

REJUVENATING SOLUTIONS LTD

Inspection report

6 The Chandlery
Quayside
Berwick-upon-tweed
TD15 1HE
Tel: 01289385119






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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 safe?	Good 
Are services effective?	Good 
Are services caring?	Outstanding 
Are services responsive to people's needs?	Good 
Are services well-led?	Good 

Overall summary

This service is rated as Good overall.

The key questions are rated as:

Are services safe? – Good

Are services effective? – Good

Are services caring? – Outstanding

Are services responsive? – Good

Are services well-led? – Good

We carried out an announced comprehensive inspection at Rejuvenating Solutions Ltd as part of our inspection programme.

Rejuvenating Solutions Ltd provides aesthetic treatments such as the diagnosis and treatment of skin conditions like acne and rosacea, and minor surgical interventions. 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. Rejuvenating Solutions Ltd provides a range of non-surgical cosmetic interventions which are not within CQC scope of registration. Therefore, we did not inspect or report on these services.

Our key findings were:

- There were systems and processes in place to ensure that care was delivered safely.
- Staff prioritised the well-being of people who used their service, they gave many examples of how they had changed people's lives in a positive and meaningful way.
- The service had received very positive feedback from people about the care they had received.
- The service listened to people and responded to their needs.
- Leaders had the capacity and skills to deliver high-quality, sustainable care.
- There was a focus on continuous learning and improvement.
- All members of staff maintained the necessary skills and competence to support people appropriately.

We saw the following outstanding practice:

- The service demonstrated that it had ensured that people who were known to them were looked after and had received the support they required throughout the pandemic. This included personally delivering products to patients homes and checking on patients general welfare, health and well-being. The staff exhibited genuine caring attitudes.
- The service had gathered testimony from patients who had lived with skin conditions that had directly affected their mental health. We observed people showing how effective treatment had been and the positive impact on their health and well-being.
- The service was able to demonstrate how they had gone beyond their remit of other services of a similar nature. For example, they had advocated medical treatment for one young adult who had been unable to access this previously.

Overall summary

The service was able to demonstrate a connection between the young adult's skin condition and mental well-being. The diligence of the service then enabled the young adult to access the very necessary treatment, which was required. We received written evidence indicating prior to this intervention that the young person had considered taking their own life, but had subsequently, with the support of the service, made a full recovery.

Dr Rosie Benneyworth BM BS BMedSci MRCGP

Chief Inspector of Primary Medical Services and Integrated Care

Our inspection team

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

Background to REJUVENATING SOLUTIONS LTD

Rejuvenating Solutions Ltd is registered with the Care Quality Commission to provide the regulated activities of treatment of disease, disorder, or injury (TDDI), and surgical procedures from one registered location at the following address:

6 The Chandlery, Quayside, Berwick upon Tweed, TD15 1HE

We visited this location as part of our inspection.

Rejuvenating Solutions Ltd provides aesthetic services such as medical treatments for skin conditions like acne and rosacea; treatment of excessive sweating with prescribed toxin injection; topical/systemic therapy for eczema, psoriasis, and acne; microsclerotherapy for thread vein; and acne scar management through microneedling and medical chemical peel. The service sees approximately 130 to 150 people per month and offers treatments to people over the age of 18.

The service provides both face-to-face and online consultations. The core opening times of the service are as follows:

- Monday 10am-4pm
- Tuesday 10am-4pm
- Wednesday 10am-4pm
- Thursday 10am-4pm
- Friday 10am-4pm
- Saturday closed
- Sunday – closed

The service consists of two nurses and a senior administrator.

How we inspected this service

Prior to visiting this service we reviewed information from stakeholders (e.g. online reviews, CQC notifications) and data submitted by the provider.

We interviewed staff, undertook observations and a review of documents both remotely and during a site visit.

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 safe?

We rated safe as Good because:

There were systems and processes in place to ensure that care was delivered safely.

Safety systems and processes

The service had clear systems to keep people safe and safeguarded from abuse.

