## **Boston West** Hospital

Quality Account 2024/25



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## 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

Since its establishment in 1964 in Sydney, Australia, Ramsay Health Care has grown into one of the world's longest established and most respected healthcare providers. We are incredibly proud to be part of this global network, renowned for delivering safe, high-quality, patient-centred care that consistently leads to positive outcomes. In the UK, this legacy of excellence continues to resonate with both our patients and healthcare partners.

Patients choose Ramsay because they trust us to maintain the highest standards of clinical quality and provide exceptional care. This trust is reflected in our consistently high patient feedback scores and achievements, such as JAG accreditation held for all endoscopy services that have been inspected by the Royal College of Physicians Joint Advisory Group (JAG). Furthermore, 97% of our hospitals have been rated as 'Good' by the Care Quality Commission, with several recent inspections reaffirming our commitment to quality.

We are particularly proud of the Ramsay mobile diagnostic service, which has been awarded the prestigious Quality Standard for Imaging (QSI) Quality Mark. Developed by The Royal College of Radiologists (RCR) and The College of Radiographers (CoR), this mark sets national quality criteria for imaging services and encourages continuous improvement. We are honoured to be the first mobile service to receive this recognition, with our assessment highlighting excellence in MRI safety, IR(ME)R procedures, and equipment management.

Earlier this year, we launched our updated Social Impact Report, in partnership with The Purpose Coalition. This report highlights the significant strides we've made in driving positive change within the communities we serve. We remain focused on our Purpose Goals, including Positive Destinations Post-16+, Fair Career Progression, Good Health and Wellbeing, and Building Sustainable Communities. A key addition this year is our new goal, 'Working in Partnership,' which highlights our ongoing collaboration with the NHS. With waiting lists at record levels, Ramsay UK is proud to play a crucial role in supporting the NHS, reducing waiting times, and addressing health inequalities across the country.

At Ramsay, we believe that clinical excellence is a shared responsibility. Our organisational culture ensures that the patient is at the centre of everything we do. We recognise that our people—our colleagues and doctors—are key to our success, and teamwork is the foundation of meeting the high expectations of our patients.

I am incredibly proud of Ramsay Health Care's longstanding reputation for delivering safe, quality care. It is with great pleasure that we share our results with you and look forward to continuing to make a positive impact.

**Nick Costa** 

### 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 <u>carl.cottam@ramsayhealth.co.uk</u> 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 21 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) investigation, with a second theatre build currently underway at the Boston West Hospital, to further expand the services we can provide. 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 21 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 2024 and March 2025, we admitted a total of 4062 patients, of which approximately 95.1% were NHS patients. On average, 270 patients per week were seen in our outpatient department by one of our 34 consultants. We employ 10 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) Silver Accreditation.





## Part 2

## 2.1 Quality Priorities for 2025/26

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 2024/25 (looking back)

#### **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 supported 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 we will continue to offer patient centred care to all our patients and be responsive to feedback and events that occur.

#### How did we do? Initiative successful

PSIRF continues to be an embedded part of the culture and practice at Boston West Hospital. The PSIRF has allowed us to look at incidents that arise with a holistic approach and ensure that lessons can be learned and actioned. This ultimately ensures patient, and staff safety is at the forefront of all that we do.

#### **Patient Experience**

#### **Cemplicity – Net Promoter Score**

Cemplicity is an external company that has been utilised by the NHS and private sector, inclusive of Ramsay Health Care, to aid in the collating and analysis of patient feedback and outcomes. 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.

#### How did we do? Initiative successful

Boston West consistently scores highly on patient satisfaction and routinely achieves an NPS score in the 90's. This is reflective of the collaborative working within all departments to ensure that patients are well taken care of during their time with us and beyond. We look forward to continuing this trend into 2025/26.

#### **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, took the decision to roll this out at Boston West Hospital. Following engagement with the Anaesthetic Consultant body and with full support, SipTilSend was implemented on 4th December 2023 at both sites.

#### How did we do? Initiative successful

SipTilSend has been successfully implemented with its purpose to 'end presurgical oral fluid deprivation'. There is a dedicated member of staff within the ward who provides information to and oversees the process for all patients ensuring that the process is adhered to.



#### **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.

#### How did we do? Initiative successful

The majority of the consultant body now use T-Pro as part of their embedded practice, which ensures that clinic letters are available on the electronic patient record system without delay.

#### 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.



How did we do? Initiative successful

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.

