

Frimley Park Hospital NHS Foundation Trust

Quality Report

Portsmouth Road
Frimley
Surrey
GU16 7UJ
Tel: 01276 604604
Website: www.frimleypark.nhs.uk

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2014
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This report describes our judgement of the quality of care at this trust. It is based on a combination of what we found when we inspected, information from our 'Intelligent Monitoring' system, and information given to us from patients, the public and other organisations.

Ratings

Overall rating for this trust

Outstanding 

Are services at this trust safe?

Good 

Are services at this trust effective?

Good 

Are services at this trust caring?

Outstanding 

Are services at this trust responsive?

Outstanding 

Are services at this trust well-led?

Outstanding 

Summary of findings

Letter from the Chief Inspector of Hospitals

Frimley Park Hospital provides acute services to a population of 400,000 people across north-east Hampshire, west Surrey and east Berkshire. It serves a wider population for some specialist care including emergency vascular and heart attacks. In addition to the main site, it runs outpatient and diagnostic services from Aldershot, Farnham, Fleet and Bracknell.

Frimley Park Hospital has around 3,700 whole time equivalent members of staff and hosts a Ministry of Defence Hospital Unit with military medical, surgical and nursing workforce fully integrated into the NHS staff.

We carried out this follow-up inspection in addition to our comprehensive inspection in November 2013, as Frimley Park Hospital was inspected during a pilot period when shadow ratings were not published. In order to publish a rating, we needed to update our evidence and inspect all core services. Because we had inspected the trust so recently (in November 2013) we did not repeat some parts of our usual inspection process. This included the unannounced visit (which took place at night) and the public listening event. At the public listening event in November we heard directly from about 100 people about their experiences of care.

In addition, due to the proximity of the junior doctor changeover date (the significant majority of the junior doctors changed post a day before the inspection) we did not speak with many of them during this inspection. However the feedback from those spoken with during the November inspection was overwhelmingly positive, describing a high level of support from their consultants and registrars which they told us had had a resultant impact on their personal confidence levels and medical practice. They went on to describe why this led to medical staff frequently returning to Frimley Park at a later stage of their training or as consultants. Specific comments included one doctor stating that the level of support she had received in her day-to-day work was “outstanding”, and another that although the workload was sometimes very heavy, the senior staff “led by example” and were very approachable. These findings are corroborated by the fact that Frimley Park is rated top for training within the Kent, Surrey and Sussex deanery by foundation trainees.

Overall, this hospital was rated as outstanding. We rated it good for providing safe and effective care and outstanding for being caring, responsive to patients’ needs and being well-led.

We rated A&E, medicine, surgery, critical care and end of life care as outstanding. We rated children and young people’s services, maternity and outpatients as good.

Our key findings were as follows:

Safe:

- Frimley Park Hospital was one of the first 12 trusts nationally to sign up to the NHS England “Sign up for Safety” Campaign. A safety culture was a priority for staff at all levels and was embedded throughout the trust. Learning from events was encouraged and we were given multiple examples throughout the services of how care had been improved as a result of incident reports and investigations.
- Wards were well staffed from both a medical and nursing point of view. Where shortfalls had been identified, the senior team were aware and action plans were in place to address this. Where temporary staff were employed there was sufficient training to orientate them to the trust.
- The hospital was clean and staff were witnessed to follow good hygiene practices. Audits were undertaken routinely by the trust and action was taken if areas or staff groups were not compliant with expected cleanliness standards.

Effective:

- Staff based care delivered on best practice guidelines. Local outcomes were regularly audited and the trust was able to demonstrate how it had changed practice to improve results for patients year on year. The trust also benchmarked itself, and compared well against, national comparators.
- There was strong multidisciplinary team working throughout the trust. Staff worked alongside each other for the benefit of patients receiving care. There

Summary of findings

were multiple Clinical Nurse Specialists who supported teams and patients in specific areas, bringing their own expertise and knowledge to develop innovative ways of improving services.

- The trust was committed to developing seven-day services throughout. Good progress had been made towards this, and plans demonstrated that where this had not been completely rolled out, business cases had been accepted by the board and recruitment was ongoing.

