

Fulwood Hall Hospital

Quality Account 2023/24



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Welcome to Ramsay Health Care UK

Fulwood Hall Hospital is part of the Ramsay Health Care Group

Statement from Nick Costa, Chief Executive Officer, Ramsay Health Care UK

Established in Sydney, Australia in 1964, Ramsay Health Care celebrates its 60th anniversary in 2024. Outside of the NHS, we are one of the longest running healthcare providers in the world. In the UK, we are incredibly proud to be part of a responsible, global healthcare provider widely respected with a strong reputation of delivering, safe, high quality, patient centred care with positive outcomes.

Patients are confident when they come to Ramsay because we are unwavering in our commitment to the highest standards of clinical quality and providing exceptional care. We see this in our patient feedback and independent accreditation awards. All of our endoscopy services inspected by the Royal College of Physicians Joint Advisory Group (JAG) are JAG accredited, we have 97% of our hospitals rated as 'Good' by the Care Quality Commission, and Bupa recognises two of our hospitals providing cancer services as Breast Centres of Excellence.

In 2023, we published our [Social Impact Report](#) in partnership with The Purpose Coalition, a purpose-led organisation focused on bringing together businesses that are breaking down barriers and improving social mobility. The report highlights fantastic examples of Ramsay teams supporting patients in local communities with access to care when they need it through robust partnership working within local health systems. It also showcases our continued support for staff to develop their careers through a range of training and development opportunities, often breaking down social-economic barriers for individuals. With a clear focus on delivering the highest standards of care for patients with outstanding outcomes and a commitment to being a responsible employer and member of our local communities, we acknowledge that the impact we have is both in and outside of our hospital walls.

Everyone across our organisation is responsible for the delivery of clinical excellence and our organisational culture ensures that the patient remains at the centre of everything we do. We recognise that our people, staff, and doctors are the key to our success and teamwork is the central foundation in meeting the expectations of our patients.

I am very proud of Ramsay Health Care's reputation in the delivery of safe and quality care and it gives me great pleasure to share our results with you.



Nick Costa
Chief Executive Officer

Statement from Jo Dickson, Chief Clinical and Quality Officer, Ramsay Health Care UK

I am incredibly proud of the care and service our teams, both clinical and operational, deliver for patients every single day across our 34 hospitals, mobile diagnostic fleet, three decontamination hubs and two corporate offices. The saying, 'the whole is greater than the sum of its parts,' has two very real meanings in Ramsay UK. The overall service and experience that our teams deliver for our patients continues to deliver on our organisational purpose of People caring for People, evidenced through our fantastic patient feedback scores, which includes our group NPS rating of 87 and 96% Friends and Family rating. However, those teams and colleagues are all providing an outstanding individual contribution which we seek to recognise, support and champion across our organisation.

Our ability to deliver first-class healthcare services in our hospitals is underpinned through an ongoing cycle of investment into our facilities, equipment and staff, alongside an ongoing programme of digital advancements to support the seamless delivery and management of patient services. With an exciting schedule of projects that will increase the use of digital services to improve care over the coming years, we are clear in our commitment to support our patients with greater engagement and autonomy throughout their experience with Ramsay UK.

We are committed to the professional development of all our colleagues and have an ethos of continuous improvement. We celebrate when things go well, and we improve where we can do so. Our patients can expect openness and transparency from all colleagues, and all colleagues have confidence that if they raise a concern or identify a risk then they will be listened to, and appropriate action will be taken.

I am looking forward as we continue our commitment to provide high-quality health services to our patients with investment and a focus on utilising digital systems to support the patient journey.

A handwritten signature in black ink that reads "Jo Dickson". The signature is written in a cursive, flowing style.

Jo Dickson
Chief Clinical and Quality Officer

Introduction to our Quality Account

This Quality Account is Fulwood Hall Hospital's annual report to the public and other stakeholders about the quality of the services we provide. It presents our achievements in terms of clinical excellence, effectiveness, safety and patient experience and demonstrates that our managers, clinicians and staff are all committed to providing continuous, evidence based, quality care to those people we treat. It will also show that we regularly scrutinise every service we provide with a view to improving it and ensuring that our patient's treatment outcomes are the best they can be. It will give a balanced view of what we are good at and what we need to improve on.

Our first Quality Account in 2010 was developed by our Corporate Office and summarised and reviewed quality activities across every hospital and treatment centre within the Ramsay Health Care UK. It was recognised that this didn't provide enough in depth information for the public and commissioners about the quality of services within each individual hospital and how this relates to the local community it serves. Therefore, each site within the Ramsay Group now develops its own Quality Account, which includes some Group wide initiatives, but also describes the many excellent local achievements and quality plans that we would like to share.

Part 1

1.1 Statement on quality from the Hospital Director

Mrs Fiona Thornhill, Hospital Director
Fulwood Hall Hospital

Welcome to Fulwood Hall Hospital's Quality Account. 2023/24 has seen the hospital grow from strength to strength across several areas. We continue the excellent work across the hospital teams to improve patient satisfaction and clinical quality outcomes.

The hospital's vision remains to be the leading healthcare provider where clinical excellence, safety, care and quality are at the heart of everything we do. The Quality Account outlines our performance over the past year and describes our priorities for the year ahead. I am pleased to report that we have continued to achieve extremely high patient satisfaction scores. By involving and listening to our stakeholders and acting on patient feedback, we have been able to identify areas of good practice and key areas to focus on to improve patient care. Whilst patient and stakeholder feedback is very important, a range of other measures based on patient safety and clinical effectiveness are used to provide assurances that treatment is evidence-based and delivered by appropriately qualified and experienced doctors, nurses and other healthcare professionals. Further information on these measures and outcomes are evident throughout the Quality Account. As Hospital Director at Fulwood Hall Hospital, ensuring the delivery of high standards of clinical care for our patients remains my highest priority. The Quality Account is an accurate representation of the hospital's performance and outlines the ongoing initiatives to continuously improve the quality of services that we provide. We are and will remain, a hospital that is totally committed to patient centric care.



Fiona Thornhill

Hospital Director

1.2 Hospital Accountability Statement

To the best of my knowledge, as requested by the regulations governing the publication of this document, the information in this report is accurate.

Mrs Fiona Thornhill

Hospital Director
Fulwood Hall Hospital
Ramsay Health Care UK

This report has been reviewed and approved by:

MAC Chair - **Mr Jeremy Ward**, Consultant General Surgeon,
Fulwood Hall Hospital



Clinical Governance Committee Chair - **Mr Richard Boden**,
Consultant Orthopaedic Surgeon, Fulwood Hall Hospital

Welcome to Fulwood Hall Hospital



Hospital Facilities

Fulwood Hall Hospital was opened as a purpose-built healthcare facility in 1986. We provide fast, convenient, effective, and high-quality treatment for patients, whether medically insured, self-pay, or from the NHS.

The facility is registered with the Care Quality Commission to provide care and treatment for adults, aged 18yrs and over for diagnostic and screening procedures, surgical procedures, treatment of disease, medical disorders, and sports injury.

The hospital has eight private consulting rooms supported by a fully equipped outpatient treatment room, a pre-operative assessment unit for screening and assessing patients prior to surgery as well as modern imaging facilities.

Patient accommodation consists of a dedicated day care facility providing individual accommodation for patients that do not require an overnight stay. Our day care facility has been designed specifically to support patients in their recovery so they can be treated and return home as soon as they are clinically able and confident to leave.

For patients that are having procedures which do require an overnight stay, there are 28 private, en-suite bedrooms which have been comfortably furnished to ensure your stay with us is a pleasant one. All bedrooms have TV/radio and telephone with WI-FI being available throughout the building. Our in-house chefs prepare a seasonal menu using fresh healthy ingredients.

The hospital has three operating theatres with an additional minor procedures suite and patients are assured that a resident doctor is available on site 24 hours a day, 7 days a week. During the reporting year we treated a total of 9890 patients, 89.20% of which were treated under the care of the NHS.

At Fulwood Hall Hospital we truly live the Ramsay Values of 'People Caring for People'. Fulwood Hall has had a huge focus on mental health in the last 2 years. We have 11 mental health first aiders representing almost all departments across the hospital. A key area of focus was raising awareness and ensuring the stigma around discussing mental health issues was reduced.

Treatments and Services at the hospital

Approximately 71 Consultant Surgeons/Specialists, 38 Anaesthetists and 9 Radiologists are available at Fulwood Hall Hospital each of whom work through approved Practising Privileges, providing a wide range of medical and surgical procedures and services. These include orthopaedic surgery, neurosurgery, general surgery, cosmetic surgery, pain management, dermatology, gynaecology, neurology, ophthalmology, and urology. In support, onsite X-ray, MRI, CT, and Ultrasound facilities are available.

Fulwood Hall Hospital has 174 members of contracted staff, with a split of 68 operational and 106 clinical.

All patients at Fulwood Hall are allocated a 'named nurse' at the beginning of each shift, the role of the named nurse is to provide co-ordinated care, support and treatment which is personalised to meet individual patient needs. The named nurse approach enables our patients to identify one nurse who is specifically and consistently responsible for their overall nursing care on any specific day.

Infection Prevention and Control Lead

Leading in the delivery of our 2023/24 Infection Prevention and Control Annual Plan, our IPC lead ensures all actions are completed throughout the hospital. This evidences our compliance with requirements of the 'Health and Social Care Act 2008 – Code of Practice for Health and Adult Social Care on the Prevention and Control of Infections', related guidance and 'Care Quality Commission Standard Outcome 8 - Regulation 12 - Cleanliness and Infection Control'.