- The provider conducted safety risk assessments. It had appropriate safety policies, which were regularly reviewed and communicated to staff. Staff received safety information from the service as part of their training. The service had systems to safeguard children and vulnerable adults from abuse.
- Staff took steps to protect people from abuse, neglect, harassment, discrimination and breaches of their dignity and respect.
- The provider carried out staff checks at the time of recruitment and were looking at ways to repeat this on an ongoing basis where appropriate. Disclosure and Barring Service (DBS) checks were undertaken where required. (DBS checks identify whether a person has a criminal record or is on an official list of people barred from working in roles where they may have contact with children or adults who may be vulnerable).
- All staff received up-to-date safeguarding and safety training appropriate to their role. They knew how to identify and report concerns.
- There was an effective system to manage infection prevention and control.
- The provider ensured that facilities and equipment were safe and that equipment was maintained according to manufacturers' instructions. There were systems for safely managing healthcare waste.
- The provider carried out appropriate environmental risk assessments, which took into account the profile of people using the service and those who may be accompanying them.
- The provider had independent accreditation with an organisation which regulates areas of non-medical cosmetic treatment which is not regulated by CQC.

Risks to patients

There were systems to assess, monitor and manage risks to patient safety.

- There were arrangements for planning and monitoring the number and mix of staff needed.
- Staff understood their responsibilities to manage emergencies and to recognise those in need of urgent medical attention. They knew how to identify and manage people with severe infections, for example sepsis.
- There were appropriate indemnity arrangements in place.
- There were suitable medicines and equipment to deal with medical emergencies which were stored appropriately and checked regularly. If items recommended in national guidance were not kept, there was an appropriate risk assessment to inform this decision.

Information to deliver safe care and treatment

Staff had the information they needed to deliver safe care and treatment to patients.

- Individual care records were written and managed in a way that kept people safe. The care records we saw showed that information needed to deliver safe care and treatment was available to relevant staff in an accessible way.
- The service had systems for sharing information with staff and other agencies to enable them to deliver safe care and treatment.

Are services safe?

- The service had a system in place to retain medical records in line with Department of Health and Social Care (DHSC) guidance in the event that they cease trading.
- Clinicians made appropriate and timely referrals in line with protocols and up to date evidence-based guidance.

Safe and appropriate use of medicines

The service had reliable systems for appropriate and safe handling of medicines.

- The systems and arrangements for managing medicines, emergency medicines and equipment minimised risks. The service kept prescription stationery securely and monitored its use.
- The service did not prescribe Schedule 2 and 3 controlled drugs (medicines that have the highest level of control due to their risk of misuse and dependence). Neither did they prescribe schedule 4 or 5 controlled drugs.
- Staff prescribed, administered or supplied medicines to clients and gave advice on medicines in line with legal requirements and current national guidance. Processes were in place for checking medicines and staff kept accurate records of medicines.

Track record on safety and incidents

The service had a good safety record.

- There were comprehensive risk assessments in relation to safety issues.
- The service monitored and reviewed activity. This helped it to understand risks and gave a clear, accurate and current picture that led to safety improvements.

Lessons learned and improvements made

The service learned and made improvements when things went wrong.

- There was a system for recording and acting on significant events.
- There were adequate systems for reviewing and investigating when things went wrong.
- The provider was aware of and complied with the requirements of the Duty of Candour. The provider encouraged a culture of openness and honesty. The service had systems in place for knowing about notifiable safety incidents

When there were unexpected or unintended safety incidents:

- Although there had been no unexpected or unintended safety incidents the service had a policy in place to ensure if anyone was affected reasonable support, truthful information and a verbal and written apology would be provided.
- The service had systems in place to ensure they acted on and learned from external safety events as well as client and medicine safety alerts. The service had an effective mechanism in place to disseminate alerts to all members of the team.

Are services effective?

We rated effective as Good because:

Effective needs assessment, care and treatment

The provider had systems to keep clinicians up to date with current evidence based practice. We saw evidence that clinicians assessed needs and delivered care and treatment in line with current legislation, standards and guidance (relevant to their service).

- Peoples' immediate and ongoing needs were fully assessed. Where appropriate this included their clinical needs and their mental and physical wellbeing.
- Clinicians had enough information to make or confirm a diagnosis
- We saw no evidence of discrimination when making care and treatment decisions.

Monitoring care and treatment

The service was actively involved in quality improvement activity.

The service made improvements through the use of completed audits. Clinical audit had a positive impact on quality of care and outcomes for patients. There was clear evidence of action to improve quality.

Effective staffing

Staff had the skills, knowledge and experience to carry out their roles.

