

***We are the regulator:** Our job is to check whether hospitals, care homes and care services are meeting essential standards.*

## Babyvision Limited

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Tel: 01743709064

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2012

We inspected the following standards as part of a routine inspection. This is what we found:

<b>Respecting and involving people who use services</b>	✓ Met this standard
<b>Care and welfare of people who use services</b>	✓ Met this standard
<b>Safety and suitability of premises</b>	✓ Met this standard
<b>Requirements relating to workers</b>	✓ Met this standard
<b>Complaints</b>	✓ Met this standard

## Details about this location

Registered Provider	Babyvision Limited
Registered Manager	Mrs. Ruth Finch
Overview of the service	Baby Vision offers a full range of diagnostic antenatal scanning and consultation services for women throughout their pregnancy.
Type of service	Diagnostic and/or screening service
Regulated activities	Diagnostic and screening procedures Maternity and midwifery services

## Contents

*When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.*

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## Summary of this inspection

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### Why we carried out this inspection

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This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

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### How we carried out this inspection

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We looked at the personal care or treatment records of people who use the service, carried out a visit on 19 October 2012, observed how people were being cared for and talked with people who use the service. We talked with staff.

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### What people told us and what we found

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We spoke with three people who used the service, their partners and families who accompanied them. People were very pleased with the service they received. They told us they found the service 'very professional'. Comments included, "I'm more than happy with the service I received, it was so much better than the hospital" and "it's a very personalised service, you're not just a number here".

People told us they felt fully involved with their procedure. They said they were treated with respect and their privacy and dignity was upheld. They told us everything was fully explained to them and they were given lots of opportunity to ask questions.

People told us they felt safe visiting the clinic. One person said, "it's a really nice and welcoming building". The building was fit for purpose, well maintained and easily accessible.

There was a process in place to ensure that checks were obtained on staff working at the clinic. A member of staff told us they enjoyed their work and felt well supported.

The manager ensured that people's views were considered and listened to. People had access to complaint and suggestion forms available in the waiting room and on the website. One person told us, "I can't see why anybody would wish to complain, it's an excellent service".

You can see our judgements on the front page of this report.

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### More information about the provider

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Please see our website [www.cqc.org.uk](http://www.cqc.org.uk) for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

## Our judgements for each standard inspected

**Respecting and involving people who use services** ✓ Met this standard

People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

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### Our judgement

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The provider was meeting this standard.

People's privacy and dignity were respected. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

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### Reasons for our judgement

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We saw people were provided with appropriate information about the clinic and the charges for the various procedures available. The waiting room and provider's website had detailed information about the varied scanning packages available, what the package included and the cost.

Staff told us, "we provide people with as much information as possible to help them make an informed choice. We ask when their baby is due and recommend the most suitable scan for them for their term of pregnancy".

People told us they were given a choice of day and time for their procedure. We observed this during our visit when prospective clients telephoned to arrange an appointment. People said they were provided with quick and flexible appointments to accommodate their needs.

People told us they understood the options available to them. They said these had been fully explained to them. People said their privacy and dignity was maintained throughout their procedure. They said they were treated with respect. Staff described how they promoted privacy, dignity and choice when supporting people with their procedure. One member of staff said, "I treat people how I want to be treatment myself. You never get a second chance at making a first impression".

We were told if somebody requested to know the gender of their baby they were given the option of being told during their consultation. Alternatively they could have this information provided in an envelope to open in their own home.

One person told us, "it's a very professional service; they knew my name as soon as I walked through the door". Another person said, "I was really made welcome and treated nicely". All of the people we spoke with told us they would "definitely" recommend the service.

The clinic also provided information on a social networking site for people to access for

advice and information.

**People should get safe and appropriate care that meets their needs and supports their rights**

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**Our judgement**

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The provider was meeting this standard.

People experienced care and support that met their needs and protected their rights.

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**Reasons for our judgement**

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People told us that they were "very" pleased with the care and support that they received during their procedure. We saw the clinic had received numerous thank you cards and testimonials from people who had used the service. Comments included, "thanks again for all your care and attention. You provide a fantastic service" and "staff were very friendly and the scan was not rushed. We had loads of time to watch our little boy on the screen".

On arrival to the clinic people were requested to sign a form. This was to acknowledge their ultrasound scans were non medical and should not be seen as a substitute for hospital scans or antenatal appointments. The form also advised that the gender of their unborn child was not disclosed unless requested. Ultrasound scan reports were completed during the consultation and images provided.

The manager told us about the range of scans available and discussed the referral process. They said women self referred and paid for a private consultation. The manager said they worked closely alongside the National Health Service (NHS) to ensure women received the best care. Women under the age of 18 were provided with a healthy pregnancy guide. The manager told us they provided people with information in a format they could understand. A chaperone service was available upon request.

The manager told us about the procedures in place in the event of an unexpected scan result or an abnormal examination result. For example, a miscarriage. We were told that with the person's consent, they would immediately make a referral to the early pregnancy unit at the hospital on their behalf. A detailed ultrasound report of their findings would also be provided. The manager said, "all options are discussed with the person and we provide them with a leaflet on the management of miscarriage provided by the Miscarriage Association". We also saw other leaflets were available for people to take away in addition to contact numbers for support agencies.

