

# Boston West Hospital

Quality Account  
2023/24



Public



**Ramsay**  
Health Care

# Contents

<b>Introduction Page</b>		<b>3</b>
<b>Welcome to Ramsay Health Care UK</b>		<b>3</b>
<b>Introduction to our Quality Account</b>		<b>4</b>
<b>PART 1 – STATEMENT ON QUALITY</b>		<b>5</b>
<b>1.1</b>	<b>Statement on Quality from the Hospital Director</b>	<b>5</b>
<b>1.2</b>	<b>Hospital Accountability Statement</b>	<b>7</b>
<b>1.3</b>	<b>Welcome to Boston West Hospital</b>	<b>8</b>
<b>PART 2</b>		<b>10</b>
<b>2.1</b>	<b>Quality Priorities for 2023/24</b>	<b>10</b>
2.1.1	Review of Clinical Priorities 2023/24 (looking back)	10
2.1.2	Clinical Priorities for 2024/25 (looking forward)	12
<b>2.2</b>	<b>Mandatory statements relating to the quality of NHS services provided</b>	<b>15</b>
2.2.1	Review of Services	15
2.2.2	Participation in Clinical Audit	17
2.2.3	Participation in Research	19
2.2.4	Goals agreed with Commissioners	19
2.2.5	Statement from the Care Quality Commission	19
2.2.6	Statement on Data Quality	19
2.2.7	Stakeholders views on 2023/24 Quality Accounts	21
<b>PART 3 – REVIEW OF QUALITY PERFORMANCE</b>		<b>25</b>
<b>3.1</b>	<b>The Core Quality Account indicators</b>	<b>27</b>
<b>3.2</b>	<b>Patient Safety</b>	<b>30</b>
<b>3.3</b>	<b>Clinical Effectiveness</b>	<b>33</b>
<b>3.4</b>	<b>Patient Experience</b>	<b>36</b>
<b>3.5</b>	<b>Case Studies</b>	<b>40</b>
<b>Appendix 1 – Services Covered by this Quality Account</b>		<b>42</b>
<b>Appendix 2 – Boston West Hospital Statement of Purpose</b>		<b>43</b>
<b>Appendix 3 - Clinical Audits</b>		<b>44</b>
<b>Appendix 4 - Glossary of Abbreviations</b>		<b>47</b>

# Welcome to Ramsay Health Care UK

## Boston West 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 60<sup>th</sup> 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

# Introduction to our Quality Account

This Quality Account is Boston West 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

*Carl Cottam, Hospital Director*

*Boston West Hospital*

As the Hospital Director of Boston West Hospital, I am passionate about ensuring that we deliver consistently high standards of care to all our patients. Our Quality Account provides information about how we monitor and evaluate the quality of the service that we deliver.

I have been the Hospital Director at Boston West Hospital since October 2010 and have also jointly managed the Fitzwilliam Hospital since January 2012. The two hospitals work closely within a shared service model in the provision of supporting administration services and patient care.

My number one priority is safety for all our staff and patients. Since joining Boston West Hospital I have been impressed by the attitude of the staff and the consultants and their desire to develop the hospital. Staff are proud of their hospital and the care delivered for patients is compassionate, dignified, and respectful.

This document has been developed with the involvement of our staff, who have been instrumental in developing a systems approach to risk management, which focuses on providing safe quality care to mitigate the risk of adverse events.

Our Vision is that:

*“As a committed team of professional individuals, we aim to consistently deliver quality, holistic care for all our patients across a full range of care services. We believe we are able to achieve this by continually updating our key skills and knowledge, enabling us to deliver evidence based clinical practice throughout the Hospital.”*

Our Quality Account details the actions that we have taken over the past year to ensure that our high standards in delivering patient care remain our focus for everything we do. Through our vigorous audit regime and by listening to our stakeholders and patient feedback, we have been able to identify areas of good practice and where we can improve the care patients receive. This has enabled us to refine some of our processes to make improvements to the service we offer.

We have enhanced our training and education plan throughout the year involving both the administrative and clinical teams. It is important we have robust training programs to deliver excellent care and service standards.

We hope to share our progressive improvements over the past year. Boston West Hospital has a very strong track record as a safe and responsible provider of health care services, and we are proud to share our results.

To ensure we have a coordinated approach to the delivery of the care we provide, we have our Clinical Governance Committee and Medical Advisory Committee, who monitor the adherence to professional



standards and legislative requirements. The committees review the hospital's clinical performance and activity on a quarterly basis.

The committees have reviewed and agree with the content and actions detailed within the Quality Account.

As Hospital Director, I am aware of all aspects of clinical quality and NHS services provided at Boston West Hospital and can confirm the accuracy of this document.

If you would like to comment or provide feedback regarding the content of the quality account, please do not hesitate to contact me at [carl.cottam@ramsayhealth.co.uk](mailto:carl.cottam@ramsayhealth.co.uk) or telephone 01733 842308.

**Mr Carl Cottam, Hospital Director, Boston West Hospital**

## 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.



**Mr Carl Cottam**  
**Hospital Director**  
**Boston West Hospital, Ramsay Health Care UK**

**This report has been reviewed and approved by:**

- Medical Advisory Committee Chair, Mr Nazeer Dahar – Consultant Urologist

The report has also been shared with the following groups for their review and comment prior to submission:

- Lincolnshire Integrated Care Board (ICB)
- Healthwatch Lincolnshire
- Lincolnshire Health Overview and Scrutiny Committee
- Boston West Hospital Patient & Public Involvement Group (PPIG) Chair

## 1.3 Welcome to Boston West Hospital

Boston West Hospital has been part of the local community for 20 years. We have a dedicated workforce that is committed to making each and every patient feel secure and safe. Whether our patients are coming in for a consultation or day surgery, we want them to feel that they are cared for by compassionate and highly trained staff that provide skilled care to our patients. We pride ourselves on providing consultant led care, meaning that all patients are under the direct care of a Consultant at each step of their patient care pathway.

Boston West Hospital is a purpose-built facility that provides services for assessment, diagnosis, and treatment of common medical conditions, and has a suite of outpatient treatment rooms. A well-equipped modern theatre undertakes a range of surgical procedures and endoscopic (diagnostic) investigations. The Sterile Services Unit is no longer situated at Boston West Hospital and is situated at a New Ramsay Regional Sterile Services Hub.



The hospital provides a wide range of services covering NHS and private day case procedures for the specialties listed in Appendix 1.

Over the past 20 years, our establishment has grown from strength to strength. From friendly reception staff to highly skilled consultants, delivering quality patient care is at the centre of what we do. Not only do we continue to receive positive feedback, but we utilise that feedback to review and improve care pathways, to



foster a culture of continuous development and improvement. This process is vital in ensuring that we offer the best possible experience for our patients.

At Boston West Hospital, we provide safe, convenient, effective, and high quality medical and surgical services for adult patients aged 18 years and over, whether privately insured, self-funding, or funded via the NHS. We strive to offer the same level of outstanding care to all patients.

Between April 2023 and March 2024, we admitted a total of 3884 patients, of which approximately 94.8% were NHS patients. On average, 255 patients per week were seen in our outpatient department by one of our 35 consultants. We employ 8 highly trained nursing staff who work alongside a wide variety of other healthcare professionals to deliver the best possible care.

We have continued to engage with local General Practitioners this year on the services we offer and the most current pathways for patient care. This has resulted in our ability to tailor care to meet the needs of patients and improve quality. GP's have access to the national NHS Electronic Referral System (ERS), which facilitates direct NHS patient referrals into Boston West Hospital; this gives GP's and our patients greater control, choice, and flexibility throughout the referral process. We have continued to foster good working relationships with our NHS Clinical Commissioners to facilitate improved access and capacity for patients requiring day case surgery, and with our surrounding care facilities, including Pilgrim Hospital, to offer patient choice for NHS services.

We have invested in our commitment to quality to provide our patients with the best clinical care and patient experience. We also continue to foster good, communicative, and proactive relationships with our local United Lincolnshire Hospital NHS Foundation Trust (ULHT). This affiliation promotes a robust governance process, which in turn enhances both patient safety and patient experience.

We are privileged to work closely with many charities and organisations and continue to fundraise and shine a light on many of them, including the Stroke Unit, Marie Curie societies, Children in Need, Breast Cancer Awareness Day, Sports Relief, and the MacMillan Coffee morning.

We are also delighted to announce that Boston West Hospital has recently been awarded the Antiseptic Non-Touch Technique (ANTT) Bronze Accreditation. More information about this accreditation can be found in Case Study 2 on page 42 of this Quality Account.

# Part 2

## 2.1 Quality Priorities for 2024/25

On an annual cycle, Boston West 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 Hospital's Senior Leadership 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 Review of Clinical Priorities 2023/24 (looking back)

##### Patient Safety

##### **Patient Safety Incident Response Framework (PSIRF)**

The Patient Safety Incident Response Framework (PSIRF) is a national policy which set out the NHS's approach to developing and maintaining effective systems and processes for responding to patient safety incidents for the purpose of learning and improving patient safety. The PSIRF replaced the Serious Incident Framework (2015).

