Expectancy Scanning Studios Ltd

Quality Report

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This report describes our judgement of the quality of care at this location. It is based on a combination of what we found when we inspected and a review of all information available to CQC including information given to us from patients, the public and other organisations

Ratings

Overall rating for this location	Good
Are services safe?	Good
Are services effective?	
Are services caring?	Good
Are services responsive?	Good
Are services well-led?	Good

Summary of findings

Letter from the Chief Inspector of Hospitals

Expectancy Scanning Studios Ltd is operated by Private Pregnancy Ultrasound Services Ltd trading as Expectancy Scanning Studios Ltd. Facilities include one ultrasound scanner and a scanning room, a reception area and a toilet.

We inspected this service using our comprehensive inspection methodology. We carried out the announced inspection on 9 September 2019.

To get to the heart of patients' experiences of care and treatment, we ask the same five questions of all services: are they safe, effective, caring, responsive to people's needs, and well-led? Where we have a legal duty to do so we rate services' performance against each key question as outstanding, good, requires improvement or inadequate.

Throughout the inspection, we took account of what people told us and how the provider understood and complied with the Mental Capacity Act 2005.

Services we rate

We rated it as good overall.

- There was a programme of mandatory training in key safety areas, which all staff completed, and systems for checking staff competencies.
- Staff understood what to do if they had a safeguarding concern.
- The service carried out routine quality assurance and servicing to ensure the ultrasound scanner and equipment were safe for use.
- Records were up-to-date, complete and stored appropriately to prevent unauthorised access.
- Staff demonstrated a kind and caring approach to their patients. They supported their patients' emotional needs and provided reassurance.
- Appointments were scheduled to meet the needs and demands of the patients who needed their services.
- The service had systems in place to get feedback from patients to enable them to continually improve the service being provided.
- Patient views and experiences were gathered and acted on to improve the service.
- The service strived for continuous learning, service improvement and innovation.

However:

- Due to the size of the service there were no formal team meetings.

Dr. Nigel Acheson
Deputy Chief Inspector of Hospitals (South East)

Summary of findings

Our judgements about each of the main services

Service	Rating	Summary of each main service
Diagnostic imaging	Good 	**We rated this service good because it was safe, caring, responsive and well led. We do not rate effective for this type of service.**

Summary of findings

Contents

Good

Expectancy Scanning Studios Ltd

Services we looked at
Diagnostic imaging;

Summary of this inspection

Background to Expectancy Scanning Studios Ltd

Expectancy Scanning Studios Ltd is operated by Private Pregnancy Ultrasound Services Ltd trading as Expectancy Scanning Studios Ltd. The service first opened in 2017 before moving to its current location in Gillingham, Kent in November 2017. The service primarily serves the communities of Kent. It also accepts patient referrals from outside this area.

All ultrasound scans performed at Expectancy Scanning Studios Ltd are in addition to those provided through the NHS.

The service has had a registered manager in post since December 2017.

We have not previously inspected or rated this service.

Our inspection team

The team that inspected the service comprised a CQC lead inspector and an assistant inspector. The inspection team was overseen by Catherine Campbell, Head of Hospital Inspection.

Information about Expectancy Scanning Studios Ltd

The service is located in a private gated courtyard and has one scanning room and is registered to provide the following regulated activities:

- Diagnostic and screening procedures.

During the inspection, we visited the scanning room and waiting area. We spoke with two staff; the front of house assistant and the registered manager. We spoke with one patient and one relative. During our inspection, we reviewed five sets of patient records.

There were no special reviews or investigations of the hospital ongoing by the CQC at any time during the 12 months before this inspection. The service has never been inspected.

Activity (August 2018 to August 2019)

The service scanned 665 patients, all of which were self-funded.

The service carried out 19 (3%) non-invasive prenatal tests and 16 (2%) group B streptococcus swabs.

Track record on safety

- No never events
- No clinical incidents
- No serious injuries
- No incidences of healthcare acquired Meticillin-resistant Staphylococcus aureus (MRSA), Meticillin-sensitive staphylococcus aureus (MSSA), Clostridium difficile (c.diff) or Escherichia coli (E-Coli).
- No complaints

Services provided at the service under service level agreement:

- Clinical and or non-clinical waste removal
- Grounds Maintenance
- Maintenance of medical equipment
- Pathology and histology

Summary of this inspection

The five questions we ask about services and what we found

We always ask the following five questions of services.

Are services safe?

