

# Independent Healthcare Inspection Report (Announced)

Body Basix, Cardiff

Inspection date: 07 May 2024

Publication date: 07 August 2024



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In writing:

Communications Manager  
Healthcare Inspectorate Wales  
Welsh Government  
Rhydycar Business Park  
Merthyr Tydfil  
CF48 1UZ

Or via

Phone: 0300 062 8163  
Email: [hiw@gov.wales](mailto:hiw@gov.wales)  
Website: [www.hiw.org.uk](http://www.hiw.org.uk)

# Healthcare Inspectorate Wales (HIW) is the independent inspectorate and regulator of healthcare in Wales

## Our purpose

To check that healthcare services are provided in a way which maximises the health and wellbeing of people

## Our values

We place people at the heart of what we do.

We are:

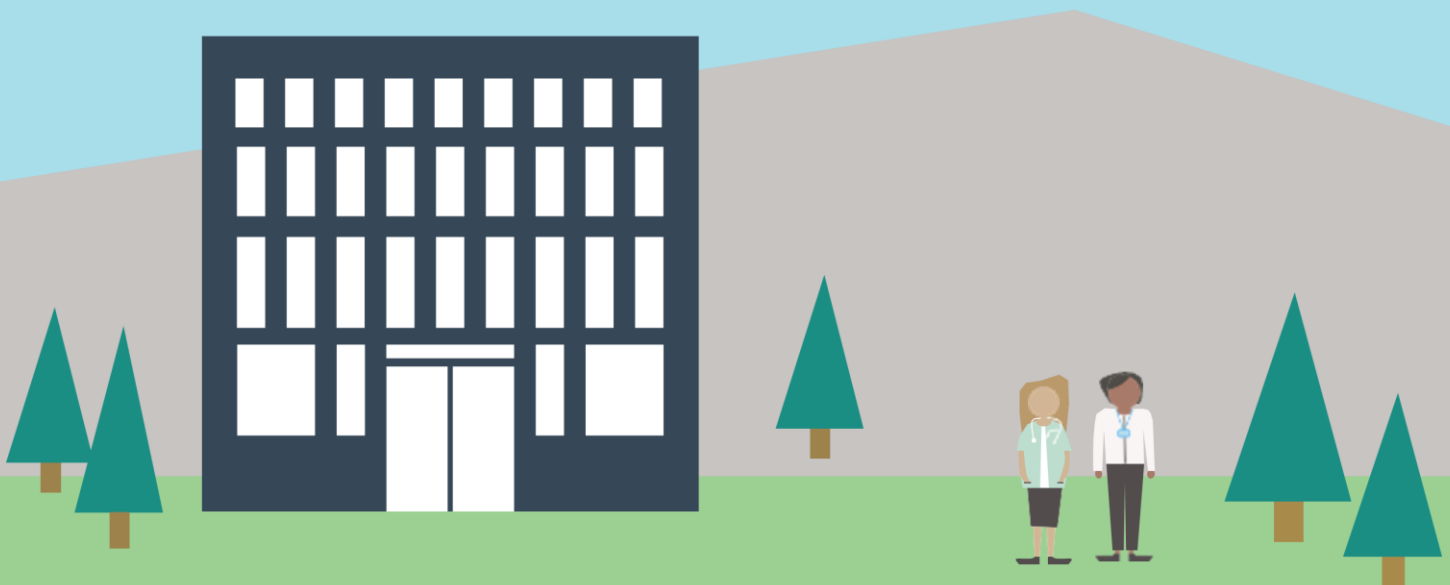
- Independent - we are impartial, deciding what work we do and where we do it
- Objective - we are reasoned, fair and evidence driven
- Decisive - we make clear judgements and take action to improve poor standards and highlight the good practice we find
- Inclusive - we value and encourage equality and diversity through our work
- Proportionate - we are agile and we carry out our work where it matters most

## Our goal

To be a trusted voice which influences and drives improvement in healthcare

## Our priorities

- We will focus on the quality of healthcare provided to people and communities as they access, use and move between services.
- We will adapt our approach to ensure we are responsive to emerging risks to patient safety
- We will work collaboratively to drive system and service improvement within healthcare
- We will support and develop our workforce to enable them, and the organisation, to deliver our priorities.