Implementation of PSIRF cannot be achieved by a change in policy alone, and it cannot be implemented in days or weeks, as it required work to design a new set of systems and processes. Organisations were expected to transition to PSIRF by Autumn 2023.

The framework represented a significant shift in the way the NHS responded to patient safety incidents and is a major step towards establishing a safety management system across the NHS. It is a key part of the NHS patient safety strategy.

The PSIRF supports the development and maintenance of an effective patient safety incident response system that integrates four key aims:

1. Compassionate engagement and involvement of those affected by patient safety incidents.
2. Application of a range of system-based approaches to learning from patient safety incidents.
3. Considered and proportionate responses to patient safety incidents.
4. Supportive oversight focused on strengthening response system functioning and improvement.

Processes for incident reporting, investigation and learning lessons at Boston West Hospital were progressive and already aligned very closely with the principals set out in PSIRF; the success of this initiative would be determined by a review and change in processes to ensure the 4 key principals above drove the way we responded to patient safety incidents for the purpose of learning and improving patient safety.

### How did we do? Initiative successful

Boston West Hospital have successfully transitioned to the PSIRF framework during 2023. During this period, staff received specific role-based training to ensure they understand the core values of PSIRF. Additionally, 2 new e-learning modules were added for staff to complete and further consolidate their understanding.

As mentioned, the Boston West Hospital already adopted an open and progressive approach to incident reporting that was very much in tandem with the PSIRF framework, which made for a much smoother transition period. PSIRF has been utilised already in review of cases and learning points have been generated following these reviews.

### Clinical Effectiveness

#### RADAR



In 2023, Ramsay Health Care UK invested in a new software for the management of some quality and compliance processes. Radar is an integrated system that is used as part of the framework Ramsay Health Care UK uses to manage lots of different elements of risk, providing a platform for incident reporting, recording risk assessments, communicating national alerts, and monitoring actions required for improvement.

It was hoped that the system would provide reliable processes and consistent communications via a streamlined and centralised approach. Configured specifically for Ramsay Health Care UK, the cloud-based, fully auditable system would be accessible on any device, anywhere, and would allow users to view personalised, role-based platforms, creating a culture of ownership and standardised behaviours.

Achievement of this initiative would be demonstrated by the successful implementation of the Radar system at Boston West Hospital, not just as a new piece of software, but as an embedded culture of quality and compliance and a smooth transition to this new way of working.

### How did we do? Initiative successful

In August 2023, Radar was successfully implemented across all Ramsay Health Care UK sites, helping us to streamline the way we work regarding incident recording and beyond. In the lead up to the launch date, numerous training sessions were held both locally, and corporately, to teach all staff how to best use the new system, and ensure staff felt confident moving forward.

The implementation has seen many positive benefits for staff and the hospital, such as:

- Centralisation of hospital risks, for easier management and oversight.
- Clearer user interface for easier navigation.
- Easier communication channel for corporate updates to site level.

The Radar system is another tool to ensure great governance processes and transparency within the hospital. It further helps us promote a safe environment for our patients and staff alike.

## Patient Experience

### Cemplicity

During 2023/24, we aspire to continue to analyse the content of the patient feedback we receive via Cemplicity to identify areas which require improvement and drive focussed actions, to enhance the care and experience we deliver to our patients.

#### How did we do? Initiative successful

We analyse data from patients monthly and this is reported in all our various committee meetings. We ensure that we are proactive in contacting patients who have identified areas of improvement to discuss this with them and this enables us to formulate an action plan for improvement, where appropriate. The Boston West Hospital sits above the Ramsay National Average at 93%.

### 2.1.2 Clinical Priorities for 2024/25 (looking forward)

#### Patient Safety

##### Patient Safety Incident Response Framework (PSIRF)

PSIRF was successfully implemented within the Boston West Hospital during 2023/24. Much of the ethos was already embedded in routine practice, which ensured the transition was very smooth. Our Ramsay Corporate Team issued new policy relating to PSIRF and the Patient Safety Incident Response Plan (PSIRP), which was complimented by local policies that were introduced. The plan is to ensure that all staff feel empowered and able to speak up within a just culture, to ensure that lessons can be learned from any event that occurs.

Looking forward to 2024/25 we will continue to offer patient centred care to all our patients and be responsive to feedback and events that occur.

#### Patient Experience

##### Cemplicity – Net Promoter Score

A key measure of performance and patient satisfaction used by Ramsay Healthcare is the Net Promoter Score (NPS). On discharge from the hospital patients are electronically sent a questionnaire through Cemplicity, which contains several questions pertaining to their experience and aspects of their care. These responses are analysed and generate areas for focused improvement. Boston West Hospital perform above the Ramsay National Average in the vast majority of questions answered by patients.

We will continue to push forward with this initiative in 2024/25 and hope to maintain the high levels of patient satisfaction reported by patients treated at the Boston West Hospital.



## Clinical Effectiveness

### SipTilSend – Enhancing Patient Recovery

The requirement for all adult surgical patients undergoing general anaesthesia to be in the fasted state has been routine practice for many years. This has been challenged, and many now accept that the morbidity caused by prolonged fluid fasting is no longer acceptable and offers no safety benefit (Morrison et al 2020)

SipTilSend is a new approach to pre-operative drinking which encourages patients to sip from one 170ml glass of water, refilled every hour, until sent to theatre. Ramsay have conducted a very successful pilot study of SipTilSend at Clifton Park Hospital and as a result, we took the decision to roll this out at Boston West Hospital. Following engagement with the Anaesthetic body and with full support, SipTilSend was implemented on 4th December 2023 at both sites.



### Digital Dictation – “T-PRO”

As part of Ramsay’s ongoing digital innovation agenda, 2023 saw the introduction of digital dictation and the acquisition of a software called “T-PRO” to help facilitate this. Digital dictation allows consultants to dictate patient letters straight after an appointment, and T-PRO will transcribe the consultant’s dictation and allow for automatic upload onto a patient’s electronic patient record. This innovation further strengthens our processes ensuring patient records are kept up to date and there is no timelapse between appointment and generation of consultant letters.



Our dedicated T-PRO experts facilitated 1-1 training sessions with consultants to give them the knowledge to use this tool effectively. Communications via letter and email were also sent to the consultant body further explaining the benefits of T-PRO.

### Investment in Leadership

At Boston West Hospital we pride ourselves on investment in staff to continue their professional development along their career pathway. We believe that effective leadership can help boost productivity of staff and foster a good working environment for all.



Ramsay Academy offer the Leading our People and Leading our Leaders courses – both of which are nationally recognised Leadership & Management qualifications. During 2023/24, 3 members of the Boston West Hospital Senior Leadership Team and 3 Heads of Department have commenced the respective courses.

Staff are expected to complete these courses by the end of 2024, further strengthening our wider leadership team.

## 2.2 Mandatory Statements Relating to the Quality of NHS Services Provided

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

### 2.2.1 Review of Services

During 2022/23, Boston West Hospital provided and/or subcontracted 9 NHS services. Boston West Hospital has reviewed all the data available to us on the quality of care in all 10 of these NHS services.

The income generated by the NHS services reviewed between 1<sup>st</sup> April 2023 to 31<sup>st</sup> March 2024 represents 89.6% of the total income generated by Boston West Hospital for all services in the period.

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 Hospital's 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 that affect patient safety and quality were:

#### Human Resources

In the period 2023/24, agency costs represent a total of 6.24% of our total staff cost; this includes Anaesthetists. Long term sickness, maternity leave, new starter induction and training contributed to lost hours, which currently sits at 13.6%.

The total skill mix calculation for Boston West Hospital was completed by reviewing the contracted hours for Registered Nursing staff and Healthcare Assistants. 'Staff Hours Worked per Hospital Patient Day' was 15.69. The Theatre and Outpatient department has a good balance of registered Nurses and Healthcare Assistants. Boston West Hospital have:

- 1 employed Anaesthetist
- 8 contracted Registered Nurses
- 7 contracted Health Care Assistants
- 4 contracted Operating Departmental Practitioners

During 2023/24, staff turnover at Boston West Hospital continues to see a decrease from 5.5% to 3.8%. Levels of sickness again saw a decrease in 2023/24 to 3.2%. We will continue to work with our "Wellbeing Service" to support employees both in the workplace and as part of a structured return to work service. The staff appraisal completion rate at Boston West Hospital currently sits at 67%, with plans in place to complete the remaining staff. No RIDDOR events were reported at the Boston West Hospital during 2023/24.

Boston West Hospital has a robust mandatory training program with regular monitoring of training compliance. This allows the hospital to meet the contractual obligations and to ensure that staff are fully compliant to deliver high standards of patient care. In March 2024, our overall mandatory training compliance was 93.6%, an increase of 8.6% on 2022/23 figures. We continue to use our virtual Induction training program and a Mandatory Training program developed in 2020 and these courses are now an embedded part of our

staff development project. Training that requires face to face delivery is regularly carried out by internal and external trainers to small groups of staff to ensure an optimal training experience.