All staff have successfully gained their Leadership & Management qualifications. We are also delighted that 2 of the members of staff who attended, have now been promoted into the Senior Leadership Team. At Boston West Hospital we are committed to investing in our people and we look forward to carrying this into 2025/26.

#### 2.1.2 Clinical Priorities for 2025/26 (looking forward)

#### **Patient Safety**

#### **Getting it Right First Time (GIRFT)**

Ramsay has commissioned the Getting It Right First Time (GIRFT) programme, hosted by the Royal National Orthopaedic Hospital (RNOH), to review its Orthopaedic and Spinal Services. GIRFT is a clinicianled, data-focused initiative designed to enhance healthcare quality and patient outcomes by identifying unnecessary variations in clinical procedures and recognising best practice.

Boston West Hospital have been included as part of this review and any recommendations will be reviewed and implemented during 2025/26.

#### **ANTT Gold Accreditation**

After the success of achieving ANTT Silver Accreditation during 2024/25, we strive to achieve Gold Accreditation during 2025/26. To achieve Gold status all relevant staff must be assessed, and we will be subject to an external assessment by the ANTT assessors. Our dedicated IPC Lead Nurse will spear head the efforts and we hope to achieve this prestigious award within the next year.

#### **Patient Experience**

#### **Boston West Hospital – Expansion**

Boston West Hospital continues to grow, and we are seeing a wide range of patients for different specialities from our vast geographical surroundings. It is important to us to serve the community and ensure that patients can access high quality healthcare. Building work to increase the size of the hospital is anticipated to finish in the latter part of 2025. Boston West will increase to 2 operating theatres and expand Outpatient facilities by increasing the number of consulting rooms. The addition of more consulting rooms will allow more patients to start their pathway at Boston West Hospital, and access surgery at the Fitzwilliam Hospital, that is not undertaken at Boston West Hospital. A light and bright reception area has been included in the upgrade to the facility which patients are already using. Staff have also benefitted from new areas in which to and rest during breaks.

#### **Clinical Effectiveness**

**Cemplicity** The Cemplicity system can be utilised in many different ways and allows for detailed data analysis. One mechanism that is available to us is the collation and collection of our Patient Reported Outcome Measures (PROM). When patients complete their pre- and post-operative PROM this is uploaded into the Cemplicity system. When a patient reports a worsened outcome post-procedure, an alert is sent to the Senior Managers and Clinical Team for review. Our Quality Improvement Team will review the response and inform the Consultant so that the patient can be rebooked into clinic. This ensures that patients receive the appropriate care as and when they need it. Looking ahead to 2025/6, we will continue to utilise this system for all our patient PROMs that have since moved on to the e-PROM model.

# cemplicity°

# 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 2024/25, 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 of these NHS services.

The income generated by the NHS services reviewed between 1<sup>st</sup> April 2024 to 31<sup>st</sup> March 2025 represents 92% 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 2024/25, the indicators on the scorecard that affect patient safety and quality were:

#### **Human Resources**

In the period 2024/25, agency costs represent a total of 2% of our total staff cost. Long term sickness, maternity leave, new starter induction and training contributed to lost hours, which currently sits at 13.5%, which is broadly the same as the last reporting period.

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 13.14. The Theatre and Outpatient department has a good balance of registered Nurses and Healthcare Assistants. Boston West Hospital have:

- 1 employed Anaesthetist
- 10 contracted Registered Nurses
- 6 contracted Health Care Assistants
- 1 contracted Operating Departmental Practitioners

During 2023/24, staff turnover at Boston West Hospital saw an increase from 3.8% to 7.1%. Levels of sickness again saw a decrease in 2024/25 to 1.1%. 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 77.8%, with plans in place to complete the remaining staff. No RIDDOR events were reported at the Boston West Hospital during 2024/25.

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 2025, our overall mandatory training compliance was 91.4%. 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**

In September 2024, Ramsay Health Care UK carried out a group independent colleague engagement survey, which Boston West Hospital participated in. The Survey is completed annually and is called "One Voice". It gives all staff members the opportunity to complete an electronic survey, rating different categories either unfavourable, neutral or favourable as a percentage.

The Staff Engagement Survey results for the Boston West Hospital were published in October 2024 and showed that 90% of contracted staff participated and we achieved an Engagement score of 86%. Staff feedback was favourable which is excellent.