Resuscitation Lead

Our resuscitation leads ensure we meet guidance set by the Resuscitation Council (UK) in having safe systems, policies, processes, and protocols which enable us to care for patients where their condition may deteriorate. This includes (but is not limited to) training (Basic Life Support, Intermediate Life Support, Advanced Life Support, Acute Illness Management, Transfer), audit, equipment reviews and regular scenarios for staff. They also take a lead in ensuring compliance to internal Resuscitation policy and procedures.

Blood Transfusion Lead

Our blood transfusion lead ensures our blood storage, ordering and administration processes are in line with MHRA regulations. They also lead in ensuring staff are trained on blood products, prescribing, storage, administration and that we have a clear massive haemorrhage policy which is tested with planned scenarios.

Occupational Health Lead

Our occupational health lead supports the corporate Occupational Health team at site level. They ensure all staff wellbeing is supported, from up-to-date vaccinations, to monitoring the skin (hands) of identified staff cohorts. They also deliver staff education regarding the importance of the annual flu vaccination programme.

All our consultants have regular appraisals and are encouraged to submit data to PHIN. Specialist services such as Orthopaedics and Neurosurgery use multi-disciplinary team working to remove the potential for one consultant to make key decisions in complex cases.

We have a live in onsite doctor in the role of Resident Medical Officer (RMO) who supports the delivery of consultant instruction. Working alongside the nursing team, they support the provision of on-site medical support to all our patients 24 hours a day, 7 days a week.

We work very closely with our local NHS Lancashire Teaching Hospitals Trust where we have an agreement to transfer acutely ill patients for high dependency and intensive care. We also have contracts with them to supply blood and laboratory services. We regularly meet with the trust to share best practice around blood transfusion and ensure our trainers meet competencies to deliver high quality training.

The hospital has built up excellent working relationships with our local Commissioners, Greater Preston ICB and the local Lancashire Teaching Hospitals NHS Foundation Trust in order to deliver a joint approach to patient care delivery across the patient economy.

Working within the Department of Health guidelines, we screen patients for MRSA, and have a strong focus on patient safety. Over the period covered in this report the hospital has a 0% infection rate for MRSA.

Working with the Local Community

Fulwood Hall Hospital continues to focus on delivering high standards of patient care in a friendly and approachable manner. Working with our partners, which include local GPs, consultants, and other specialists, we deliver an individual personal service to all our patients, tailored to meet their needs.

During the reporting period Fulwood Hall Hospital continued to raise money for the Multiple System Atrophy (MSA) Trust, most recently raising almost £3,000. In the coming year, our chosen hospital charity is the local air ambulance.

Part 2

2.1 Quality priorities for 2023/24

Plan for 2023/24

On an annual cycle, Fulwood Hall Hospital develops an operational plan to set objectives for the year ahead.

We have a clear commitment to our private patients as well as working in partnership with the NHS ensuring that those services commissioned to us, result in safe, quality treatment for all NHS patients whilst they are in our care. We constantly strive to improve clinical safety and standards by a systematic process of governance including audit and feedback from all those experiencing our services.

To meet these aims, we have various initiatives on going at any one time. The priorities are determined by the hospitals Senior Management Team taking into account patient feedback, audit results, national guidance, and the recommendations from various hospital committees which represent all professional and management levels.

Most importantly, we believe our priorities must drive patient safety, clinical effectiveness and improve the experience of all people visiting our hospital.

Priorities for improvement

2.1.1 A review of clinical priorities 2022/23 (looking back)

In 2023/2024 we directed our clinical priorities focusing on 3 main areas: Patient Safety, Clinical Effectiveness and Patient Experience.

Patient Safety:

Infection Prevention and Control (IPC) - Hand Hygiene Promotion

Fulwood Hall Hospital has a very low surgical site infection rate which we strive to maintain therefore, in the coming year we will re-visit and re-invigorate our hand hygiene training and audit. The hand hygiene audits we will carry out will provide assurance that the training and education staff receive have been successful and that the risk of transmitting infection within the hospital has been reduced to a minimum.

We have:

1. An annual IPC Action Plan to review the progress against key performance indicators and to set the strategic direction for IPC in the coming year. Key focus areas include surveillance, anti-microbial stewardship, education and training, decontamination and cleaning and audit.

2. Created a dedicated local IPC Committee to bring together key stakeholders and ensure progress of actions against the IPC Action Plan. Meeting monthly the committee focuses on areas such as robust audit compliance, effective cleaning and decontamination processes and disseminating corporate policy and national guidance.
3. Undertaken robust audit of our hand hygiene with only 1 audit out of 16 since the new year not hitting 100%.
4. Created a new and improved Mandatory Training programme for Hand Hygiene due to be launched in the summer of 2024.
5. Achieved the accreditation of ANTT (Aseptic Non-Touch Technique) Bronze award.

Clinical Effectiveness:

Daycase joint replacement and reducing length of stay

As part of our commitment to improve the quality of services we provide to our patients at Fulwood Hall Hospital, we are introducing the Enhanced Recovery After Surgery (ERAS) programmes for patients undergoing specific elective operations.

The measure of success will be a reduction in the length of stay for our orthopaedic patients.

We have:

1. Implemented processes to identify day case patient candidates and ensure a safe pathway and that patient expectations are met.
2. Implemented enhanced recovery to sustainably reduce patient length of stay and improve patient experience.

Comparing the average length of stay for joint arthroplasty from July 2023 (1.8) with the average length of stay in April 2024 (1.9) we can see there has not been a significant change in the length of stay. The hospital has seen increasing Daycase and Day 1 discharges. However, this appears to have been offset by the increasing complexity of patients and challenges managing pain.

Patient Experience:

Patient feedback and engagement

Fulwood Hall Hospital embraces all forms of feedback (including complaints and unsolicited feedback) as an opportunity to review and improve care and learns from positive as well as negative feedback.

Over the coming year we will focus on all forms of feedback and produce a SMART action plan to improve the overall experience of care our patients receive at Fulwood Hall Hospital. This will be measured through improved patient satisfaction scores.

We have:

1. Retained high levels of patient satisfaction with overall scores remaining at 96%.
2. Implemented a Patient Experience Group with the aims of improving the quantity and quality of patient feedback, analysing and learning from it and implementing improvements to our patient pathways.

2.1.2 Clinical Priorities for 2023/24 (looking forward)

In this section we will describe our clinical development plans and ambitions over the next year. We will demonstrate our commitment to providing the highest possible standards of clinical quality, and show how we are listening to our patients, staff and partners, and how we will work with them to deliver services that are relevant to the people who use them.

Patient Safety:

Patient Safety Incident Response Framework (PSIRF) Implementation

Learning from patient safety incidents has always been core to Ramsay Healthcare but the application of PSIRF tools allows us to ensure proportionate responses and learning from incidents. We will look to develop a Patient Safety Incident Response Group to encourage our teams to use these tools independently and share updates and patient outcomes. PSIRF has been implemented widely in the NHS and many of our staff and partners have some familiarity with PSIRF. By effectively embedding the principles of PSIRF, we as a key contributor to the local health economy of Lancashire and the North West can deliver rapid and effective learning from patient safety incidents.

Clinical Effectiveness:

PROMS (Patient Reported Outcome Measures)

Patients attend our hospital as part of a care pathway to improve their health. As a health organisation it is important we are transparent about the outcomes of our patients to help patients make effective choices about their care. Obtaining outcomes also allows the hospital to learn and improve on delivering care pathways to maximise patient outcomes. We will look to increase our patient uptake of PROMS across procedures including cataract, hip replacement, knee replacement and spinal surgery.

Patient Experience:

Patient Focus Group

Consistently maximising the feedback from our patients and learning from their experience is core to our values of People Caring for People. Only by listening to patient experiences can we tailor our care pathways, skills, and infrastructure to effectively meet their needs. In the past year we have implemented a Patient Experience Committee. In the coming year we will look to use this committee to develop a patient experience strategy and set up a patient focus group with our past patients. The patient focus group will report into our Patient Experience Committee to refine the feedback of patients and to gain their input on future improvements to the hospital and its services.

2.2 Mandatory Statements

The following section contains the mandatory statements common to all Quality Accounts as required by the regulations set out by the Department of Health.

2.2.1 Review of Services

During 2023/24 Fulwood Hall Hospital provided and/or subcontracted 9 (94 specialties) NHS services.

Fulwood Hall Hospital has reviewed all the data available to them on the quality of care in all 9 of these NHS services.

The income generated by the NHS services reviewed in 1 April 2023 to 31st March 2024 represents 81% per cent of the total income generated from the provision of NHS services by Fulwood Hall Hospital for 1 April 2023 to 31st March 2024.

Ramsay uses a balanced scorecard approach to give an overview of audit results across the critical areas of patient care. The indicators on the Ramsay scorecard are reviewed each year. The scorecard is reviewed each quarter by the hospitals Senior Leadership Team together with Corporate Senior Managers and Directors. The balanced scorecard approach has been an extremely successful tool in helping us benchmark against other hospitals and identifying key areas for improvement.

