

Gynaecology Ultrasound Centre Limited

# The Gynaecology Ultrasound Centre

## Inspection report

137 Harley Street  
London  
W1G 6BF  
Tel: 02077250521  
[www.ultragyn.co.uk](http://www.ultragyn.co.uk)

Date of inspection visit: 4 August 2021  
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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

Are services safe?

Are services effective?

Are services caring?

Are services responsive to people's needs?

Are services well-led?

# Summary of findings

## Overall summary

This was a focused follow up inspection to investigate whether concerns from our previous inspection in April 2020 had been resolved. We did not rate this service at this inspection. The previous overall rating of good remains.

At this inspection we found:

- The provider has complied with the Requirement Notice issued in April 2020. The provider had made improvements to ensure that there were formal opportunities to discuss and learn from incidents, complaints and audit results. The service now had a live risk register and a formalised risk management framework.

# Summary of findings

## Our judgements about each of the main services

### Service

#### Diagnostic imaging

### Rating Summary of each main service

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# Summary of findings

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# Summary of this inspection

## Background to The Gynaecology Ultrasound Centre

The Gynaecology Ultrasound Centre is operated by The Gynaecology Ultrasound Centre Limited. Facilities include two clinical rooms for examinations and ultrasound scanning. There is a changing cubicle and a clinical storage area in each room. The Gynaecology Ultrasound Centre is a standalone service and provides a private clinical and diagnostic service for women with concerns about their gynaecological health, including early pregnancy. It does not provide a service to NHS patients. The centre offers transvaginal and transabdominal scanning as well as two and three-dimensional scans where appropriate. Most women are referred by their consultant or GP. It provides gynaecological diagnostic services to women over 18 years of age and family planning.

The service was last inspected on 6 February 2020 and a report we published in April 2020. Following the April 2020 inspection, the service was rated as good and was served one Requirement Notice for failing to comply with Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 17 (good governance).

## How we carried out this inspection

The team that inspected the service comprised a CQC lead inspector and one other inspector. The inspection team was overseen by Nicola Wise, Head of Hospital Inspection.

We inspected The Gynaecology Ultrasound Centre on 4 August 2021 using our focused inspection methodology. We inspected the service to see if improvements had been made since our last inspection and to determine whether the provider was now compliant with the requirements set out in the Requirement Notice issued in April 2020. We gave staff 24 hours' notice that we were coming to inspect to ensure that the centre was open and registered manager was available.

During this inspection, the team visited the whole centre and spoke with two members of staff, including the clinic manager.

You can find information about how we carry out our inspections on our website: <https://www.cqc.org.uk/what-we-do/how-we-do-our-job/what-we-do-inspection>.


# Our findings

## Overview of ratings

Our ratings for this location are:

	Safe	Effective	Caring	Responsive	Well-led	Overall
Diagnostic imaging	N/A	N/A	N/A	N/A	Inspected but not rated	N/A
Overall	N/A	N/A	N/A	N/A	N/A	N/A

# Diagnostic imaging

Safe	
Effective	
Caring	
Responsive	
Well-led	Inspected but not rated 

## Are Diagnostic imaging well-led?

Inspected but not rated 

During this inspection we looked at specific aspects of the well-led domain. Please see the overall summary for more information.

### Governance

**Since the last inspection, the provider had made improvements to ensure that there were formal opportunities to discuss and learn from incidents, complaints, and audit results.**

At the last inspection in 2020, we were not assured that there were effective structures, processes and systems of accountability to support the delivery of good quality, sustainable services. We found that the registered manager was aware of all governance systems and risks but there were no formal systems for monitoring this or sharing it with all staff. The service did not have regular minuted team meetings but relied on informal sharing of information as they were a small team. At this inspection, we saw the provider had made improvements and implemented a formalised governance system with minuted team and governance meetings. We saw staff meeting minutes of January, March, and May 2021, where operational and governance issues were discussed. We saw the minutes of May and July 2021 governance meeting which was attended by clinical and non-clinical staff, audit programme, incidents and complaints were discussed at that meeting. The clinic manager informed us that clinical governance meetings were scheduled to be held every three months and minutes were available on the shared drive for all staff members.

There was an audit programme to provide assurance of the quality and safety of the service. Peer review audits were undertaken in accordance with recommendations made by the British Medical Ultrasound Society.

### Managing risks, issues, and performance

**Since the last inspection, the provider had made improvements and there were systems to identify and escalate relevant risks and issues and actions taken to reduce their impact.**

At the last inspection, we found the service did not have a risk register and not all staff were aware of the risks within the service. At this inspection, we found that there was a live risk register being maintained at the service and staff had a better understanding of the risks within the service. There were 17 risks listed on the risk register. We saw minutes of July 2021 clinical governance meeting where the risk register was discussed. The clinic manager informed us that the risk register was planned to be shared with the wider team at the upcoming staff meeting next week. Following this

# Diagnostic imaging

inspection, we saw minutes of the staff meeting held on 12 August 2021, where risk register was discussed. Since the last inspection in April 2020, the provider had also implemented a fortnightly risk assessment which included plans to cope with unexpected events. We saw completed risk assessments of June and August 2021, where actions were taken to resolve any issues.

Following this inspection, we were assured that the provider was now compliant with the requirements set out in the Requirement Notice issued in April 2020.