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.
- Introduction of recognition awards for staff who are seen to go above and beyond.
- Ramsay are supporting their leaders to adopt best practices through the "Leading Our People and Leading Our Leaders training". Plus, the addition of a new course "Stepping into Leadership" for those who are new to management.
- Work continues ensuring banding for staff is in line with national targets majority of roles have now been brought in line with national pay grades.
- 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 2025/26.

#### **Patient Services**

Boston West Hospital reported 3 complaints during 2024/25. 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 2024/25, Boston West Hospital commenced with the building of a second theatre. The intention is to facilitate the expansion of services, which will further benefit the local community. Completion of building work is scheduled for the end of July 2025.

#### 2.2.2 Participation in Clinical Audit

During 1<sup>st</sup> April 2024 to 31<sup>st</sup> March 2025, Boston West Hospital participated in 2 national clinical audits. 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<br>Review Programme | % cases submitted |
|--|-------------------|
| ICHOMs Cataract PROMs                                | 1698              |
| Cataract Surgery                                     | 100%              |
| Elective surgery - Private PROMs Programme           | 1715              |
|  | 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 continue the use of e-PROMs to ensure that all patients feel confident when participating.

Boston West Hospital will review the audits available in 2025/26 and will take part in any that are relevant.

#### **Local Audits**

The reports of 244 local clinical audits from 1<sup>st</sup> April 2024 to 31<sup>st</sup> March 2025 with an average score of 97.8%. All audit results 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 completed audits match the schedule and can instantly review the scores to determine where additional focus and action may be needed. During 2024/25, 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
- Infection Prevention & Control Governance and Assurance
- Infection Prevention & Control Infrastructure
- Infection Prevention & Control Surgical Site Infection
- Infection Prevention & Control Peripheral Venous Cannula Care Bundle
- Medical Records
- 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
- Sharps

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 teamwork.
- Implementation of a new maintenance QR code for any maintenance issues to be logged centrally. This allows for the timely completion of any urgent works needed.
- Review of patient medication and pain management undertaken by our Pharmacy Manager, to ensure patients are administered the most appropriate medication on discharge.

#### 2.2.3 Participation in Research

There were no patients recruited during 2024/25 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 2024 to 31<sup>st</sup> March 2025 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 2025 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 2024/25 our key goal was to:

- Following the release of a new version of the Breast and Cosmetic Implant Register (BCIR), staff will continue to ensure embedded practice is adhered to and data is uploaded.

100% of applicable procedures are now being submitted by the theatre team onto the BCIR. This allows for more effective data analysis both locally and nationally.

In 2025/26 our areas of focus to improve the capture of patient data are:

 Staff will continue to work to capture relevant patients and support the completion of the Cataract and Carpal Tunnel e-PROMs to ensure that we are able to closely monitor any concerns following surgery.

#### NHS Number and General Medical Practice Code Validity

Boston West Hospital submitted records during 2024/25 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:

- 99.95% 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 2024/2025 submission is due by 30th June 2025.

This information is publicly available on the DSP website at: <a href="https://www.dsptoolkit.nhs.uk/">https://www.dsptoolkit.nhs.uk/</a>

#### **Clinical coding error rate**

Boston West Hospital was subject to the Payment by Results clinical coding audit during 2024/25 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   | Secondary | Primary   | Secondary |
|---------------|-----------|-----------|-----------|-----------|
|               | Diagnosis | Diagnosis | Procedure | Procedure |
| Boston West   | 95%       | 94%       | 98%       | 98%       |

#### 2.2.7 Stakeholders views on 2024/25 Quality Account

#### 2.2.7.1 NHS Lincolnshire ICB Commentary on Boston West Hospital Quality Account 2024/25





#### Lincolnshire Integrated Care Board

Julie Ikeda Quality Improvement Manager Boston West Hospital Ramsay Healthcare UK Bridge House The Point Lions Way Sleaford NG34 8GG

Tel: 01522 573939 Email: licb.office@nhs.net

11 June 2025

Dear Julie,

NHS Lincolnshire Integrated Care Board (the commissioners) welcomes the opportunity to review and comment on the draft Boston West Hospital Quality Account 2024/25.

