

Inspection report 2006/2007

MediZen Ltd

*Suite A, Astor House, 282 Lichfield Road, Mere Green, Sutton Coldfield,
West Midlands, B74 4AG*

Introduction

Independent healthcare providers in England must be registered with the Healthcare Commission. To register, they need to demonstrate compliance with the Care Standards Act 2000 and associated regulations. The Healthcare Commission tests providers' compliance by assessing each registered establishment against a set of *National Minimum Standards*, which were published by the Government for that purpose and set out the expected standards for different types of independent health services.

Our inspections are targeted to areas of potential risk. They focus on areas where previous inspections, the establishment's own data and inspectors' observations suggest potential risks. Further areas are also added as spot checks. In general, a smaller number of standards assessed at inspection reflects a strong ability in the establishment to demonstrate satisfactory performance.

In addition to this report, the establishment has received fuller information about the basis for the inspection findings, which is available on request from the Healthcare Commission (Independent Healthcare), Finsbury Tower, 103-105 Bunhill Row, London EC1Y 8TG. The establishment's action plan, which sets out the steps it is taking in response to inspection findings, may be requested from Sarah-Jayne Cross, MediZen Ltd, Suite A, Astor House, 282 Lichfield Road, Mere Green, Sutton Coldfield, West Midlands, B74 4AG..

Background and main findings

Background

MediZen Ltd offers Intense Pulse Light and Class 3b Laser treatments for hair removal, skin rejuvenation, and thread vein removal. Treatments are performed by personnel who have been trained in the use of this equipment. Other beauty treatments, including aesthetic injectables, which are not registerable, are also offered on site.

MediZen Ltd is situated on the 1st floor of a commercial office suite in Mere Green shopping centre. Access to the service is through a reception area on ground floor and then by stairway to the 1st floor and the clinic's own reception area.

MediZen Ltd registered with the Healthcare Commission in October 2005 and this visit was the first inspection against the National Minimum Standard and regulations.

This inspection took place on 28 March 2007, and was announced.

Main findings

This inspection visit confirmed that the policies, procedures and intended practise outlined during the registration process are being followed consistently and to a high standard. Areas of compliance against standards that were found to have exceeded those of the required minimum standards are shown in the assessment scores below.

Quality monitoring is in place and monthly audits are undertaken for monitoring standards of practise in treatment outcomes and for the completion of client records. Staff meetings are held monthly and the set agenda includes quality outcome monitoring and review.

Clients are offered the chance to comment about the quality of the service provided, which are reviewed annually to assess client's experience of their treatment and the service they received. Comments are collated and a results summary for clients is available.

Staff training and development is of a high standard. Laser operators had recently attended study days for Laser physics (Eyewear) and Advanced Laser training.

The clinic is well presented with a modern décor. All areas are clean, tidy and contribute to the overall calm atmosphere that has been achieved. Risk Assessments are in place for all areas of the clinic and are regularly reviewed.

The Laser treatment rooms and Laser equipment fully comply with the National Minimum Standard. A robust, auditable system for the maintaining, cleaning and storage of all Laser equipment is in place. The Laser Protection Advisor has recently reviewed and updated the establishments Local Rules for operating the Laser.

Achievements

The manager and staff at Medizen are proud that following requests made to clients for their input at all points via post-treatment surveys and our comments/suggestions box. The results of it show that the vast majority of our clients are happy with our service. On a scale of 1-5, 1 being very dissatisfied and 5 being excellent – our average is around 4.5.

This information is confirmed by a review of the client satisfaction survey during the inspection visit.

Assessments

The Healthcare Commission only makes assessments of standards where we do not have evidence that the establishment is likely to be achieving the required level of performance. Other standards are not assessed because the establishment has shown satisfactory performance.

For each standard that we assess, we use a four point scale.

standard exceeded	Commendable: above the required levels of performance
standard met	No shortfalls: achieving the required levels of performance
standard almost met	Minor shortfalls: no major deficiencies and required levels of performance seem achievable without extensive extra activity
standard not met	Major shortfalls: significant action is needed to achieve the required levels of performance

The assessments are grouped under the following headings and each standard shows its reference number.