In the period for 2023/24, the indicators on the scorecard which affect patient safety and quality were:

Human Resources

- Staff Cost % Net Revenue - 23.40%
- HCA Hours as % of Total Nursing - Ward: 26.5%; OPD 46.7%
- Agency Cost as % of Total Staff Cost - 16.40%
- Ward Hours PPD - 4.92
- % Staff Turnover - 2%
- % Sickness - 7%
- % Lost Time - 22.30%
- Appraisal % - 92%
- Mandatory e-learning 99%
- Staff Satisfaction Scores:
 - Engagement 79% (+6% v UK Norm)
 - Well-being 80% (+7% v UK Norm)
 - Inclusion 73% (-1% v UK Norm)
 - Expectation v Experience 86% (-9% v UK Norm)
 - Burnout Indicator 67% (+6% v UK Norm)
- Number of Significant Staff Injuries – 1

Patient

- Formal Complaints per 1000 HPD's - 0.31%

	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24
Rate	0.67	0.51	0.33	0.23	0.38	0.24	0.23	0.33	0.26	0.30	0.00	0.00	0.33
Complaints	5	4	3	2	3	2	2	3	2	3	0	0	3

- Patient Satisfaction Score - 96%
- Significant Clinical Events per 1000 Admissions - 0.95
- Readmission per 1000 Admissions - 2.05

Quality

- Workplace Health & Safety Score - Health and Safety Facilities audit completed in February 2024, scoring 91.5% which was rated as GOOD.
- Infection Control Audit Score - IPC Governance and Assurance; whole hospital - 87.5%
- IPC Environmental infrastructure; whole hospital - 97%
- Consultant Satisfaction Score - Ramsay Health Care UK conducted a follow up pulse survey to assess the level of engagement and advocacy with our doctors in April 2023. Overall, 25% of the Consultant body completed the survey, which was a significant improvement over the previous year, and the results showed a positive response in terms of engagement and advocacy of Ramsay UK. Fulwood Hall Hospital continues to build on this, with focuses on Hospital Medical Advisory Committees and how to better support these important forums for Doctors' voices.

2.2.2 Participation in clinical audit

During 1 April 2023 to 31st March 2024 Fulwood Hall Hospital participated in 5 national clinical audits and 0 national confidential enquiries of the national clinical audits and national confidential enquiries which it was eligible to participate in.

The national clinical audits and national confidential enquiries that Fulwood Hall Hospital participated in, and for which data collection was completed during 1 April 2023 to 31st March 2024, are listed below alongside the number of cases submitted to each audit or enquiry as a percentage of the number of registered cases required by the terms of that audit or enquiry.

Count	Project name (A-Z)	Provider organisation
1	British Spine Registry	Amplitude Clinical Services Ltd
2	Elective Surgery (National PROMs Programme)	NHS Digital
3	National Joint Registry ^{2, 3}	Healthcare Quality improvement Partnership
4	Surgical Site Infection Surveillance	Public Health England

The reports of 4 national clinical audits from 1 April 2023 to 31st March 2024 were reviewed by the Clinical Governance Committee and Fulwood Hall Hospital intends to take the following actions to improve the quality of healthcare provided:

Actions ongoing:

- Fulwood Hall Hospital gained the Bronze award for data collection from the National Joint Registry. Changes to processes are being implemented, as we aim to collect the relevant data for 100% of our joint replacements.
- Working to increase number of PROMS and Amplitude responses.

Local Audits

The reports of 243 local clinical audits from 1 April 2023 to 31st March 2024 were reviewed by the Clinical Governance Committee. Fulwood Hall Hospital remains committed to making continuous improvements by using the results of these audits.

The clinical audit schedule can be found in Appendix 2.

In addition to this audit schedule, we carry out locally developed audits as required for quality improvement.

2.2.3 Participation in Research

There were no patients recruited during 2023/24 to participate in research approved by a research ethics committee.

2.2.4 Goals agreed with our Commissioners using the CQUIN (Commissioning for Quality and Innovation) Framework

Fulwood Hall Hospital's income from 1 April 2023 to 31st March 2024 was not conditional on achieving quality improvement and innovation goals through the Commissioning for Quality and Innovation payment framework.

2.2.5 Statements from the Care Quality Commission (CQC)

Fulwood Hall Hospital is required to register with the Care Quality Commission and its current registration on 31st March is registered without conditions.

The Care Quality Commission has not taken enforcement action against Fulwood Hall Hospital during 2023/24.

Fulwood Hall Hospital has not participated in any special reviews or investigations by the CQC during the reporting period.

The CQC have rated Fulwood Hall Hospital as: **‘Good Overall’** for Surgery, Outpatients and Diagnostic Imaging. The last inspection took place on 14th and 15th August 2018.

2.2.6 Data Quality

Statement on relevance of Data Quality and your actions to improve your Data Quality

Data is used to aid in the decision-making process, which has led to an increased importance of data quality within the business. Data quality is important because it ensures that the information used to make key business decisions are reliable, accurate and complete.

As an organisation we work to achieve the completeness, consistency, accuracy of our data within a timely manner. We then validate our data to ensure that we are achieving and maintaining a high standard.

We work in line with the GDPR Principles for data accuracy which states that data must be of good quality, for example, the data must be accurate and up to date. This ensures that if we discover that personal data is inaccurate or not up to date, we have a duty to ensure that steps are taken towards rectification or deletion of this data.

The quality of our data is important as our healthcare professionals need to have confidence in the information that we provide to them. Better quality data empowers doctors and nurses, and this gives them confidence in their decision making. It also helps to build good customer relations and provides assurance to our patients that we protect both their personal and sensitive data.

Fulwood Hall Hospital are taking the following actions to improve data quality:

- An electronic patient record system has been established, enabling us to go ‘paper light’ with more data now recorded electronically rather than in paper form. All care pathways are within electronic records except for a few key documents such as consent, anaesthetic record, NEWS and prescription charts.
- Regular training is in place to ensure staff understand the importance of accurate data input and have sufficient technical competence.
- Spot checks are completed by Senior Leadership Team to ensure data accuracy.
- Data quality issues are reported, investigated, and actioned; lessons learnt, processes reviewed and shared with teams as necessary.
- Internal Information Security audits and action plans are in place and reviewed annually.
- Clinical record audits are carried out as per the clinical audit schedule to ensure that patient

records are accurate and complete.

NHS Number and General Medical Practice Code Validity

Fulwood Hall Hospital submitted records during 2023/24 to the Secondary Uses Service (SUS) for inclusion in the Hospital Episode Statistics (HES) which are included in the latest published data.

The percentage of records in the published data which included:

The patient's valid NHS number:

- 99.86% for admitted patient care;
- 100% for outpatient care; and
- NA for accident and emergency care (not undertaken at our hospital).

The General Medical Practice Code:

- 100% for admitted patient care;
- 100% for outpatient care; and
- NA for accident and emergency care (not undertaken at our hospital).

Information Governance Toolkit attainment levels

Ramsay Health Care UK Operations Ltd status is 'Standards Met'. The 2023/2024 submission is due by 30th June 2024.

This information is publicly available on the DSP website at:

<https://www.dsptoolkit.nhs.uk/>

Clinical coding error rate

Fulwood Hall Hospital was subject to the Payment by Results clinical coding audit during 2023/24 by the Audit Commission and the error rates reported in the latest published audit for that period for diagnoses and treatment coding (clinical coding) were:

Hospital Site	NHS Admitted Care Sample 50 Episodes of Care	Primary Diagnosis % Correct	Secondary Diagnosis % Correct	Primary Procedure % Correct	Secondary Procedure % Correct
Fulwood Hall	2023	96%	97%	100%	100%

**Ramsay Health Care DSPT_IG Requirement 505 Attainment Levels as of May 2024.*

2.2.7 Stakeholders views on 2023/24 Quality Account

Our ref: SO/SB
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17th June 2024

Fiona Thornhill
Hospital Director
Fulwood Hall Hospital
Ramsay Health Care UK

Dear Fiona

Re: ICB Response to Ramsay Health Care's (RHC) Quality Account for Fulwood Hall Hospital 2023/24

Lancashire and South Cumbria ICB (LSCICB) welcomes the opportunity to review and comment on the annual Quality Account from Ramsay Health Care (RHC) for Fulwood Hall Hospital for 2023/24.

Commentary provided in this response letter relates to services commissioned by LSCICB as well as acknowledging improvement work that RHC has undertaken during 2023/24 and resulting outcomes, where available. We have a continued commitment to commissioning high quality services from RHC and take seriously their responsibility to ensure that patients' needs are met by consistent and high standards of safe care, provision of effective services and that the views and expectations of patients and the public are listened to and acted upon.

One of the main areas of focus for 2023/24 was the clinical effectiveness for day case joint replacement surgery, with an emphasis on length of stay. RHC introduced the Enhanced Recovery After Surgery (ERAS) programme for patients undergoing specific elective operations. This ensures that patients receive all support and care pre- and post- surgery with the aim of reducing their overall length of stay and ensuring the success of the procedure. It was disappointing to note that this programme has not had the impact intended on length of stay but note the positive increase in cases being managed as a day case and the complexity and challenges of pain management that have hindered anticipated progress. LSCICB looks forward to working closely with Fulwood Hall to realise the ambition for same day joint replacements and enhanced recovery post-surgery. LSCICB are pleased to note the bronze award received for data input into the national joint registry audit and would encourage RHC to continue to strive for improvement to silver and gold.

LSCICB is pleased to see a continued focus throughout 2023/24 on collaborating with the local community, supported through the GP Liaison Officer, with community funds raised for local charities and developing relationships with local GP practices.

It is noted that there has not been a follow-up inspection at Fulwood Hall Hospital when they received a "Good" rating from CQC in 2018. In 2018, RHC launched "Speak Up for Safety", leading the way as the first healthcare provider in the UK to implement an initiative of this type and scale. It is positive to see this Speak Up for Safety continues to be embedded. LSCICB acknowledge and commend the increase in Mental Health first aiders across the site, raising awareness and reducing the stigma attached to speaking openly about mental health issues.