The quality account provides comprehensive information on the quality priorities that the provider has focused on during the year in relation to patient safety, patient experience and clinical effectiveness. The account details progress in relation to these priorities and the commissioners commend the Boston West Hospital on their achievements which include:

- Patient safety: embedding PSIRF which was implemented in 2023/24 by developing local policy that facilitates holistic review of incidents, learning from events and taking actions to ensure patient safety
- Patient experience: using the Cemplicity Net Promoter Score to demonstrate high levels of patient satisfaction which are above the Ramsay average
- Clinical effectiveness: embedding the SipTilSend approach to pre-operative hydration, and the wider use of digital dictation software

The Quality Account has numerous examples of the delivery of safe and high-quality care undertaken by the provider over the past year such as:

- Taking a root cause analysis approach to the review of complaints and using governance processes to identify themes, lessons learned and improve services
- Zero serious significant events (severe harm)
- 0% rate of C- Difficile and MRSA
- 100% participation in 2 National clinical audits and high compliance with local clinical audit standards (97.8% overall)
- Zero re-admissions to hospital within 28 days of surgery, below national average return to theatre rates and no transfers out to acute care providers
- Positive comparison to national benchmarking data for compliance with Venous Thrombo-Embolism Assessment with the latest data demonstrating 99.5% compliance
- 100% scores for all applicable domains in the latest PLACE assessments

Dr Gerry McSorley. ICB Chair and Mr John Turner, Chief Executive www.lincolnshire.icb.nhs.uk The commissioners also note that the provider uses a wide range of patient feedback mechanisms and receives consistently positive feedback around patient confidence, satisfaction levels and customer service.

The Boston West Hospital can be proud of its latest staff survey results which demonstrate high response and engagement rates and favourable staff feedback.

Looking forward to the coming year, the commissioners are pleased that there continues to be a focus on patient safety patient experience and clinical effectiveness through the identification of new priorities for 2025/26, which are:

- The commissioning of the Getting It Right First Time (GIRFT) programme to recognise best practice, identify unnecessary variations in care and implement recommendations
- An aspiration to achieve Aseptic Non-Touch Technique (ANNT) Gold accreditation
- The completion of the Hospital expansion to increase capacity to 2 operating theatres and expanded Out-patient consulting room space
- To use the Cemplicity system to analyse PROMs data for all patients to highlight and address any worsened outcomes post procedure

The current Care Quality Commission rating for the hospital is Good which was awarded during the last inspection report published in October 2015.

The commissioners would like to thank the Boston West Hospital, who have continued to work closely with partners in the Lincolnshire Health System to ensure patients' needs are met.

NHS Lincolnshire Integrated Care Board looks forward to working with the Boston West Hospital over the coming year to further improve the quality of services available for our population, to deliver better outcomes and optimal patient experience.

Yours sincerely,

Vanessa Wort Associate Chief Nurse NHS Lincolnshire Integrated Care Board

2.2.7.2 Healthwatch Lincolnshire Commentary on Boston West Hospital Quality Account 2024/25



Boston West Hospital submitted the Quality Account 2024/25 to Healthwatch Lincolnshire for review and comment on 27<sup>th</sup> May 2025, in accordance with the 30-day timeline for review ahead of publication. Unfortunately, to the best of our knowledge, Fitzwilliam Hospital have not received a response. Upon receipt of a response from Healthwatch Lincolnshire, the Quality Account 2024/25 will be republished.

2.2.7.3 Boston West Hospital Patient and Public Involvement Group (PPIG) Commentary on Boston West Hospital Quality Account 2024/25

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 Fitzwilliam Hospital during 2025/26.

## Part 3:

## Review of Quality Performance 2024/2025 Statements of Quality Delivery

### Head of Clinical Services, Jane Groom

Review of Quality Performance 1<sup>st</sup> April 2024 – 31<sup>st</sup> March 2025

#### Introduction

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

At Ramsay Health Care, patient safety and quality of care are our top priorities. As Chief Clinical and Quality Officer and Chief Nurse, I am immensely proud of the dedication and passion shown by our clinical teams, whose commitment to delivering compassionate, evidence-based care ensures that patients always come first.

Across our 34 hospitals, mobile diagnostic fleet, 3 decontamination hubs, and 2 corporate offices, I am continually inspired by the outstanding care provided by both our clinical and operational teams. The saying, "The whole is greater than the sum of its parts," truly resonates at Ramsay UK. Our teams deliver exceptional service that reflects our values of "People Caring for People," as evidenced by our impressive patient feedback, including a group NPS rating of 88 and a 95.9% Friends and Family rating. Each team member's individual contribution is vital, and we remain committed to recognising, supporting, and championing their efforts.

Our ability to provide first class healthcare services is supported by continuous investment in our facilities, equipment, and colleagues. We encourage leadership, professional and personal development and support innovation in our clinical processes and pathways. Additionally, our ongoing digital advancements are enhancing the delivery and management of patient services. With an exciting roadmap which further integrates and develops our digital systems, we are committed to empowering patients and improving their healthcare journey with Ramsay UK.