### Staff Satisfaction

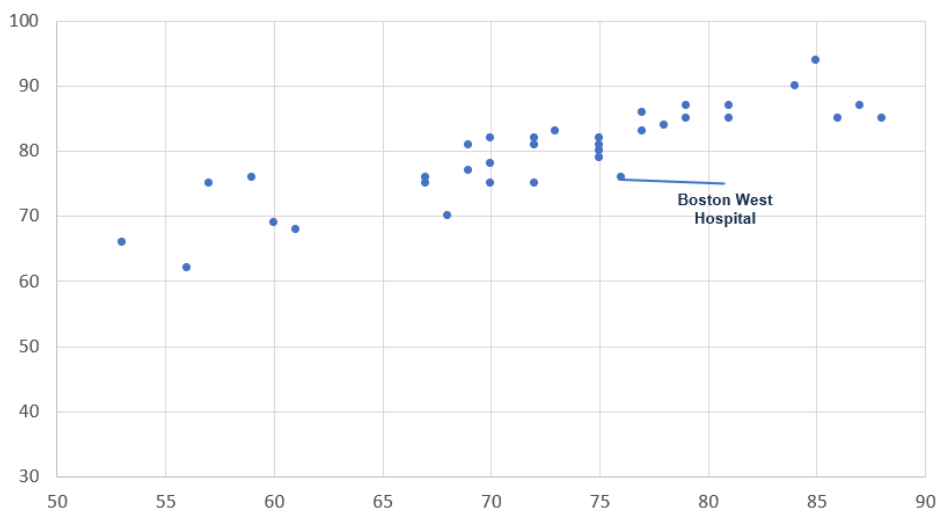
During 2023, Ramsay Health Care UK carried out a group wide Staff Satisfaction Survey, which Boston West Hospital participated in. The Survey is completed annually and is called “Your Voice”. It gives all staff members the opportunity to complete an online survey rating different categories either ‘Very Poor’, ‘Poor’, ‘Moderate’, ‘Good’ or ‘Very Good’.

Staff survey results were collated to show the staff satisfaction for each individual question. For overall staff satisfaction, Boston West Hospital placed in the top half of all Ramsay Health Care units overall and this is an encouraging result.

## Engagement Vs Meeting and Exceeding Expectation - site

### The % of meets and exceeds expectations.

If experiences exceed expectations, everyone wins.



### How engaged are employees (%)?

Engaged people are more motivated to meet or exceed goals

The results of the survey were shared with all staff members and feedback sessions were organised for staff to speak with members of the Senior Leadership Team to discuss any of the findings. The actions taken locally and nationally to address areas of improvement are:

- Regular emails from the Ramsay Health Care UK Benefits Team, promoting staff discounts and other benefits available to Ramsay Staff.
- Local celebration and “Thank You Days” to praise the great work of all the departments.
- Ramsay are supporting their leaders to adopt best practices through the “Leading Our People and Leading Our Leaders training”.
- Regular promotion of courses and apprenticeships for all staff that are available through the central Ramsay Academy.



- Promotion of “give back days” allowing staff to utilise a day to undertake an activity of their choosing that helps support a local charity or cause that is special to them.

We are dedicated to continuing to listen to and celebrate our staff throughout the coming year. We encourage staff to continue to provide their feedback year-round in advance of the next Ramsay group-wide survey planned for 2024/25.

### **Ramsay UK Consultant Pulse Survey Results 2023**

Ramsay Health Care conducted its first global survey of Doctors working in its facilities across the territories where it operates in 2022. Despite a low response rate, this provided key areas of focus in the UK. We committed to conducting a follow-up survey to assess our impact as part of our action planning, which focused on communication, visibility of our Executive and Senior Leaders, and engagement. In April 2023, Ramsay UK conducted a follow up pulse survey to assess the level of engagement and advocacy with our Doctors. 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. More work is required to build on this, with an initial focus on Hospital Medical Advisory Committees and how to better support these important forums for Doctors' voices.

### **Patient Services**

Boston West Hospital reported no complaints during 2023/24. When complaints are received, we would routinely complete a full assessment of the circumstances of each complaint, engaging with the complainant by undertaking direct personal contact and providing detail of what can be expected. With a genuine desire to improve patient satisfaction, we determine if the complaint is upheld or not and complete a full 360-degree root cause analysis. We explain the procedure, provide direct telephone numbers, and invite every complainant to meet with members of our Senior Leadership Team if they remain dissatisfied with complaint conclusions and outcome.

The themes and trends of the complaints are reviewed by the Clinical Governance Committee and Medical Advisory Committees. Lessons learned from complaints are discussed in departmental meetings to offer staff an opportunity to reflect on the issues raised and agree a plan to improve service or perception. Ramsay also has an overarching view of governance and provides feedback and benchmarking information to the Boston West Hospital on a regular basis.

Our other mechanisms of feedback include NHS Choices, NHS Friends and Family Test and we Value Your Opinion card completion. We also utilise an external organisation to gather unbiased data from patients about their experience and satisfaction with the services they have received.

Complaints have been the subject of an audit by our Corporate team who recorded a very positive outcome.

### **Quality**

During 2023/24, the TSSU (sterile services) department moved from the Boston West Hospital to a new state of the art Ramsay Healthcare hub. This move allowed for the streamlining of services and better utilisation of staff and space. During 2024/25, the plan will be to add an additional theatre at Boston West Hospital to facilitate the expansion of services, which will further benefit the local community.

#### **2.2.2 Participation in Clinical Audit**

During 1<sup>st</sup> April 2023 to 31<sup>st</sup> March 2024, Boston West Hospital participated in one national clinical audit. All other National Clinical Audits were not applicable to the services offered at the unit. The audit is listed below

alongside the number of cases submitted as a percentage of the number of registered cases required by the terms of the audit.

Name of audit / Clinical Outcome Review Programme	% cases submitted
<b>ICHOMs Cataract PROMs</b> Cataract Surgery	<b>1573</b> 100%

The report of the national clinical audit was reviewed by the Clinical Governance Committee and Boston West Hospital intends to take the following actions to improve the quality of healthcare provided.

- To further embed the use of E-PROMs to ensure that all patients feel confident when participating.

Boston West Hospital will review the audits available in 2024/25 and will take part in any that are relevant.

### Local Audits

The reports of 165 local clinical audits from 1<sup>st</sup> April 2023 to 31<sup>st</sup> March 2024 were reviewed by the Clinical Governance Committee. The clinical audit schedule can be found in Appendix 3.

Audits are completed using 'Tendable' (previously 'Perfect Ward'), a bespoke accessible on-line audit system which also automatically prompts the audits from the set schedule for each area. The system allows us to see, at a glance, how the audits completed match the schedule and can instantly review the scores to determine where additional focus and action may be needed. During 2023/24, we have seen a continued high standard of compliance achieved across many of our clinical areas. Some consistently high scoring audits include:

- Department Cleanliness
- Hand Hygiene
- NatSSIPs – Swab Count
- NatSSIPs – Prosthesis
- NatSSIPs – Stop Before You Block
- NatSSIPs – Histology
- LSO and 5 Steps Safer Surgery
- Duty of Candour
- Infection Prevention & Control – Governance and Assurance
- Infection Prevention & Control – Infrastructure
- Infection Prevention & Control – Management of Linen
- Infection Prevention & Control – Surgical Site Infection
- Infection Prevention & Control – Peripheral Venous Cannula Care Bundle
- Medical Records
- Privacy & Dignity
- Patient Journey: Intra-Operative Observation
- Patient Journey: Recovery Observation
- Patient Journey: Safe Transfer of the Patient
- Essential Care: Nutrition & Hydration
- Controlled Drugs
- Pain Management
- Safeguarding
- Safe & Secure

The audit findings are shared with the relevant teams, to congratulate them on effectiveness and success as well as inform about areas for further improvement. Actions taken in response to audit results include:

- Emphasis on collaborative working between the heads of departments and housekeeping lead, to complete departmental cleanliness audits. This allows for better oversight and team working.
- Review of patient hydration and the introduction of “SipTilSend” – a new approach to pre-operative drinking

### 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

Boston West Hospital’s income from 1<sup>st</sup> April 2023 to 31<sup>st</sup> March 2024 was not conditional on achieving quality improvement and innovation goals through the CQUIN payment framework because the National NHS CQUIN framework ceased in 2020/21.

### 2.2.5 Statements from the Care Quality Commission (CQC)

Boston West is registered with the Care Quality Commission and its registration status on 31<sup>st</sup> March 2023 is ‘Without Conditions’. Boston West Hospital has not participated in any special reviews or investigations by the CQC during the reporting period.

### 2.2.6 Statement on Data Quality

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

The annual audit program reviews the quality of our data via clinical systems together with medical and paper records. In 2023/24 our key goal was to:

- **Achieve >98% of patients recorded with an NHS number, in line with National targets for the Independent Sector.**  
Patients are sent registration forms and patient health questionnaires electronically, which allows them to input their NHS number. Upon attendance at the hospital, they will again be asked to disclose their NHS number. A report is pulled which identifies any patient being seen, who does not have an NHS number on file and patients are contacted to obtain this. At present >98% of our patients have an NHS number recorded on their file.

In 2024/25 our areas of focus to improve the capture of patient data are:

- The further embedding of E-PROMs for Cataracts to ensure that all patients feel confident when participating.