Good

We rated safe as good because:

- Staff understood how to protect patients from abuse and had good links with local safeguarding agencies.
- The service controlled infection risk well and had suitable premises and equipment and looked after them well.
- The service had enough staff with the right qualifications, skills and experience to keep people safe from avoidable harm.
- There were processes for staff to raise concerns and report incidents. Staff understood their roles and responsibility to raise concerns and record safety incidents.

Are services effective?

- The service used current evidence-based guidance and good practice standards to inform the delivery of care.
- The service ensured staff were competent for their roles.
- Staff worked well as a team to benefit patients.
- Staff understood how and when to assess whether a patient had capacity to make decisions about their care.

Are services caring?

Good

We rated caring as good because:

- Staff cared for patients with compassion. Patient feedback was consistently positive.
- Staff provided emotional support to patients to minimise their distress.
- Patients received information in a way which they understood and felt involved in their care. Patients were always given the opportunity to ask staff questions.

Are services responsive?

Good

We rated responsive as good because:

- The service ensured there were appointments available to meet the needs of the patients.
- The service planned and provided services in a way that met the needs of local people.
- Staff took account of patients' individual needs.

Are services well-led?

Good

We rated well-led as good because:

Summary of this inspection

- The registered manager had the skills and abilities to run the service.
- The service collected, analysed, managed and used information well.
- The service engaged well with patients, staff, the public and local organisations to plan and manage appropriate services and collaborated with partner organisations effectively.

Detailed findings from this inspection

Overview of ratings

Our ratings for this location are:

	Safe	Effective	Caring	Responsive	Well-led	Overall
Diagnostic imaging	Good	N/A	Good	Good	Good	Good
Overall	Good	N/A	Good	Good	Good	Good

Good

Diagnostic imaging

Safe	Good
Effective	
Caring	Good
Responsive	Good
Well-led	Good

Are diagnostic imaging services safe?

Good

Mandatory training

The service provided mandatory training in key skills to all staff and made sure everyone completed it.

- Expectancy Scanning Studios Ltd had a mandatory training requirement which all staff were required to complete each year. Mandatory training records showed all staff were 100% compliant with training requirements.
- Mandatory training modules included, but were not limited to, basic life support, consent, duty of candour, fire safety, information governance, infection control, moving and handling and mental capacity act training.
- Mandatory training was delivered in a mixture of face-to-face and online training. Staff had protected time to complete training.

Safeguarding

Staff understood how to protect patients from abuse and the service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it.

- The service had policies for the safeguarding of vulnerable adults and children which included contact information for reporting concerns and guidance for notification to the relevant organisations. A flow chart was displayed in the reception area to act as a reminder to staff of what action to follow and who to contact if they identified a safeguarding concern.
- The service had good working relationships with local NHS hospitals. If staff required any safeguarding advice, they contacted the local hospital's safeguarding team for guidance. This included a level four children's safeguarding trained professional.
- Staff we spoke with had not made any safeguarding referrals; however, they were able to confidently tell us how they would identify a safeguarding issue and what action they would take. This included informing the safeguarding lead for the service.
- The registered manager who was also the sonographer for the service was trained to safeguarding level three for children, while the front of house assistant was trained to safeguarding level two for children. This met intercollegiate guidance: Safeguarding Children and Young People: Roles and competencies for Health Care Staff (January 2019). Guidance states all non-clinical and clinical staff who have any contact with children, young people and/or parents/carers should be trained to level two.
- All staff had received training in safeguarding vulnerable adults. The registered manager was trained to level three and the front of house assistant was trained to level two.
- The service had a separate and up-to-date female genital mutilation (FGM) policy, which provided staff with guidance on how to identify and report FGM. Female Genital Mutilation (FGM) is illegal in England and Wales under the FGM Act 2003 ("the 2003 Act"). It is a form of child abuse and violence against women.

FGM comprises all procedures involving partial or total removal of the external female genitalia for non-medical reasons. The registered manager had completed additional training in the recognition and reporting of female genital mutilation.

- There were signs displayed in the reception area offering a chaperone service. The front of house assistant was chaperone trained and was aware of their responsibilities as a chaperone.

Cleanliness, infection control and hygiene

The service-controlled infection risk well. Staff used equipment and control measures to protect patients, themselves and others from infection. They kept equipment and the premises visibly clean.