I look forward to continuing this journey and building on our commitment to delivering high-quality healthcare, with sustained investment and a focus on innovation.

), drson

Jo Dickson

#### **Ramsay Clinical Governance Framework 2024/25**

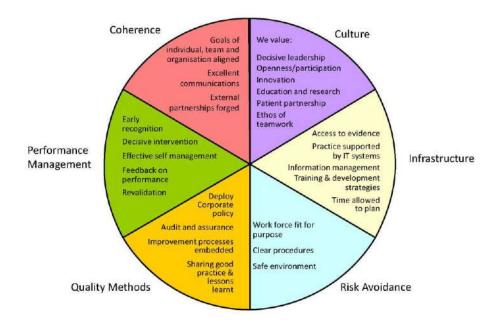
The aim of clinical governance is to ensure that Ramsay develop ways of working which assure that the quality of patient care is central to the business of the organisation.

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 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           | Be    | est    | W    | orst   | Aver    | age    | Period | Bostor | n West |
|------------|------------------|-------|--------|------|--------|---------|--------|--------|--------|--------|
|            | Dec21 -<br>Nov22 | R1K02 | 0.2456 | RHCH | 2.1583 | Average | 1.0965 | 22/23  | NVC27  | 0.0000 |
|            | Nov22 -<br>Oct23 | RQM   | 0.7215 | RXP  | 1.2065 | Average | 1.0021 | 23/24  | NVC27  | 0.0000 |
|            | Nov23 -<br>Oct24 | RQM   | 0.6967 | RXR  | 1.2985 | Average | 1.0036 | 24/25  | NVC27  | 0.0003 |

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 was 1 death reported within 30 days of elective surgery in 2024/25.
- It was ascertained that the death was unrelated to the procedure the patient was treated for at the Boston West Hospital.

#### **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. Trend analysis has been undertaken on all cases of readmission, and we are not seen as an outlier for the metric.



Boston West Hospital considers that this data is as described as we did not report any readmissions during the reporting period. 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.

| V      | TE     | Period            | Bes     | t    | Wo    | rst   | A۱  | verage | Period            | Boston | West  |
|--------|--------|-------------------|---------|------|-------|-------|-----|--------|-------------------|--------|-------|
| Assess | sment: | Q1 to Q4<br>18/19 | Several | 100% | NVC0M | 41.6% | Eng | 95.6%  | Q1 to Q4<br>18/19 | NVC27  | 94.5% |
|        |        | Q1 to Q3<br>19/20 | Several | 100% | RXL   | 71.8% | Eng | 95.5%  | Q1 to Q3<br>19/20 | NVC27  | 95.5% |
|        |        | Q3 24/25          | Several | 100% | RCB   | 13.7% | Eng | 90.3%  | Q3 24/25          | NVC27  | 99.5% |

The data shows Boston West Hospital has performed better than national benchmarking data, with a consistent performance. Analysis of 2024/25 data show an overall compliance percentage of 99.5%.

The VTE management of patients post operatively has been reviewed via periodic audits during 2024/25, 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 2024/25.

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**

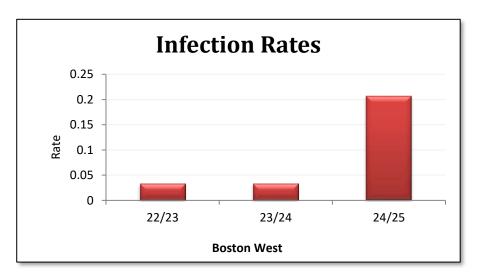
## Boston West Hospital has a very low rate of hospital acquired infection and has had no reported MRSA Bacteraemia in the past 4 years.

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 2024/25, Boston West Hospital Acquired Infections saw an increase, however, this could be due to our pro-active nature in asking patients to contact us should they need and bringing them in for review at the earliest opportunity.