- All staff were appropriately qualified. The provider had an induction programme for all newly appointed staff.
- Relevant professionals were registered with the Nursing and Midwifery Council and were up to date with their revalidation
- The provider understood the learning needs of staff and provided protected time and training to meet them. Up to date records of skills, qualifications and training were maintained. Staff were encouraged and given opportunities to develop.

Coordinating patient care and information sharing

Staff worked together, and worked well with other organisations, to deliver effective care and treatment.

- People received coordinated and person-centred care. Staff referred to, and communicated effectively with, other services when appropriate such as the persons own GP.
- Before providing treatment, nurses at the service ensured they had adequate knowledge of the persons health, any relevant test results and their medicines history. We saw examples of patients being signposted to more suitable sources of treatment.
- All people were asked for consent to share details of their consultation and any medicines prescribed with their registered GP.
- Peoples' information was shared appropriately and with their consent.

Supporting patients to live healthier lives

Are services effective?

Staff were consistent and proactive in empowering patients, and supporting them to manage their own health and maximise their independence.

- Where appropriate, staff gave people advice so they could self-care.
- Where peoples' needs could not be met by the service, staff redirected them to the appropriate service for their needs.

Consent to care and treatment

The service obtained consent to care and treatment in line with legislation and guidance.

- Staff understood the requirements of legislation and guidance when considering consent and decision making.

Staff supported people to make decisions and monitored the process for seeking consent appropriately.

Are services caring?

We rated caring as Outstanding because:

Staff at the service displayed an understanding and non-judgemental attitude to all clients and the service had received very positive feedback from clients about the care they had received. People were truly respected and valued as individuals and were empowered as partners in their care, practically and emotionally, by an exceptional and distinctive service

Kindness, respect and compassion

Staff treated patients with kindness, respect and compassion.

- The service sought feedback on the quality of clinical care clients received.
- The service provided free health awareness education via social media. This included not only awareness sessions about acne and skin care but also other subjects including men's health.
- We looked at reviews for the service on-line, they had 35 positive reviews and no negative reviews.
- The service demonstrated that it had ensured that people who were known to them were looked after and had received the support they required throughout the pandemic. This included personally delivering products to patients' homes and checking on patient's general welfare, health and well-being. The staff exhibited genuine caring attitudes.
- The service had gathered testimony from patients who had lived with skin conditions that had directly affected their mental health. We observed people showing how effective treatment had been and the positive impact on their health and well-being.
- We saw examples of individual care that demonstrated this kind of attention was routine and the culture of the service was to go beyond what might be reasonably expected of them. For example, they had advocated medical treatment for one young adult who had been unable to access this previously. The service was able to demonstrate a connection between the young adult's skin condition and mental well-being. The diligence of the service then enabled the young adult to access the very necessary treatment, which was required. We received written evidence indicating prior to this intervention that the young person had considered taking their own life, but had subsequently, with the support of the service, made a full recovery.
- Staff understood clients' personal, cultural, social and religious needs. They displayed an understanding and non-judgemental attitude to all clients.
- The service gave clients timely support and information.

Involvement in decisions about care and treatment

Staff helped patients to be involved in decisions about care and treatment.

- Interpretation services were available for clients who did not have English as a first language. Clients were also told about multi-lingual staff who might be able to support them. Information leaflets were available in easy read formats, to help clients be involved in decisions about their care.
- We saw from publicly available reviews of the service that clients felt listened to and supported by staff and had sufficient time during consultations to make an informed decision about the choice of treatment available to them.
- Staff communicated with people in a way that they could understand, for example, communication aids and easy read materials were available.
- We saw examples of how the service liaised with other services to support people in making decisions about their care and treatment when they required additional treatments the service could not provide.

Privacy and Dignity

Are services caring?

The service respected patients' privacy and dignity.

- Staff recognised the importance of people's dignity and respect.
- Staff knew that if people wanted to discuss sensitive issues or appeared distressed they could offer them a private room to discuss their needs.

Are services responsive to people's needs?

We rated responsive as Good because:

The provider understood the needs of their clients and improved services in response to those needs. Access to care was timely and we saw that complaints, should they occur, would be taken seriously.

Responding to and meeting people's needs

The service organised and delivered services to meet patients' needs. It took account of patient needs and preferences.