Caring:

- Treating patients with dignity and respect, as well as valuing them as individuals, was evident throughout the organisation and found to be a fundamental part of the culture at Frimley Park Hospital.
- Throughout our inspection patients and their relatives told us how caring staff had been towards them, and how staff had 'gone the extra mile' to support them during their admission to hospital. We also witnessed exemplary care being given on many wards.
- Gaining feedback from patients and their relatives was a priority and was used by the trust to improve the care that was delivered. The trust was above the national average in the national Friends and Family test, both in terms of those recommending the hospital to others and in the response rate.

Responsive:

- We saw multiple examples of how services had changed the way they delivered care – either through feedback or by working with the local community to develop the service.
- In areas where there were problems with the flow of patients, there was evidence of inter and intra departmental working to try and improve patient pathways. We witnessed many innovative solutions and saw examples where they had learned from other trusts that had experienced similar difficulties.
- The trust had worked hard to embrace patients who were more vulnerable or had increased needs. There was good support for patients living with dementia or a learning difficulty, and the trust had worked with the local Nepalese community to improve methods of communication.

Well-led:

- Staff engagement at the trust was impressive. The CEO led from the top with a clear mantra that staff worked 'for Frimley' not 'at Frimley' and the concept of the 'Frimley Family' was felt throughout the inspection. Staff were encouraged to, and rewarded for, improving patient experience and therefore at all levels staff reported feeling empowered to develop their own solutions to enhance their services. There was a strong sense of support and alignment between clinicians and managers, both of whom reported working together to achieve their aim of providing outstanding patient care.
- There was a clear vision and values that had been developed with staff to ensure that they aligned with a service they wanted to work for. As a result "committed to excellence; working together; facing the future" was embedded throughout the trust and underpinned fundamental behaviours. The potential acquisition of another provider had been well communicated with staff and at all levels there was confidence that the service provided at Frimley Park hospital would remain at the current high standard.
- The trust demonstrated a strong patient-centred culture, which considered that public engagement was essential in developing services. The evident strength and depth of leadership at both board and ward level was outstanding, the benefits of which were clearly demonstrated by the consistency of high quality care provided across the domains and throughout the core services and should be congratulated.

In addition to the above, we saw multiple specific areas of good and outstanding practice:

- The A&E department had been redesigned by taking patients' views into account, and provided an environment that helped to deliver exceptional patient care (including specific dementia-friendly areas).
- The four-hour target was consistently met, and the other core services that worked with the A&E department acknowledged that the target was everyone's responsibility.
- Joint working between the elderly care physicians and the A&E department led to improved patient experience and reduced unnecessary admissions.

Summary of findings

- 'Round table' discussions were used as a learning tool, and there were well-developed Mortality and Morbidity (M&M) meetings, which included dissemination to all levels of staff.
- There was a drive to increase incident reporting by all staff groups, especially medical staff (i.e. doctors).
- The management of medical outliers, including the method of communicating with teams, ensured ownership and daily (early) review.
- Specialist advice was available for GPs and the A&E department and rapid access clinics reduced unnecessary admissions.
- Theatre utilisation had improved, and resulted in a cancellation rate of 0.6% between October 2013 and June 2014.
- There were communal dining areas on the orthopaedic wards.
- There was a high standard of care provided for patients at the end of their life, and we saw that staff went to great lengths to respect and accommodate the wishes of patients and their families, including the use of the 'Time Garden'.
- The trust used and audited the trust wide 'Personalised Care Plans for the Dying Patient' in place of the previously used Liverpool Care Pathway.
- The A&E department used memorial boxes for recently bereaved relatives and contacted them six weeks following the death of a relative.
- The ophthalmology service had received a 'Clinical Service of the Year' award from the Macular Society
- Joint working with specialist providers allowed patients to attend outpatient clinics closer to their home rather than having to travel to another provider further away.

However, there were some very limited areas of poor practice where the trust needs to make improvements.

The trust should:

- Review nursing staffing levels and skill mix in paediatrics (services for children).
- Ensure paediatric staff have the necessary skills to identify and manage the deteriorating child.
- Review how training data is recorded within paediatrics, to ensure that records are accurate.