To continue to manage hospital-acquired infection at Boston West Hospital, in 2024/25, 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 Bronze 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 28<sup>th</sup> October 2024 to complete the PLACE audit, please see our scores below:

| Boston West<br>Hospital  | Cleanliness | Food and<br>Hydration | Organisational<br>Food | Ward Food | Privacy, Dignity<br>and Wellbeing | Condition<br>Appearance and<br>Maintenance | Disability |
|--------------------------|-------------|-----------------------|------------------------|-----------|-----------------------------------|--|------------|
| 2024                     | 100.00%     | N/A                   | N/A                    | N/A       | 100.00%                           | 100.00%                                    | 100.00%    |
| 2023                     | 100.00%     | N/A                   | N/A                    | N/A       | 95.83%                            | 100.00%                                    | 100.00%    |
| Ramsay Average<br>2024   | 98.60%      | 93.40%                | 91.30%                 | 95.90%    | 84.10%                            | 97.50%                                     | 86.90%     |
| National Average<br>2024 | 98.31%      | 91.32%                | 92.17%                 | 91.38%    | 88.22%                            | 96.36%                                     | 85.20%     |

Results in all areas are higher than the 2024 National and Ramsay Average and all areas received full marks.

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 2024/25, we completed several 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 as per PSIRF inclusive of Hot Debriefs and After-Action Reviews
- 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 regarding 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.
- Additional Speak up for Safety Trainers have been trained to ensure that staff feel safe and supported should they need to raise concerns relating to patient/staff safety.

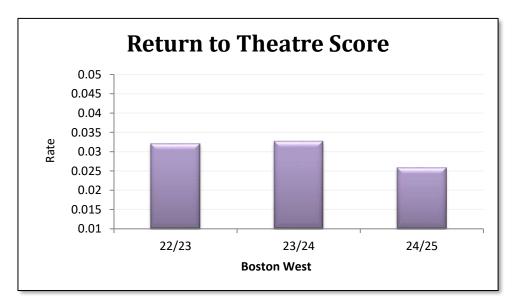
## **3.3 Clinical Effectiveness**

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 0.026%, significantly below the national average and is a decrease in comparison to the same period in 2023/24.

#### **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 2024/25, the Boston West Hospital did not report any patient transfers 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 2024/25 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 applies the principles of the learning from Patient Safety Incident Framework (PSIRF) and CQC notification requirements for any death and in the interests of shared learning shares all data for all payor groups. Historically, Boston West Hospital did not have permitted authority to utilise the national care record system (NCRS), however, in 2024, we were granted access and staff were trained to access the NCRS, with private patient consent, enabling staff to access important patient information. Whilst there has been no patient harm linked to the previous inability to access, the sharing of NCRS access with our staff has been an important component of shared learning.

#### 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**

#### 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
- 3rd 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. We received 1 negative NHS Choices comment in 2024/25.

#### Complaints

Boston West Hospital reported 3 complaints during 2024/25 which highlights that patients continue to be satisfied with the service they receive at the hospital. 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.

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 occasionally 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)

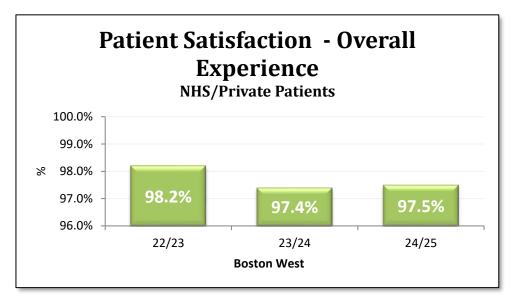
For our 3<sup>rd</sup> Party Data Collection of Patient Feedback, we utilise an external organisation, 'Cemplicity', to gather unbiased data from patients about their experience and satisfaction with the services they have received. We conclude from the volume of responses and content of comments that 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) of 90% underpinning confidence in general, overall customer service. Dignity and Respect also shows a strong positive result of 97%. A slight decrease from last year audit, and we appreciate this is an excellent result. Other areas: Friends and Family, Patient Involvement in decisions, privacy, are positive.

#### **Overall Patient Satisfaction**

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.



Patient experience, provided through the feedback channels or directly to us, is welcomed and supports service developments and process improvements or reassurance that we are meeting patient expectations.

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 commended accordingly.

All negative feedback or suggestions for improvement are also fed back to the relevant staff or teams using direct feedback. All staff are aware of our complaint's procedures 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 at patient discharge.
- 'We value your opinion' leaflet.
- Verbal feedback to Ramsay staff including Consultants, Head of Clinical Services/Hospital Directors whilst visiting patients and through Provider/CQC direct feedback.
- Written communication via letters/e-mails.
- 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 continues to provide an excellent, positive foundation on which we can build.

## 3.5 Boston West Hospital Case Studies

## Case Study 1

#### **Boston West Theatre Build**

In our ongoing efforts to provide the best service to the local community, Boston West Hospital has embarked on an exciting expansion to upgrade its services and facilities. We are thrilled to utilise the space vacated by the decontamination unit, which was relocated to a central hub in 2023/24, to expand the outpatient area to accommodate more patients, upgrade the theatre with state-of-the-art equipment, and enhance the staff and reception areas.

