Arolygiaeth Gofal Iechyd Cymru Healthcare Inspectorate Wales

Inspection Summary Report

Wish Skin Clinic, Port Talbot Inspection date: 16 October 2023 Publication date: 16 January 2024



This summary document provides an overview of the outcome of the inspection

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We found that Wish Skin Clinic, Port Talbot was committed to providing a positive experience for their patients in a modern and welcoming environment. Processes were in place to ensure the privacy and dignity of each patient was maintained during treatments.

There was level access to the practice, allowing wheelchair users or those with mobility issues to access the facilities easily.

The staff team worked well together to provide a good standard of care for their patients in an environment that was clean, tidy and free from visible hazards.

The registered manager displayed a good knowledge and understanding of the governance required to operate the service safely and effectively. Staff were given a comprehensive induction and had access to training opportunities to further develop their skills and knowledge.

We identified a small number of improvements needed. Further details can be found in Appendix C of the full report.

Note the inspection findings relate to the point in time that the inspection was undertaken.



What we did

Full details on how we inspect the NHS and regulate independent healthcare providers in Wales can be found on our <u>website</u>.

Healthcare Inspectorate Wales (HIW) completed an announced inspection of Wish Skin Clinic Limited Company on 16 October 2023.

Our team for the inspection comprised of two HIW Healthcare Inspectors.

This summary version of the report is designed for members of the public.

A full report, which is designed for the setting, and describes all findings relating to the provision of high quality, safe and reliable care that is centred on individual patients can be found on our <u>website</u>.



Quality of Patient Experience



Overall Summary

We found Wish Skin Clinic Limited was committed to providing a positive experience to their patients in an environment which was clean, modern and welcoming. There were processes and systems in place to ensure patients were being treated with dignity and professionalism.

The service provided patients with detailed information pre-procedure enabling them to make informed decisions about their treatment. The statement of purpose and patient information guide provided to us by the registered manager met regulatory requirements. Patient feedback in the questionnaires and online reviews were very positive.

Where the service could improve

- Expand selection of information available to patients, taking into consideration the communication needs and wishes of the patient
- Implement a process to inform patients of feedback results.

What we found this service did well

- Disabled access to the service
- Modern and welcoming environment
- Arrangements in place to protect patient privacy
- Comprehensive patient records.

Patients told us:

"The clinic is very well kept. All information is explained in advance. Staff are very friendly."

"I have been attending this clinic for a few years now and I always feel confident and always informed on any treatments I have. I am always advised honestly if I require, or not, the treatments I am interested in."

"Excellent Service"

Delivery of Safe and Effective Care



Overall Summary

We found the service to be well organised, clean and free from visible hazards. There were suitable arrangements in place to ensure patients were provided safe and effective care. Treatments were carried out in good size rooms located on the ground floor. All rooms protected the dignity and privacy of the patients.

We found appropriate infection control arrangements in place at the service and well completed cleaning schedules.

There was evidence of annual servicing of the fire extinguishers and recent fire and environmental risk assessments were in place for the premises. There was appropriate first aid equipment on site and there were suitably trained staff.

There were good arrangements in place to ensure that the laser machines were used appropriately and safely. All laser operators were fully trained in their use. The registered manager was knowledgeable, professional and demonstrated their understanding of where and how to access advice and guidance.

Patient records were found to be of a good standard and easy to navigate. All records and patient identifying information was being stored securely.

Where the service could improve

- Undertake regular fire tests and fire drills for the building
- Review documentation retention periods in line with regulations

What we found this service did well

- Medical protocols were in place and being adhered to
- Patient information was being stored securely
- Treatment rooms were clean and well equipped
- The laser machines were serviced and maintained appropriately to ensure safe treatment.

Quality of Management and Leadership



Overall Summary

We found the registered manager and her staff team worked well together and were very committed to providing a good standard of care for their patients.

There was evidence of a comprehensive induction process, with good compliance to staff recruitment procedures. Our review of mandatory training compliance found this to be good overall.

Various policies and procedures were in place and these were reviewed in line with specified timeframes. However, not all policies were version controlled or signed as having been read.

Team meetings were taking place regularly and feedback was via minutes for those absent. The registered manager also had processes in place to assess and monitor the quality of the services provided and reported on the findings.

Where the service could improve

- Policies must be signed and version controlled
- 'Record of review' by staff to be added to policy folder
- Ensure DBS certificates are valid and retained on file.

What we found this service did well

- Comprehensive induction process
- Regular appraisals for all staff
- Annual reports as set out in regulation 19 of the Independent Health Care (Wales) Regulations 2011 were completed.

Next steps

Where we have identified improvements and immediate concerns during our inspection which require the service to take action, these are detailed in the appendices of the full inspection report.

When we identify concerns that pose an immediate risk to patient safety we ask the service to undertake urgent action. These concerns are outlined in the appendices and outline the action taken by the service to protect patient safety and approved by us. We also provide a detailed table of improvements identified during the inspection where we require the service to tell us about the actions they are taking to address these areas and improve the quality and safety of healthcare services. In addition we outline concerns raised and acknowledge those resolved during the inspection.

At the appropriate time HIW asks the service to confirm action has been taken in line with management responses documented in the improvement plan. We also ask services to provide documented evidence of action taken and/or progress made.