- The service had an infection prevention and control (IPC) policy, which provided staff with guidance and IPC procedures to follow to minimise the spread of infection. The policy was in date and had a review date of June 2022. The registered manager was the infection control lead for this service.
- Cleanliness and hygiene standards were maintained and embedded within the service. All areas of the service we visited were visibly clean and tidy. Staff carried out all the cleaning requirements for the service. We reviewed records of daily cleaning and weekly deep cleaning which showed staff cleaned the premises and equipment in accordance with the IPC policy.
- Staff cleaned equipment and the scanning couch between patients. We saw staff cleaning and sanitising scanning probes and equipment after each scan.
- All staff were aware and were seen to be bare below the elbow throughout the inspection. This helped prevent the spread of infection from clothing that could be contaminated and allowed them to wash their hands thoroughly.
- Hand sanitising gel was readily available throughout the service. We saw staff using hand sanitizer and washing their hands before and after patient contact.
- The service carried out hand hygiene questionnaire every six months. Patients were asked to answer three questions relating to the staff's hand hygiene compliance. The last questionnaire was completed in July 2019. Eleven patients completed the questionnaire. All patients agreed that they had seen staff using hand sanitizer and that the general cleanliness of Expectancy Scanning Studios Ltd was acceptable. A further 91% of patients said they were aware of staff washing their hands.
- The service had a service level agreement with an external company to collect clinical waste however, this had not happened yet. The registered manager told us the service produced very little clinical waste and mainly domestic waste therefore there was an agreement with the external company to collect clinical waste as and when required.

Environment and equipment

The design, maintenance and use of facilities, premises and equipment kept people safe. Staff were trained to use them.

- The service had systems and processes to monitor the electrical testing requirements and servicing of equipment. Records showed electrical testing had been completed in the last 12 months and the ultrasound scanner was last serviced in August 2019 in line with manufacturer's guidance.
- Equipment was well maintained. The sonographer was responsible for carrying out monthly quality assurance checks and we saw records confirming this. The checks were to evaluate the safety and performance of the ultrasound equipment ensuring that the information obtained in a clinical ultrasound procedure is accurate and clinical practices are safe.
- A service level agreement was in place with an external company for the day to day maintenance of equipment. Failures in equipment were reported to the technical support team. Staff told us they had not had to contact the company but were confident that repairs could be completed with minimal disruption to the service.
- The service had one ultrasound scanner located in a designated clinic room. The room had adequate space to manoeuvre and accommodate the patient's family and there was an adjustable couch. There was good lighting which when dimmed, allowed ultrasound scans to be clearly seen.

- Staff had access to all equipment and supplies they needed to provide a good service. Staff carried out a monthly stock take to ensure the service was always well stocked and consumables were within their expiry date and this included the service's first aid box.
- Fire extinguishers were accessible, stored appropriately, and had been inspected and serviced within the last 12 months. Fire drills were held every three to six months and staff used such opportunities to reflect on the drill and make changes.
- We saw one sharps bin, which was clean, correctly assembled with an assembly date, and had a temporary lid to prevent accidental spillage of sharps.
- There had been no instances of healthcare acquired infections in the 12 months prior to our inspection.

Assessing and responding to patient risk

Staff completed and updated risk assessments for each patient and removed or minimised risks.

- Patients attending the clinic were asked to provide clinical details before a procedure and the sonographer risk assessed all bookings to ensure patients were suitable for treatment. If unsuitable, the sonographer discussed this with the patient and a referral was made to the NHS for suitable care.
- Expectancy Scanning Studios Ltd had an abnormality referral policy and established pathways for staff to refer women to their GP or local NHS trust if unexpected findings were identified on the ultrasound scan or following non-invasive prenatal testing. Staff communicated their referral to the local NHS trust's early pregnancy clinic or GPs by telephone. If out of hours, the sonographer contacted the gynaecology registrar at the local trust. However, if the matter was urgent, staff told us they would call 999 for an ambulance transfer.
- Records showed that the service had referred 34 patients to the local NHS trust in the last 12 months which was 5% of the total patients the service saw. Of these patients, 85% were in their first trimester.
- In the event of an abnormality referral to the NHS, the patient was given a copy of the report to present to the hospital. Patients were asked to consent to sharing this information verbally and signed the consent form as part of the pre-scan questionnaire.
- Staff told women about the importance of attending their NHS scans and appointments. Staff made sure women understood that the ultrasound scans and screening tests they performed were in addition to the routine care they received as part of their maternity pathway.
- Due to the nature of the service, there was no emergency resuscitation equipment on site. However, staff had access to a first aid box. There were clear guidelines for staff to follow if a woman suddenly became unwell whilst attending the clinic.

Staffing

The service had enough staff with the right qualifications, skills, training and experience to provide the right care and treatment.