We are delighted to report that services have run smoothly during the construction, with no disruptions to patient care. This success is a testament to the fantastic teamwork and planning by the dedicated team at Boston West Hospital.

The works are scheduled for completion in June 2025, and we eagerly look forward to providing invaluable services to all who need them. We appreciate the support from our patients, staff and community during this time. We welcome your feedback and suggestions as we continue to improve our services. Together, we are building a better future for our community.



### **Case Study 2**

#### Kellie Bradshaw-Morris – Continued Professional Development

Kellie joined Ramsay Health Care and the Boston West Hospital in April 2022 as a bank staff member before moving into a clinical lead role in Theatres in February 2023. She has made a significant impact on our team, bringing her wealth of experience and enthusiasm, and understanding that continued personal development is crucial in healthcare.

Kellie graduated with First Class Honours in Perioperative Practice from Derby University in June 2024. Not one to rest on her laurels, she has applied for the MSc Healthcare Leadership at the University of Hull, starting January 2025.

Kellie joined the British Army in 2009 and trained as an Operating Department Practitioner (ODP) at Birmingham City University. She qualified in 2011 and served in the Armed Forces for eight years, leaving the service upon the birth of her son. Since then, she has continued to work as an ODP in the private sector.

Kellie comments, "I completed the training to top up my Diploma of Higher Education to Degree level. I am passionate about learning, staying updated with healthcare changes, and implementing evidence-based practices to maximize patient safety and improve the quality of care."

We are incredibly proud of Kellie's achievements and contributions. Kellie's dedication and hard work are truly inspiring, and her commitment to continuous learning has inspired many of us. We are excited to see her growth in the coming years!





#### **Appendix 1**

## 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

#### **Appendix 2**

### **Boston West Hospital Statement of Purpose**

#### Boston West Hospital



Boston West Hospital is a purpose-built day case Hospital which provides services for assessment, diagnosis and treatment of common medical conditions. A wellequipped modern theatre undertakes a range of surgical procedures and endoscopic (diagnostic) investigations. 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

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:   |
|---|--|--|
| Treatment<br>of Disease,<br>Disorder<br>Or injury | Physiotherapy, Cosmetics,<br>Gastroenterology, General Surgery,<br>Medico Legal, Ophthalmology,<br>Orthopaedics, Gynaecology,<br>Urology and Pain management   | All adults 18 yrs and over   |
| Surgical<br>Procedures                            | Ambulatory and Day Surgery only:<br>Gastroenterology, General surgery,<br>Endo venous laser treatment<br>(EVLT), Endoscopy,  | All adults excluding:<br>• Patients with blood disorders (haemophilia, sickle<br>cell, thalassaemia)<br>• Patients on renal dialysis   |
|   | Gastroenterology, General Surgery,<br>Gynaecology, Ophthalmology &<br>YAG Laser, Orthopaedic surgery,<br>Urology, Pain management<br>injections.   | <ul> <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)</li> <li>Poorty 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> All patients will be individually assessed, and we will only exclude patients if we are unable to provide an appropriate and safe clinical environment. |
| Diagnostic<br>and<br>screening                    | Clinical Chemistry, Cytology and<br>Histopathology, Diagnostic<br>Radiology, GI Physiology,<br>Haematology, Microbiology, MRI,<br>Phlebotomy, Transfusion,<br>Ultrasound, Bone Densitometry,<br>Urinary Screening and Specimen<br>collection, Urological Screening | All adults 18 years and over   |
| Family<br>Planning<br>Services                    | Gynaecology patient pathway,<br>insertion and removal of inter<br>uterine devices for medical as well<br>as contraception purposes   | All adults 18 years and over as clinically indicated   |