# Contents

1.	What we did .....	5
2.	Summary of inspection.....	6
3.	What we found .....	8
	• Quality of Patient Experience.....	8
	• Delivery of Safe and Effective Care.....	11
	• Quality of Management and Leadership .....	13
4.	Next steps.....	14
	Appendix A - Summary of concerns resolved during the inspection .....	15
	Appendix B - Immediate improvement plan.....	16
	Appendix C - Improvement plan .....	17

# 1. What we did

Full details on how we inspect the NHS and regulate independent healthcare providers in Wales can be found on our [website](#).

Healthcare Inspectorate Wales (HIW) completed an announced inspection of Body Basix in Cardiff on 07 May 2024.

The inspection was conducted by a HIW healthcare inspector.

During the inspection we invited patients or their carers to complete a questionnaire to tell us about their experience of using the service. A total of 11 were completed. We also spoke to staff working at the service during our inspection. Feedback and some of the comments we received appear throughout the report.

Where present, quotes in this publication may have been translated from their original language.

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

## 2. Summary of inspection

### Quality of Patient Experience

Overall summary:

Body Basix was providing a respectful and considerate service to all of their patients throughout their patient journey. All patients rated the service they received as 'very good' and confirmed that staff treated them with dignity and respect. We found robust arrangements in place to fully support the dignity of patients, giving due regard to their equality and rights. We also saw how staff at Body Basix provided clear and concise information to patients prior to, during and post-treatment.

This is what the service did well:

- Patients told us they felt comfortable, safe and cared for at Body Basix
- Changes in medical history and light exposures were discussed prior to every treatment with patients.

### Delivery of Safe and Effective Care

Overall summary:

We found comprehensive arrangements in place at Body Basix to manage the risk of harm to patients and deliver care in a safe and effective way. Infection prevention and control procedures were comprehensive and all patients told us the setting was 'very clean'. Prior to our inspection we established a new laser device at this setting required HIW registration, which was resolved prior to and during the inspection. Overall, the service compliance with regulatory requirements was suitable. Patient records were handled and updated correctly and stored in a secure manner.

This is what the service did well:

- Safe arrangements were in place for the operation of the laser equipment
- Cleaning regimes were robust and frequent.

### Quality of Management and Leadership

Overall summary:

The leadership and management arrangements in place were satisfactory. Clear lines of responsibility helped staff understand their individual roles and provide better care for patients. Clear and comprehensive policies were in place to provide guidance for staff, including complaints and training policies. However, policy

review dates and version control information was not recorded, meaning we could not establish when the policies were drafted nor reviewed. The processes for recruitment and staff training were found to be appropriate.

This is what we recommend the service can improve:

- The registered manager must include a date and version control in their policies and make appropriate arrangements for recording whether staff have read and acknowledged the policies.

This is what the service did well:

- Patient feedback and complaints were appropriately addressed
- Workforce planning and recruitment practices were suitable.

## 3. What we found

### Quality of Patient Experience

#### Patient feedback

Before our inspection we invited the service to hand out questionnaires to patients to obtain their views on the care and treatments provided. In total, we received 11 completed questionnaires. All except two of the respondents indicated that they had visited the service within the last two months. All of the respondents rated the service they received as 'very good'. Some of the comments provided by patients on the questionnaires included:

*"Staff have always been professional, courteous and friendly."*

*"Highly professional salon with experienced and knowledgeable staff."*

*"Clinic is a very safe and calm environment."*

*"I have always been very impressed with the level of service received at Body Basix".*

#### Health protection and improvement

We saw evidence of a comprehensive account of patient medical history being recorded during their initial consultation prior to patch testing. We also saw evidence patients provided an update to their medical history at every follow-up appointment. All respondents to the HIW questionnaire stated they signed a consent form prior to treatment and their medical history was also checked prior to any treatments. Patients also confirmed they were given a patch test before receiving a new treatment.