- Expectancy Scanning Studios Ltd employed two members of staff, the registered manager who was also the sonographer and a front of house assistant.
- During clinic times, the registered manager and front of house assistant were always on site to ensure there was no lone working.
- Staff had an induction procedure that covered all aspects of the service for their job role.
- The registered manager monitored staff sickness rates. We reviewed records which demonstrated that the service had no sickness absences for staff in the last 12 months.
- The service did not use agency staff and there were no staff vacancies at the time of our inspection.

Records

Staff kept detailed records of patients' care and treatment.

- Records were clear, up-to-date and easily available to staff. We reviewed five sets of patient records and they were in line with Standards for Reporting and Interpretation of Imaging Investigation set by the

Royal College of Radiologists. Records were accurately completed with procedure findings, recommendations, the name of the sonographer who undertook the scan and date of the scan. Reports were completed immediately ensuring they were accurately recorded.

- All patients attending clinic received a printed or an electronic report of their scan. Templates of reports had been devised in conjunction with British Medical Ultrasound Society (BMUS) and reviews from external clinical specialists. The service kept an electronic copy of the scan and report for nine months, in case they needed to refer to the document in future.
- Pre-scan questionnaires and consent forms at the service ensured enough information was obtained from women prior to their scans; for example, in relation to the number of weeks pregnant, and number of previous pregnancies.

Medicines

- No medicines were stored or administered as part of the services provided.

Incidents

The service managed patient safety incidents well. Staff recognised and reported incidents and near misses.

- Expectancy Scanning Studios Ltd had an in-date incident reporting policy and a paper-based incident reporting form.
- Staff reported incidents through the incident form. The service manager was responsible for investigating incidents and kept an incident log to identify themes and learning.
- The service reported no near misses in the 12 months before our inspection. Although there were no reports of incidents, staff could describe the process for reporting and examples of when they would do this such as if a patient became unwell.
- There were no never events reported for the service from November 2017 to November 2018. Never events are serious incidents that are entirely preventable as guidance, or safety recommendations providing strong systemic protective barriers, are available at a national level, and should have been implemented by all healthcare providers.
- Regulation 20 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 is a regulation, which was introduced in November 2014. This regulation requires the organisation to be open and transparent with a patient when things go wrong in relation to their care and the patient suffers harm or could suffer harm, which falls into defined thresholds. The duty of candour regulation only applies to incidents where severe or moderate harm to a patient has occurred.
- Staff we spoke with had a sound understanding of the duty of candour requirement and the need for being open and honest with patients and their families when errors occurred. Staff at the service had not needed to notify patients in line with duty of candour however, they could explain the action to take if they needed to implement the duty of candour following an incident which met the requirement.

Are diagnostic imaging services effective?

We do not rate effective**.**

Evidence-based care and treatment

The service provided care and treatment based on national guidance and evidence-based practice.

- Staff followed up-to-date policies to plan and deliver high quality care according to best practice and national guidance. Polices included details of the author, date of publication and date for review. All policies and procedures were reviewed every three years as standard, however, the registered manager told us if legislation changed, they would update the relevant policy accordingly.
- Policies and protocols were in line with current legislation and national evidence-based guidance from professional organisations, such as the British Medical Ultrasound Society (BMUS) and the National

Institute for Health and Care Excellence (NICE). For example, the service followed NICE guidelines [NG126] Ectopic pregnancy and miscarriage: diagnosis and initial management.

- Staff demonstrated a good understanding of national legislation that affected their practice. The registered manager was responsible for the management of policies and procedures and their compliance.
- Staff knew how to access policies. They were available electronically. Paper copies were also accessible to staff.

Nutrition and hydration

- Food and drinks were not routinely provided due to the nature of the service and the limited amount of time patients spent in the service. However, patients were offered bottled water.

Pain relief

- Patients were asked by staff if they were comfortable during the procedures, however, no formal pain level monitoring was undertaken due to the nature of the scans performed.

Patient outcomes

Staff monitored the effectiveness of care and treatment.

