

# Parkside Hospital at Putney

## Quality Report

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This report describes our judgement of the quality of care at this location. It is based on a combination of what we found when we inspected and a review of all information available to CQC including information given to us from patients, the public and other organisations

## Ratings

### Overall rating for this location

Good



Are services safe?

Good



Are services effective?

Not sufficient evidence to rate



Are services caring?

Good



Are services responsive?

Good



Are services well-led?

Good



# Summary of findings

## Letter from the Chief Inspector of Hospitals

This was the first comprehensive inspection of Parkside Hospital at Putney, which was part of the CQC's ongoing programme of comprehensive, independent healthcare acute hospital inspections. We carried out an announced inspection of Parkside Hospital at Putney on 24 May 2016.

The inspection team inspected the core service of surgical procedures.

All diagnostic imaging is not conducted at this location and is provided by the provider's other location, Parkside Hospital, Wimbledon.

We have rated Parkside Hospital at Putney as good. We found surgical procedures were good in each of the four key questions relating to safe, caring, responsive and well-led. We inspected but did not rate the key question of effective. This is because, all surgical procedures are carried out at the main Parkside Hospital site, where we did inspect and rate effective.

### Are services safe at this hospital

We rated safe as good because:

- Patients were protected from avoidable harm and abuse.
- There was a good incident reporting culture throughout the hospital.
- There were no staff vacancies and staffing levels were planned in response to the clinics that were running in order to keep patients safe at all times.
- Incidents were investigated and learning from incidents was shared throughout the hospital.
- Risks to patients and people using the service were assessed, monitored and managed on a day to day basis.
- The environment was visibly clean and well maintained. It was suitable for the purpose that it was used for.

### Are services effective at this hospital

- Patient care and treatment reflected relevant research and guidance including up to date guidance from the National Institute for Health and Care Excellence (NICE).
- The outcomes of care and treatment were monitored and actions taken to make improvements.
- New staff completed a thorough induction and supervision period.
- Policies were available online for staff and there was a process that they could confirm they have read and understood these.
- Consent to care and treatment was obtained in line with guidance. A specific consent form was available for patients planning to have gender reassignment surgery.

### Are services caring at this hospital

We rated caring as good because:

- Patients received supportive care and treatment in an environment that maintained their privacy and dignity.
- Interactions between staff and patients were positive.
- Feedback from patients was that staff were caring, supportive and respectful.

# Summary of findings

- Staff took time to visit patients after their surgery to provide emotional support.

## **Are services responsive at this hospital**

We rated responsive as good because:

- The reconfiguration of services meant that the needs of patients requiring pre-assessment or appointments within the gender reassignment clinic were better met.
- The length of pre-assessment appointment times was directed in line with NICE guidelines and also taking into account individual needs of the patient, such as those with dementia or a learning disability.
- Interpreters were planned to be available if a patient attending an appointment did not have English as their first language.
- A detailed pack of patient information regarding gender reassignment surgery was provided to all patients attending this clinic.

## **Are services well led at this hospital**

We rated well led as good because:

- The leadership, governance and culture promoted the delivery of high quality, person-centred care.
- There was a clear vision and strategy and staff understood their role within its delivery.
- There was a clear governance structure in place which enabled heads of department to feed into the Medical Advisory Committee (MAC) and the hospital executive management team

Our key findings were as follows:

- There were clearly defined and visible local leadership roles. Senior staff provided clear leadership and were known and approachable to staff.
- Staff morale and motivation were good and staff enjoyed working at Parkside Hospital at Putney. There was supportive management at all levels, effective team-working and an open culture in which staff were able to raise concerns and make suggestions.
- All clinical areas we visited were visibly clean and tidy. Staff were aware of current infection prevention and control guidelines. Cleaning schedules were in place with clearly defined roles and responsibilities for cleaning and decontaminating the environment and equipment.
- The areas we inspected had a sufficient number of trained nursing and support staff with an appropriate skills mix to meet patients' needs.
- Vulnerable adults, such as patients with a learning disability and those living with dementia were identified prior to their appointments and steps were taken to ensure they were appropriately cared for. This included a longer appointment time if required.
- Local patient questionnaires were available and themes were collated and used for feedback.