## Clinical Audit Programme 2024/25

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 /<br>Ownership<br>(may be delegated)            | Frequency<br>(subject to review)                       |
|--|---|--|
| Hand Hygiene observation (5 moments)             | Ward, Theatres, Radiology, Physio,<br>Outpatients, Amb Care           | Monthly  |
| Surgical Site Infection                          | Theatres  | October, April   |
| IPC Governance and Assurance                     | IPC   | July to September                                      |
| IPC Environmental infrastructure                 | IPC   | October to December                                    |
| IPC Management of Linen                          | IPC   | August, February                                       |
| IPC Aseptic Non-Touch Technique:<br>Standard     | IPC   | As required  |
| IPC Aseptic Non-Touch Technique:<br>Surgical     | IPC   | As required  |
| Sharps   | IPC   | August, December,<br>April                             |
| 50 Steps Cleaning (Functional Risk 1)            | Theatres,   | Fortnightly  |
| 50 Steps Cleaning (Functional Risk 1)            | Theatres  | Fortnightly  |
| 50 Steps Cleaning (FR2-4)                        | Ward, Theatres, Radiology, Physio,<br>Outpatients, Amb Care, Pharmacy | Monthly  |
| 50 Steps Cleaning (FR5-6)                        | SLT   | July to September                                      |
| Peripheral Venous Cannula Care Bundle            | Theatres  | July to September                                      |
| Urinary Catheterisation Bundle                   | Theatres  | October to December                                    |
| Patient Journey: Safe Transfer of the<br>Patient | Amb Care  | August, February                                       |
| Patient Journey: Intraoperative<br>Observation   | Theatres  | August/September,<br>February/March                    |
| Patient Journey: Recovery Observation            | Theatres  | October to December,<br>April to June (if<br>required) |

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| LSO and 5 Steps Safer Surgery           | Theatres, Outpatients                                   | July to September<br>January to March       |
|---|---|---|
| NatSSIPs Stop Before You Block          | Theatres  | July/August<br>December/January<br>May/June |
| NatSSIPs Prosthesis                     | Theatres  | July/August<br>December/January<br>May/June |
| NatSSIPs Swab Count                     | Theatres  | July/August<br>December/January<br>May/June |
| NatSSIPs Instruments                    | Theatres, Outpatients                                   | October to December<br>April to June        |
| NatSSIPs Histology                      | Theatres, Outpatients                                   | October to December<br>April to June        |
| Complaints                              | SLT   | August/September<br>February/March          |
| Duty of Candour                         | SLT   | August/September<br>February/March          |
| Practising Privileges - Non-consultant  | HoCS  | July, October,<br>January, April            |
| Practising Privileges - Consultants     | HoCS  | July, October,<br>January, April            |
| Privacy & Dignity                       | Theatres  | November/December (as required)             |
| Essential Care: Falls Prevention        | HoCS  | September / October (as required)           |
| Essential Care: Nutrition & Hydration   | HoCS  | September / October                         |
| Medical Records                         | Theatres, Ward, Outpatients/Pre-Op<br>Assess, Radiology | July to September<br>January to March       |
| Medical Records - NEWS2                 | Amb Care  | July to September<br>January to March       |
| Medical Records - VTE                   | Amb Care  | July to September<br>January to March       |
| Medical Records - Patient Consent       | HoCS  | October to December<br>April to June        |
| Medical Records – MDT Compliance        | HoCS  | July to September<br>January to March       |
| Antimicrobial Stewardship & Prescribing | Pharmacy, IPC   | October to December<br>April to June        |
| Safe & Secure                           | Pharmacy  | July to September<br>January to March       |
| Prescribing, Supply & Administration'   | Pharmacy  | October to December<br>April to June        |
| Medicines Reconciliation                | Pharmacy  | July, October,<br>January, April            |
| Controlled Drugs                        | Pharmacy  | September,<br>December, March,<br>June      |

| Pain Management               | Pharmacy                        | October, April      |
|-------------------------------|---------------------------------|---------------------|
| Medicines Governance          | Pharmacy                        | January to March    |
| Departmental Governance       | Amb Care, Theatres, Outpatients | October to December |
| Safeguarding                  | SLT                             | December            |
| Decontamination - Endoscopy   | Decontamination (Corporate)     | As required         |
| Occupational Delivery On-Site | HoCS                            | November to January |
| H&S Fire Safety               | Ops Managers                    | January, July       |
| H&S Legionella                | Ops Managers                    | February, August    |
| H&S PUWER/LOLER               | Ops Managers                    | March               |
| H&S Management                | Ops Managers                    | April               |
| H&S Moving & Handling         | Ops Managers                    | Мау                 |
| H&S Work at Height            | Ops Managers                    | June                |
| H&S Slips Trips & Falls       | Ops Managers                    | September (25)      |
| H&S COSHH                     | Ops Managers                    | October (25)        |
| H&S Electrical Safety         | Ops Managers                    | November (25)       |
| H&S Violence at Work          | Ops Managers                    | December (25)       |

#### 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

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