- Safety - does the establishment provide treatment and care safely?
- Clinical and cost effectiveness - is the best possible treatment provided?
- Governance - is the establishment well run?
- Patient focus - does the establishment put the patient first?
- Accessible and responsive care - is care organised around patients' needs and wishes?
- Care environment and amenities - is the place where you are treated well designed and maintained?
- Service specific standards for the type of establishment inspected

Safety

Standard	Assessment
Children receiving treatment are protected effectively from abuse. (C13)	Standard met
Patients receive treatment using equipment and supplies that are safe and in good condition. (C18)	Standard met
Patients, staff and anyone visiting the registered premises are assured that all risks connected with the establishment, treatment and services are identified, assessed and managed appropriately. (C20)	Standard exceeded
The risk of patients, staff and visitors acquiring a health care associated infection is minimised. (C25)	Standard met
Patients are not treated with contaminated medical devices. (C26)	Standard met

Clinical and cost effectiveness

Standard	Assessment
Treatments provided to clients are in line with the relevant clinical guidelines. (C3)	Standard met
Clients are assured that monitoring of the quality of treatment and care takes place. (C4)	Standard exceeded

Governance

Standard	Assessment
Appropriate policies and procedures are in place to help ensure the quality of treatment and services. (C7)	Standard met
Clients are assured that a fit person runs the establishment. (C8)	Standard met
Clients receive care from appropriately recruited, trained and qualified staff. (C9)	Standard met
Contracts ensure that clients receive goods and services of the appropriate quality. (C28)	Standard met

Records are created, maintained and stored to standards, which meet legal and regulatory compliance and professional practice recommendations. (C29)	Standard met
Clients are assured of appropriately completed health records. (C30)	Standard met

Patient focus

Standard	Assessment
Patients receive clear and accurate information about their treatment and its likely costs. (C1)	Standard met
The treatment and care provided are patient centred. (C2)	Standard met
Patients have access to an effective complaints process. (C14)	Standard met
Patients receive appropriate information about how to make a complaint. (C15)	Standard met

Accessible and responsive care

Standard	Assessment
Patients' views are obtained by the establishment and used to inform the provision of treatment and care and prospective patients. (C6)	Standard met

Care environment and amenities

Standard	Assessment
Patients receive treatment in premises that are safe and appropriate for that treatment. (C17)	Standard met
The appropriate health and safety measures are in place. (C21)	Standard met

Service specific standards

Standard	Assessment
Patients receive treatment using lasers and intense pulsed lights from competent operators and in accordance with appropriate procedures. (P1)	Standard exceeded
Patients receive treatment from appropriately trained operators. (P2)	Standard met
The environment in which lasers and intense pulsed lights are used is safe. (P3)	Standard met

Conditions of registration

The establishment's registration is subject to the following conditions.

Condition of Registration:	Met/Not met:
To use a `Lovely Superior Pro` for the purpose of undertaking treatments as specified within the statement of purpose.	Met
The `Lovely Superior Pro` is used in accordance with the local rules and medical protocols.	Met
Treatments are provided to male and female persons aged 18 (eighteen) years and over.	Met

Requirements and recommendations

The requirements below address cases of non-compliance with the Private and Voluntary Healthcare Regulations 2001 that were found as a result of assessing the standards shown in brackets. They are presented in the same order as the standards assessed, and are numbered to help us monitor progress reports. Requirements are the responsibility of the 'registered person' who, as set out in the legislation, may be either the registered manager of an establishment or, if day to day management is delegated from a head office, the designated responsible individual there. The Healthcare Commission will monitor action plans and, if necessary, take enforcement action to ensure compliance with the regulation shown.

Safety

No.	Regulation	Requirement	Time scale
		None	

Clinical and cost effectiveness

No.	Regulation	Requirement	Time scale
		None	

Governance

No.	Regulation	Requirement	Time scale
		None	

Patient focus

No.	Regulation	Requirement	Time scale
		None	

Accessible and responsive care

No.	Regulation	Requirement	Time scale
		None	

Care environment and amenities

No.	Regulation	Requirement	Time scale
		None	

Service specific requirements

No.	Regulation	Requirement	Time scale
		None	

Areas of non-compliance outstanding from the last inspection

No.	Regulation	Requirement	Time scale
		Not applicable	

Recommendations

Recommendations relate to non-statutory aspects of government standards or national guidance. They are for establishments to consider and will not be enforced.

Standard	Recommendation
	None

The action plan in response to these recommendations and requirements may be requested from the establishment at the address at the front of this report.

The Healthcare Commission exists to promote improvement in health and healthcare. We have a statutory duty to assess the performance of healthcare organisations, award annual performance ratings for the NHS and coordinate reviews of healthcare by others. In doing so, we aim to reduce the regulatory burden on healthcare organisations and align assessments of the healthcare provided by the NHS and the independent (private and voluntary) sector. The Healthcare Commission's full name is the Commission for Healthcare Audit and Inspection.

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