### NHS Number and General Medical Practice Code Validity

Boston West 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:

- 99.97% for admitted patient care;
- 99.99% 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 30<sup>th</sup> June 2024.

This information is publicly available on the DSP website at:

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

### Clinical coding error rate

Boston West 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	Primary Diagnosis	Secondary Diagnosis	Primary Procedure	Secondary Procedure
Boston West	95%	94%	98%	98%



## 2.2.7 Stakeholders views on 2023/24 Quality Account

### 2.2.7.1 NHS Lincolnshire ICB Commentary on Boston West Hospital Quality Account 2023/24

Jane Groom  
Ramsay Healthcare  
Boston West Hospital  
Boston West Business Park  
Sleaford Road  
Boston  
Lincolnshire  
PE21 8EG  
Tel: 01733 261717  
Email: [Jane.Groom@ramsayhealth.co.uk](mailto:Jane.Groom@ramsayhealth.co.uk)

**Lincolnshire Integrated Care Board**  
Bridge House  
The Point  
Lions Way  
Sleaford  
NG34 8GG

Tel: 01522 573939  
Email: [licb.office@nhs.net](mailto:licb.office@nhs.net)

Date: 11<sup>th</sup> June 2024

Dear Jane,

NHS Lincolnshire Integrated Care Board (the commissioners) welcomes the opportunity to review and comment on the Ramsay Healthcare; Boston West Hospital (the provider) Draft Quality Report 2023/24.

The commissioner confirms that, to the best of our knowledge, the accuracy of the information presented within the working draft of the quality account submitted, is a true reflection of the quality delivered by the provider. The quality account provides comprehensive information on the quality priorities that the provider has focussed on during the year in relation to patient safety, clinical effectiveness and patient experience.

Throughout 2023/2024, the provider has continued to engage with system partners and the provider investing in their commitment to patient experience, quality care and safety. The provider has made the most of digital technologies for audit purposes and patient experience feedback.

The provider delivered on several quality priorities and has committed to these continuing into the coming year. These include:

- Patient Experience; Friends and Family Test (FFT), the commissioners recognise that the providers scores compare favourably against the national average, with the providers monthly figures showing 97.7% satisfaction for NHS patients at the Boston West Hospital. The provider has zero complaints for 2023/24 at Boston West Hospital and there are clearly defined processes for responding should complaints be raised, which is testament to the providers commitment to delivering a patient focussed service.
- Patient Safety; Boston West Hospital have successfully transitioned to the PSIRF framework during 2023. The commissioners recognise that staff have received specific role-based training to ensure they understand the core values of PSIRF. The commissioners note there have been no serious incidents recorded.
- Infection prevention and control (IPC); The provider to continue working to maintain zero cases of hospital acquired infections and adhering to national guidance. The commissioners acknowledge that there has been no clostridium difficile, methicillin sensitive staphylococcus aureus (MSSA) or methicillin-resistant staphylococcus aureus

Dr Gerry McSorley, Acting ICB Chair and Mr John Turner, Chief Executive  
[www.lincolnshire.icb.nhs.uk](http://www.lincolnshire.icb.nhs.uk)

(MRSA) cases in the hospital and this is due to best practice and management of IPC practices.

The Quality Account has numerous examples of the good work undertaken by the provider over the past year. Service achievements including implementing PSIRF in conjunction with RADAR which is an integrated system that is used as part of the framework Ramsay Health Care UK. RADAR is used to manage a number of different elements of risk, providing a platform for incident reporting, recording risk assessments, communicating national alerts, and monitoring actions required for improvement.

Looking forward to the coming year the commissioners are pleased that the provider is committed to continuing to build on patient experience, patient safety, IPC, clinical effectiveness and continued use of clinical audits. The commissioners acknowledge that the provider is committed to supporting staff via the wellbeing services; staff resilience contributes to the quality of care for patients and enhancing patient and staff experience. The commissioners support the providers stance on staff adopting best practices through the "Leading Our People and Leading Our Leaders training" for all leaders at Boston West Hospital

The commissioners acknowledge that the last Comprehensive Care Quality Commission inspection was in October 2015 and rated as "Good".

The commissioners would like to thank Ramsay Boston West Hospital for the continued collaborative work with the Lincolnshire Health System.

The commissioners look forward to working with Ramsay Boston West Hospital over the coming 12 months to further improve the quality of services available for our patients to deliver better outcomes, and the best possible patient experience.

Yours sincerely



Vanessa Wort  
Associate Chief Nurse



Boston West Hospital submitted the Quality Account 2023/24 to Healthwatch Lincolnshire for review and comment on 28<sup>th</sup> May 2024, in accordance with the 30-day timeline for review ahead of publication. Unfortunately, to the best of our knowledge, Boston West Hospital have not received a response. Upon receipt of a response from Healthwatch Lincolnshire, the Quality Account 2023/24 will be republished.

### [2.2.7.3 Boston West Hospital Patient and Public Involvement Group \(PPIG\) Commentary on Boston West Hospital Quality Account 2023/24](#)

We have been unable to obtain commentary from our Patient and Public Involvement Group (PPIG) this year. We look forward to being able to welcome the PPIG back to Boston West Hospital, hopefully during 2024/25.

# Part 3:

## Review of Quality Performance 2023/2024

### Statements of Quality Delivery

#### Head of Clinical Services, Jane Groom

**Review of Quality Performance 1<sup>st</sup> April 2023 - 31<sup>st</sup> March 2024**

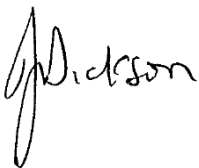
**Statement from Jo Dickson, Chief Clinical and Quality Officer, Ramsay Health Care UK**

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.



**Jo Dickson**

Chief Clinical and Quality Officer

## 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.

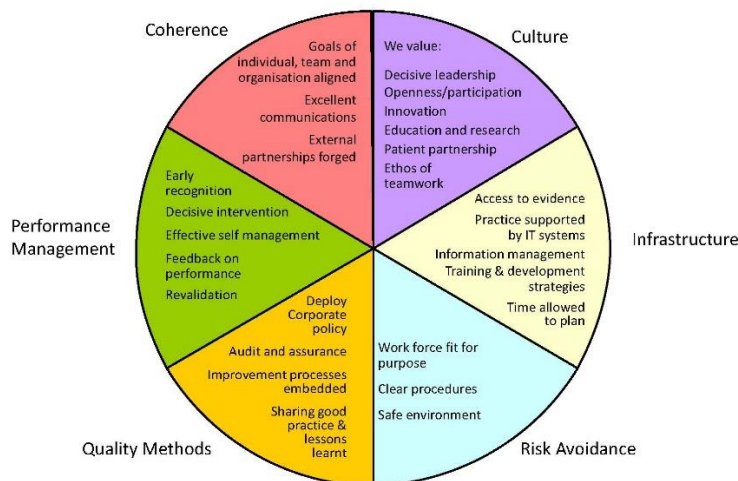
The emphasis is on providing an environment and culture to support continuous clinical quality improvement so that patients receive safe and effective care, clinicians are enabled to provide that care, and the organisation can satisfy itself that we are doing the right things in the right way.

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

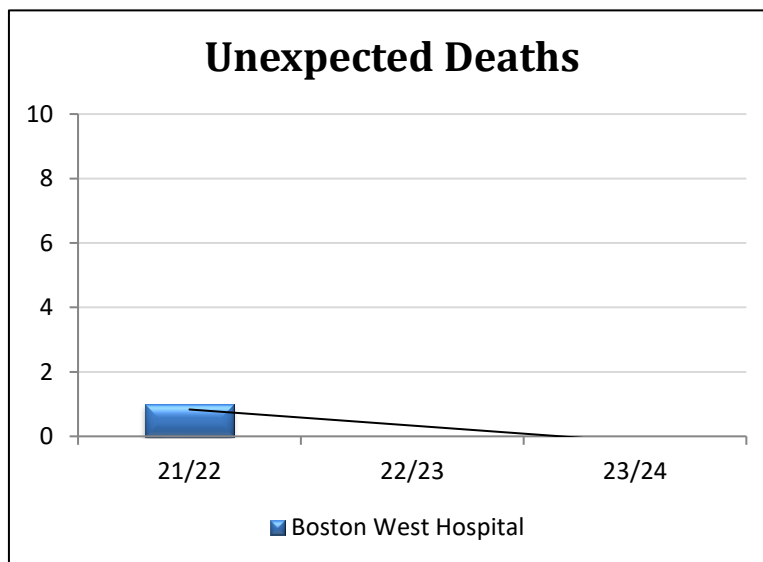
All acute hospitals are required to report against the indicators below as part of the Quality Account. We have only included indicators relevant to the services provided by the hospital.

Data sets are routinely submitted to the NHS Trust or NHS ICB and Non-NHS bodies via NHS Digital, a comparison of the numbers, percentages, values, scores or rates of the NHS Trust and non-NHS bodies (as applicable) are included for each of those listed in the tables below with:

- a. The national average for the same; and
- b. With those NHS Trusts and NHS Foundation Trusts with the highest and lowest of the same, for the reporting period.