#### Dignity and respect

A private room with frosted glass was used to conduct all consultations and treatments. The door for this room was locked when patients were present, with an access code to be used only in the event of an emergency to gain entry. Patients were left to change in private and a modesty towel was used during treatments. Patients who responded to the HIW questionnaire all said measures were taken to protect their privacy.

Chaperones were permitted in treatment rooms where requested, and an additional set of protective eyewear was available to ensure their safety.



All patients who completed a questionnaire said they were treated with dignity and respect and that staff listened to them/answered their questions. Patients told us:

*“[the laser operator] always respects my privacy and makes me feel very comfortable during my treatments.”*

*“I was made to feel very comfortable.”*

### **Patient information and consent**

We reviewed a total of five patient records during our inspection. All of the records contained comprehensive consultation forms, as well as the details of the treatments administered. We saw the records detailed the face-to-face consultations undertaken as well as the records of the pre-treatment patch-testing process. Signed consent forms for each treatment were evidenced alongside robust arrangements to confirm patients were able to give informed consent. Laser treatment patient guides and post-treatment care advice were also provided to each patient and evidenced within the records we reviewed.

All questionnaire respondents informed us they had received enough information to understand the treatment options available to them, including the cost as well as the risks and benefits. Patients said:

*“Treatment advice was given very clearly throughout my treatment.”*

*“[the laser operator] always asks me if I have been in UV / Medical changes before treatment.”*

All patients also said they were given aftercare instructions and clear guidance on what to do in the event of infection or emergency. Patients said:

*“I am always given great aftercare advice.”*

*“Always provides after care sheet and explains thoroughly.”*

### **Communicating effectively**

We saw suitable information was provided to patients at every stage of their treatment. Patients were able to make appointments over the telephone, online or in person at Body Basix. Online, patients had access to a wide range of information regarding treatments. The patient guide outlined all relevant information relating to the treatment options, costs, means of raising a concern and emergency care. The statement of purpose for Body Basix was also up to date and comprehensive.

All respondents to the HIW questionnaire indicated their preferred language was English. The staff we spoke with during the inspection were not aware of any Welsh speakers in their patient cohort but confirmed that documents required in the medium of Welsh would be provided upon request. We saw some posters and documents were available bilingually at the setting.

### **Care planning and provision**

All records reviewed during the inspection were comprehensive and easy to navigate. The records included details from the initial consultation, patch tests and consent to treatments on every occasion. Two of the records we reviewed, which were made prior to a documentation update, did not capture the details of side effects in a defined area on the treatment form. However, all new records captured side effects correctly in a designated space on the treatment form.

### **Equality, diversity and human rights**

During our discussions with staff, we were provided with suitable examples of how they treated patients equally and upheld their rights. These examples were supported by a satisfactory equality and diversity policy in place. A zero tolerance to discrimination and harassment poster was also on display at the main reception. The rights of patients were further upheld by allowing patients to choose their preferred pronouns and names on their records.

Body Basix was located up a set of stairs from the front door and was within a listed building which could not be altered. Therefore, access was limited and would not accommodate those with reduced mobility. This information was clearly communicated to patients on their website and in their patient guide.

All respondents to the HIW patient questionnaire indicated they had not faced any discrimination when accessing or using this service. Patients also told us they could access the right healthcare at the right time with due respect for their protected characteristics.

### **Citizen engagement and feedback**

We found the systems in place to request, record and respond to feedback were robust. Patients were automatically contacted to request written feedback following their appointment and verbal feedback was also requested, where necessary. Patient feedback was posted online for general awareness. Staff confirmed that patients also had the choice to submit feedback anonymously.

# Delivery of Safe and Effective Care

## **Managing risk and health and safety**

We found comprehensive arrangements were in place to manage and minimise the risks to patients and ensure their safety. Safety certifications for gas, electrical wiring and portable appliance testing were all in place. We reviewed the Laser Protection Advisor (LPA) risk assessments in place, all of which were suitable, and we saw these had been reviewed annually. Fire safety precautions were all satisfactory and staff demonstrated a good understanding of what to do in the event of an emergency.

