



Healthcare  
Improvement  
Scotland

Inspections  
and reviews  
To drive improvement

# Announced Inspection Report: Independent Healthcare

**Service:** Youthful You Aesthetics, Kirkintilloch

**Service Provider:** Youthful You Aesthetics Limited

23 November 2021

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Healthcare Improvement Scotland Announced Inspection Report  
Youthful You Aesthetics, Youthful You Aesthetics Limited: 23 November 2021

## Contents

<b>1</b>	<b>A summary of our inspection</b>	<b>4</b>
<hr/>		
<b>2</b>	<b>What we found during our inspection</b>	<b>7</b>
<hr/>		
	<b>Appendix 1 – Requirements and recommendations</b>	<b>12</b>
	<b>Appendix 2 – About our inspections</b>	<b>14</b>
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## 1 A summary of our inspection

The focus of our inspections is to ensure each service is person-centred, safe and well led. Therefore, we only evaluate the service against three key quality indicators which apply across all services. However, depending on the scope and nature of the service, we may look at additional quality indicators.

### About our inspection

We carried out an announced inspection to Youthful You Aesthetics on Tuesday 23 November 2021. We spoke with the owner (sole practitioner) during the inspection. Although the service issued an online survey for us before the inspection, we did not receive any responses from patients. This was our first inspection to this service.

The inspection team was made up of one inspector.

As part of the inspection process, we asked the service to submit a self-evaluation. The questions in the self-evaluation are based on our Quality Framework and ask the service to tell us what it does well, what improvements could be made and how it intends to make those improvements. The service submitted a self-evaluation.

### What we found and inspection grades awarded

For Youthful You Aesthetics, the following grades have been applied to three key quality indicators.

Key quality indicators inspected		
Domain 5 – Delivery of safe, effective, compassionate and person-centred care		
Quality indicator	Summary findings	Grade awarded
5.1 - Safe delivery of care	Equipment was clean and well maintained. Appropriate systems were in place for safe and secure handling of medicines and infection prevention and control. A regular programme of audits should be introduced to help the service make improvements.	✓ Satisfactory

Key quality indicators inspected		
Domain 9 – Quality improvement-focused leadership		
Quality indicator	Summary findings	Grade awarded
9.4 - Leadership of improvement and change	The manager maintained current best practice through training and self-directed learning. A quality improvement plan should be developed to measure the impact of service change and demonstrate a culture of continuous improvement.	✓ Satisfactory

The following additional quality indicators were inspected against during this inspection.

Additional quality indicators inspected (ungraded)	
Domain 5 – Delivery of safe, effective, compassionate and person-centred care	
Quality indicator	Summary findings
5.2 - Assessment and management of people experiencing care	Comprehensive patient assessments were completed and clearly documented before any treatment was provided. Next of kin details and consent should be recorded for sharing information. Written aftercare instructions should be provided.

Grades may change after this inspection due to other regulatory activity. For example, if we have to take enforcement action to improve the service or if we investigate and agree with a complaint someone makes about the service.

More information about grading can be found on our website at:  
[http://www.healthcareimprovementscotland.org/our\\_work/inspecting\\_and\\_regulating\\_care/ihc\\_inspection\\_guidance/inspection\\_methodology.aspx](http://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/ihc_inspection_guidance/inspection_methodology.aspx)

## What action we expect Youthful You Aesthetics to take after our inspection

This inspection resulted in five recommendations. See Appendix 1 for a full list of the recommendations.

An improvement action plan has been developed by the provider and is available on the Healthcare Improvement Scotland website:  
[www.healthcareimprovementscotland.org/our\\_work/inspecting\\_and\\_regulating\\_care/independent\\_healthcare/find\\_a\\_provider\\_or\\_service.aspx](http://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/independent_healthcare/find_a_provider_or_service.aspx)

We would like to thank all staff at Youthful You Aesthetics for their assistance during the inspection.

## 2 What we found during our inspection

### Service delivery

This section is where we report on how safe the service is.

#### **Domain 5 – Delivery of safe, effective, compassionate and person-centred care**

High performing healthcare organisations are focused on safety and learning to take forward improvements, and put in place appropriate controls to manage risks. They provide care that is respectful and responsive to people's individual needs, preferences and values delivered through appropriate clinical and operational planning, processes and procedures.

