

Aspire Health and Beauty - Laser Audit report.

The quality of care is monitored by Aspire Health and Beauty as part of our IPL Treatment policy.

Treatments are monitored for safety and efficacy and clinical records are reviewed to ensure best practice such as consultation and consent procedures are followed.

Information about the safety of our treatments is collated from various sources including:

- ◆ comments and complaints
- ◆ analyses of adverse incident log
- ◆ analyses of side effect log
- ◆ analyses of record review log
- ◆ review of clinical records
- ◆ clinical outcomes
- ◆ risk assessments

Documentation procedures such as an adverse incidents log, a side effects log and a complaints log are in place so that any incident, side effect or complaint can be recorded, reviewed and analyzed.

Analysis of such data guides clinical policies, procedures and protocols and are in place to identify any risks, unsafe practices or highlight a need for further training.

This audit has included:

- ◆ client ages
- ◆ client satisfaction with treatment
- ◆ Number of IPL treatments carried out in this period
- ◆ different skin types
- ◆ range of fluences
- ◆ treatment types and popularity

CLINIC Audit Report Form

Date: 27th July 2018 Period: July 2017-July 2018	Audit Type: Clinical Records	Completed by: Jemma Voce
Brief Summary of Results:	Overall good clinical records	
Areas of Good Practice Identified:	Client involvement and treatment explained. Accurate and legible records kept Consent obtained and medical history assessed	
Areas Where Need for Improvement Identified:	None	
<u>Proposals for Change:</u> Has an action plan been produced yet? NO (If YES, please attach completed Action Plan Form)		
If <u>NOI</u> , was this because audit confirmed best practice? YES If <u>NO</u> , please give reason why an action plan has not yet been produced. Not required		
<u>Outcome:</u> Has the audit led to improved patient outcomes? YES Has the audit led to better ways of work? YES		
Have protocols or guidelines been written as a result of this audit? NOT REQUIRED If <u>YES</u> , please provide brief details:		

Proposed Re-audit date: July 2019

CLINIC Audit Report Form

Date: 27th July 2018	Audit Type: LOG BOOK	Completed by: Jemma voce
Brief Summary of Results:	Client information all complete	
Areas of Good Practice Identified:	Written legibly, comments and concerns identified and written	
Areas Where Need for Improvement Identified:	None	
<u>Proposals for Change:</u> Has an action plan been produced yet? No (If YES, please attach completed Action Plan Form)		
If <u>NO</u> , was this because audit confirmed best practice? YES If <u>NO</u> , please give reason why an action plan has not yet been produced. Not required		
<u>Outcome:</u> Has the audit led to improved patient outcomes? NO Has the audit led to better ways of work? NO		
Have protocols or guidelines been written as a result of this audit? No requirement to change If <u>YES</u> , please provide brief details:		

Proposed Re-audit date: July 2019

CLINIC Audit Report Form

Date: 27th July 2018	Audit Type: Consent Forms	Completed by: Jemma Voce
Brief Summary of Results:	10 consent forms audited. All criteria met	
Areas of Good Practice Identified:	All written legibly. Explanation of treatment, price, possible side effects. All signed by client and practitioner	
Areas Where Need for Improvement Identified:	None	
<u>Proposals for Change:</u> Has an action plan been produced yet? NOT REQUIRED (If YES, please attach completed Action Plan Form)		
If <u>NO</u> , was this because audit confirmed best practice? YES If <u>NO</u> , please give reason why an action plan has not yet been produced.		
<u>Outcome:</u> Has the audit led to improved patient outcomes? NO Has the audit led to better ways of work? NO		
Have protocols or guidelines been written as a result of this audit? NOT REQUIRED If <u>YES</u> , please provide brief details:		

Proposed Re-audit date: July 2019