

# Discover Laser

## Inspection report

Crow Wood Leisure  
Royle Lane  
Burnley  
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[www.discoverlaser.co.uk](http://www.discoverlaser.co.uk)

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This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

## Ratings

### Overall rating for this location

Good



Are services well-led?

Good



# Overall summary

**This service is rated as Good overall.** (Previous inspection 10 August 2022 – Good)

The key questions are rated as:

Are services safe? – Good (Previous inspection 10 August 2022)

Are services effective? – Good (Previous inspection 10 August 2022)

Are services caring? – Good (Previous inspection 10 August 2022)

Are services responsive? – Good (Previous inspection 10 August 2022)

Are services well-led? – Good (This inspection 16 May 2023)

Following our previous inspection on 10 August 2022, the service was rated good overall with a rating of good for the key questions safe, effective, caring and responsive and a rating of requires improvement for the key question well led. We issued the service with a requirement notice for a breach of Regulation 17(1) Good governance. This inspection identified improvements in all areas noted at the inspection in August 2022, and the key question well led is now rated good.

The inspection in August 2022 was undertaken under the NHS and independent acute hospitals surgery framework. Since that inspection the taxonomy or classification of the service provided by Discover Laser Ltd has been adjusted as the services provided are more aligned with the Primary Medical Services (PMS) independent health inspection framework.

The full reports for previous inspections can be found by selecting the 'all reports' link for Discover Laser on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

Discover Laser is a registered location of Discover Laser Ltd. It is an independent health clinic providing a range of services to fee paying members of the public.

This service is registered with CQC under the Health and Social Care Act 2008 in respect of some, but not all, of the services it provides. There are some exemptions from regulation by CQC which relate to particular types of regulated activities and services and these are set out in Schedule 1 and Schedule 2 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Discover Laser provides a range of non-surgical cosmetic interventions. For example anti-wrinkle treatments, dermal fillers, including lip fillers, skin and hair laser treatments. These types of treatments are not within CQC scope of registration. Therefore, we did not inspect or report on these services.

The Dr Jose Miguel Montero Garcia is the registered manager. A registered manager is a person who is registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

## Our key findings were:

This inspection focused on the key question of Well led and the breaches of regulation identified at the previous inspection in August 2022.

- The provider offered a range of different services, most of which were not within the scope of CQC registration.

# Overall summary

- Those services that were within CQC scope were offered on a private, fee-paying basis only and were accessible to patients who chose to use them.
- Services offered at the time of this inspection that were within the scope of registration were Mohs Micrographic Surgery (MMS) used to treat some early stage skin cancers and undertaken by a Consultant Dermatologist. Patients attending for this type of surgery had received the appropriate clinical investigations prior to the surgical treatment being undertaken at Discover Laser.
- Other services offered by Discover Laser included the removal of skin lesions such moles and cysts and other treatments including those for acne. The website for these offered comprehensive information about these services and included details of fees.

We found that the issues identified at inspection in August 2022 had been addressed. These included:

- Since our previous inspection, the provider had invested in creating an MMS laboratory and treatment suite consisting of a secure laboratory, with a separate room for preparing, viewing and analysing slides of excised tissue. The suite of rooms also included two separate patient consultation/treatment rooms which had interconnecting doors with the laboratory promoting the safe flow of the excised tissue from patient to laboratory for preparation for examination and assessment.
- The risk assessments for the MMS laboratory had been updated and were subject to regular review.
- Systems for cleaning and equipment checking regimes for the MMS laboratory areas were established and were up to date.
- The service had implemented a protocol to ensure pathological specimens were retained and stored in accordance with relevant guidance and standards.

We also found the areas identified at the previous inspection where the provider should make improvements had also been addressed, including:

- Signage and security for MMS laboratory had been improved.
- Systems to maintain oversight of the documentation in relation to the MMS service was now established.
- Staff received regular appraisal.
- The service accommodated patients with disabilities and could access additional support if required for those patients with sensory loss.
- Feedback from staff indicated there was clear understanding of the vision and strategy for the service.