Professor Sir Mike Richards
Chief Inspector of Hospitals

Summary of findings

Background to Frimley Park Hospital NHS Foundation Trust

Frimley Park Hospital NHS Foundation Trust has been a foundation trust since 1 April 2005. It employs almost 3,700 whole time equivalent staff and has around 750 beds. The trust's turnover is £290million and it has been in surplus since 2005.

We carried out this follow up inspection in addition to our comprehensive inspection in November 2013, as Frimley Park Hospital was inspected during a pilot period when shadow ratings were not published. In order to publish a rating we needed to update our evidence and inspect all core services and 'well-led' trust-wide. Because we had inspected the trust so recently (in November 2013) we did not repeat some parts of our usual inspection process. This included the unannounced visit (which took place at night) and the public listening event. At the public listening event in November we heard directly from about 100 people about their experiences of care.

At the time of this inspection there was a stable executive team. The CEO had been in post since 1989 and other executive members joined between 1991 and 2013. The Chair had been in position since April 2006 and the remaining non-executive directors had been in position since between 2006 and 2013.

Frimley Park Hospital NHS Foundation Trust hosts a Ministry of Defence Hospital Unit with military medical, surgical and nursing workforce fully integrated into the NHS staff.

The trust is proposing to acquire Heatherwood and Wexham park Hospitals NHS Foundation Trust during 2014 and at the time of the inspection were progressing through the transaction.

Our inspection team

Our inspection team was led by:

Chair: Professor Sir Mike Richards, Chief Inspector of Hospitals, Care Quality Commission

Head of Hospital Inspections: Heidi Smoult, Care Quality Commission

The team of eight on 10 and 11 July and the team of 22 on 8 and 9 August 2014 included CQC senior managers, inspectors, doctors, nurses, pharmacist, patients and public representatives, Experts by Experience and senior NHS managers.

How we carried out this inspection

To get to the heart of patients' experiences of care, we always ask the following five questions of every service and provider:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

The inspection team inspected the following eight core services at the Frimley Park Hospital:

- Accident and emergency

- Medical care (including older people's care)
- Surgery
- Critical care
- Maternity and family planning
- Services for children and young people
- End of life care
- Outpatients.

Before the announced inspection, we reviewed a range of information we held from our inspection in November 2013 when we asked other organisations to share what they knew about the hospital. These included the clinical commissioning group (CCG), Monitor, NHS England, Local

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Area Team (LAT), Health Education England (HEE), the General Medical Council (GMC), the Nursing and Midwifery Council (NMC), Royal Colleges and the local Health watch. At this follow up inspection we liaised with a proportion of these stakeholders.

We carried out the follow up inspection in two parts. We inspected A&E and Maternity on 10 and 11 July 2014. We inspected medicine, surgery, critical care, paediatrics and young people, end of life care and outpatients on 7 and 8 August 2014.

We interviewed staff and talked with patients and staff from all the ward areas and outpatient services. We observed how people were being cared for, talked with carers and/or family members, and reviewed patients' records of personal care and treatment.

What people who use the trust's services say

In the Adult Inpatient Survey in 2013 Frimley Park Hospital NHS Foundation Trust scored 'within expectations' in all 10 areas. The trust's performance had remained the same in seven areas but they had made improvements in three areas. Of the individual 60 questions asked the trust performed better than other trusts in nine questions.

The results of the 2013 NHS Staff Survey demonstrated that Frimley Park hospital performance was better than expected in 17 of the indicators and placed within the top 20% of trusts nationally, while none of the indicators were within the bottom 20% of trusts nationally. Those worse than expected included not receiving an annual appraisal and experiencing discrimination at work in last 12 months.

Friends and Family Test results showed the average scores for both inpatients and A&E were better than the national figure for 2012/13. In addition, the response rate for both inpatient, A&E and Maternity for April to June 2014 was better than the national percentage.

The Cancer Patient Experience Survey (CPES), Department of Health, 2012/13, showed that out of 69 questions, for which the trust had a sufficient number of survey respondents on which to base findings Frimley Park hospital was rated by patients in the top 20% of all trusts nationally for 25 of the 69 questions.

The CQC's Survey of Women's Experiences of Birth 2013 showed that under the 'Care during labour and birth' that the trust was performing the same as other trusts for all three areas of questioning.