### Mortality

The table below shows the Mortality data, the latest data release from NHS Digital. The mortality data is a Summary Hospital-level Mortality Indicator (SHMI). The figures below have been extracted from the most recent data sets available. The data submission is to prevent people from dying prematurely and enhancing quality of life for people with long-term conditions as part of the NHS outcomes framework.



Mortality:	Period	Best		Worst		Average		Period	Boston West	
	Apr20 - Mar 21	RRV	0.6908	RM1	1.201	Average	0.0078	21/22	NVC27	0.0004
Dec21 - Nov22	R1K02	0.2456	RHCH	2.1583	Average	1.0965	22/23	NVC27	0.0000	
Nov22 - Oct23	RQM	0.7215	RXP	1.2065	Average	1.0021	23/24	NVC27	0.0000	

Boston West Hospital considers the data is a true reflection of activity for the following reason.

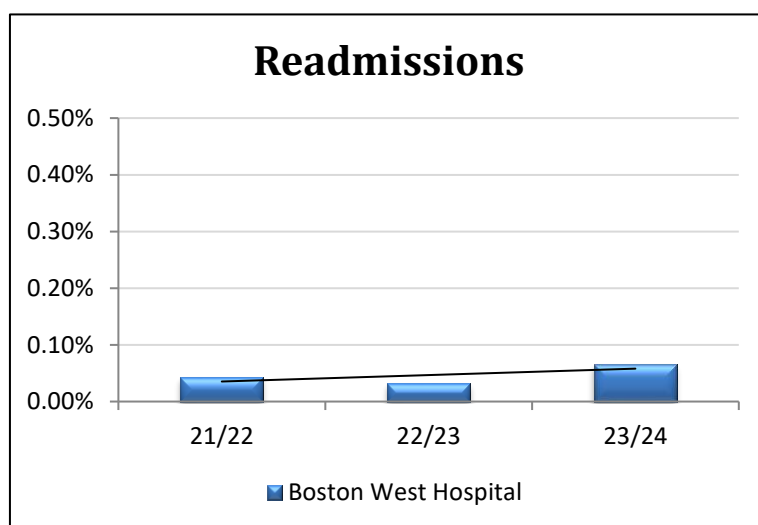
- A death within an elective care setting is rare; as illustrated in the graph above, there were no deaths reported within 30 days of elective surgery in 2023/24.

## National PROMs

Boston West Hospital does not undertake hip and knee joint replacement surgery and therefore do not participate in National NHS PROMs for these procedures.

## Readmissions within 28 days

It is unusual for patients to require readmission to hospital following their procedure, when a patient is readmitted, they are reviewed by the duty doctor and a treatment plan is initiated. The statistics regarding readmissions to Boston West Hospital are reviewed on a quarterly basis at the Medical Advisory Committee and Clinical Governance Committee, the data is also benchmarked against the wider Ramsay group to review our individual hospital performance within group. In percentage terms, the readmission rate relates to 0.07% of our total admissions during 2023/24. Trend analysis has been undertaken on all cases of readmission and there is no particular theme attributed to any one consultant or specialty.



Boston West Hospital considers that this data is as described for the following reasons:

- 1 patient was readmitted for nausea – they were monitored and discharged uneventfully.
- 1 patient was readmitted at another healthcare facility.
- Readmission rates are below the national average – which may be attributed to the good standard of care provided to patients.

Boston West Hospital will continue to provide patients with support with aftercare advice and encourage patients to return where clinically indicated.

## Venous ThromboEmbolism (VTE) Risk Assessment

The VTE assessment domain reviews data to see if patients are being treated and cared for in a safe environment and are being protected from avoidable harm. The data looks at all patients who have had an adequate risk assessment prior to admission in relation to the prevention of post-operative VTE events.

Period	Best		Worst		Average	
Q1 to Q4 18/19	Several	100%	NVCOM	41.6%	Eng	95.6%
Q1 to Q3 19/20	Several	100%	RXL	71.8%	Eng	95.5%

Period	Boston West	
Q1 to Q4 18/19	NVC27	94.5%
Q1 to Q3 19/20	NVC27	95.5%

The data shows Boston West Hospital has performed better than national benchmarking data, with a consistent performance. Analysis of 2019/20 shows an overall compliance percentage of 95.5%. This is the most recent data available, as due to the Covid-19, this submission was paused and there is no published data after Q3 19/20.

The VTE management of patients post operatively has been reviewed via periodic audits during 2023/24, to ensure the best possible care is being delivered to patients. Work is ongoing to ensure all patients have the appropriate review to ensure treatment plans are reviewed and monitored, with any changes to treatment plans noted and documented. Any treatment is provided in accordance with the consultant's post-operative assessment, to mitigate the risk of avoidable harm.

### **C difficile infection**

From the data analysed, Boston West Hospital is amongst the best performing organisations in the country for C-Difficile rates with a 0% rate in C-Difficile cases for 2023/24.

The hospital shows consistent practice in pre assessment procedures. Continued commitment has been shown by the clinical staff to support the local antibiotic policy in line with best practice.

The scores reflect good practice from clinical staff in the ability to isolate patients when required, promoting good infection control processes.

## 3.2 Patient Safety

We are a progressive hospital and focussed on stretching our performance every year and in all performance respects, and certainly regarding our track record for patient safety.

Risks to patient safety come to light through a number of routes including routine audit, complaints, litigation, adverse incident reporting and raising concerns, but more routinely from tracking trends in performance indicators.

Our focus on patient safety has resulted in a marked improvement in a number of key indicators as illustrated in the graphs below.

### 3.2.1 Infection Prevention and Control

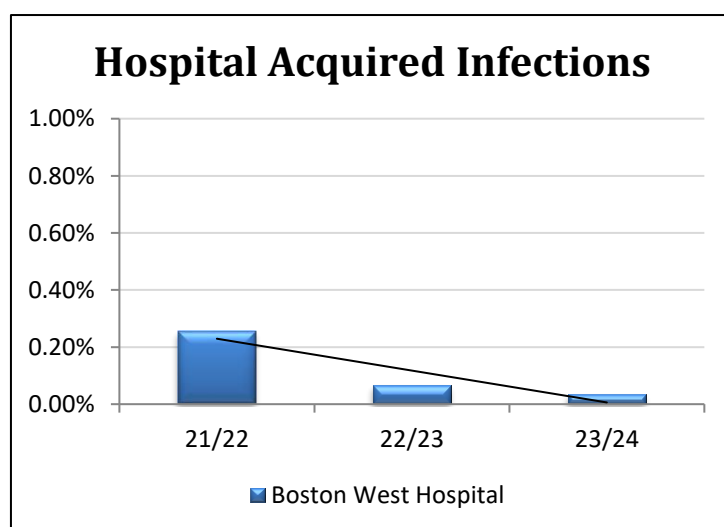
***Boston West Hospital has a very low rate of hospital acquired infection and has had no reported MRSA Bacteraemia in the past 4 years.***

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.

Ramsay participates in mandatory surveillance of surgical site infections for orthopaedic joint surgery, and these are also monitored. Infection Prevention and Control management is very active within our hospital. An annual strategy is developed by a corporate level Infection Prevention and Control (IPC) Committee and group policy is revised and re-deployed every two years, or more often where required. 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.

#### Hospital Acquired Infections

In comparison to the national average the Boston West Hospital are performing significantly better than national benchmarks. At Boston West Hospital, we have a dedicated Infection Control Committee who meet regularly throughout the year to manage our Infection Prevention and Control processes monitor any incidences of infection following any type of surgery. During 2023/24, Boston West Hospital Acquired Infections continued to decrease, as demonstrated in the graph below:



To continue to manage hospital-acquired infection at Boston West Hospital, in 2023/24, our highly experienced Infection Control Lead Nurse progressed the following actions:

- Continued to engage with staff regarding the accurate reporting of non-confirmed wound infections via our incident reporting tool, Radar.
- Continued work on achieving ANTT Silver Accreditation, following on from the great work of achieving Gold Accreditation.
- Ongoing training with dedicated Link Champions within each clinical department, to ensure best practice is being adhered to.
- Regular audits of the environment and clinical practice to ensure high standards of infection prevention continue to be adhered to.

### 3.2.2 Cleanliness and Hospital Hygiene

Assessments of safe healthcare environments include Patient-Led Assessments of the Care Environment (PLACE). This is an annual audit undertaken by all NHS trusts, voluntary, independent and private healthcare providers. The assessment team is made up of staff and patients but must be made up of at least 50% patients/members of the public. Our Patient and Public Involvement Group (PPIG) routinely visit the Hospital site and complete the audit once per year.