Professor Sir Mike Richards

**Chief Inspector of Hospitals**

# Summary of findings

## Our judgements about each of the main services

### Service

### Surgery

### Rating Summary of each main service

We rated this service as good because:

- Patients were protected from avoidable harm and abuse.
- There was a good incident reporting culture throughout the hospital.
- Patient care and treatment reflected relevant research and guidance including up to date guidance from the National Institute for Health and Care Excellence (NICE).
- The outcomes of care and treatment were monitored and actions taken to make improvements.
- Patients received supportive care and treatment in an environment that maintained their privacy and dignity.
- Interactions between staff and patients were positive.
- The reconfiguration of services meant that the needs of patients requiring pre-assessment or appointments within the gender reassignment clinic were better met.
- The length of pre-assessment appointment times was directed in line with NICE guidelines and also taking into account individual needs of the patient, such as those with dementia or a learning disability.
- The leadership, governance and culture promoted the delivery of high quality, person-centred care.
- There was a clear vision and strategy and staff understood their role within its delivery.

Good



# Summary of findings

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Good



# Parkside Hospital at Putney

**Services we looked at**

Surgical procedures.

# Summary of this inspection

## Background to Parkside Hospital at Putney

Parkside Hospital at Putney is a satellite location of Parkside Hospital in Wimbledon. It is part of the Aspen Health care Limited group. It opened in February 2012 to provide additional clinic space for outpatient services.

In January 2016, following an internal reorganisation, the clinics offered at Parkside Hospital at Putney were changed to provide pre-assessment appointments and a gender reassignment clinic.

The registered manager is also the hospital director of Parkside Hospital in Wimbledon and has been registered since the service opened.

Parkside Hospital at Putney is registered to provide the following regulated activities:

- Diagnostic and screening procedures

- Treatment of disease, disorder or injury.
- Surgical procedures.

Healthcare is provided by staff at the clinic to patients with private medical insurance, those who self-pay and through National Health Service (NHS) contracts.

There are four consulting rooms and a treatment area used for examination and phlebotomy. The service offers appointments between 8am and 5pm, Monday to Friday.

We inspected the surgical procedures at Parkside Hospital at Putney as part of our ongoing comprehensive inspection programme of independent healthcare hospitals. This was the first comprehensive inspection of Parkside Hospital at Putney.

## Our inspection team

Our inspection team was led by:

**Inspection Lead:** Roger James, Care Quality Commission and designation

The team included two CQC inspectors.

## How we carried out this inspection

Before our inspection, we reviewed a range of information we held about the clinics at Parkside Hospital at Putney and each core service. We also held a staff focus group for those employed by the service.

We carried out an announced inspection on 24 May 2016.

We spoke with a range of staff in the hospital, including nurses, consultants and administrative staff. During our inspection we reviewed services provided by Parkside Hospital at Putney in the pre-assessment and gender reassignment clinics.

During our inspection we spoke with four members of staff, including a consultant who had practising privileges at the hospital and one patient. We observed how people were being cared for and we reviewed the treatment records of four patients in the pre-assessment clinic.

# Summary of this inspection

## Information about Parkside Hospital at Putney

Parkside Hospital at Putney provided an outpatient service which comprised of four consulting rooms, a consulting suite, a treatment room for phlebotomy and examinations and an occupational health room.

As Parkside Hospital at Putney is a satellite location of Parkside Hospital at Wimbledon it is not possible to provide a breakdown of the number of consultations carried out at this location.

Parkside Hospital at Wimbledon and Parkside Hospital at Putney together have 321 doctors working under the rules of practising privileges. Since December 2015, only two of these doctors regularly hold clinics at Parkside

Hospital in Putney. The hospitals employ nine full time equivalent staff including nurses, care assistants and administrative and clerical staff who work at both Parkside Hospital sites.

Between January 2015 to December 2015, when Parkside Hospital at Putney was a satellite site of the Parkside Hospital outpatients provision, the hospital saw 182 NHS funded patients for their first appointment and 242 follow up patients. During the same reporting period, the hospital saw 376 self-funded patients for their first appointment and 398 follow up patients who were self-funded.

The Executive Director was registered as the Controlled Drugs Accountable Officer (CD AO) prior to the service being established in February 2012.



# Summary of this inspection

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Are services safe?

We rated safe as good because:

- There were appropriate systems for keeping patients safe. Staff were aware how to report incidents and safeguarding issues and were aware of the Mental Capacity Act 2005 and the Duty of Candour processes. Learning from incidents was shared widely.
- All areas we inspected were visibly clean and uncluttered and had appropriate infection prevention and control equipment available.
- Sufficient equipment was available, well maintained and appropriately checked.
- Records were securely stored, legible, signed and dated.
- Staffing levels were sufficient to meet the needs of patients and there were no vacancies.