Facts and data about this trust

Context

- Foundation Trust since 1 April 2005
- Approximately 750 beds
- Serves a population of around 400,000
- Employs around 3,700 whole time equivalent members of staff

Activity

- Around 33,000 inpatient emergency admissions per annum
- Around 57,000 inpatient elective admissions (including day case activity)
- Around 350,000 outpatient attendances per annum

- Around 104,000 A&E attendances per annum
- Around 5,500 births per annum

Intelligent Monitoring

- Safe: Items = 8, Risks = 1, Elevated = 1, Score = 3
- Effective: Items = 31, Risks = 0, Elevated = 0, Score = 0
- Caring: Items = 21, Risks = 0, Elevated = 0, Score = 0
- Responsive: Items = 10, Risks = 0, Elevated = 0, Score = 0
- Well led: Items = 24, Risks = 2, Elevated = 0, Score = 2
- **Total:** Items = 94, Risks = 3, Elevated = 1, Score = 5

Key Intelligence Indicators

Safety

Summary of findings

- One never event in last 12 months – retained swab in maternity services
- STEIS 59 Serious Untoward Incidents (April 2013 - March 2014)
- Infections
 - C-difficile: within expectation
 - MRSA: within expectation

Effective

- HSMR: 88 (better than national average)
- SHMI: 89 (better than national average)

Caring

- Friends and Family Test
 - Average score for both inpatients and A&E are better than the national average for 2012/13
 - Response rates for both inpatients and A&E are better than the national average for 2012/13
- Cancer Patient Experience - In the top 20% of all trusts nationally for 25 of the 69 questions
- CQC Adult Inpatient Survey - Trust scored 'within expectations' in all 10 areas

Responsive

- A+E 4 hour target: Consistently met the 95% in the previous 12 months

- Referral to treatment: Consistently met the admitted and non-admitted pathways
- Cancer 2 week wait: Consistently met the national target
- Cancer 31 day wait: Consistently met the national target
- Cancer 62 day wait: Consistently met the national target

Well-led


- Staff survey 2013:
 - Consistently been in the top 20% for over ten years with 0 questions in the lowest 20%
 - 88% recommend the hospital as a place to receive treatment (better than average)
 - 77% recommend the trust as a place to work (better than average)
 - 83% of staff say the care of patients their top priority (better than average)
 - 96% extremely likely or likely to recommend as a place to work (better than average)

Inspection history

Comprehensive new inspection in November 2013 during wave one. Ratings were not published.

Summary of findings

Our judgements about each of our five key questions

	Rating
<p>Are services at this trust safe?</p> <p>Overall we rated the safety of services in the trust as good. For specific information please refer to the report for Frimley Park Hospital.</p> <p>Incident reporting was embraced by staff throughout the organisation. Where some staff groups had low levels of incident reporting, such as doctors, work had been carried to increase their reporting with good results, which demonstrated the continuous improvement culture and accountability amongst all staff groups. Learning and improvements from incidents was seen throughout the majority of the organisation with many levels of staff able to describe an improvement to patient care.</p> <p>Frimley Park Hospital NHS Foundation Trust was one of 12 NHS trusts to initially sign up to the NHS England “Sign up for Safety” Campaign. A safety culture was a priority for staff at all levels and embedded throughout the trust. Staff were empowered to be part of improvements. The trust had carried out some ‘look back’ exercises as a team approach to review notes and look for areas of improvement to patient care, with any concerns identified shared with patients in an open and transparent manner.</p> <p>The standard of cleanliness, infection control and hygiene was good and staff were consistently seen adhering to infection control policies and procedures. There was a system for robust monitoring of cleanliness and infection control to ensure standards were being met. There was sufficient equipment to ensure staff were able to carry out their duties and there was a robust system for maintaining equipment. Medicines management was good throughout the organisation and learning was embedded in response to medication errors.</p> <p>Records were well maintained and documentation was completed comprehensively ensuring patient records were up to date, including completion of risk assessments. Consent was carried out effectively. Staff were trained in safeguarding and there were appropriate processes for safeguarding patients against abuse.</p> <p>Statutory and mandatory training levels were good and where they fell below the trust expectation there were clear plans in place to make improvements.</p> <p>There was a system in place to assess deteriorating patients, known as the Medical Emergency Team (MET) score, which was a tool</p>	<p>Good </p>

Summary of findings

developed by the trust. Evidence demonstrated good compliance with completion and appropriate escalation action when required. In addition, the trust carried out audits proactively to continuously improve the use of the tool.