#### **Our findings**

#### **Quality indicator 5.1 - Safe delivery of care**

**Equipment was clean and well maintained. Appropriate systems were in place for safe and secure handling of medicines and infection prevention and control. A regular programme of audits should be introduced to help the service make improvements.**

An infection prevention and control policy was in place and we saw good compliance with infection prevention and control procedures. This included the safe disposal of medical sharps, such as syringes and needles, clinical waste and single-use patient equipment (used to prevent the risk of cross-infection). We saw a good supply of personal protective equipment available (disposable gloves and aprons).

A safe system was in place for the procurement, prescribing, storage and administration of medicines, in line with the service's medication policy. The service had emergency medication in place, appropriate for the treatments being carried out. The registered manager had been trained to deliver advanced adult life support in the event of a medical emergency.

While no serious incidents had been reported in the service, a clear system was in place to record and manage accident and incident reporting. The manager was aware of the responsibility to report incidents that must be notified to Healthcare Improvement Scotland and under health and safety legislation.

### What needs to improve

We found no evidence of audits taking place to review the safe delivery and quality of the service. For example, audits could be carried out on patient care records and medicine management. An audit programme would help the service structure its audit process, record its findings and record the improvements (recommendation a).

- No requirements.

### Recommendation a

- The service should develop a programme of regular audits to cover key aspects of care and treatment. Audits should be documented and improvement action plans implemented.

## Our findings

### Quality indicator 5.2 - Assessment and management of people experiencing care

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**Comprehensive patient assessments were completed and clearly documented before any treatment was provided. Next of kin details and consent should be recorded for sharing information. Written aftercare instructions should be provided.**

We discussed with the service how patients' needs were assessed, and treatment was planned and delivered, in line with patients' individual treatment plans. The five patient care records we reviewed showed that comprehensive assessments and consultations were carried out before treatment started. These included taking a full medical history, with details of any health conditions, medications, allergies, pregnancy and previous treatments. Any risks and benefits associated with the treatment are explained and this was carried out for all new and returning patients. Records were kept of each treatment session, including:

- a consent to treatment, including having their photograph taken
- the dosage and medicine batch numbers, and
- diagrams and photographs of the treated area helped to inform the overall plan of care.



Patients were invited to attend a free follow-up appointment. This allowed the service to make sure patients were happy with the results and provide more treatment or advice. We saw that patients were given the service's contact details in case of complications.

All patient care records we looked at were legible, signed and stored securely in line with information management protocols and legislation.

### **What needs to improve**

Patient care records we looked at did not document next-of-kin details or patient consent for sharing information with their GP and other medical staff in an emergency, if required (recommendation b).

While patients were given verbal aftercare advice, they had not received written aftercare instructions (recommendation c).

Written aftercare instructions would allow patients to make informed choices and decisions about their care. This provision of aftercare was not documented in patient care records (recommendation d).

- No requirements.

### **Recommendation b**

- The service should record next of kin details and patient consent for sharing information with their GP and other medical staff in an emergency, if required, in patients' care records.

### **Recommendation c**

- The service should provide written aftercare information.

### **Recommendation d**

- The service should formally document what aftercare has been provided to patients in the patient care record.

## Vision and leadership

This section is where we report on how well the service is led.

### Domain 9 – Quality improvement-focused leadership

High performing healthcare organisations are focused on quality improvement. The leaders and managers in the organisation drive the delivery of high quality, safe, person-centred care by supporting and promoting an open and fair culture of continuous learning and improvement.

### Our findings

#### Quality indicator 9.4 - Leadership of improvement and change

**The manager maintained current best practice through training and self-directed learning. A quality improvement plan should be developed to measure the impact of service change and demonstrate a culture of continuous improvement.**

An experienced nurse practitioner, independent prescriber registered with the Nursing and Midwifery Council (NMC) owned and operated the service. Every 3 years, nurses complete an ongoing professional registration-check process with the NMC. As part of the process, they demonstrate that they have met the requirements of their professional registration to an appropriate person. They maintain current best practice through ongoing training and development, and annual appraisals.

The service had a reliable system for reviewing its policies and procedures. We saw updated policies for infection control and duty of candour (where healthcare organisations have a professional responsibility to be honest with patients when things go wrong).

The service kept up to date with changes in the aesthetics industry, legislation and best practice through attending regular conferences, training days provided by pharmaceutical and aesthetics training companies and subscribing to journal and forums.

The service had informal partnerships with other experienced aesthetic practitioners. These partnerships helped to provide peer support, advice and best practice and discuss any treatments, procedures or complications.