Good



### Are services effective?

- Patient care and treatment reflected relevant research and guidance including up to date guidance from the National Institute for Health and Care Excellence (NICE).
- The outcomes of care and treatment were monitored and actions taken to make improvements.
- New staff completed a thorough induction and supervision period
- Consent to care and treatment was obtained in line with guidance. A specific consent form was available for patients planning to have gender reassignment surgery.

Not sufficient evidence to rate



### Are services caring?

We rated caring as good because:

- Patients received supportive care and treatment in an environment that maintained their privacy and dignity.
- Interactions between staff and patients were positive.
- Feedback from patients was that staff were caring, supportive and respectful
- Staff took time to visit patients after their surgery to provide emotional support.

Good



### Are services responsive?

We rated responsive as good because:

Good



# Summary of this inspection

- The reconfiguration of services meant that the needs of patients requiring pre-assessment or appointments within the gender reassignment clinic were better met.
- The length of pre-assessment appointment times was in line with NICE guidelines and also took account of the needs of individual patients
- A detailed pack of patient information about gender reassignment surgery was provided to all relevant patients attending this clinic.

## Are services well-led?

We rated well-led as good because:

- Staff were focussed on providing the best service they could for all patients whether they were NHS or self-funded.
- Staff understood the strategy and their role within its delivery.
- Staff were involved in making improvements to their service
- Staff told us that senior and local managers were visible and approachable.

**Good**







# Detailed findings from this inspection

## Overview of ratings

Our ratings for this location are:

	Safe	Effective	Caring	Responsive	Well-led	Overall
Surgery	Good	Not rated	Good	Good	Good	Good
Overall	Good	Not rated	Good	Good	Good	Good

# Surgery

Safe	Good 
Effective	Not sufficient evidence to rate 
Caring	Good 
Responsive	Good 
Well-led	Good 

## Summary of findings

We rated this service as good because:

- Patients were protected from avoidable harm and abuse.
- There was a good incident reporting culture throughout the hospital.
- Patient care and treatment reflected relevant research and guidance including up to date guidance from the National Institute for Health and Care Excellence (NICE).
- The outcomes of care and treatment were monitored and actions taken to make improvements.
- Patients received supportive care and treatment in an environment that maintained their privacy and dignity.
- Interactions between staff and patients were positive.
- The reconfiguration of services meant that the needs of patients requiring pre-assessment or appointments within the gender reassignment clinic were better met.
- The length of pre-assessment appointment times was directed in line with NICE guidelines and also taking into account individual needs of the patient, such as those with dementia or a learning disability.
- The leadership, governance and culture promoted the delivery of high quality, person-centred care.
- There was a clear vision and strategy and staff understood their role within its delivery.

## Are surgery services safe?

Good 

We rated safe as good because:

- There were appropriate systems for keeping patients safe. Staff were aware how to report incidents and safeguarding issues and were aware of the Mental Capacity Act 2005 and the Duty of Candour processes. Learning from incidents was shared widely.
- All areas we inspected were visibly clean and uncluttered and had appropriate infection prevention and control equipment available.
- Sufficient equipment was available, well maintained and appropriately checked.
- Records were securely stored, legible, signed and dated.
- Staffing levels were sufficient to meet the needs of patients and there were no vacancies.

### Incidents

- All staff we spoke to knew how to report incidents through the hospital's computer based reporting system (DATIX). They were aware of the types of incidents that they needed to escalate and they told us they were encouraged to report incidents.
- All incidents were reviewed and investigated by the Outpatients manager based at Parkside Hospital in Wimbledon. They shared findings from incidents with individual staff and also at team meetings. There had been no incidents reported at this location since its reconfiguration in December 2015.

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- Incidents were also discussed at a Parkside Hospital in Wimbledon Sisters meeting and this feedback would then be passed onto the teams.
- Staff were familiar with the term 'duty of candour' (meaning they should act in an open and transparent way in relation to care and treatment provided) although they had not had reason to use it. Staff told us they would apologise and inform patients or their carer if an incident or near miss of avoidable harm occurred.