Nurse staffing levels were mostly sufficient and where there were vacancies, the trust monitored the risk through a tool used on each ward consistently. Where bank or agency nurses were used there was a robust induction checklist, which included introduction to the use of the MET score. Medical staffing levels were sufficient and the trust secured a high level of doctors in training and staff from the military.

Are services at this trust effective?

Overall, we rated the effectiveness of the services in the trust as good. For specific information, please refer to the report for the Frimley Park Hospital.

Evidence-based care was fundamental to the policies and procedures used throughout the organisation, with a commitment to continuously improve outcomes for patients. Guidelines and policies included evidence-based guidance and national recommendations. Clinical outcomes were consistently in line with or better than the national average. Where the trust had recognised themselves as needing to improve outcome data, such as orthopaedics, there was innovative multidisciplinary team working to assess the concerns identified and take necessary steps to improve outcomes to a position to being better than the national average.

There was significant evidence of audit leading to improvements being made by all staff groups, which included a yearly audit competition to encourage and promote innovative thinking among multidisciplinary teams.

Management of pain was good and patient feedback was consistent with this evidence. Nutrition and hydration of patients was managed effectively and staff were clear in ensuring this aspect of care was delivered according to individual needs.

Staff competence and continuous development was evident in the trust. There were a significant number of specialist nurses both in surgery and medicine, as well as those to meet the needs of vulnerable groups, which demonstrated an increased commitment to specialist knowledge and training to enhance patient care and patient experience.

Staff throughout the organisation were committed to multidisciplinary working and recognised the value of each other's

Good



Summary of findings

role in delivering high quality care. Multidisciplinary meetings were consistently carried out with a clear commitment to working collaboratively to improve care through innovations, improvements in pathways, improvements in teamwork and more efficient ways of working.

Are services at this trust caring?

Overall, we rated the caring aspects of services in the trust as outstanding. For specific information, please refer to the report for the Frimley Park Hospital.

Treating patients with dignity and respect, as well as valuing them as individuals was evident throughout the organisation and fundamentally part of the culture. Patients were empowered to be part of their ongoing care and feedback from patients during the inspection was consistently excellent. The friends and family test results were better than the national average for both A&E and inpatient care; and the response rates were also better than the national average.

There was a clear motivation from staff to offer kind and compassionate care, where patients' views were considered and acted upon. In addition, where patients had specific needs staff demonstrated a commitment to deliver care that met the individual requirements.

Feedback from patients, carers and relatives highlighted the commitment staff had in ensuring they were involved in their care and this partnership approach to empower patients was evident during the inspection. Staff were caring, kind and supportive and feedback demonstrated exceeding expectations in many cases. There was a culture of innovative approach to meeting patients' individual needs and staff were reported to 'go out of their way' to meet patients' needs. For example, patients reaching the end of life were involved in planning their wishes and staff were committed to meeting these and overcoming obstacles.

Outstanding



Are services at this trust responsive?

Overall we rated the responsiveness of services in the trust as outstanding. For specific information, please refer to the report for the Frimley Park Hospital.

The trust demonstrated a culture that strived to meet the needs of patients through service development and using innovative thinking during planning. Meeting people's individual needs were a significant focus when services were developed and patient's views were actively sought through groups in the community, constituency meetings and other forums to ensure developments

Outstanding



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captured the wishes and needs of their population. Examples of developments which fundamentally considered patients views were the redesign of the A&E department, the development of the maternity department and the midwife-led unit. These examples demonstrated a commitment to working with patients in the local community when developing services.

The trust proactively took steps to meet the individual needs of different and vulnerable groups of people that used their services. One example was the significant amount of work with the Nepalese community, which resulted in some staff being trained as translators for this group of patients. In addition, there was a commitment to meet the needs of vulnerable groups such as patients with a learning disability.