We saw a thank you card stating, "The information you provided me was very helpful and helped in making my decision to go down the surgical route. Thank you so much for your time and kindness".

Staff were knowledgeable about the procedures available that the service provided. People we spoke with during our inspection told us they were "very" satisfied with the service they received.

## Safety and suitability of premises

✓ Met this standard

People should be cared for in safe and accessible surroundings that support their health and welfare

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### Our judgement

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The provider was meeting this standard.

People who used the service, staff and visitors were protected against the risk of unsafe or unsuitable premises.

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### Reasons for our judgement

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The premises were situated in a rural village on the outskirts of Shrewsbury. The clinic was located in a ground floor barn conversion within a small business park. People we spoke with told us they were provided with directions of how to get to the clinic when they made their initial appointment. We also saw directions were available on the provider's website.

The manager had taken steps to provide an environment that was suitably designed. We saw appropriate measures were in place to ensure the security and safety of the premises. We looked at records that showed the premises were well maintained. People told us they were impressed with the premises. Comments included, "it's a really well presented and welcoming building" and "it's a lovely setting, very luxurious".

The building offered level access to accommodate people with a physical disability. Designated disabled toilet facilities were available within the business park. A low level reception desk was in place to provide greater accessibility for all people.

The premises provided a comfortable environment and facilities also allowed partners and families to be involved in the scanning procedure and share the experience. Families with young children told us they particularly liked the play area that was available. The design and layout of the premises were suitable for carrying out procedures and maintained to a high standard. The layout ensured people's rights to privacy and dignity were maintained. Records were securely held and the receptionist demonstrated a clear understanding of maintaining confidentiality.

## Requirements relating to workers

✓ Met this standard

People should be cared for by staff who are properly qualified and able to do their job

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### Our judgement

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The provider was meeting this standard.

People were cared for, or supported by, suitably qualified, skilled and experienced staff.

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### Reasons for our judgement

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The people we spoke with were very complimentary about the staff. They told us staff were competent in their role. One person said, "they are very professional" another person said, "they are very nice here".

The team consisted of an ultrasonographer (the registered manager and director), a receptionist, and a self-employed fetal medicine consultant and nurse specialist. No additional staff had been employed since it was founded in 2005.

We looked at staff records held. These included a Criminal Records Bureau (CRB) check for the manager and receptionist and written references and checks on staff identity. The manager told us CRB checks had been seen for the staff who were self-employed who also worked for the NHS. They confirmed they were in the process of obtaining new CRB checks for these two staff.

We reviewed staff records that detailed the clinicians working at the service had a current registration with the relevant professional bodies. These included; Health and Care Professions Council (HPC), the General Medical Council (GMC) and Nursing and Midwifery Council (NMC). Certificates seen demonstrated staff had attended various training courses to maintain their competence.

**People should have their complaints listened to and acted on properly**

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**Our judgement**

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The provider was meeting this standard.

There was a complaints system available. Comments and complaints people made were responded to appropriately.

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**Reasons for our judgement**

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People we spoke with told us they had seen the comments and suggestions forms held in the waiting room. One person told us, "I can't see why anybody would wish to complain, it's an excellent service". Another person told us, "I'm more than happy, it's brilliant". We heard one person say, "thank you for making it such a lovely experience" as they left the clinic.

The manager told us people were encouraged to place their comments good or bad on a social networking site they used. We saw this site contained numerous testimonials that reflected very positively about the service provided. There were also numerous thank you cards. Comments included, "your service is very friendly, relaxed and professional" and "you made our pregnancy feel really special".

The clinic welcomed suggestions and complaints. We saw leaflets were made available in the waiting area. People also had the opportunity to make a complaint using the provider's website. We saw a complaints procedure was in place. The provider might wish to note that the complaints procedure should be made available in a format for people who used the service. People should also be informed of further steps they could take in the complaint process. This would be if they were not satisfied with the outcome of a complaint investigated by the provider.

We had not received any complaints about the provider. We saw the provider had received two complaints since our last inspection. We saw people's complaints were fully investigated and resolved within the required timescale.

## About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of dentists and other services at least once every two years. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times but we always inspect at least one standard from each of the five key areas every year. We may check fewer key areas in the case of dentists and some other services.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

## How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

**✓ Met this standard** This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

**✗ Action needed** This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

**✗ Enforcement action taken** If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

## How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. We make a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation) from the breach. This could be a minor, moderate or major impact.

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**Minor impact** – people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

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**Moderate impact** – people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

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**Major impact** – people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

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We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

## Glossary of terms we use in this report

### Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

### Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

## Glossary of terms we use in this report (continued)

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### **(Registered) Provider**

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There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

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### **Regulations**

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We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

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### **Responsive inspection**

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This is carried out at any time in relation to identified concerns.

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### **Routine inspection**

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This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

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### **Themed inspection**

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This is targeted to look at specific standards, sectors or types of care.

## Contact us

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