Boston West Hospital PPIG met on 15th November 2023 to complete the PLACE audit, please see our scores below:

Boston West Hospital	Cleanliness	Food and Hydration	Organisational Food	Ward Food	Privacy, Dignity and Wellbeing	Condition Appearance and Maintenance	Disability
2023	100.00%	N/A	N/A	N/A	95.83%	100.00%	100.00%
2022	100.00%	N/A	N/A	N/A	96.55%	100.00%	100.00%
National Average 2023	NOT YET PUBLISHED	NOT YET PUBLISHED	NOT YET PUBLISHED	NOT YET PUBLISHED	NOT YET PUBLISHED	NOT YET PUBLISHED	NOT YET PUBLISHED

Results in all areas are higher than the 2022 National and Ramsay Average, although national averages for 2023 have not yet been published. Areas that did not score full marks were:

#### Privacy, Dignity & Wellbeing – Social Spaces & Ward

- Are there area(s)/room(s) designated exclusively for use as family/visiting?
- Is there a day room, social/communal area or playroom on the ward?
- Is there a dedicated garden area for patients?

Although we do not have a designated area with the sole purpose of a patient social space, communal area, playroom or family visiting, Boston West Hospital is a Daycase treatment centre where these facilities would not be utilised.

A discussion took place with the PPIG to feedback the results, advise of actions taken and gain their thoughts for improvements. Boston West Hospital scores demonstrate our commitment to ensuring our Hospital provides a safe, clean, welcoming and friendly environment for our patients.

### 3.2.3 Safety in the Workplace

We seek to ensure our staff have a high safety awareness through an overall risk management programme and this awareness then naturally extends to safeguarding patient safety. Our record in workplace safety supports the effectiveness of our safety training and local safety initiatives.

Effective and ongoing communication of key safety messages is important in healthcare. Multiple updates relating to drugs and equipment are received every month and these are sent in a timely way via an electronic system called the Ramsay Central Alert System (CAS). Safety alerts, medicine / device recalls and new and revised policies are cascaded across Boston West Hospital to ensure we keep up to date with all safety matters.

During 2023/24, we completed a number of safety initiatives:

- Continued the training program delivered to staff at both mandatory training and induction regarding the incident reporting system, Radar.
- Ongoing sharing of lessons learned sessions with the clinical teams, sharing learning from adverse events.
- Regular meetings undertaken by the Hospital Health and Safety Committee to ensure robust systems are in place for the monitoring and review of safety issues.
- Multiple updates to key staff relating to drugs/equipment/policy changes.
- Incident Reporting campaign to provide ongoing support and education regarding the responsibilities staff must report incidents.
- Ongoing training with all staff surrounding good principles surrounding the safe manual handling of objects and patients.
- Annual and regular updating of department PUWER registers to ensure the safe use of equipment at work.



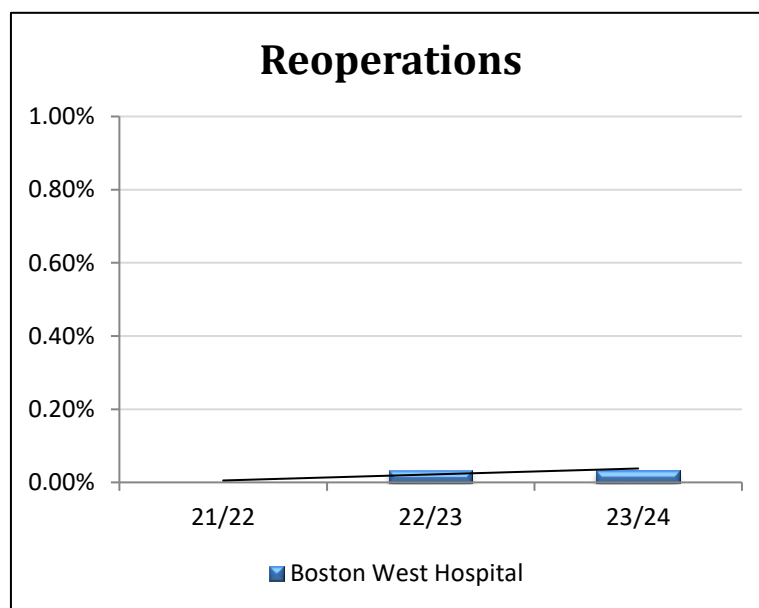
## 3.3 Clinical Effectiveness

Boston West 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.

The National Institute of Clinical Excellence (NICE) guidance information is reviewed locally on a quarterly basis at the Medical Advisory Committee, to ensure clinicians are aware of the latest national guidance to provide safe and effective care and treatment.

### 3.3.1 Return to Theatre

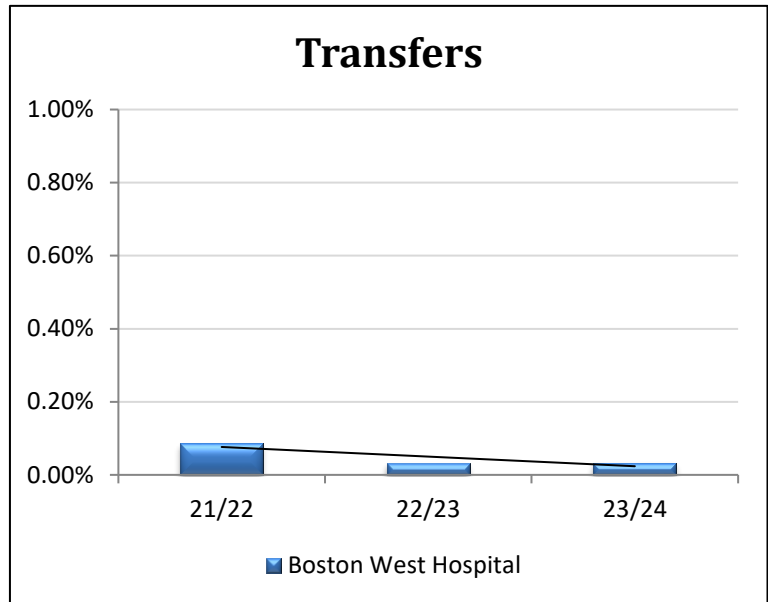
Ramsay is treating significantly higher numbers of patients every year as our services grow. The majority of our patients undergo planned surgical procedures and so monitoring numbers of patients that require a return to theatre for supplementary treatment is an important measure. Every surgical intervention 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.



The data has been analysed for reoperation against total admissions for the period, which sets the Boston West Hospital readmission rate at 0.03%, significantly below the national average and is the same rate as the previous reporting period.

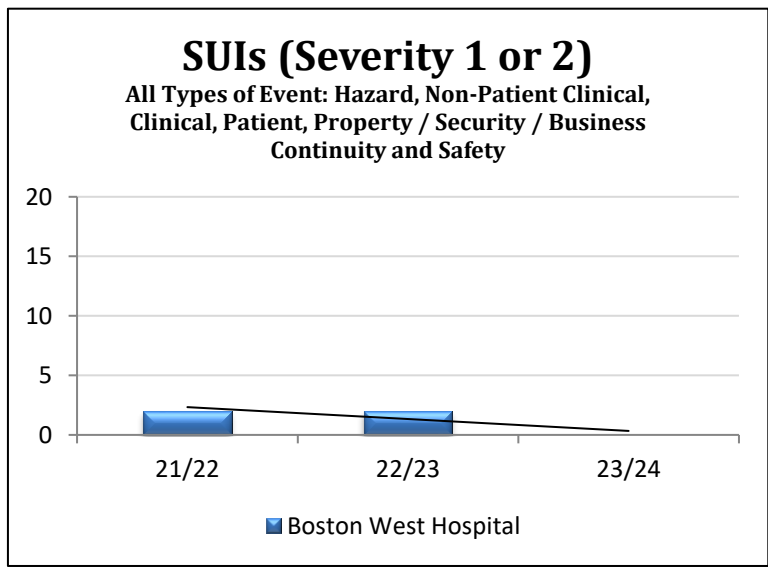
### External Transfers

Transfers to other providers of care can occur where it is deemed more appropriate for the patient's care to continue at a facility that regularly treats patients with more complex care needs. In 2023/24, the Boston West Hospital transfer remained the same as 2022/23 data and continues to sit well below the national average.



### Significant Clinical Incidents

Boston West Hospital has a governance process which monitors significant clinical events. During the period 2023/24 we did not report any serious significant events (severe harm). All serious incidents that occur are fully investigated and root cause analysis reviews are undertaken, to ensure that the appropriate clinical actions have been taken in each case and to identify any actions that need to be taken, to inform sharing reflective lessons learned and improve the quality of care and service we deliver.



### 3.3.2 Learning from Deaths

Boston West Hospital completes an annual summary report on how investigations and learnings from deaths have informed the hospital's quality improvement plans, which includes the number of patient deaths that have occurred during a reporting period. Boston West Hospital did not report any deaths following elective surgery in 2023/24.

### 3.3.3 Staff Who Speak up

In 2018, Ramsay UK 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. The programme, which is being delivered in partnership with the Cognitive Institute, reinforces Ramsay's commitment to providing outstanding healthcare to our patients and safeguarding our staff against unsafe practice. The 'Safety C.O.D.E.' enables staff to break out of traditional models of healthcare hierarchy in the workplace, to challenge senior colleagues if they feel practice or behaviour is unsafe or inappropriate. This has already resulted in an environment of heightened team working, accountability and communication to produce high quality care, patient centred in the best interests of the patient.