As pathways were reviewed and redesigned, there was a commitment to ensure that patients were able to receive care closer to their home where possible. An example was the development of a one-stop service for ophthalmology patients, which was introduced through partnership working with other organisations.

Innovative approaches to pathways redesign was encouraged throughout the trust to ensure patients were able to access services in a timely way. The trust has consistently met the referral to treatment targets for the previous two years; it has consistently achieved the A&E four-hour target and has met the cancer waiting times target. There were examples of pathway redesign and innovation to achieve this, such as the extended theatre sessions to increase theatre productivity.

Complaints were effectively managed with clear processes in place, which included the CEO and Director of Nursing (occasionally referred to as Chief Nurse) reading all complaints that involved patient care. There was a commitment and accountability from staff throughout the organisation to learn from complaints and make improvements where necessary.

Are services at this trust well-led?

The trust's leadership was rated as outstanding. For specific information about the leadership within the hospital please refer to the report for Frimley Park Hospital.

The drive for high quality patient-centred care was evident through the combination of the leadership at all levels, with the governance process and the open and transparent culture being used to drive improvements. The culture throughout the trust was open and

Outstanding



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transparent with a clear sense of pride among all staff groups. There was a strong sense of support and alignment between clinicians and managers with a clear sense of accountability among staff at all levels.

The CEO had been in post for 25 years and displayed a visible and strong leadership style, which was reported to have a significant impact on the trust. The executive team were cohesive yet challenging to ensure patients were at the centre of their work. Staff were aligned with the trust's vision and values "committed to excellence; working together; facing the future" and they were evidently embedded throughout the trust underpinning fundamental behaviours. There was a sense of mutual support and passion to deliver patient-centred care amongst all staff groups at all levels. There was a recognised visibility of leadership and excellent engagement with governors and the public through constituency meetings held monthly.

There was evidence of a proactive and systematic approach to improve outcomes, improve patient experience, drive efficiency and productivity; including work with other stakeholders where appropriate to continuously improve patient care. The governance structure was robust and there was evidence of good 'board to ward' and 'ward to board' communication.

The strategy and vision for the trust, which included the potential acquisition of another provider, demonstrated robust analysis and proactive approach to ensure sustainability and pathways of care (including hyperacute services), whilst remaining realistic regarding the potential challenges that may be encountered. Steps had been taken to ensure the transition was effective through strength of leadership which included the former medical director of 13 years leading on the clinical aspects of the transaction. In addition, there was a clear acknowledgement that the high quality care vision at Frimley Park must be maintained, and there was clear depth and breadth in the leadership team to mitigate this risk.

The governance arrangements demonstrated evidence of performance management against key indicators and evidence of proactive review of the structures to ensure that continuous improvement underpinned practice, such as improvements made in morbidity and mortality meetings across specialties. There was evidence that governance structures were embedded throughout the trust and that the processes were reliable, such as incident reporting where staff demonstrated knowledge of improvements being made as a consequence. Junior doctors and governors were present on some of the governance committees to ensure views were captured and to provide challenge.

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Staff engagement was excellent and staff were very open and described the 'Frimley Family' with the CEO mantra that staff needed to work 'for Frimley' not 'at Frimley'. There was a culture of positivity and probity evident at all levels. There was a genuine sense of a flattened hierarchy and culture that ensured all staff views were captured amongst all groups and at all levels.

Public engagement was fundamental to developments made in the trust and patient feedback was proactively sought with improvements made as a consequence, including consideration for minority groups. An open and transparent approach with patients was evident, with 'look back' exercises carried out and subsequent sharing of information with patients or relatives.

Innovation and continuous improvement was fundamental to the culture at the trust and there was evidence that innovation among all staff groups and at all levels was encouraged. Research and development was evident in a number of specialties with evidence of the subsequent positive impact on patient care. Innovations and good practice from benchmarking and other organisations was actively sought, such as the development of the environment in A&E.

The positive approach to leadership and shared vision and strategy among staff engendered a culture of patient-centred care with a clear shared purpose, which motivated staff to drive improvements.