## Cleanliness, infection control and hygiene

- Parkside Hospital at Putney was visibly clean, tidy and free from clutter. We were informed that a private cleaning company cleaned the area daily. Daily and weekly checks were carried out for infection prevention and control by staff. Each month there was a full cleanliness check of all areas. We saw records to show that these had been completed.
- All clinic rooms had working facilities for handwashing, with enough paper towels and protective clothing available to use when necessary. We observed staff washing their hands and using hand gel appropriately.
- An annual deep dive reviewed the infection prevention and control and health and safety arrangements. We saw a record of the last one conducted in October 2015 with an action plan.
- Personal protective equipment, such as gloves was available for staff in all clinical areas to ensure their safety and reduce risks of cross infection when performing procedures.
- Domestic and clinical waste was disposed of correctly. We saw appropriate facilities for disposal of clinical waste and sharps such as needles located in the consultation and treatment rooms.
- Staff adhered to 'bare below the elbow' guidance when required whilst delivering care.
- Equipment was well maintained and appropriately checked; they were visibly clean and we saw 'I am clean' stickers that the hospital used to identify that the item had been cleaned.

## Environment and equipment

- The floor of the building used by Parkside Hospital at Putney was well maintained, bright with large windows in most rooms, free from clutter and provided a suitable environment for treating patients.
- Rooms were accessible via a keypad code system and meant that they were secure.
- Equipment was well maintained, appropriately checked and signed weekly.
- Single use, sterile instruments were used where possible. The single use instruments we saw were all within their expiry dates.
- Staff told us that they always had access to equipment and instruments they needed to meet patients' needs.
- Emergency resuscitation equipment was available at Parkside Hospital at Putney and was inspected and checked weekly by staff. A new compact design of this equipment had been recently introduced and its design meant that it now only required weekly checking and was more easily accessible and ready for staff to use in an emergency situation.

## Medicines

- Medicines at Parkside Hospital at Putney were stored, managed, administered and recorded securely and safely.
- Medicines that required refrigeration were stored in a locked fridge, keys were held by the senior member of staff and temperatures were checked and recorded daily when the service was open.

## Records

- Medical records at Parkside Hospital at Putney were paper based. We reviewed four sets of patient's records for pre-assessment. All records were legible signed and dated. Records contained all the relevant information including letters from the patients' General Practitioner (GP).
- Patient records were stored securely and access was limited to those who needed to access them.
- Patient records were requested by the administrator before the appointment to allow sufficient time to identify any gaps or issues.

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- Records were transported between Parkside Hospital at Wimbledon and Parkside Hospital at Putney by the hospital porter service using a secure, sealed mail bag.
- The gender reassignment clinic held letters dictated on a tablet computer and these were then compiled into a paper record by the hospital admission team at the Wimbledon site.

## Safeguarding

- Safeguarding policies and procedures were accessible to staff. Staff could explain the process if a concern was identified.
- Staff completed an on-line electronic learning training module as part of their mandatory training for safeguarding adults and children. At the time of our inspection 90% of all Parkside Hospital staff (both sites) had completed safeguarding adults part A and safeguarding children 1 and 70% of all Parkside Hospital (both sites) had completed safeguarding of adults part B and safeguarding children 2.

## Mandatory training

- Mandatory training was completed using an on-line electronic learning package. The training included infection prevention and control, manual handling, fire safety and information governance.
- Basic life support practical mandatory training was also provided.
- Staff compliance with mandatory training reported for all staff across Parkside Hospital (both sites) was variable with percentage completion ranging from 41% for staff that required Adult Immediate Life Support to 86% for fire safety. It was not possible to identify which of these staff worked at Parkside Hospital at Putney and staff that we spoke to there said that they had completed their mandatory training.
- All new nursing staff to the hospital underwent an induction and completed competency paperwork. Induction periods were tailored to the needs of the individual and area of work.

## Assessing and responding to patient risk

- In the event of a patient becoming acutely unwell, a 999 ambulance would be called.

- A daily meeting, known locally as a huddle, was held within the pre-assessment team to discuss the plan for the day and identify any issues in advance.

## Nursing staffing

- There were currently no nursing vacancies within Parkside Hospital at Putney.
- The pre-assessment nursing team who worked across both Parkside Hospital sites consisted of one nurse practitioner, one sister, three staff nurses and one care assistant. The gender reassignment team had one specialist nurse.
- Nurses generally worked from Monday to Friday with timings dependent on the clinics running.
- Cover for staff leave or sickness was provided by staff that were part of the existing nursing team.
- There was a low level of staff sickness. Levels across Parkside Hospital for October to December 2015 were 3%.