Fulwood Hall Hospital has had no reports of MRSA and no reports of C. Difficile in 2023/24. Fulwood Hall have seen a small increase in readmissions, falls and transfer's out. The Fulwood Hall team acknowledge additional work is required and LSCICB note the action plans in place regarding falls. The increase in readmissions and transfers out are potentially related to improved staff training for identifying the deteriorating patient and an increase in more major procedures being undertaken on site. This coupled with an increase in complexity of patients, is a trend being seen across the health system and LSCICB recognise the work on Patient Safety Incident Response Framework (PSIRF) implementation and thematic reviews of these increases.

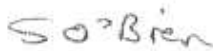
It is positive to note that there have been no serious incidents or Never Events during 2023/24, and no serious complaints received.

LSCICB acknowledges the ongoing commitment to patient engagement and feedback and are pleased that RHC at Fulwood Hall Hospital will be aiming to produce a Patient Experience Strategy. This will improve and enhance the overall experience of care patients receive. This is reflected in the Friends and Family Test (FFT) response recorded in 2024, which was 96% satisfaction. This finding is mirrored in RHC's local patient satisfaction survey. It is also pleasing to note that Patient Reported Outcome Measures (PROMs) reported for hip and knees are both above the England national average.

LSCICB appreciates the feedback from the Patient-Led Assessments of the Care Environment (PLACE) visit in December 2023, positives were highlighted around good levels of patient care and experience delivered within a generally good environment, with areas for improvement noted around some general redecoration, signage and privacy within the reception area. The ICB acknowledges the actions being undertaken to act upon the feedback received.

LSCICB look forward to working closely with RHC on their 2024/2025 priorities (PSIRF being embedded, increased uptake of PROMs and development of a patient focus group) and further developing our collaborative partnerships to continue to improve the quality of care to our patients.

Yours sincerely



Sarah O'Brien
Chief Nursing Officer

Part 3: Review of quality performance 2023/24

Ramsay Clinical Governance Framework 2023/24

The aim of clinical governance is to ensure that Ramsay develop ways of working which assure that the quality of patient care is central to the business of the organisation.

The emphasis is on providing an environment and culture to support continuous clinical quality improvement so that patients receive safe and effective care, clinicians are enabled to provide that care and the organisation can satisfy itself that we are doing the right things in the right way.

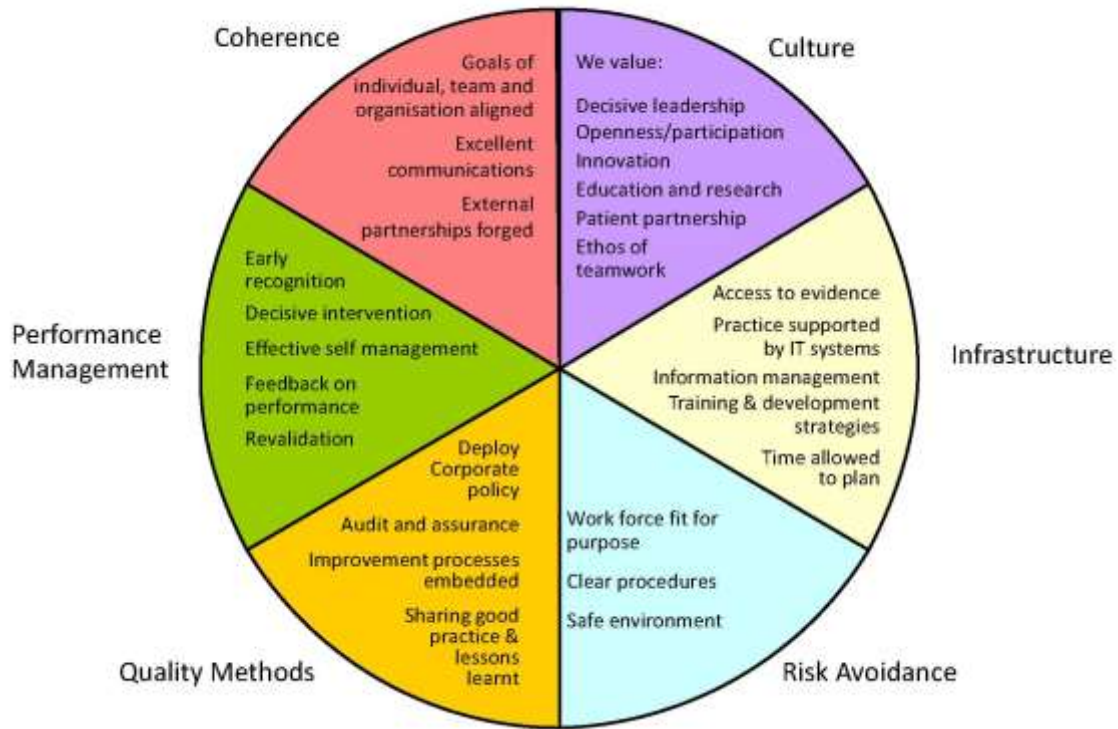
It is important that Clinical Governance is integrated into other governance systems in the organisation and should not be seen as a “stand-alone” activity. All management systems, clinical, financial, estates etc, are inter-dependent with actions in one area impacting on others.

Several models have been devised to include all the elements of Clinical Governance to provide a framework for ensuring that it is embedded, implemented and can be monitored in an organisation. In developing this framework for Ramsay Health Care UK we have gone back to the original Scally and Donaldson paper (1998) as we believe that it is a model that allows coverage and inclusion of all the necessary strategies, policies, systems and processes for effective Clinical Governance.

The domains of this model are:

- Infrastructure
- Culture
- Quality methods
- Poor performance
- Risk avoidance
- Coherence

Ramsay Health Care Clinical Governance Framework



National Guidance

Ramsay also complies with the recommendations contained in technology appraisals issued by the National Institute for Health and Clinical Excellence (NICE) and Safety Alerts as issued by the NHS Commissioning Board Special Health Authority.

Ramsay has systems in place for scrutinising all national clinical guidance and selecting those that are applicable to our business and thereafter monitoring their implementation.

3.1 The Core Quality Account indicators

Mortality

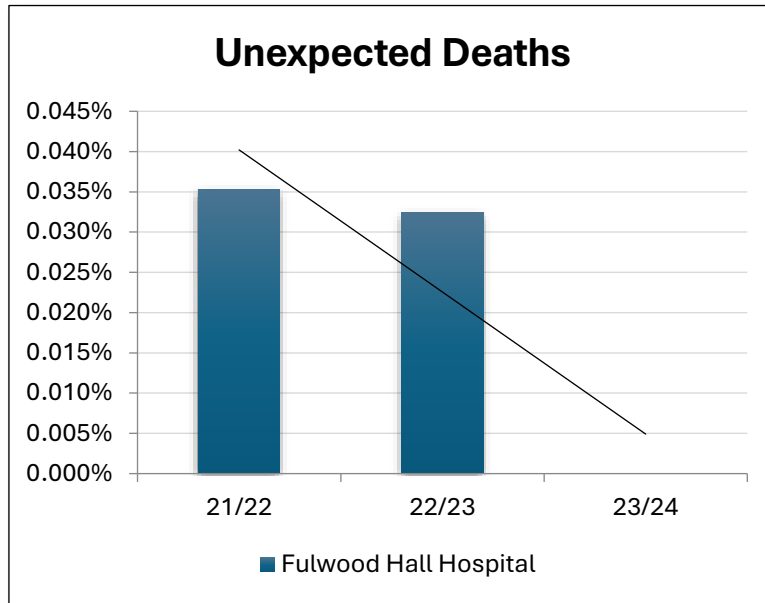
Mortality:	Period	Best		Worst		Average		Period	Fulwood	
	Apr20 - Mar 21	RRV	0.6908	RM1	1.201	Average	0.0078	21/22	NVC07	0.0004
Dec21 - Nov22	R1K02	0.2456	RHCH	2.1583	Average	1.0965	22/23	NVC07	0.0003	
Nov22-Oct23	RQM	0.7215	RXP	1.2065	Average	1.0021	23/24	NVC07	0.0000	

SHMI Figures are not available for Independent Sector Hospitals

RiskMan data is used to find mortality rate

Publication Date: 14 Mar 2024

Rate per 100 discharges:



Fulwood Hall Hospital considers that this data is as described for the following reasons:

The above data shows that Fulwood Hall Hospital have had no unexpected deaths during the reporting period. Any deaths occurring would be fully investigated using the principles of PSIRF. Patients admitted for elective surgery have a thorough pre-operative assessment and are managed effectively post operatively.

National PROMS

PROMS: Hips	Period	Best		Worst		Average	
	Apr19 - Mar 20	NTPH1	25.5465	NT411	17.059	Eng	22.6867
	Apr20 - Mar 21	NV302	25.7015	NVC20	17.335	Eng	22.9812
	Apr21 - Mar 22	NT333	26.0042	NVC20	7.31011	Eng	22.8474

Period	Fulwood	
Apr19 - Mar 20	NVC07	22.011
Apr20 - Mar 21	NVC07	21.051
Apr21 - Mar 22	NVC07	23.498

PROMS: Knees	Period	Best		Worst		Average	
	Apr19 - Mar 20	RR7	20.6878	R1K	12.6215	Eng	17.4858
	Apr20 - Mar 21	NVC23	20.2502	RXP	11.9159	Eng	16.8858
	Apr21 - Mar 22	RCF	20.6336	NT209	14.2667	Eng	17.6247

Period	Fulwood	
Apr20 - Mar 21	NVC07	17.495
Apr19 - Mar 20	NVC07	*
Apr20 - Mar 21	NVC07	19.602

REQUIREMENT is for ADJ. Health Gain
 Oxford Hip Score - Primary Hip
 Oxford Knee Score - Primary Knee
 Publication has been paused for 22/23

The uptake and response to PROMs and health gains are a clinical priority for the coming year as described earlier in this report. We will be working to maintain and improve our scores to keep them above the national average.