- An audit programme provided assurance of the quality and safety of the service. Peer review audits were undertaken in accordance with recommendations made by the BMUS. Other audits, such as clinic and local compliance audits, were undertaken regularly. They monitored women's experience, environment cleanliness, compliance to health and safety, quality of ultrasound scan reports, maintenance of equipment, and compliance to policies and procedures. We saw evidence that actions were taken to improve the service where indicated by the audit.
- The service monitored referral rates. The service had referred 34 women to the local NHS trust in the last 12 months. The service kept a tracker for each patient who had been referred to the NHS. The registered manager would contact patients to find out the outcome of the referral, if they agreed to receive a follow up call during the consenting stage. This enabled staff to identify if outcomes matched their report findings.
- The registered manager regularly submitted anonymised images and reports to a local trust for peer review. Furthermore, they participated in peer review sessions to ensure the quality of imaging and reporting was optimised and maintained. We reviewed audit results from the NHS Fetal Anomaly Screening Programme. The audit analysed various measurements such as the length of the embryo and fetuses and gave a rating for each scan. All scans from May 2019 to September 2019 were rated acceptable or good. All acceptable audits detailed areas for improvement so the sonographer was aware of what was required to achieve a good rating.

Competent staff

The service made sure staff were competent for their roles.

- The registered manager was a registered midwife and continued to practice outside the clinic in acute and charity settings in order to maintain their clinical practice and audit as a sonographer and a midwife.
- All staff underwent appropriate recruitment checks prior to employment to ensure they had the skills, competence and experience required for their role. We reviewed two staff records and saw all relevant information was included such as two employment references, photographic identification, a full employment history, evidence of professional qualifications and a Disclosure and Barring Service (DBS) check.
- All new staff had a full induction tailored to their role. This included staff roles and responsibilities, mandatory and role specific training. Training and education was carried out face to face and through electronic learning. Training records confirmed staff had completed role-specific training.
- The service manager supported staff to develop through yearly, constructive appraisals of their work. At the time of our inspection, the front of house

assistant had received an appraisal while the registered manager received an appraisal through their NHS work. Both appraisals had been completed in the last 12 months.

- Staff were encouraged and given opportunities to develop. As part of their appraisal process, the front of house assistant expressed interest in undertaking a number of courses. The registered manager and the front of house assistant discussed how the courses would benefit the service and the assistant and funding the courses. At the time of our inspection, the front of house assistant had recently completed a phlebotomy course and was currently obtaining experience in the NHS with the aim to carry out blood tests.

Multidisciplinary working

Staff worked together as a team to benefit patients.

- During the inspection, staff described positive examples of the sonographer and front of house assistant working well together. Their professional working relationship promoted a relaxed environment for women and helped to put women and their families at ease.
- At the start and end of each clinic session, the front of house assistant and sonographer had a 'huddle' to discuss bookings, prepare for the clinic and to reflect on the clinic. Any issues were raised, discussed and plans addressed to improve the service. We saw staff communicating well with each other. We saw the registered manager providing verbal updates to the front of house assistant before the patients arrived.
- There was a service level agreement for the provision of bloods results from a private laboratory. The service worked well with the private laboratory and relaying bloods results to patients and their practitioners if necessary.

Seven-day service

Expectancy Scanning Studios Ltd was not an acute service, therefore did not open every day.

- Staff worked flexibly to meet the needs of women and their families. All procedures were planned, with appointments arranged in advance.
- Clinics were generally held on weekday evenings from 6.30pm to 9.00pm. The service ran afternoon clinics from 1.00pm to 9.00pm up to twice a week and was open every Saturday and Sunday from 10am to 4.30pm.

Health promotion

Staff gave patients practical support and advice to lead healthier lives.

- Staff provided information to signpost service users to other services appropriate to their needs. The service provided clear written information that the imaging service was not a substitute for antenatal care.
- The service displayed posters and leaflets for local mother and baby support groups and sporting activities for mothers and babies.

Consent and Mental Capacity Act

Staff supported patients to make informed decisions about their care and treatment. They followed national guidance to gain patients' consent.

- Expectancy Scanning Studios Ltd had processes to ensure women consented to procedures. All women received written information to read and sign before their procedure. We saw staff obtaining verbal and written consent from women before continuing with the procedure.
- Staff gave a detailed explanation of the procedure, discussing any potential risks to the unborn child. They ensured the patient was well informed before making a decision on whether to proceed with the scan or not. Staff gave women the choice of withdrawing their consent and stopping the ultrasound scan at any time.
- The service had different consent forms for the various procedures undertaken at the service. For example, we saw forms for fertility scans, blood tests and transvaginal ultrasound scans. Staff were aware of the various forms and ensured they were used correctly.
- The service had a consent form for women between the ages of 16 and 18. The form included a Gillick competent assessment. The sonographer undertook the assessment however, the service had not had to use this.

- Staff had a sound understanding of their roles and responsibilities under the Mental Capacity Act (2005). They knew how to support women who lacked the capacity to make decisions about their care. While staff had completed training in relation to the Mental Capacity Act (2005) as part of their mandatory training, they reported that they had not seen a woman who lack capacity since the service opened in 2017.