Ramsay UK has an exceptionally robust integrated governance approach to clinical care and safety, and continually measures performance and outcomes against internal and external benchmarks. However, following a CQC report in 2016 with an 'inadequate' rating at another Ramsay site, coupled with whistleblower reports and internal provider reviews at other Ramsay sites, evidence indicated that some staff may not be happy speaking up and identify risk and potentially poor practice in colleagues. Ramsay reviewed this and it appeared there was a potential issue in healthcare globally. In response to this, Ramsay introduced the 'Speaking Up for Safety' programme.

The Safety C.O.D.E. (which stands for Check, Option, Demand, Elevate) is a toolkit which consists of these four escalation steps for an employee to take if they feel something is unsafe. Sponsored by the Executive Board, the hospital Senior Leadership Team oversee the roll out and integration of the programme and training across all our Hospitals within Ramsay. The programme is employee led, with staff delivering the training to their colleagues, supporting the process for adoption of the Safety C.O.D.E through peer-to-peer communication. Training compliance for staff and consultants is monitored corporately; the company benchmark is 85%. Currently, Boston West Hospital compliance sits at 85%.

Since the programme was introduced serious incidents, transfers out and near misses related to patient safety have fallen; and lessons learnt are discussed more freely and shared across the organisation weekly. The programme is part of an ongoing transformational process to be embedded into our workplace and reinforces a culture of safety and transparency for our teams to operate within, and our patients to feel confident in. The tools the Safety C.O.D.E. uses not only provide a framework for process, but they open a space of psychological safety where employees feel confident to speak up to more senior colleagues without fear of retribution.

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

## Mechanisms of Patient Feedback

This data set looks at the positive experiences of care provided by Boston West Hospital.



Feedback from our patients is extremely important to us and is vital in the continued improvement of our care and service delivery; Boston West Hospital has 5 mechanisms of patient feedback:

- The Friends and Family Test
- NHS Choices
- Complaints
- We Value Your Opinion card completion
- 3<sup>rd</sup> Party Data Collection of Patient Feedback (Patient Satisfaction Surveys) – Cemplicity

### The Friends and Family Test

The NHS domain for the Friends and Family test aims to canvas the opinion of service users, ensuring patients have a positive experience of care. We are pleased to see consistently good results but continue to promote this feedback mechanisms to improve the volume of respondents.

### NHS Choices

Patients also leave feedback about Boston West Hospital on the NHS Choices website; when feedback is input, we are directly notified by email. Positive comments are shared with all staff via email to demonstrate appreciation for their hard work. Negative comments are investigated, and in response, we take positive steps to prevent reoccurrence. No negative NHS Choices comments have been received in 2023/24.

### Complaints

Boston West Hospital reported no complaints during 2023/24 which showcases an implicit but important message about overall satisfaction. This also demonstrates a desire, by the staff to take immediate action and resolving issues as they arise. This is a remarkable situation and testament to our staff who have a desire to create the best possible experience for patients.

In the event complaints are made, we follow a thorough process to review and respond to the issues raised. We discuss outcomes at weekly complaint meetings held, between the Quality Improvement team and the Heads of Department, thus providing a holistic and timely completion of the investigation. Complaint themes and actions are discussed at departmental meetings, core level management meetings and at Clinical Governance and Medical Advisory Committees, as well as being reported to our corporate team.

### **We Value Your Opinion Cards**

“We Value Your Opinion” cards are completed by patients following their procedure and allows them to comment on their stay at/or following discharge. The patient completes a questionnaire, allowing free text for any comments or feedback. This feedback is reviewed by the Senior Leadership Team and any areas identified for improvement are considered. Feedback has been overwhelmingly positive this year, with the top trending positive theme; ‘the care and consideration offered by all staff’. A very small number of negative comments relate to admin issues and occasional unexpected extended waiting times. Regardless of this, the scores and feedback are exceptionally good, showing average satisfaction scores exceeding 99% and in 6 out of the 12 months, 100% was achieved, which is a score maintained from the last reporting period.

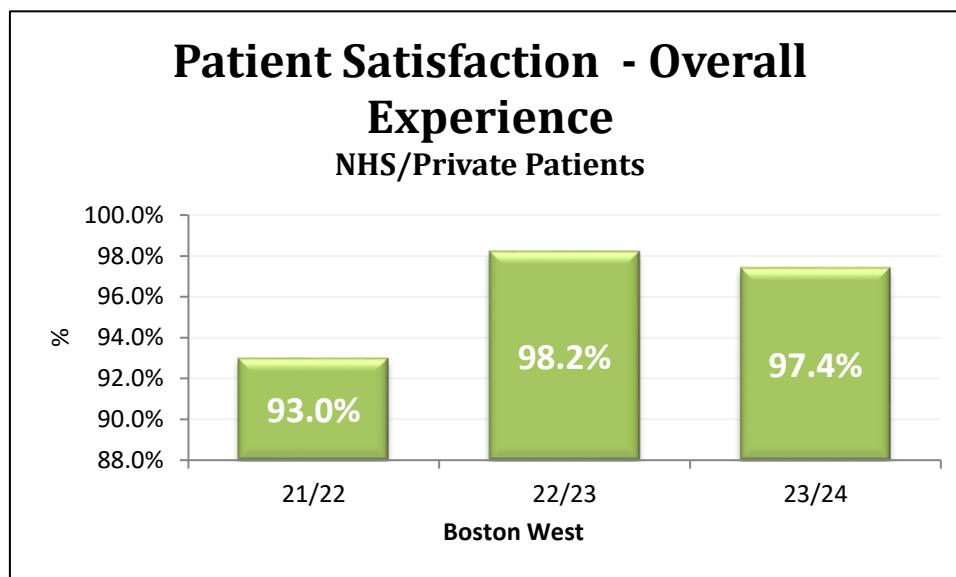
### **Patient Satisfaction Surveys (Cemplicity)**

For our 3<sup>rd</sup> Party Data Collection of Patient Feedback, we utilise an external organisation, ‘Cemplicity’, to gather unbiased data from patients about their experience and satisfaction with the services they have received. We conclude from the volume of responses and content of comments that The Boston West Hospital achieve what is classified as world class care.

Feedback data is received electronically. Patients consent to deliver their feedback during their visit to Ramsay Hospitals and provide us with an email address; within 30 days of that visit, they will receive an invitation and a link to a short survey about their experience. The data set is then later released to local sites where it is reviewed and analysed to inform areas which require improvement and drive focussed actions. We have successfully campaigned to increase response rates. We engage positively with all patients seeking consent to contact and by promoting the value of giving feedback to improve what we do and how we do it.

Our analysis of this feedback has identified a high Net Promotor Score (NPS) exceeding 84% Underpinning confidence in general, overall customer service. Dignity and Respect also shows a strong positive result of 100%. An overall improvement from past audits, we appreciate this is an excellent result. Other areas; Friends and Family, Patient Involvement in decisions, privacy, are emphatically positive.

## Overall Patient Satisfaction



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

All positive feedback is relayed to the relevant staff reinforcing 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 commended accordingly.

Negative feedback or suggestions for improvement are also fed back to the relevant staff using direct feedback. Every member of staff is aware of our complaints procedures which are deployed in the event our patients are unhappy with any aspect of their care.

Patient experiences feature as regular agenda items on Local Governance Committees for discussion, trend analysis and further action where necessary. Escalation and further reporting to Ramsay Corporate and Department of Health (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.
- Friends and family questions asked on patient discharge.
- 'We value your opinion' leaflet.
- Verbal feedback to Ramsay staff - including Consultants, Head 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.

We will continue to listen and act upon feedback and look for every opportunity to continually improve the satisfaction scores. Accepting our statistics show we exceed the national average, we are eager to improve, to reflect the contribution made by our team. Patient feedback, is an essential tool, enabling the hospital to make improvements to the services offered to patients. We continually review all feedback mechanisms and proactively contact patients should they wish to directly discuss any aspect of their care or treatment at this Hospital.



The Boston West Hospital's aim is to continue with our commitment to patient outcomes and improving the patient experience across all hospital interactions. Our world class promotor score provides an excellent, positive foundation on which we can build.

## 3.5 Boston West Hospital Case Studies

### Case Study 1

#### Deborah Howman - Outpatients Lead

Debbie started her journey with Ramsay Healthcare back in 2021, following a career in the NHS working on a busy daycase unit 8 years prior. Her experience in the NHS allowed her to develop her extensive experience surrounding daycase admissions which she enjoyed immensely. Starting initially as a part-time Registered Nurse (RN) at Boston West Hospital, an opportunity quickly arose for Debbie to take on the role of Outpatient Lead on an unofficial basis. She took this challenge up without hesitation!

Her development into her current position of Outpatient Lead was inevitable having excelled on many occasions and having gained invaluable expertise whilst working at Boston West Hospital. Debbie is praised by many of her fellow colleagues for her outstanding efforts and commitment to ensuring excellence and standards are upheld. She states, *"I wouldn't swap my job for the world; I am really proud of my team"*. Debbie has recently obtained her Advanced Life Support Certification and demonstrates her willingness to learn and develop – she was very nervous before her assessment and is immensely proud of her achievement, as are everyone else at the Boston West Hospital.