Readmissions within 28 days

Readmissions:	Period	Best		Worst		Average		Period	Fulwood	
	18/19	N/A	N/A	N/A	N/A	Eng	14.3	21/22	NVC07	0.00
	19/20	N/A	N/A	N/A	N/A	Eng	13.7	22/23	NVC07	0.00
	20/21	N/A	N/A	N/A	N/A	Eng	15.5	23/24	NVC07	0.00

Data no longer reported

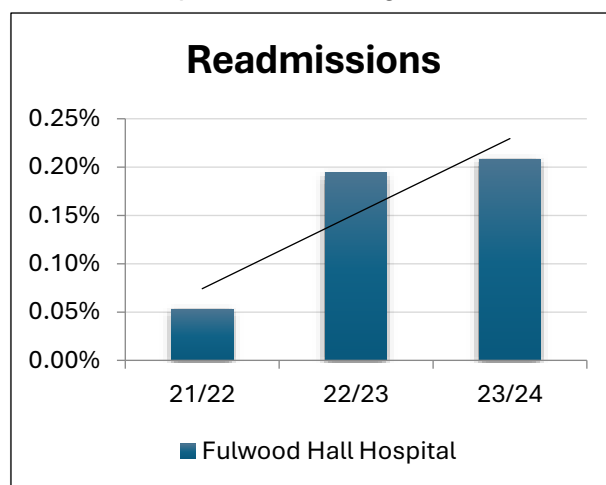
There is no data published after 19/20

Publication Date: 17 Mar 2022

Fulwood Hall Hospital considers that this data is as described for the following reasons:

The data is no longer being reported and there has been no data published since 2019/20.

Rate per 100 discharges: 0.21%



Fulwood Hall Hospital intends to take the following actions to improve the number of readmissions by providing additional training above the mandatory training offering to all clinical staff, particularly staff on the ward and in the theatre department. Patient activity has risen in the last year, with an increase in the number of major surgeries such as joint replacements being performed at Fulwood Hall Hospital. Any patient readmissions will be investigated using PSIRF processes, with a thematic review taking place to identify trends if appropriate.

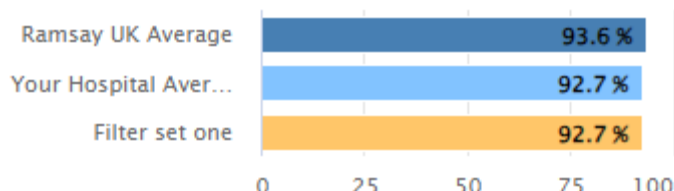
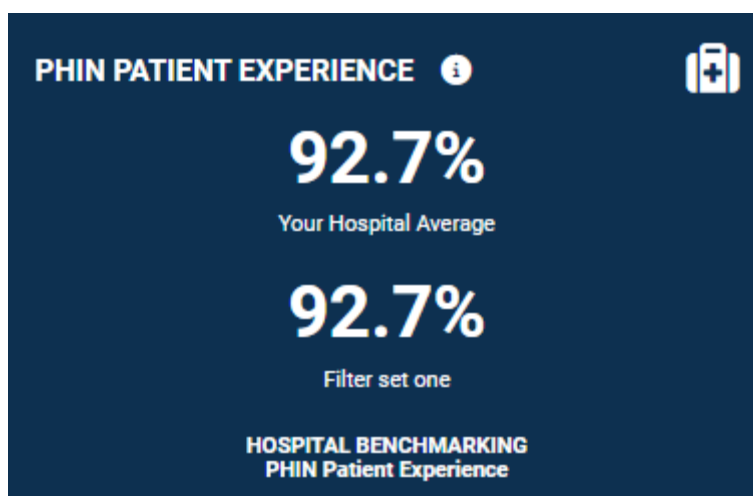
Responsiveness to Personal Needs

PHIN Experience score (suite of 5 questions giving overall Responsive to Personal Needs score):

Summary of PHIN Patient Experience performance

Export

Filter set one: **St. James's Hospital, Fulwood Hill Hospital**



Break down per question and overall responsiveness score taken from Ramsay's external patient experience survey, period April 2023 - March 2024.

Our **Net Promoter Score (NPS)** is shown below:
 April 2023 - December 2023: **NPS 86** (from 1677 responses)
 January 2024 - March 2024: **NPS 89** (from 768 responses)

VTE Risk Assessment

VTE Assessment:	Period	Best		Worst		Average		Period	Fulwood	
	Q1 to Q4 18/19	Several	100%	NVC0M	41.6%	Eng	95.6%	Q1 to Q4 18/19	NVC07	97.6%
Q1 to Q3 19/20	Several	100%	RXL	71.8%	Eng	95.5%	Q1 to Q3 19/20	NVC07	98.2%	

Due to Covid this submission was paused. There is no data published after Q3 19/20

Fulwood Hall Hospital considers that this data is as described for the following reasons:

Due to the continuing COVID-19 pandemic, this submission was paused. There has been no data published after Q3 2019/2020.

C difficile infection

C. Diff rate: per 100,000 bed days	Period	Best		Worst		Average		Fulwood		
	2020/21	Severall	0	RPC	81.0	Eng	15.0	2021/22	NVC07	0.0
	2021/22	Severall	0	RPY	54.0	Eng	16.0	2022/23	NVC07	0.0

Benchmarking Data as published up to 2021/22 as at 14/04/23

No data published since 21/22

Fulwood Hall Hospital considers that this data is as described for the following reasons:

There has been no incidence of C. Diff infections at Fulwood Hall Hospital during this period.

Patient Safety Incidents with Harm

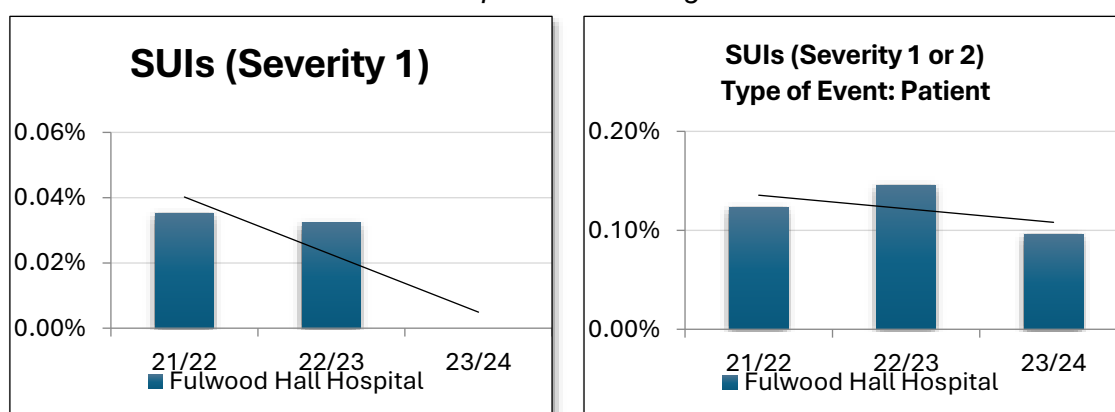
SUIs: (Severity 1 only)	Period	Best		Worst		Average		Fulwood		
	Oct19 - Mar20	Severall	0.00	Severall	0.50	Eng	0.20	2021/22	NVC07	0.00
	2021/22	RAX	0.03	RJR	1.08	Eng	0.30	2022/23	NVC07	0.00
	2022/23	N/A	N/A	N/A	N/A	N/A	N/A	2023/24	NVC07	0.00

No independent sector data, Ramsay data is from Riskman (Overall Sev 1)

Acute Non-Specialist Data From NRLS, England Average based on these sites only

September 2023 update: We have paused the annual publishing of this data while we consider future publications

Rate per 100 discharges:



Fulwood Hall Hospital considers that this data is as described for the following reasons:

This data has not been captured nationally for the independent sector. Ramsay has reviewed the internal reporting system to pull through our own data and the data is recorded in the table and graphs provided. There were no Severity 1 incidents in 2022/23.

Fulwood Hall Hospital has taken the following actions to improve this number, and so the quality of its services, by continuing to promote a positive safety culture, where staff feel empowered to speak up for safety. We close the loop by providing staff with updates and outcomes of incidents and learn from these events.

Friends and Family Test

F&F Test:	Period	Best		Worst		Average		Period	Fulwood	
	Feb-22	Several	100%	RTK	77.0%	Eng	94.0%	Feb-22	NVC07	100.0%
	Feb-23	Several	100%	RAL	56.0%	Eng	95.0%	Feb-23	NVC07	99.2%
	Jan-24	Several	100%	RTK	74.0%	Eng	94.0%	Jan-24	NVC07	100.0%

Percentage Positive

Fulwood Hall Hospital considers that this data is as described for the following reasons:

In addition to providing safe and effective care, overall patient experience is a key measure of quality. We see patient feedback received from the Friends and Family test as pivotal in shaping future services to ensure they meet the needs of our patients. We use the information received from our patient survey to improve the services and care we provide. We take pride in the service that we provide to our patients, which is shown in the above table demonstrating a score above the national average where patients were asked if they would recommend the care and treatment at Fulwood Hall Hospital.