Are diagnostic imaging services caring?

Good

We rated it as **good.**

Compassionate care

Staff treated patients with compassion and kindness, respected their privacy and dignity, and took account of their individual needs.

- The service highly valued patient feedback, which could be provided through a variety of channels; and used this to improve patient experience. Staff gave patients a feedback request form following a procedure however, staff said the majority of feedback was received through social media.
- All of the feedback was extremely positive and included comments such as "I feel comfortable here"; "The experience was perfect"; "Second time visiting Expectancy Scanning Studios and cannot praise it enough. Phenomenal service, nothing is ever too much trouble. We feel beyond comfortable here"; "the staff were amazing and totally reassured us that the baby was well after a fall. The accommodation is lovely and clean and very relaxing and welcoming".
- During our inspection, we spoke with one woman and their relative. Both described the staff as friendly and we saw them thanking staff for the service provided.

Emotional support

Staff provided emotional support to patients, families and carers to minimise their distress.

- Appointments were planned to accommodate women at different stages of their pregnancies. For example, women who had experienced pregnancy loss or were anxious about their pregnancy did not have successive appointments with those who were in the later stages of their pregnancy. We also saw that the service did not display pictures of babies and ultrasound scan images to minimise distress.
- Staff were supportive and offered emotional support and reassurance. The registered manager had completed training to deliver bad news to women and their family. Their experience enhanced the services available at the service.
- Clients requiring referral to NHS for abnormalities were followed up personally by the registered manager either by message, email or phone to offer support and ensure they had received access to timely care as requested.
- There was a chaperone service available and we saw staff offering this service to patients. The front of house assistant was a trained chaperone.

Understanding and involvement of patients and those close to them

Staff supported and involved patients, families and carers to understand their condition and make decisions about their care and treatment.

- Children and family members were welcome to attend the appointments and staff ensured they were involved in the visit. For example, we saw staff inviting one woman's child and partner to ask questions and interacted with them as well as the woman during the procedure.
- Women and their partners were provided with written and verbal information about where to access additional help if they required it or if they had any concerns. For example, there was support literature given to patients from external agencies and fetal loss organisations. Patients reported they had received enough information before and during the appointment.
- The sonographer explained the scan report post procedure, giving the patient and family time to ask any questions.
- Patients attending for non-invasive prenatal testing were contacted by the registered manager through email prior to the test, offering a point of contact and information regarding the test and procedure. At the

appointment, the registered manager who performed the test discussed the test, the procedure and implications with the patient prior to carrying out the test.

- Patients were provided with the terms and conditions of the service. These were outlined on the back of the consent form which was compulsory for all patients to sign prior to having an ultrasound scan. Patients were advised of the cost before the procedure and payment was made at reception. Costs of scans were clearly outlined on the service's website. Payment methods and processes were discussed at the time of booking.

Are diagnostic imaging services responsive?

Good

We rated it as **good.**

Service delivery to meet the needs of local people

The service planned and provided care in a way that met the needs of local people.

- The service had a good understanding of the needs of the local population. The service provided a flexible service with good choice of appointment times. One patient told us they found the service on a search engine and was given a choice of time slots including the next day.
- Expectancy Scanning Studios Ltd were the only local service that offered Group B streptococcus testing. Group B streptococcus testing is used to screen for the presence of harmful bacteria that causes life threatening infections in new-born babies. This test was not routinely offered in the NHS. Patients were given leaflets from the Royal College of Obstetricians and Gynaecologist on Group B streptococcus.
- Information about the services offered at the location were accessible online. The service offered a range of ultrasound scans for pregnant women; such as wellbeing, viability, growth, presentation and gender scans.
- Expectancy Scanning Studios Ltd had begun partnership with a nationwide new-born safe sleep initiative. The registered manager was an ambassador and expert in the field of antenatal fetal growth restriction and was a health expert as part of the health promotion initiative to improve the national rates of sudden infant death syndrome. Expectancy Scanning Studios Ltd provided information and links to safe sleep campaigns. In addition, the service held free events once a month for local parents to collect a free safe sleep space for their new-born.

Meeting people's individual needs

The service was inclusive and took account of patients' individual needs and preferences.