## Major incident awareness and training

- Staff we spoke to were aware of the actions required if there was a fire on site. They showed us the new evacuation mattress that was available and explained that there had been a recent training session for staff on this piece of equipment.

## Are surgery services effective?

Not sufficient evidence to rate 

- Patient care and treatment reflected relevant research and guidance including up to date guidance from the National Institute for Health and Care Excellence (NICE).
- The outcomes of care and treatment were monitored and actions taken to make improvements.
- New staff completed a thorough induction and supervision period.
- Consent to care and treatment was obtained in line with guidance. A specific consent form was available for patients planning to have gender reassignment surgery.

## Evidence-based care and treatment

- The service had local policies and guidelines in line with national guidance. New or updated policies and

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standard operating procedures were flagged on an online system called Net Consent and staff were required to submit a password to confirm that they had read them.

- The pre-assessment team were currently redrafting the pre-assessment policy to deliver it in line with updated guidance from the National Institute for Health and Social Care Excellence (NICE) that had been published in April 2016.

## Patient outcomes

- The gender reassignment team told us that they participated in a patient reported outcomes measure. However, we were not able to view any of these results.
- The gender reassignment team had also completed an audit of blood loss for which they were presenting the results at the World Professional Association for Transgender Health conference being held in June 2016.
- The pre-assessment team reported that they carried out an audit of surgical site infection and staff had telephoned patients 30 days after admission to review results. These results were reviewed by the hospital infection control lead and practice changed if appropriate. An example of change as a result of audit was the use of a different type of dressing.

## Competent staff

- All new pre-assessment clinic staff completed an induction programme and had a probation period of three months when they started in the department.
- Supervision of nurses was undertaken by the senior pre-assessment sister and nurse practitioner. The supervision of the care assistants was carried out by the registered nurses.
- All staff we spoke to told us that they received an annual appraisal which supported their clinical development.
- Nursing staff reported that they were being supported to prepare for revalidation.
- Staff reported additional training they had completed, such as a clinical leadership course and a physical assessment course and said that they were focussed on their needs.

- The specialist nurse for gender reassignment carried out internal training with ward nursing staff at Parkside Hospital at Wimbledon in order to ensure that they were aware of how to care for this group of patients when they were admitted for surgery.

## Multidisciplinary working (related to this core service)

- There was a strong multi-disciplinary team (MDT) approach across all areas that we visited. We observed good collaborative working and communication. Staff reported that they worked well as a team.
- Specialist staff within the gender reassignment team said they felt part of the wider team.

## Seven-day services

- Services were provided Monday to Friday from 8am to 5pm with some pre-assessment clinics held in the evening. There were no services provided at weekends.

## Access to information

- The admissions team at Parkside Hospital passed bookings to the pre-assessment administrator who contacted the patients and arranged the appointments. Paper records were provided before the appointment for the pre-assessment team to review and request any additional information from the patient's GP.
- For patients referred to the gender reassignment clinic, letters were dictated and placed onto a drop box on a tablet system. A main hospital file was then made up by the Parkside Hospital at Wimbledon.

## Consent, Mental Capacity Act and Deprivation of Liberty Safeguards

- The provider had a policy covering the obtaining of consent from patients.
- For patients attending the pre-assessment clinic for surgery that would be carried out at the Parkside Hospital site in Wimbledon, written consent was obtained on the day of operation by the consultant prior to the procedure.
- At Parkside Hospital (Wimbledon and Putney locations) data showed that 75% of nurses and 50% of care assistants had received informed consent training.
- Referrals for the gender reassignment clinic were received from a gender identity clinic. Staff told us that

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the initial appointment was to confirm that the patient was fit and ready for surgery. An example was given of a patient that was referred back to the gender identity clinic rather than being booked for surgery.

- Patients completed a procedure-specific consent form before undergoing vaginoplasty surgery, so that they had written details about the procedure and risks of the surgery and potential after effects.

## Are surgery services caring?

Good 

We rated caring as good because:

- Patients received supportive care and treatment in an environment that maintained their privacy and dignity.
- Interactions between staff and patients were positive.
- Feedback from patients was that staff were caring, supportive and respectful.
- Staff took time to visit patients within the inpatient wards after their surgery to provide emotional support.