- The provider understood the needs of their clients and improved services in response to those needs. For example, the provider had identified there was a gap in local provision for ear syringing services. In response to this need they set up this service working in conjunction with other providers to ensure people's needs were met.
- The facilities and premises were appropriate for the services delivered.
- Reasonable adjustments had been made so that people in vulnerable circumstances could access and use services on an equal basis to others. The building was fully accessible with all client areas on the ground floor. There were protocols in place for patients in wheelchairs and accessible toilets. Easy read information was available.

Timely access to the service

Patients were able to access care and treatment from the service within an appropriate timescale for their needs.

- Clients had timely access to initial assessment, test results, diagnosis and treatment.
- Clients with the most urgent needs had their care and treatment prioritised.

Listening and learning from concerns and complaints

The service took complaints and concerns seriously and had procedures to respond to them appropriately, to improve the quality of care if they occurred.

- Information about how to make a complaint or raise concerns was available.
- The service has procedures to inform people of any further action that may be available to them should they not be satisfied with the response to their complaint.

The service had complaint policy and procedures in place which would enable them to learn lessons from individual concerns, complaints and from analysis of trends.

Are services well-led?

We rated well-led as Good because:

Leaders had the capacity and skills to deliver high-quality, sustainable care. There were clear and effective processes for managing risks, issues and performance and we saw there was a focus on continuous learning and improvement.

Leadership capacity and capability

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

- Leaders were knowledgeable about issues and priorities relating to the quality and future of services. They understood the challenges and were addressing them.
- Leaders at all levels were visible and approachable. They worked closely with staff and others to make sure they prioritised compassionate and inclusive leadership.
- The provider had effective processes to develop leadership capacity and skills, including planning for the future leadership of the service.

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 service developed its vision, values and strategy jointly with staff.
- Staff were aware of and understood the vision, values and strategy and their role in achieving them
- The service monitored progress against delivery of the strategy.

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 clients.
- Leaders acted on behaviour and performance inconsistent with the vision and values.
- Openness, honesty and transparency were demonstrated when responding to incidents and complaints. The provider was aware of and had systems to ensure compliance with the requirements of the duty of candour.
- Staff told us they could raise concerns and were encouraged to do so. They had confidence that these would be addressed.
- 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. Staff were supported to meet the requirements of professional revalidation where necessary. Clinical staff, including nurses, were considered valued members of the team. They were given protected time for professional time for professional development and evaluation of their clinical work.
- There was a strong emphasis on the safety and well-being of all staff.
- The service actively promoted equality and diversity. It identified and addressed the causes of any workforce inequality. Staff had received equality and diversity training. Staff felt they were treated equally.
- There were positive relationships between staff and teams.

Are services well-led?

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 partnerships, joint working arrangements and shared services promoted interactive and co-ordinated person-centred care.
- Staff were clear on their roles and accountabilities
- Leaders had established proper policies, procedures and activities to ensure safety and assured themselves that they were operating as intended.
- External companies had been sourced to provide human resources, legal, public relations, and accountancy advice or services.
- The service used performance information which was reported and monitored and management and staff were held to account
- The information used to monitor performance and the delivery of quality care was accurate and useful. There were plans to address any identified weaknesses.
- 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.
- The service had processes to manage current and future performance. Performance of clinical staff could be demonstrated through audit of their consultations, prescribing and referral decisions. Leaders had oversight of safety alerts, incidents, and complaints.
- Clinical audit had a positive impact on quality of care and outcomes for clients. There was clear evidence of action to change services to improve quality.
- The provider had plans in place and had trained staff for major incidents. They had responded well to the pandemic and leased extra space to ensure social distancing and other requirements could be met.

Appropriate and accurate information

The service acted on appropriate and accurate information.

- Quality and operational information was used to ensure and improve performance. Performance information was combined with the views of clients.
- Quality and sustainability were discussed in relevant meetings where all staff had sufficient access to information.

Engagement with patients, the public, staff and external partners

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

Are services well-led?

- The service encouraged and heard views and concerns from the public, staff and external partners and acted on them to shape services and culture.
- Staff could describe to us the systems in place to give feedback. We saw evidence of feedback opportunities for staff and how the findings were fed back to staff. We also saw staff engagement in responding to these findings.
- The service was transparent, collaborative and open with stakeholders about performance.

Continuous improvement and innovation

There were 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 encouraged staff to take time out to review individual and team objectives, processes and performance.