3.2 Patient safety

At Fulwood Hall Hospital, we are committed to ensuring the safety of every patient in our care.

We are continuously working to make improvements in patient safety through audit, incident reporting and management, lessons learned and complaints. We work to identify any themes or trends in patient incidents to address wider contributing factors.

We are not afraid to make changes to process or practice that can lead to an improvement in patient safety.

We are an open, honest, and transparent hospital, and we believe in keeping patient at the centre of everything that we do.

Our focus on patient safety has resulted in an improvement in several key indicators as illustrated in the data above.

3.2.1 Infection prevention and control

Fulwood Hall Hospital has a very low rate of hospital acquired infection and has had no reported MRSA Bacteraemia in the past 4 years.

We comply with mandatory reporting of all Alert organisms including MSSA/MRSA Bacteraemia and Clostridium Difficile infections with a programme to reduce incidents year on year.

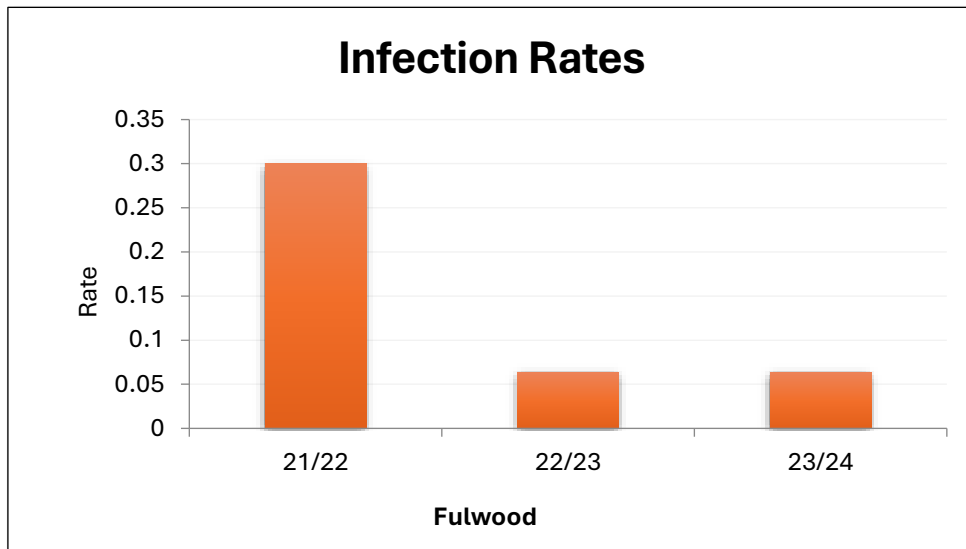
Infection Prevention and Control management is very active within our hospital. An annual strategy is developed by the corporate level Infection Prevention and Control (IPC) Committee, and group policy is revised and re-deployed every two years. Our IPC programmes are designed to bring about improvements in performance and in practice year on year.

A network of specialist nurses and infection control link nurses operate across the Ramsay organisation to support good networking and clinical practice.

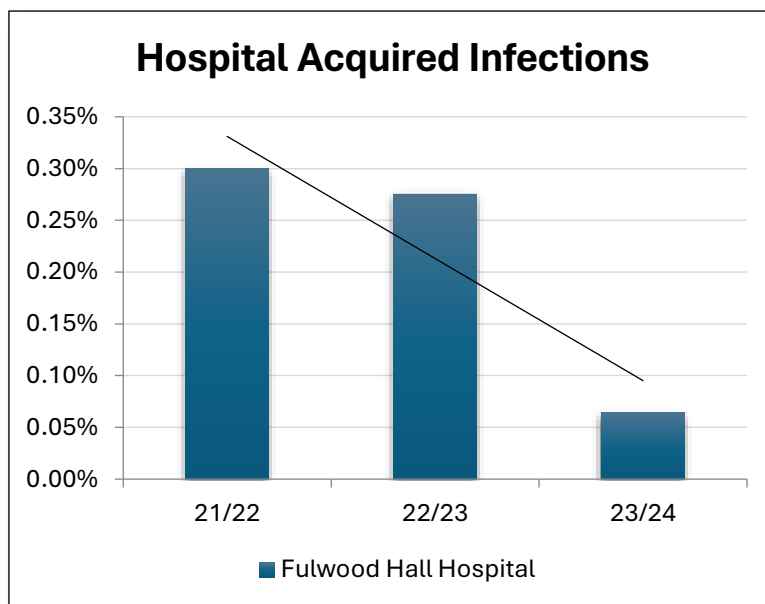
Programmes and activities within our hospital include:

- Fulwood Hall Hospital has recently been awarded Bronze ANTT® Patient Protection Accreditation following significant focus and effort from our teams and dedicated Infection Control Lead.
- During 2023/24 we have continued to collect data from our patients who have had hip and knee replacement surgery in line with the Public Health England (PHE) 'Surveillance of surgical site infections', and AQUA 'Hip & Knee Replacement: Advancing Quality Data Collection' programmes.
- We have a designated Infection Prevention and Control link who is a member of the Regional IPC Committee which is chaired by a Consultant Microbiologist and consists of representatives from each hospital. The Committee meets quarterly to oversee implementation of corporate policies, national guidance and review clinical audit & practice.
- Our infection control lead is proactive in identifying and investigating any post-operative infections and supporting such patients, with a view to identify contributing factors and apply learning to benefit patient outcomes going forwards.
- As can be seen in Appendix 1, hand hygiene, ANTT and 50-steps cleaning audits are undertaken regularly as part of the Ramsay Health Care UK audit schedule. Designated hand hygiene, hand surveillance and ANTT sessions are to be included in our annual mandatory training day.
- Introduction of a local Infection Prevention and Control (IPC) meeting every month, with representatives from all clinical and non-clinical departments.
- Ensure that staff undertake mandatory IPC e-learning, as well as face to face training sessions annually.

- Audit results are used to identify trends and create action plans which are completed and evidenced.
- Adherence to antimicrobial stewardship and ensure antimicrobial prescribing is compliant with the Ramsay formulary and local NHS Trust protocols.



Rate per 100 discharges: 0.06%



As can be seen in the above graphs our infection control rate has decreased over the last year. In comparison to the national average, it is below average. This is due to stringent screening and infection prevention measures within the hospital.

3.2.2 Cleanliness and hospital hygiene

Assessments of safe healthcare environments also include **Patient-Led Assessments of the Care Environment (PLACE)**

PLACE assessments occur annually at Fulwood Hall Hospital, providing us with a patient’s eye view of the buildings, facilities, and food we offer, giving us a clear picture of how the people who use our hospital see it and how it can be improved.

The main purpose of a PLACE assessment is to get the patient view.

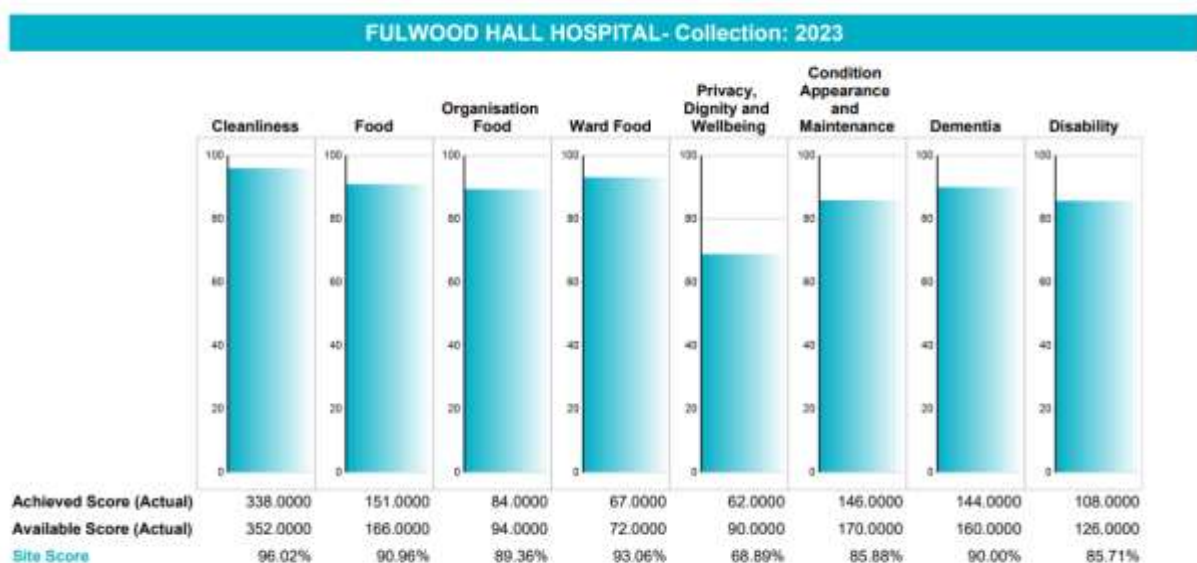
The latest PLACE assessment at Fulwood Hall Hospital took place in December 2023.

Positive feedback:

- The final impression from the assessor was that they were confident that a good level of patient care and experience will be delivered within the environment.
- Meal options are good and well presented.
- Reception was clean and welcoming.
- Patients change and wait in complete privacy.
- Staff took notice of their views and comments.