Debbie comments that she is proud of all her staff members as they have not only learnt one job but gained experience in a multitude of areas. Holding close working relationships with other departments has allowed them to provide quality care across all departments due to their exceptional communication.

Everyone at the Boston west Hospital is extremely proud to have Debbie leading the way in the Outpatient department!



# Case Study 2

## Aseptic Non-Touch Technique Accreditation (ANTT)

ANTT is a framework that provides healthcare professional with a logical and standardised process that promotes safe and efficient aseptic techniques. ANTT sets out to:

- Improve patient safety by supporting effective education, competency assessment and safe clinical practice.
- Standardise aseptic technique across organisations and countries and reduces variability in practice.
- Provides a foundation for the effective clinical governance of aseptic technique.
- Helps protect and reassure patients by providing more consistent standardised aseptic technique.

A focus area during 2023/24 was for the Boston West Hospital to achieve Bronze accreditation. Our Infection Prevention & Control Nurse worked closely with staff and clinical Heads of Departments to carry out audits and competencies and was on hand to offer advice and guidance where needed to educate staff.

The criteria for the Bronze accreditation included having 30% percent of staff competency assessed and 50 audits completed in a 12 months period. In October 2023, the Boston West Hospital was awarded the prestigious ANTT Bronze Accreditation.

The work continues to obtain Silver Accreditation in 2024/25, and we are supremely proud of the progress that has been made in 2023/24.



# Services covered by this Quality Account

- Endo Venous Laser Treatment (EVLT)
- Endoscopy
- Gastroenterology
- General Surgery
- Gynaecology
- Ophthalmology & YAG Laser
- Orthopaedic Surgery
- Pain Management Injections
- Urology

# Boston West Hospital Statement of Purpose

## Boston West Hospital



Boston West Hospital has day case facilities. One theatre incorporating endoscopy. Patients requiring level 2 care are treated and cared for by a well-trained team of staff, in a dedicated area prior to transfer to a critical care facility. Boston West Hospital provides care and treatment for patients 18 years and over. On site facilities include Physiotherapy. The hospital places a high level of importance on effective communication with patients. Consultants will fully explain treatment at the time of consultation and there is a range of patient information leaflets to support this process.

Location: Boston West Hospital, West Business Park, Sleaford Road, Sleaford Road, Boston PE21 8EG

Tel: 01205 591860

Registered Manager: Carl Cottam

carl.cottam@ramsayhealth.co.uk

### Regulated Activities – Boston West hospital

	Services Provided	Peoples Needs Met for:
<b>Treatment of Disease, Disorder Or Injury</b>	Physiotherapy, Cosmetics, Gastroenterology, General Surgery, Medico Legal, Ophthalmology, Orthopaedics, Gynaecology, Urology, Pain management	All adults 18 yrs and over
<b>Surgical Procedures</b>	Ambulatory and Day Surgery only: Gastroenterology, General surgery, Endo venous laser treatment (EVL), Endoscopy, Gastroenterology, General Surgery, Gynaecology, Ophthalmology & YAG Laser, Orthopaedic surgery, Urology, Pain management injections.	All adults excluding: <ul style="list-style-type: none"> <li>• Patients with blood disorders (haemophilia, sickle cell, thalassaemia)</li> <li>• Patients on renal dialysis</li> <li>• Patients with history of malignant hyperpyrexia</li> <li>• Planned surgery patients with positive MRSA screen are deferred until negative.</li> <li>• Patients who are likely to need ventilatory support post operatively.</li> <li>• Patients who are above a stable ASA 3</li> <li>• Any patient who will require planned admission to ITU post-surgery.</li> <li>• 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)</li> <li>• MI in last 6 months</li> <li>• Angina classification 3/4 (limitations on normal activity e.g., 1 flight of stairs or angina at rest)</li> <li>• CVA in last 6 months</li> <li>• Sleep Apnoea requiring CPAP.</li> </ul> <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. All patients must meet social/clinical criteria for day surgery.</p>
<b>Diagnostic and screening</b>	GI physiology, Image Intensifier, , Phlebotomy, Ultrasound, Urinary Screening and Specimen collection.	All adults 18 yrs and over
<b>Family Planning Services</b>	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 3

# Clinical Audit Programme 2023/24

Findings from the baseline audits will determine the hospital local audit programme to be developed for the remainder of the year.

### Clinical Audit Programme

The Clinical Audit programme for Ramsay Health Care UK runs from July to the following June each year, 2020 saw the migration of audit activity from the traditional excel programme to an 'app' base programme initially called Perfect Ward. In 2022 Perfect Ward rebranded to "Tendable." Staff access the app through iOS devices and ease of use has much improved. Tailoring of individual audits is an ongoing process and improved reporting of audit activity has been of immediate benefit.

Audit	Department Allocation / Ownership (may be delegated)	Frequency (subject to review)
Hand Hygiene observation (5 moments)	Ward, Theatres, Radiology, Physio, Outpatients, Amb Care	Monthly
Surgical Site Infection	Theatres	October, April
IPC Governance and Assurance	IPC	July
IPC Environmental infrastructure	IPC	August, February
IPC Management of Linen	IPC	August February (as required)
Sharps	IPC	August, December, April
50 Steps Cleaning	Ward, Theatres, Radiology, Physio, Outpatients, Amb Care, Pharmacy	Monthly
50 Steps Cleaning (FR5-6)	SLT	July, January, August
Peripheral Venous Cannula Care Bundle	HoCS	July to September
Urinary Catheterisation Bundle	HoCS	July to September
Patient Journey: Safe Transfer of the Patient	Amb Care	August, February
Patient Journey: Intraoperative Observation	Theatres	August/September, February/March
Patient Journey: Recovery Observation	Theatres	October/November, April/May
LSO and 5 Steps Safer Surgery	Theatres, Outpatients	July/August, January/February
NatSSIPs Stop Before You Block	Theatres	September/October, March/April



NatSSIPs Prosthesis	Theatres	November/December, May/June
NatSSIPs Swab Count	Theatres	July/August, January/February
NatSSIPs Instruments	Theatres, Outpatients	September/October, March/April
NatSSIPs Histology	Theatres, Outpatients	November/December, May/June
Complaints	SLT	November
Duty of Candour	SLT	January
Practicing Privileges - Non-consultant	HoCS	October
Practicing Privileges - Consultants	HoCS	July, January
Privacy & Dignity	Ward	May/June, November/December
Essential Care: Falls Prevention	HoCS	September/October
Essential Care: Nutrition & Hydration	HoCS	September/October
Medical Records	Theatres, Ward, Outpatients/Pre-Op Assess, Radiology	July/August <i>November/December (if required)</i>
Medical Records - NEWS2	Amb Care	October, February, June
Medical Records - VTE	Amb Care	July, November, March
Medical Records - Patient Consent	HoCS	July, December, April
Medical Records – MDT Compliance	HoCS	December
Safe & Secure	Pharmacy	August, February
Prescribing	Pharmacy	October, April
Medicines Reconciliation	Pharmacy	July, October, January, April
Controlled Drugs	Pharmacy	September, December, March, June
Pain Management	Pharmacy	July, October, January, April
Medicines Optimisation	Pharmacy	November
Departmental Governance	Amb Care, Theatres, Outpatients	October to December
Safeguarding	SLT	July
Decontamination - Endoscopy	Decontamination (Corporate)	As required

<b>Occupational Delivery On-Site</b>	HoCS	November to January
<b>Managing Health Risks On-Site</b>	Corporate OH	As required

## Appendix 4

# Glossary of Abbreviations

ACCP	American College of Clinical Pharmacology
AIM	Acute Illness Management
ALS	Advanced Life Support
CAS	Central Alert System
CQC	Care Quality Commission
CQUIN	Commissioning for Quality and Innovation
COVID-19	An infectious disease caused by the SARS-CoV-2 virus
DDA	Disability Discrimination Audit
DH	Department of Health
EVLt	Endovenous Laser Treatment
GP	General Practitioner
GRS	Global Rating Scale
HCA	Health Care Assistant
HPD	Hospital Patient Days
H&S	Health and Safety
HOCS	Head of Clinical Services
IHAS	Independent Healthcare Advisory Services
ICB	Integrated Care Board
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
NVC27	Code for Boston West Hospital used on the data information websites
ODP	Operating Department Practitioner
OSC	Overview and Scrutiny Committee
PLACE	Patient-Led Assessments of the Care Environment
PPE	Personal Protective Equipment
PROM	Patient Reported Outcome Measures
RIMS	Risk Information Management System
SUS	Secondary Uses Service
SAC	Standard Acute Contract
SLT	Senior Leadership Team
STF	Slips, Trips and Falls
SUFS	Speak Up For Safety
SUI	Serious Untoward Incident
TLF	The Leadership Factor
ULHT	United Lincolnshire Hospitals Trust
VTE	Venous Thromboembolism



# Boston West 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.

For further information, please contact:

**01205 591860**

Boston West Hospital address:

Boston West Hospital  
Boston West Business Park  
Sleaford Road  
Boston  
Lincolnshire  
PE21 8EG

Boston West Hospital website:

**[www.bostonwesthospital.co.uk](http://www.bostonwesthospital.co.uk)**