Vision and strategy for this service

- The trust values were aligned to the vision and strategy for the trust "committed to excellence; working together; facing the future" and were embedded throughout the organisation amongst all levels and staff groups.
- All staff were able to describe the values and felt they were meaningful to staff.
- Frimley Park Hospital NHS Foundation Trust strategy described the acquisition of another acute provider, which aimed to create a clinically and financially stable trust that delivered high quality clinical care to a diverse population, providing the new enlarged trust the scope to:
 - ensure hyperacute services can be maintained serving a larger diverse population
 - provide specialist services closer to home
 - development of state of the art new elective surgical centre
 - develop a single positive culture throughout the organisation at all levels of staff
 - ensure safe transition of staff to ensure ongoing development and motivation is maintained

Summary of findings

- standardise systems, policies and processes to ensure robust transition of services
- cross-site clinical leadership, which puts clinicians at the centre decision making
- The trust strategy to provide excellent local acute services with some hyperacute services allowed clear objectives to be set, which was evident through the performance appraisal system.

Governance, risk management and quality measurement

- There were robust and standardised governance systems and processes in place to manage risk, measure performance and improve services.
- There was consistent evidence of good 'board to ward' and 'ward to board' communication.
- The Clinical Governance Committee had representation from non-executive directors and governors to allow objective challenge.
- The Quality Committee was chaired by the medical director and reviewed the Quality Improvement Plan and output from the Morbidity and Mortality review group. This committee required all clinical directors to present their clinical quality dashboard and discuss issues regarding quality and safety.
- Morbidity and Mortality meetings were embedded throughout the specialities and the medical director provided structured review of this process through the Quality Committee.
- There was a culture of incident reporting amongst all staff groups and focused work had been done to improve incident reporting amongst certain staff groups, such as medical staff, where there had been evidence of low reporting figures.
- There was evidence throughout the trust that staff received feedback from incidents and there were extensive examples of learning from incident resulting in improvements being made in practice, although some areas required some strengthening of the feedback to staff.
- There was a culture of proactive risk management and clinical governance processes to identify necessary improvements and work with a cycle of continuous improvement.
- There was evidence that the trust carried out 'look back' exercise and where failings or potential failings were identified they shared these with patients and their relatives in an open and transparent manner.
- Learning from incidents, complaints and compliments was evident trust wide and there were extensive examples of shared learning from one area/ward to other areas within the trust.
- There was a structured bi-monthly schedule where the medical director met with junior doctors to understand any clinical

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issues or concerns they may be facing to allow them to be addressed in a timely manner. The Director of Nursing (occasionally referred to as Chief Nurse) also held meetings with newly qualified nurses and students.

- A joint Patient Experience Group with trust directors and governors focussed on quality issues and there were structured drop in sessions for governors to have the opportunity to challenge the CEO and trust Chair.
- There was evidence that the governors challenged the board and held them to account against the board objectives.
- The Frimley System Transformation Board was set up following work with the King's Fund and focused on continuous review of pathways to ensure a sustainable future for the organisation and health economy, which included working with the public and other stakeholders. This board was also used to respond to winter pressures and had resulted in a number of initiatives being developed in conjunction with primary care to improve the care and pathways for patients.
- The 'Ask Andrew' area of the trust website allowed patients and relatives to directly raise concerns with the CEO and there was evidence that this was used on a daily basis and that the CEO responded directly.
- The complaints process was robust with clear evidence that clinicians and managers were aligned in managing complaints in an open and transparent manner. The CEO and Director of Nursing personally reviewed all clinical complaints to ensure they were aware of issues being raised.
- The trust has been nominated as one of the 12 pilot trusts for patient safety in 2014.

Leadership of service

- The CEO had been in post for 25 years and provided consistent and visible leadership throughout the trust and set a clear culture that all staff must put patients at the centre of their work.
- There was an evident theme of support and alignment among clinicians, manager and executive directors.
- The Chair demonstrated a clear understanding of the objectives, values and future strategy of the trust and was able to evidence clear examples of the non-executives holding the executive team to account in a challenging but supportive manner.
- The CEO was recognised nationally by the Health Service Journal as one of the top ten CEO's nationally.