Feedback for review in preparation for the next assessment:

- It was noted that some internal floors, walls and decorations were looking tired, and this is currently being addressed by ongoing renovations to patient rooms and other areas.
- No availability of a multi-faith prayer room - an area has now been identified for this purpose and is awaiting completion.
- Updating of signage for Physiotherapy department, as this has recently moved.
- Seating, privacy, and dignity challenges in reception when it is busy.



3.2.3 Safety in the workplace

The safety and wellbeing of our staff and patients is a priority at Fulwood Hall Hospital.

There is a robust Health & Safety framework that is supported by a multi-departmental committee chaired by the Operations Manager that reviews any staff and patient safety incidents or concerns and shares lessons learnt.

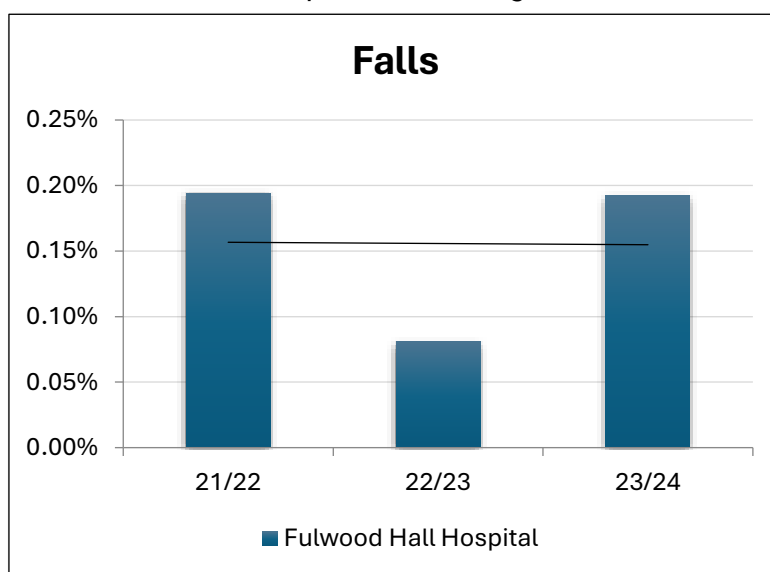
Patient safety alerts from the Ramsay Central Alert System (CAS) including clinical alerts and learnings, medical device alerts from the MHRA, and policy updates are disseminated to staff to keep them informed of any changes or issues.

At Fulwood Hall we ensure all staff undertake mandatory and supplementary training which provides knowledge and skill in maintaining their and their colleagues' safety. Modules include fire, moving and handling infection prevention and control for example.

Our staff are encouraged to report any safety incidents via the RADAR online reporting system.

Each department has a local risk register which is reviewed annually, and new ones carried out as required. Any issues scoring 9 or above are escalated to the hospital risk register and reviewed by our Senior Leadership Team each month.

Rate per 100 discharges:



As can be seen in the above graph our falls rate has increased over the last year, being the same as the national average.

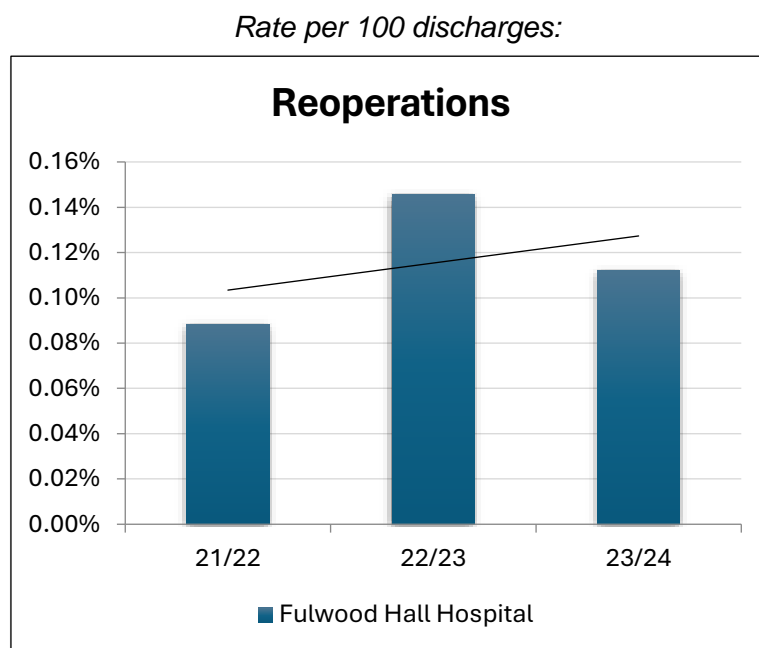
Fulwood Hall Hospital has taken actions to improve this rate and so the quality of its services, by implementing the use of 'falls mats' and mandating falls risk assessment of patients on the ward. An increase in capacity has seen a slight increase in the rate of falls. Any patient falls will be investigated using PSIRF processes, with a thematic review taking place to identify trends if appropriate.

3.3 Clinical effectiveness

Fulwood Hall Hospital has a Clinical Governance team and committee that meet regularly through the year to monitor quality and effectiveness of care. Clinical incidents, patient and staff feedback are systematically reviewed to determine any trend that requires further analysis or investigation. More importantly, recommendations for action and improvement are presented to hospital management and medical advisory committees to ensure results are visible and tied into actions required by the organisation as a whole.

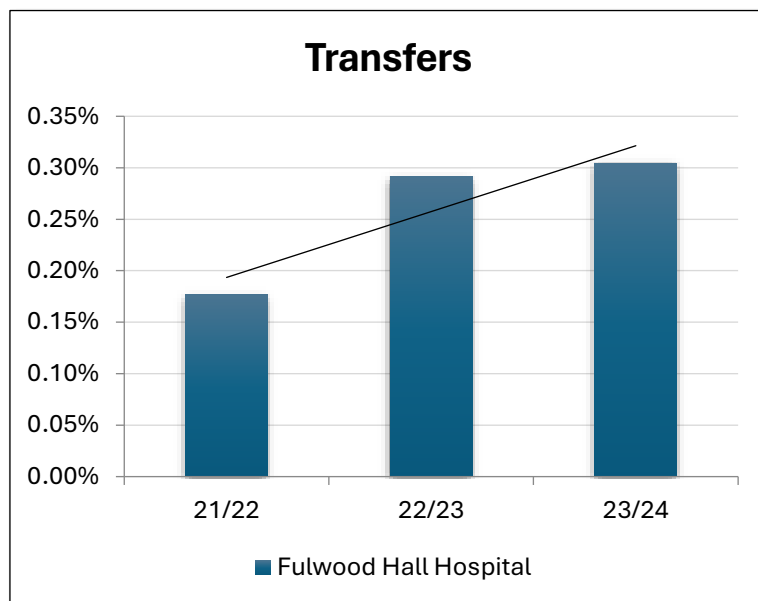
3.3.1 Return to theatre

Ramsay is treating significantly higher numbers of patients every year as our services grow. The majority of our patients undergo planned surgical procedures and so monitoring numbers of patients that require a return to theatre for supplementary treatment is an important measure. Every surgical intervention carries a risk of complication so some incidence of returns to theatre is normal. The value of the measurement is to detect trends that emerge in relation to a specific operation or specific surgical team. Ramsay's rate of return is very low consistent with our track record of successful clinical outcomes.



As can be seen in the above graph our return to theatre rate has decreased over the last year. In comparison to the national average, it is slightly higher (0.11 vs 0.08). We feel positive that despite an increase in capacity and major surgeries, our return to theatre score and reoperation rate (below) have decreased since 2022/23. We have seen a small increase in the rate of transfers out to our local NHS hospital. In addition to performing a higher proportion of major surgeries, our staff have had increased training on recognition of the deteriorating patient and how to effectively escalate their concerns.

Rate per 100 discharges:



3.3.2 Learning from Deaths

In the reporting period, 1st April 2023- 31st March 2024 there were no unexpected deaths at Fulwood Hall Hospital.

3.3.3 Staff who speak up

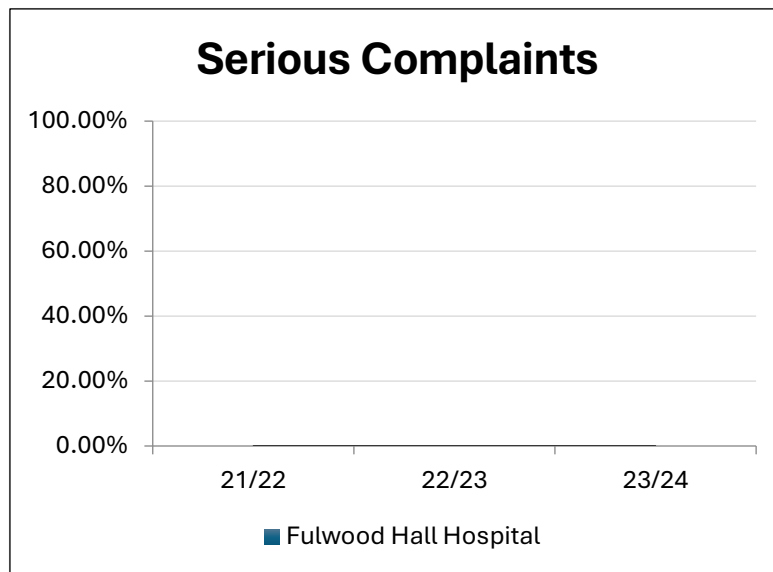
Ramsay Health Care UK is continuing with its Speaking up for Safety Programme and is currently training up some master trainers to ensure that speaking up for safety continues to be a priority within the organisation. The Promoting Professional Accountability (PPA) training will also continue in liaison with Ramsay Australia and the Vanderbilt University in America.