The first aid kit was complete and appropriately equipped, with all staff trained to the correct level in first aid.

## **Infection prevention and control (IPC) and decontamination**

Appropriate processes were in place to enable the effective cleaning and decontamination of treatment areas and the equipment. These processes were outlined in the infection control policy for the setting. Clinical waste was handled correctly and disposed of through a waste handling contract.

All patients said the setting was 'very clean'. All except one of the patients who responded to the question stated that infection prevention and control measures were being followed, the other patient stating 'they did not know'. Patients told us:

*"The clinic is always very clean and tidy."*

*"Rooms are always cleaned to a high standard and always felt very safe coming here when the salon was allowed to open following covid."*

## **Safeguarding children and safeguarding vulnerable adults**

The setting had a suitable safeguarding policy in place, which was up to date and contained details of the local safeguarding team. The policy clearly outlined the procedures to follow in the event of a safeguarding concern. We also saw evidence the registered manager had completed level three adult safeguarding training. No treatments were provided to anyone under the age of 18.

## **Medical devices, equipment and diagnostic systems**

Prior to our inspection, during our pre-inspection procedures we found the laser machine which had been registered with HIW by the service was not the same machine which was in use at the setting. A new machine had been purchased and was in being used solely at this setting. Prior to our inspection, we instructed the

setting to immediately stop using this machine until it had been registered with HIW. This matter was resolved on the day of inspection in that the laser machine was appropriately registered with HIW. The details of the actions taken by HIW are included in Appendix A. On the day of inspection, we reviewed the new laser machine at the service and found all appropriate safety arrangements were in place to protect patients and staff.

A suitable contract was in place with certified LPA. We saw records of annual visits to the setting by the LPA and a comprehensive report was produced, which included a risk assessment. There were individualised treatment protocols in place for the use of the laser machines which had been created and approved by a medical practitioner as part of the LPA contract.

The room where the laser was kept was locked when not in use, and the key stored securely by the laser operator for the setting. Daily checks took place on the laser machine, with calibration checks prior to each treatment and servicing records showed the machine was last inspected in March 2024. Protective eyewear was also readily available, in good condition and consistent with the local rules.

#### **Safe and clinically effective care**

We found treatments at Body Basix were being delivered safely and effectively. The sole laser operator had up to date manufacturer-approved training as well as recent Core of Knowledge training.

There was one room used for laser treatments at the setting. This room was lockable and displayed appropriate signage on the door indicating that laser treatments took place within the room. The signage also advised not to enter while treatments were being provided and to knock and wait prior to entry.

We saw evidence in patient records of every patient receiving patch-testing and skin typing prior to their course of treatments.

#### **Participating in quality improvement activities**

Patient feedback was regularly reviewed and discussed within the setting in order to drive continuous improvement. Audits also took place on cleaning and hygiene throughout the setting.

#### **Records management**

We found evidence of good record keeping at Body Basix. Patient records were paper-based and were stored in a securely locked cabinet away from public access. Access to the records was overseen by the registered manager. We saw evidence that all records were disposed of securely through a suitable waste disposal contract.

# Quality of Management and Leadership

## **Governance and accountability framework**

Clear lines of responsibility were evident and the staff we spoke with were both clear on their responsibilities. Informal staff meetings were frequent, with minutes being taken during the more formalised monthly meetings.

We saw all the policies and procedures were clear and comprehensive. However, policy review dates and version control information was not recorded, meaning we could not establish when the policies were drafted nor reviewed. During the inspection, we also found there was no process to record whether staff had read and understood the policies.

**The registered manager must include a date and version control in their policies.**

**The registered manager must make appropriate arrangements for recording whether staff have read and acknowledged the policies.**

The public liability insurance and HIW registration certificates were on display at reception.