**Dr Sean O’Kelly BSc MB ChB MSc DCH FRCA**

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

## Our inspection team

The inspection was led by a CQC inspector who had access to advice from a specialist advisor.

## Background to Discover Laser

Discover Laser, Crow Wood Leisure, Royle Lane, Burnley, Lancashire, BB12 0RT is registered with the Care Quality Commission (CQC) as an independent health service provider. The provider is a registered GP and has additional qualifications for cosmetic medicine. The service offers a range of medical, cosmetic and aesthetic services to adults over the age of 18 years.

The web address for the service is: [www.discoverlaser.co.uk](http://www.discoverlaser.co.uk)

The service is located within a modern building within the boundaries of the Crow Wood Leisure complex, The complex includes a hotel and spa, a gym and dining facilities. The Discover Laser clinic provides bright, clean and modern surroundings and there is a bespoke MMS suite which provides a spacious, secure laboratory with adjoining minor surgery consultation rooms.

The service is registered with the CQC to provide the following regulated activities:

Surgical procedures

Treatment of disease, disorder and injury

Diagnostic and screening procedures

Discover Laser is open 10am to 7pm Monday and Wednesdays, 10am to 6pm Tuesday, Thursday and Fridays, and from 10am to 4pm on Saturdays.

### How we inspected this service

We requested a range of documents, staff feedback forms and undertook an inspection site visit on 16 May 2023 specifically to follow up on the areas identified at a previous inspection in August 2022.

To get to the heart of patients' experiences of care and treatment, we always ask the following five questions:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

These questions therefore formed the framework for the areas we looked at during the inspection.

# Are services well-led?

## **We rated well-led as Good because:**

We rated well-led as good. The provider had taken action following our inspection in August 2022. A new dedicated suite of clinical treatment and laboratory rooms had been created to ensure MMS was provided in a safe, effective and secure area which offered patients a bespoke service. The records demonstrating systems of quality assurance for the MMS were robust and evidence demonstrated regular and comprehensive monitoring was undertaken for the services it delivered.

## **Leadership capacity and capability**

### **Leaders had the capacity and skills to deliver high-quality, sustainable care.**

- The provider was supported by a business/clinical director, and a team of 4 part time health care assistants/therapists and 1 laboratory technician and a secretary. Close working arrangements were established with 2 consultant dermatologists and a biochemist to provide MMS.
- Leaders were knowledgeable about issues and priorities relating to the quality and future of services. They were members of the British College of Aesthetic Medicine (BCAM) and submitted an annual survey following an analysis of the trends and performance over the previous 12 month period.
- Feedback from staff was positive stating the provider and the business director were available and accessible. The provider and the business director worked closely with staff and others to make sure they prioritised compassionate and inclusive leadership.

## **Vision and strategy**

### **The service had a clear vision and credible strategy to deliver high quality care and promote good outcomes for patients.**

- There was a clear vision and set of values. The service had a realistic strategy and supporting business plans to achieve priorities. The business plan for 2023 was available and this demonstrated a positive review of past performance with clear objectives for future developments.
- The service monitored progress against delivery of the strategy.
- The service developed its vision, values and strategy jointly with staff and external stakeholders. The service closed for one day every month so a full staff meeting and staff training could be provided.
- Staff were aware of and understood the vision, values and strategy and their role in achieving them.

## **Culture**

### **The service had a culture of high-quality sustainable care.**

- Staff felt respected, supported and valued. They were proud to work for the service.
- The service focused on the needs of patients.
- Leaders and managers acted on behaviour and performance inconsistent with the vision and values.
- Openness, honesty and transparency were demonstrated when responding to incidents and complaints. Significant incidents were recorded and the records of these showed when there had been an issue, the patient was involved in the discussion of the issue, action taken and apology provided as appropriate.
- The provider was aware of and had systems to ensure compliance with the requirements of the duty of candour.