## Compassionate care

- We spoke to one patient and reviewed seven feedback cards from patients who attended the gender reassignment clinic. The care given by the team was reported as 'warm and professional' and 'respectful and friendly'.
- The patient we spoke to had been given care advice and another patient feedback card reported that 'the competence of staff is without doubt of the highest standard.'
- Staff respected patient confidentiality and ensured that discussion took place in treatment rooms.
- The gender reassignment clinic had been moved from the main outpatients department at the Parkside Wimbledon hospital site so that this group of patients had a quieter and more private environment available for attending appointments.
- The service offered patients the support of a chaperone. For the gender reassignment clinic that involved intimate examinations, a specialist nurse was assigned to support the patients throughout.

- Patients attending the clinic took part in a survey that requested feedback on their care. The data for the outpatient survey (including Parkside Hospital in Wimbledon and Parkside Hospital at Putney) showed for the patients that responded in January to March 2016, from 214 responses, 85% would recommend the service and 98% had confidence and trust in the staff.

## Understanding and involvement of patients and those close to them

- Staff told us of the personal service that they were able to offer to patients referred to the gender reassignment clinic. As it was a small team, they were proud of the support they were able to offer to this group of patients.
- A patient also told us how she found the nurses 'fantastic and supportive'.
- Patients attending the gender reassignment clinic said that staff were 'respectful'.
- Staff told us they had the time to care for patients in the hospital and spend extra time with them.
- The pre-assessment team would arrange for interpreters to be present if required for appointments and could arrange extra time if a patient had additional needs.

## Emotional support

- One staff member told us how she visited some patients when they are in hospital after gender reassignment surgery in order to provide emotional support.
- We observed reception staff speaking with patients on their arrival in order to put them at ease when they were apprehensive
- The gender reassignment team had a specialist nurse as part of their team that could provide specialist support.
- Patients in the gender reassignment clinic saw their named consultant or specialist nurse at every stage of their journey so their needs could be assessed in line with their care pathway.

## Are surgery services responsive?

Good 

We rated responsive as good because:



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- The reconfiguration of services meant that the needs of patients requiring pre-assessment or appointments within the gender reassignment clinic were better met.
- The length of pre-assessment appointment times was in line with NICE guidelines and also took account of the needs of individual patients.
- A detailed pack of patient information about gender reassignment surgery was provided to all patients attending this clinic.

## Service planning and delivery to meet the needs of local people

- The waiting area was spacious and had comfortable seating for patients and visitors. There were drinks available as well as magazines.
- Patients accessed pre-assessment services through referral from either their private consultant or via the NHS choose and book service. Referral to the gender reassignment clinic was made from a gender identity clinic. As part of the expansion of the gender reassignment service a new contract to treat 250 NHS gender reassignment patients had just been agreed.
- Pre-assessment patients were offered appointment times to fit around their personal and work lives. Patients were treated equally regardless of whether they were NHS patients or self-funded patients.
- On arrival patients reported to the reception area where they were directed towards the appropriate clinic or waiting area.
- The hospital had sufficient space and flexibility for the number of patients being treated.
- Consultation rooms were private and a treatment room was available for any intimate examinations.
- There was no parking available for patients at the site. The pre-assessment team had addressed this by ensuring patients with mobility issues were seen for their appointment at Parkside Hospital in Wimbledon.

## Access and flow

- The hospital had scheduled clinics on a weekly basis.
- For NHS patients, the national standard for referral to treatment (RTT) time states that 95% of non-admitted patients should start consultant led treatment within 18

weeks of referral. Data provided by the hospital showed that between October 2015 and December 2015, 96% of patients referred to Parkside Hospital (Wimbledon and Putney locations) were seen within this 18 week target.

- A patient told us that they had had their procedure brought forward and, once they were referred, had not had to wait long for their appointment.
- We observed patients being informed about the wait for their appointment and that they did not have to wait long.
- The pre-assessment team showed us the pre-assessment clinical assessment investigation table that provided a Red, Amber, and Green (RAG) rated approach to the type of assessment and investigations a patient would require. This was based on the American Association of Anaesthesiologists (ASA) physical status classification system that describes fitness to undergo and anaesthetic as well as reviewing the level of surgery that was planned. This enabled the team to plan the length of appointment effectively.