- Staff told us that before performing an intimate procedure, the patient was made to feel secure in the knowledge that there would be no external interruptions such as other patient's and visitors entering the service. A trained chaperone was available if required.
- The service scheduled appointments so only one woman was in the clinic at any one time thus ensuring patient privacy and dignity, particularly in the rare event of a poor outcome. Appointment times were 45 minutes long. Staff said this allowed them to give upsetting news, support patients and discuss referrals to other organisations without rushing or fear of interruption. If necessary, the standard appointments could be extended.
- Patients attending the service were generally physically well however, the service could accommodate patients with physical and emotional disabilities. Staff were diligent in assessing such needs prior to the scan or test and because the service welcomed patients on a one person, one appointment basis any additional needs were assessed, met and adapted without other clients' being present. Staff gave us an example of a patient living with a visual impairment who attended the service. Staff made sure they explained all aspects of the procedure including consent. The patient had returned to the service a number of times because of the level of care provided and the staff's attention to detail.
- The registered manager was a midwife specialising in bereavement and provided parents who had previously suffered loss guidance as part of a support package.

Good

Diagnostic imaging

- A telephone translation service was available for patients to access. This helped ensure patients and relatives could clearly understand important elements of clinical conversations. The service could provide leaflets in other languages if required to meet individual patient needs. Leaflets were available in Polish, Turkish and Punjab as well as other languages.
- Information leaflets were also available in easy to read format.

Access and flow

People could access the service when they needed it and received the right care promptly.

- Patients were able to self-refer to the service through telephone, internet and social media using an online booking system.
- Expectancy Scanning Studios Ltd did not monitor 'Did Not Attend' (DNA) rate however, staff told us patients rarely missed their appointments. The service sent a text reminder on the morning of the procedure. Patients were prompted to contact the service if they were unable to make that particular appointment.
- There was no waiting list or backlog for appointments and last-minute bookings could usually be accommodated. Appointments could be booked out of hours when the clinic was not open.
- No clinics were cancelled or delayed in the 12 months prior to our inspection.
- The service monitored waiting times for blood results. The service level agreement with the blood laboratory confirmed that women should receive their results within seven working days of their test. Staff monitored the waiting times using a tracking form, which included the day the blood test was performed and the date the results were received from the laboratory. We reviewed this and found the target was consistently met. Any concerns or delays were discussed with the laboratory however, staff confirmed they had not had any delays in receiving test results.

Learning from complaints and concerns

It was easy for people to give feedback and raise concerns about care received.

- The service accepted complaints and concerns in person, through telephone or email. Staff said they would try to address all complaints at the earliest opportunity if the complainant wished to discuss the matter whilst they are on site. If this was not possible, the service made arrangements to either speak to the complainant through telephone or in person when it was convenient to the complainant.
- The service had an in-date complaints policy which was displayed in the waiting room. The policy set out the responsibilities of staff and the complaints process. In the event of a written complaint, an acknowledgement was sent within two working days and a full response was sent within 10 working days.
- The service had not received any complaints in the 12 months before our inspection.

Are diagnostic imaging services well-led?

Good

We rated it as **good.**

Leadership

Leaders had the skills, experience, and integrity needed to run a sustainable service.

- The registered manager had been in post since the service opened in 2017. They understood their role and responsibilities within the service.
- The registered manager had an awareness of the service's performance, limitations and the challenges it faced. They were also aware of the actions taken to address those challenges.
- The front of house assistant spoke positively about the registered manager. They said the manager was approachable, friendly, knowledgeable and effective in their role. The front of house assistant felt confident to discuss any concerns with the registered manager.

Vision and strategy

The service had a vision for what it wanted to achieve. Leaders and staff understood and knew how to apply them and monitor progress.

- The registered manager developed the service with the vision of opening the clinic to any women of childbearing age who wished to access their services, which included gynaecology scans, pregnancy ultrasound scans (early pregnancy, reassurance, anomaly, growth, gender and 3D/4D scans) and non-invasive prenatal testing.
- As part of the business plan, the service was exploring expanding their services to provide antenatal and parenting classes as well as having other therapists working for the service. This involved moving to a larger location, where classes and scanning procedures could be held simultaneously.

Culture

Staff felt respected, supported and valued. The service had an open culture where patients, their families and staff could raise concerns without fear.

- Staff felt proud to work for the service and strived for excellence in the quality of care women received.
- The registered manager promoted a positive culture that supported and valued staff. This created a sense of common purpose based on shared values.
- We saw staff working well together. Staff had close working relationships and demonstrated a team approach to their work.

Governance

Leaders operated effective governance processes, throughout the service.

