Jersey Care Commission

# INSPECTION REPORT

## Beauty Box
## Laser Procedures

## 3 Seale Street
## St Helier
## JE2 3QG

## Inspection Dates
23 June 2026

## Date published
20 August 2026

## THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014 ('the Law'), all services carrying out any regulated activity must be registered with the Jersey Care Commission ('the Commission').

This inspection was carried out in accordance with Regulation 80 of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018 to monitor compliance with the Law and Regulations, to review and evaluate the effectiveness of the regulated activity and to encourage improvement.

## ABOUT THE SERVICE

This is a report of the inspection of Beauty Box which has a registered provider/manager also referred to as the Laser Protection Supervisor in accordance with the Jersey Care Commission Standards regarding Class 3B and Class 4 Lasers.

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| Regulated Activity | Laser Procedures |
| Conditions of Registration | Age range of persons in receipt of treatment: Age 18 and above<br><br>Categories of treatments:<br>Hair removal |
| Date of inspection | 23 June 2026 & 07 July 2026 |
| Time of Inspection | 13:00-13:44 & 11:45-12:02 |
| Date of Previous Inspection | 02 June 2025 |

## ABOUT THE INSPECTION

### Inspection Details

This inspection was announced and notice of the inspection visit was given to the Laser Protection Supervisor (LPS) 34 days prior to the inspection. This was to ensure that the LPS would be available during the visit.

## INSPECTION PROCESS

### How the inspection was undertaken

The Standards of Practice for the use of lasers was referenced throughout the inspection.[1]

Prior to our inspection visit, all the information held by the Commission about this service was reviewed, including the previous inspection report.

As part of the inspection process, records including evidence of the Core of Knowledge training being completed within the previous five years, laser machine service records, treatment records and the Local Rules were reviewed.

At the conclusion of the inspection visit, the Regulation Officer provided feedback to the LPS.

[1] The Laser Standards can be accessed on the Commission's website at https://carecommission.je

## Client Information

The Regulation Officer was satisfied that client treatment records are stored in a locked cabinet with the key stored in the possession of the LPS. Client details including emergency contact details and evidence of consent being obtained for the removal of hair treatment was observed.

A review of a sample of treatment records found that they were generally completed well but consistency in the completion of the records in full is required. There was evidence of an initial test patch being performed prior to commencing a treatment regime.

It was suggested that clients who have treatments infrequently are asked to complete the comprehensive medical questionnaire more frequently in case of any change in their medical status. The LPS reported they verbally ask for an update in a client's medical status but in the event of any adverse reaction would be unable to evidence their conversation.

An informative pre and post treatment information leaflet is provided to clients however this was not consistently recorded as being provided to the client. This was a finding of the previous inspection and given as a recommendation to record at each client interaction. It was recommended again this year to record post treatment information has been given.

Within two weeks of the initial inspection the Laser Protection Supervisor prepared a written procedure for data protection that includes the safe storage of records and the required length of retention of client records.

## Policies and Procedures

The Standards require relevant certificates to be displayed within the laser premise and whilst most were evident they were not the most recent copy. During the inspection evidence was provided of current registration with the Jersey Office of the Information Commissioner and the Commission. It is positive that the current public liability insurance certificate was displayed at the entrance of the premise.

Two weeks after the initial inspection the Regulation Officer found all the necessary certificates on display.

The LPS shared they have never received a complaint however to comply with the Standards were asked to share the action they would take to respond to any complaint received. Written information regarding the handling of a complaint was produced within two weeks of the inspection which was very informative and can be shared with the clients.

The Laser Protection Advisor (LPA) was booked to conduct a remote site visit following the first inspection visit to review the Local Rules and the service specific risk assessment. At the follow up inspection the required evidence was provided including confirmation the LPA has been appointed for another year.

The written protocols by the Expert Registered Healthcare Professional were provided as part of the inspection process.

## Environment Safety

There is the ability to lock the door from the inside during a treatment to maintain dignity and provide privacy whilst ensuring the safety of clients and employees. Evidence was present of warning signs on the outside of the door that identify when the laser is in operation.

Three fire extinguishers are available including one that is available directly outside of the room and all have been serviced within the last year.

Personal protection equipment is available, and the room was clean and tidy with an explanation given of safe cleaning practices.

The LPS is required to ensure the clinical waste bin be replaced with a foot operated bin and this was achieved by the second inspection visit.

## Equipment Safety

The LPS provided evidence that they have received training from the manufacturer on the updates installed at the time of the laser service this year. The Regulation Officer was informed that continuing professional development to demonstrate knowledge and skills relevant to the treatment is maintained by participating in an online forum of laser operators where information is shared. It is requested that to comply with the Standards the LPS records evidence of their CPD.

The Regulation Officer was provided with evidence at the previous inspection in 2025 that there was compliance with undertaking the Core of Knowledge training every five years. It was requested the certificate be displayed and it was on display in the treatment room at the follow up inspection.

Eye protection is available and the Regulation Officer could see the portable appliance testing labels on the equipment supported by a document evidencing the date the equipment had undergone testing this year.

There are safe practices in place to ensure the LPS is the only person who can operate the laser machine.  A code has to be inputted which is known only to the LPS.

## IMPROVEMENT PLAN

There were no areas for improvement identified during this inspection.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of the Care Commission during the course of this inspection. The findings contained within this report do not exempt the service from their responsibility for maintaining compliance with legislation, Standards and best practice.

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