### **What needs to improve**

We saw no system in place to review the quality of the service delivered or evidence that lessons were learned from patient feedback or audits to help improve service delivery. A quality improvement plan would help to structure and record service improvement processes and outcomes. This would allow the service to measure the impact of change and demonstrate a culture of continuous improvement (recommendation e).

- No requirements.

### **Recommendation e**

- The service should develop and implement a quality improvement plan.

## Appendix 1 – Requirements and recommendations

The actions that Healthcare Improvement Scotland expects the independent healthcare service to take are called requirements and recommendations.

- **Requirement:** A requirement is a statement which sets out what is required of an independent healthcare provider to comply with the National Health Services (Scotland) Act 1978, regulations or a condition of registration. Where there are breaches of the Act, regulations, or conditions, a requirement must be made. Requirements are enforceable at the discretion of Healthcare Improvement Scotland.
- **Recommendation:** A recommendation is a statement that sets out actions the service should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.

Domain 5 – Delivery of safe, effective, compassionate and person-centred care	
Requirements	
None	
Recommendations	
<b>a</b>	<p>The service should develop a programme of regular audits to cover key aspects of care and treatment. Audits should be documented and improvement action plans implemented (see page 8).</p> <p>Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19</p>
<b>b</b>	<p>The service should record next of kin details and patient consent for sharing information with their GP and other medical staff in an emergency, if required, in patients' care records (see page 9).</p> <p>Health and Social Care Standards: My support, my life. I am fully involved in all decisions about my care and support. Statement 2.14</p>
<b>c</b>	<p>The service should provide written aftercare information (see page 9).</p> <p>Health and Social Care Standards: I am fully involved in all decisions about my care and support. Statement 2.9</p>

**Domain 5 – Delivery of safe, effective, compassionate and person-centred care (continued)**

- d** The service should formally document what aftercare has been provided to patients in the patient care record (see page 9).

Health and Social Care Standards: I am fully involved in all decisions about my care and support. Statement 2.9

**Domain 9 – Quality improvement-focused leadership**

**Requirements**

None

**Recommendation**

- e** The service should develop and implement a quality improvement plan (see page 11).

Health and Social Care Standards: My support, my life. I have confidence in the organisation providing my care and support. Statement 4.19

## Appendix 2 – About our inspections

Our quality of care approach and the quality framework allows us to provide external assurance of the quality of healthcare provided in Scotland.

Our inspectors use this approach to check independent healthcare services regularly to make sure that they are complying with necessary standards and regulations. Inspections may be announced or unannounced.

We follow a number of stages to inspect independent healthcare services.

### Before inspections

Independent healthcare services submit an annual return and self-evaluation to us.

We review this information and produce a service risk assessment to determine the risk level of the service. This helps us to decide the focus and frequency of inspection.



Before

### During inspections

We use inspection tools to help us assess the service.

Inspections will be a mix of physical inspection and discussions with staff, people experiencing care and, where appropriate, carers and families.

We give feedback to the service at the end of the inspection.



During

### After inspections

We publish reports for services and people experiencing care, carers and families based on what we find during inspections. Independent healthcare services use our reports to make improvements and find out what other services are doing well. Our reports are available on our website at: [www.healthcareimprovementscotland.org](http://www.healthcareimprovementscotland.org)

We require independent healthcare services to develop and then update an improvement action plan to address the requirements and recommendations we make.

We check progress against the improvement action plan.



After

More information about our approach can be found on our website:

[www.healthcareimprovementscotland.org/our\\_work/governance\\_and\\_assurance/quality\\_of\\_care\\_approach.aspx](http://www.healthcareimprovementscotland.org/our_work/governance_and_assurance/quality_of_care_approach.aspx)

## Complaints

If you would like to raise a concern or complaint about an independent healthcare service, you can complain directly to us at any time. However, we do suggest you contact the service directly in the first instance.

Our contact details are:

**Healthcare Improvement Scotland**

Gyle Square  
1 South Gyle Crescent  
Edinburgh  
EH12 9EB

**Telephone:** 0131 623 4300

**Email:** [hcis.ihcregulation@nhs.net](mailto:hcis.ihcregulation@nhs.net)

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Please contact our Equality and Diversity Advisor on 0141 225 6999  
or email [contactpublicinvolvement.his@nhs.net](mailto:contactpublicinvolvement.his@nhs.net)

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