## **Dealing with concerns and managing incidents**

Patient complaints were overseen by the manager and investigated alongside the laser operator. The complaints procedure was appropriately displayed in the reception area of the clinic. The complaints procedure was up to date and referenced HIW as a means to raise concerns. There were no complaints for us to review, however, we were assured by the process in place. We were told that any verbal complaint would be noted within the complaints book.

## **Workforce recruitment and employment practices**

We found Disclosure and Barring Service checks in place for both employees, with a satisfactory procedure in place for checks to be undertaken prior to employment.

## **Workforce planning, training and organisational development**

Body Basix was a family run business with two members of staff. We saw appropriate systems in place for onboarding new staff, ongoing supervision and for monitoring compliance with training.

## 4. 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 following ways within the appendices of this report (where these apply):

- Appendix A: Includes a summary of any concerns regarding patient safety which were escalated and resolved during the inspection
- Appendix B: Includes any immediate concerns regarding patient safety where we require the service to complete an immediate improvement plan telling us about the urgent actions they are taking
- Appendix C: Includes any other improvements identified during the inspection where we require the service to complete an improvement plan telling us about the actions they are taking to address these areas.

The improvement plans should:

- Clearly state how the findings identified will be addressed
- Ensure actions taken in response to the issues identified are specific, measurable, achievable, realistic and timed
- Include enough detail to provide HIW and the public with assurance that the findings identified will be sufficiently addressed
- Ensure required evidence against stated actions is provided to HIW within three months of the inspection.

As a result of the findings from this inspection the service should:

- Ensure that findings are not systemic across other areas within the wider organisation
- Provide HIW with updates where actions remain outstanding and/or in progress, to confirm when these have been addressed.

The improvement plan, once agreed, will be published on HIW's [website](#).

# Appendix A - Summary of concerns resolved during the inspection

The table below summaries the concerns identified and escalated during our inspection. Due to the impact/potential impact on patient care and treatment these concerns needed to be addressed straight away, during the inspection.

Immediate concerns Identified	Impact/potential impact on patient care and treatment	How HIW escalated the concern	How the concern was resolved
Prior to inspection, we found the service was operating a laser machine which had not been registered with HIW.	The use of a machine unregistered with HIW could have resulted in harm to patients.	Prior to the inspection, the setting was instructed to stop using the laser machine immediately.	The correct documentation was issued to HIW, the laser machine was registered and reviewed by HIW during this inspection. The machine was brought back into service following the correct registration having been completed.

## Appendix B - Immediate improvement plan

**Service:** Body Basix, Cardiff

**Date of inspection:** 7 May 2024

The table below includes any immediate non-compliance concerns about patient safety identified during the inspection where we require the service to complete an immediate improvement plan telling us about the urgent actions they are taking.

Risk/finding/issue	Improvement needed	Standard / Regulation	Service action	Responsible officer	Timescale
No further immediate concerns were identified during this inspection.					



## Appendix C - Improvement plan

**Service:** Body Basix, Cardiff

**Date of inspection:** 7 May 2024

The table below includes any other improvements identified during the inspection where we require the service to complete an improvement plan telling us about the actions they are taking to address these areas.

Risk/finding/issue	Improvement needed	Standard / Regulation	Service action	Responsible officer	Timescale
1. Policy review dates and version control information was not recorded, meaning we could not establish when the policies were drafted nor reviewed. During the inspection, we also found there was no process to record whether staff had read and understood the policies.	<p>The registered manager must include a date and version control in their policies.</p> <p>The registered manager must make appropriate arrangements for recording whether staff have read and acknowledged the policies.</p>	The Independent Health Care (Wales) Regulations 2011 Section 9	<p>Policy review dates and version control information has been added to the policies.</p> <p>A record book has been introduced to record date of staff reading and understanding the policies.</p>	Denise Renton	Completed on 10/07/2024.

The following section must be completed by a representative of the service who has overall responsibility and accountability for ensuring the improvement plan is actioned.

**Service representative**

**Name (print): DENISE RENTON**

**Job role: Laser practitioner and business owner**

**Date: 10/07/2024**