# Are services well-led?

- There were processes for providing all staff with the development they need. This included appraisal and career development conversations. All staff received regular annual appraisals in the last year. All staff were considered valuable members of the team.
- There was a strong emphasis on the safety and well-being of all staff.
- The service actively promoted equality and diversity. Staff felt they were treated equally.
- There were positive relationships between staff and teams.

## Governance arrangements

### **There were clear responsibilities, roles and systems of accountability to support good governance and management.**

- Structures, processes and systems to support good governance and management were clearly set out, understood and effective. The governance and management of joint working arrangements promoted interactive and co-ordinated person-centred care.
- Since our inspection in August 2022 the service had reviewed their governance arrangements and where they had identified gaps they had implemented actions to improve monitoring and recording of information. To support the governance of the service an audit schedule was in place which included for example, annual clinical audits of MMS, minor operations and the prescribed treatment for acne (Isotretinoin). Monthly audits included incidents, medicines, patient feedback and there were recorded schedules to monitor the equipment used for MMS histology of the excised skin cells. Cleaning schedules were recorded and a set schedule of cleaning was in place for the MMS equipment and the laboratory suite.
- Staff were clear on their roles and accountabilities and additional support including on the job supervision was provided to staff in all the areas of service delivery.
- Leaders had established proper policies, procedures and activities to ensure safety and assured themselves that they were operating as intended.
- The service submitted data or notifications to external organisations as required.
- There were robust arrangements in line with data security standards for the availability, integrity and confidentiality of patient identifiable data, records and data management systems.

## Managing risks, issues and performance

### **There were clear and effective processes for managing risks, issues and performance.**

- There was an effective process to identify, understand, monitor and address current and future risks including risks to patient safety. Since our last inspection risk assessments had been reviewed and updated. A risk register was in place, which was supported by health and safety risk assessments for each of the clinical consultation rooms and communal rooms. A specific risk assessment was in place for the MMS laboratory suite. The laboratory was secure and locked when not in use.
- The service had processes to manage current and future performance. Performance of staff and the quality of service delivery was monitored. Leaders had oversight of safety alerts, incidents, and complaints.
- The provider had plans in place and had trained staff for major incidents.

## Appropriate and accurate information

### **The service acted on accurate information.**

# Are services well-led?

- Quality and operational information was used to ensure and improve performance. Performance information was combined with the views of patients.
- Quality and sustainability were discussed in relevant meetings where all staff had sufficient access to information.
- The information used to monitor performance and the delivery of quality care was accurate and useful. There were plans to address future development and improvements.

## **Engagement with patients, the public, staff and external partners**

### **The service involved patients, the public, staff and external stakeholders to support high-quality sustainable services.**

- The service encouraged and heard views and concerns from the public, patients, staff and external stakeholders and acted on them to shape services and culture. For example, the provider consulted with the Consultant Dermatologist regarding the best lay out and structure for delivering a safe and effective MMS service. This feedback influenced the construction layout of the laboratory suite.
- Feedback from patients was requested and a monthly audit of the feedback undertaken. A review of these showed that each month patients rated the service they received as excellent. Comments by patients received in December 2022, included: “Nothing to improve” and “Professional and friendly”.
- Staff participated in regular meetings and were able to provide feedback regarding the service and obtain advice and support as they needed it.
- The service was transparent, collaborative and open with patients about performance.

## **Continuous improvement and innovation**

### **There were evidence of systems and processes for learning, continuous improvement and innovation.**

- There was a focus on continuous learning and improvement.
- The service made use of internal and external reviews of incidents and complaints. Learning was shared and used to make improvements.
- Leaders and managers encouraged staff to take time out to review individual and team objectives, processes and performance.
- There were systems to support improvement and innovation work. For example, anecdotal feedback received by the service indicated the bespoke MMS laboratory suite was currently unique, with other service providers not offering a custom made environment to undertake this kind of specialised minor surgery.