## Meeting people's individual needs

- Information leaflets were available to patients regarding their treatment. Staff gave these to patients to take away.
- A specific pack for patients attending the gender reassignment clinic contained leaflets written by the team about the details of the operation, hospital stay and after-care.
- Staff could arrange for face to face interpreting service to be available for patients whose first language was not English.
- The hospital could be accessed by patients that had a physical disability. There was disabled parking, a lift and access to disabled toilet facilities.
- Vulnerable adults attending the pre-assessment clinic, such as patients with a learning difficulty and those living with dementia were identified at the referral stage and steps were taken to ensure they were appropriately cared for. This included a longer appointment time and informing carers or representatives of the plan of care.

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- One of the considerations for the reorganisation of the services provided at Parkside at Putney was so that the area would provide a quieter environment for patients attending the gender reassignment clinic.

## Learning from complaints and concerns

- The hospital had a policy covering how people could make complaints.
- Patients were asked to comment on their experiences before leaving the hospital. All the staff we spoke with could explain how they would manage a complaint a patient raised with them, and also how to escalate a complaint.
- An annual complaints report including information from all Parkside Hospital locations was collated, which reviewed the previous year's complaints, and included key learning and improvements made as a result of learning from complaints.
- Parkside Hospital (Putney and Wimbledon locations) received 113 complaints in the year January 2015 to December 2015. This included complaints for outpatients, surgical and medical services. The main reasons for complaints related to clarity regarding the aspects of clinical treatment and financial complaints. There were no specific complaints relating to services at Parkside Hospital at Putney since its reconfiguration in December 2015.

## Are surgery services well-led?

Good 

We rated well-led as good because:

- Staff were focussed on providing the best service they could for all patients whether they were NHS or self-funded.
- Staff understood the strategy and their role within its delivery.
- Staff were involved in making improvements to their service.
- Staff told us that senior and local managers were visible and approachable.

## Vision and strategy for this core service

- The Parkside strategy for 2016 included increasing the number of gender reassignment patients and international patients.
- The staff we spoke to in the gender reassignment team were proud of the contribution that they made to delivery of this area of the strategy.
- Staff told us they could access strategy information on the intranet home page.

## Governance, risk management and quality measurement for this core service

- There was a clear governance and risk management structure and accountabilities for assurance were well defined. The executive team used various methods to gain assurances from the ward to the board. There were various committees in place which reported into the Quality Governance Meeting and the Medical Advisory Committee (MAC).
- The MAC met quarterly and the minutes for the last three MAC meetings demonstrated that key governance areas were discussed including incidents and practising privileges.
- The hospital held meetings through which governance issues were addressed. The meetings included the MAC meeting and weekly heads of department meetings. Other specialty service meetings took place in their areas and the team leads were responsible for feeding back to staff and escalating concerns to the senior management team.
- Staff had access to policies and standard operating procedures via the intranet and had to enter their password to confirm that they had read and understood those relating to them.
- Daily huddles and regular team meetings provided a route for cascades down to team members from managers.

## Leadership / culture of service

- The specialist nurse was shortlisted for a national transgender award in March 2016.
- The pre-assessment team spoke of the support they had received from the director of nursing and clinical services and said they were comfortable with raising issues with her when required.

# Surgery

- Pre-assessment staff spoke of nursing seminars that had been started where they had presented information about their service and it allowed for greater understanding of what other departments did.
- Staff we met were all welcoming, helpful and friendly. They were happy and proud to work for the service.
- All staff that we spoke to felt valued and said their managers were supportive and approachable. They felt that they were encouraged to be open about concerns.
- A staff member in the gender reassignment team spoke of how the whole team travelled every year to the World or European professional association for transgender health conference. This included the administrator as well as clinical staff.
- Staff reported an open and transparent culture which was apparent during our inspection.
- Quarterly staff forums were held with the hospital director and staff said they were all welcome to attend.
- Aspen Healthcare Limited carried out an annual staff survey in 2015 and a 68% response rate was achieved for Parkside hospital (both sites). An action plan regarding specific issues raised from that had been collated and was being led by the hospital director.
- The pre-assessment team spoke favourably of the engagement that they had when planning the reconfiguration of the services provided at Putney and the setup of the rooms.

## Innovation, improvement and sustainability

- The executive team were responsive to requests and suggestions for improvement.
- All staff were focussed on improving the quality of care that they were providing. They had all been involved in setting up the service provision at Parkside Hospital at Putney.
- The pre-assessment team were involved in making changes to the new care pathway books.

## Public and staff engagement

- The hospital carried out a patient satisfaction survey that patients were encouraged to complete in order to improve services.