- The registered manager had overall responsibility for the clinical governance and quality monitoring of the service. This included investigating incidents and responding to complaints.
- The service did not hold formalised meetings due to the size and nature of the service. However, the registered manager and front of house assistant confirmed they had frequent meetings were governance was discussed. In addition, each day began with a huddle to discuss any issues that were likely to arise and prepare the clinic for that day. Any changes made as a result of such informal meetings were communicated through email or verbally.
- There was a system to ensure staff were competent for their roles. Staff could seek further learning and attended training courses relevant to their role and funded by the service. During the inspection staff were seen to be adhering to their scope of practice.

Managing risks, issues and performance

Leaders and teams used systems to manage performance effectively. They identified and escalated relevant risks and issues and identified actions to reduce their impact. They had plans to cope with unexpected events.

- Given the size of the service, there was no risk register, however internal and external risk assessments were completed. This included health and safety and fire risk. For example, the health and safety risk assessment found that all portable appliances should be tested and tagged. At the time of our inspection, a yearly electrical safety programme was in place.
- Staff were aware of the risks and confirmed that they were discussed regularly, and risk assessments undertaken or revised as needed.
- The service did not use formal key performance indicators to monitor performance. However, the service used patient feedback, complaints, and staff feedback to help identify areas of improvement ensuring they provided an effective service.

Managing information

The service collected reliable data and analysed it. Staff could find the data they needed, in easily accessible formats. Information systems were integrated and secure.

- Staff discussed with patients how the data they provided would be used and not shared unless in the case of a required NHS referral resulting from findings of the scan or test. Patients could access the privacy data policy information through the website also.
- When patients asked for a copy of their report through email, the service sent a test email first to confirm they were the intended recipient before sending any confidential information.

- Appointments were booked using an electronic booking system. The computer used was password secured and to maintain confidentiality was positioned in the reception area in way that wasn't seen by others.
- The registered manager was the information governance lead for the service. All staff had completed information governance training. We saw that paper documents were securely stored in locked filing cabinets, and computers were password protected.

Engagement

Leaders and staff actively and openly engaged with patients, staff, the public and local organisations to plan and manage services. They collaborated with partner organisations to help improve services for patients.

- The service engaged with patients and the public through social media pages which they monitored regularly as they recognised that this was the preferred method of communication by patients. All patient feedback and comments were discussed during the informal meeting held by the service.
- There was a website for members of the public to access. This held information about the serviced offered and the price for each scan. There was also a blog run by the registered manager which discussed current topics such as the safe sleep initiative and whether ultrasound was safe in pregnancy.
- The registered manager attended local baby fairs to engage with the public and was part of a birth network for health professionals involved in birth and pregnancy. The birth network met monthly to share information on pregnancy and promotion of health. Additionally, the service was part of the Medway and Maidstone pregnancy health board which offered families access to support including breast feeding.
- Staff were often asked for their feedback and thoughts on ways to improve the service however, these were not routinely documented. Staff felt well informed and involved in the changes to the service.

Learning, continuous improvement and innovation

All staff were committed to continually learning and improving services. They had a good understanding of quality improvement methods and the skills to use them.

- Staff at the service constantly reflected on the care and services they provided. The registered manager told us they aimed to provide service through a holistic approach. The service was looking at providing a wider range of services such as complimentary therapies, bereavement counselling and baby and infant massage.
- Expectancy Scanning Studios Ltd was looking to soon commence complimentary therapy service to women and families embarking on or currently expecting a baby. This was to be performed by a registered professional qualified in aromatherapy, reflexology and acupuncture. This service has been widely requested by clients following previous feedback.
- The service had held a baby and infant first aid, choking and basic life support training day and were planning a second session to cover anaphylaxis and car seat safety. However, due to the limited space at the current location, Expectancy Scanning Studios was trailing external locations to hold classes to accommodate more people and invite external trainers such as the local first aid training team.
- Expectancy Scanning Studios Ltd were an advocate and the local distributor and collection point for safe sleeping space for babies which aimed to reduce infant mortality rates and was endorsed by the NHS.

Outstanding practice and areas for improvement

Outstanding practice

- Expectancy Scanning Studios Ltd had begun partnership with a nationwide new-born safe sleep initiative. The registered manager was an ambassador and expert in the field of antenatal fetal growth restriction and was a health expert as part of the health promotion initiative to improve the national rates of sudden infant death syndrome. Expectancy Scanning Studios Ltd provided information and links to safe sleep campaigns. In addition, the service held free events once a month for local parents to collect a free safe sleep space for their new-born.

Areas for improvement

Action the provider SHOULD take to improve

- The service should formalise and consistently document team meetings.