3.4 Patient experience

All feedback from patients regarding their experiences with Ramsay Health Care and Fulwood Hall Hospital are welcomed and inform service development in various ways dependent on the type of experience (both positive and negative) and action required to address them.

All positive feedback is relayed to the relevant staff to reinforce good practice and behaviour - letters and cards are displayed for staff to see in staff rooms and notice boards. Managers ensure that positive feedback from patients is recognised, and any individuals mentioned are praised accordingly.

All negative feedback or suggestions for improvement are also feedback to the relevant staff using direct feedback. All staff are aware of our complaints procedures should our patients be unhappy with any aspect of their care.



Patient experiences are feedback via the various methods below and are regular agenda items on Local Governance Committees for discussion, trend analysis and further action where necessary. Escalation and further reporting to Ramsay Corporate and DH bodies occurs as required and according to Ramsay and DH policy.

Feedback regarding the patient’s experience is encouraged in various ways via:

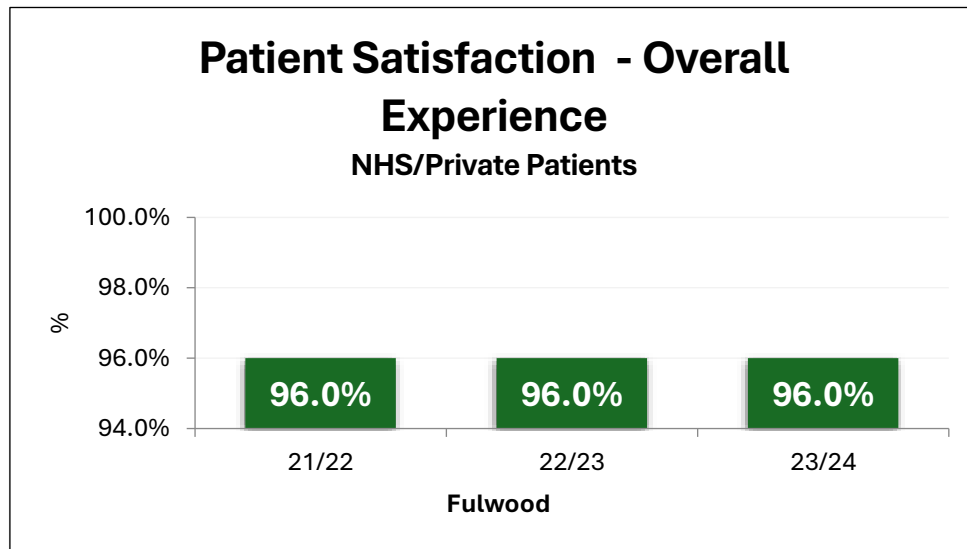
- Continuous patient satisfaction feedback via a web based invitation
- Hot alerts received within 48hrs of a patient making a comment on their web survey
- Yearly CQC patient surveys
- Friends and family questions asked on patient discharge
- ‘We value your opinion’ leaflet
- Verbal feedback to Ramsay staff - including Consultants, Heads of Clinical Services / Hospital Directors whilst visiting patients and Provider/CQC visit feedback.
- Written feedback via letters/emails
- Patient focus groups
- PROMs surveys
- Care pathways - patients are encouraged to read and participate in their plan of care

3.4.1 Patient Satisfaction Surveys

Our patient satisfaction surveys are managed by a third-party company called ‘Cemplicity’. This is to ensure our results are managed completely independently of the hospital, so we receive a true reflection of our patient’s views.

Every patient is asked their consent to receive an electronic survey or phone call following their discharge from the hospital. The results from the questions asked are used to influence the way the hospital seeks to improve its services. Any text comments made by patients on

their survey are sent as 'hot alerts' to the Hospital Manager within 48hrs of receiving them so that a response can be made to the patient as soon as possible.



As can be seen in the above graph our Patient Satisfaction rate has remained stable over the last 3 years. It is the same as the national average for 2023/24. Patient experience remains a priority at Fulwood Hospital, with plans for the coming year outlined in section 2.1.2.

Appendix 1 Services covered by this quality account

Regulated Activities – Fulwood Hall Hospital

	Services Provided	Peoples Needs Met for:
Treatment of Disease, Disorder Or injury	Cardiology services, Dermatology, General medicine, Haematology, Nephrology, , Physiotherapy, Pain management, Rheumatology, Sports Medicine, outreach clinic at Captain French Surgery	All adults 18 yrs and over
Surgical Procedures	Cosmetic/Plastic Surgery, Dermatological; Gastrointestinal, General surgery, Gynaecological, Ophthalmic, Orthopaedic, Pain Management, Spinal and Neurosurgery, Urological, Vascular, Ambulatory, Day and Inpatient Surgery,	All adults excluding: <ul style="list-style-type: none"> • Patients with blood disorders (haemophilia, sickle cell, thalassaemia) • Patients on renal dialysis • Patients with history of malignant hyperpyrexia • Planned surgery patients with positive MRSA screen are deferred until negative. • Patients who are likely to need ventilatory support post operatively. • Patients who are above a stable ASA 3. • Any patient who will require planned admission to ITU post-surgery. • Dyspnoea grade 3/4 (marked dyspnoea on mild exertion e.g., from kitchen to bathroom or dyspnoea at rest) • Poorly controlled asthma (needing oral steroids or has had frequent hospital admissions within last 3 months) • MI in last 6 months • Angina classification 3/4 (limitations on normal activity e.g., 1 flight of stairs or angina at rest) • CVA in last 6 months <p>However, all patients will be individually assessed, and we will only exclude patients if we are unable to provide an appropriate and safe clinical environment.</p>
Diagnostic and screening	Imaging services, Phlebotomy, Urinary Screening and Specimen collection.	All adults 18 yrs and over
Family Planning Services	Gynaecology patient pathway, insertion and removal of inter uterine devices for medical as well as contraception purposes	All adults 18 years and over as clinically indicated

Appendix 2 - Clinical Audit Programme 2023/24

Audit	Department Allocation / Ownership	QI Code Allocation	July	August	September	October	November	December	January	February	March	April	May	June
Hand Hygiene observation (5 moments)	Ward	Ward	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖
Hand Hygiene observation (5 moments)	Ambulatory Care	Ambulatory Care	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖
Hand Hygiene observation (5 moments)	Theatres	Theatres	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖
Hand Hygiene observation (5 moments)	IPC	Whole Hospital	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖
Surgical Site Infection (One Together)	Theatres	Theatres				✖						✖		
IPC Governance and Assurance	IPC	Whole Hospital	✖											
IPC Environmental infrastructure	IPC	Whole Hospital		✖						✖				
IPC Management of Linen	Ward	Ward		✖						✖				
Sharps	IPC	Whole Hospital		✖				✖				✖		
50 Steps Cleaning (PR1)	Theatres	Theatres	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖
50 Steps Cleaning (PR2)	Ward	Ward	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖
50 Steps Cleaning (PR2)	Ambulatory Care	Ambulatory Care	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖
50 Steps Cleaning (PR2)	Outpatients	Outpatients	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖
50 Steps Cleaning (PR2)	POA	POA	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖
50 Steps Cleaning (PR4)	Physio	Physio	✖			✖			✖			✖		
50 Steps Cleaning (PR4)	Pharmacy	Pharmacy	✖			✖			✖			✖		
50 Steps Cleaning (PR4)	Radiology	Radiology	✖			✖			✖			✖		
Peripheral Venous Cannula Care Bundle	HSCS	Whole Hospital	✖											
Urinary Catheterisation Bundle	HSCS	Whole Hospital	✖											
Patient Journey: Safe Transfer of the Patient	Ward	Ward		✖						✖				

Appendix 3

Glossary of Abbreviations

ACCP	American College of Clinical Pharmacology
AIM	Acute Illness Management
ALS	Advanced Life Support
CAS	Central Alert System
CCG	Clinical Commissioning Group
CQC	Care Quality Commission
CQUIN	Commissioning for Quality and Innovation
DDA	Disability Discrimination Audit
DH	Department of Health
EVLТ	Endovenous Laser Treatment
GP	General Practitioner
GRS	Global Rating Scale
HCA	Health Care Assistant
HPD	Hospital Patient Days
H&S	Health and Safety
IHAS	Independent Healthcare Advisory Services
IPC	Infection Prevention and Control
ISB	Information Standards Board
JAG	Joint Advisory Group
LINK	Local Involvement Network
MAC	Medical Advisory Committee
MRSA	Methicillin-Resistant Staphylococcus Aureus
MSSA	Methicillin-Sensitive Staphylococcus Aureus
NCCAC	National Collaborating Centre for Acute Care
NHS	National Health Service
NICE	National Institute for Clinical Excellence
NPSA	National Patient Safety Agency
NVC07	Code for Fulwood Hall Hospital used on the data information websites
ODP	Operating Department Practitioner
OSC	Overview and Scrutiny Committee
PLACE	Patient-Led Assessment of the Care Environment
PPE	Personal Protective Equipment
PROM	Patient Related Outcome Measures
RIMS	Risk Information Management System
SUS	Secondary Uses Service
SAC	Standard Acute Contract
SLT	Senior Leadership Team
STF	Slips, Trips and Falls
SUI	Serious Untoward Incident
VTE	Venous Thromboembolism

Fulwood Hall Hospital Ramsay Health Care UK

We would welcome any comments on the format, content or purpose of this Quality Account.
If you would like to comment or make any suggestions for the content of future reports, please telephone or write to the Hospital Director using the contact details below.

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