Summary of findings

- There was consistent feedback among all staff groups and levels that the CEO had been an extremely strong leader setting the expectations and leading by example, with significant visibility.
- The CEO had a clear mantra that all staff should work “for Frimley Park” and not “at Frimley Park” to ensure all staff member had a clear role in ensuring the organisation achieved its objectives. Staff described this as the ‘Frimley Family’.
- The CEO was reported to have an ‘open door’ policy and there were extensive examples of where staff felt able to discuss issues directly with the CEO as the trust wide structure was aiming to have a leadership team without too many levels of hierarchy.
- The executive team had clear portfolios of work and were clear on responsibility and accountability relating to their portfolios.
- The executive team were cohesive and strong in their leadership and staff feedback was consistently positive about their style of leadership and visibility.
- The former medical director of 13 years, who was recognised by staff as a strong leader stood down in December 2013 and in his new post was able to mentor the new medical director and provide clear leadership on the clinical integration aspect of the acquisition.
- The new structure for the enlarged organisation post acquisition had been clearly defined and set out to ensure the culture of Frimley Park was embedded across the new organisation as a whole.
- The trust was named ‘Trust of the Year’ for the south of England by Dr Foster in 2013.
- The trust has achieved bronze standard for Investors in People (IIP), which represents 5% IIP organisations.
- Junior doctors voted Frimley Park as the best trust for foundation training in the Kent Surrey and Sussex deanery.
- The trust has consistently achieved national performance targets for each quarter of the last two years, including referral to treatment, A&E 4 hour target and cancer waiting times.
- The NHS Leadership Academy awarded the trust “Governing Body of the Year” for 2013.
- The trust had 10 clinical directors who were recognised to be accountable for their service and staff feedback demonstrated good leadership at this level with a clear alignment of working between managers and clinicians to achieve the required objectives in an open and transparent manner.
- Nursing leadership at all levels was reported positively by staff with a consistent theme that staff felt able to raise concerns.

Summary of findings

- Senior sisters had undertaken a 6-month leadership programme in partnership with the military in order to strengthen their leadership skills and role in providing high quality care. Staff reported on this positively in relation to the impact it had had on their ability to lead effectively.

Culture within the service

- The culture throughout the organisation was open and transparent with a clear focus on improvement and putting the patient at the centre of the work.
- The staff demonstrated a cohesive, aligned and supportive culture whilst showing clear responsibility to challenge where necessary.
- There was a culture of innovation among all staff groups and a culture of encouragement to propose improvements where possible.
- There was a clear culture of personal accountability among staff with a strong sense of pride in their work.
- The executive offices were accessible and within the same block where staff attended training which had an open area for staff to meet. Staff reported that this allowed them to approach any executive if necessary and provided a structure of openness and transparency.
- The culture was one that demonstrated excellent staff engagement and commitment among all staff groups and many members of staff were seen to go out of their way to help patients or relatives in a positive and friendly manner.
- The trust recognises the provider that they propose to acquire has a different culture and has clear plans to ensure that the culture for the new enlarged organisation is positive.

Public and staff engagement

- The staff survey in 2013 results showed that of the 28 key findings, 17 were in the top 20% nationally and none were in the bottom 20% nationally.
- The trust has been in the top 20% of trusts nationally for staff engagement since 2009.
- The Friends and Family staff survey in June 2014, 95% of the staff that responded (382 staff) stated they would be extremely likely or likely to recommend the trust as a place to work.
- The trust held public engagement meetings in each constituency to ensure their views were captured and considered in aspects of the trust values and strategy, where

Summary of findings

each attendee is given a keypad to vote. A recent example of this was the consultation of the proposed acquisition where attendees were asked to vote to demonstrate their support for the transaction.

- A clinician presents at these monthly constituency meetings, with around 100 attendees to answer questions and capture views.
- The trust values were developed in conjunction with staff and they were put out for consultation to ensure all staff felt they were part of the values.
- The CEO, medical director, director of nursing (occasionally referred to as Chief Nurse) all did formal sessions with members of staff to gain feedback and update staff.
- The staff were all aware of the proposed acquisition of another provider and had been updated in a consistent manner of the changes.
- Patient feedback was sought proactively and improvements made as a consequence.
- Junior doctors are invited to attend a number of the trust committees to ensure their views are captured and issues could be raised.

Innovation, improvement and sustainability

- There was evidence of continuous improvement throughout the organisation.
- Innovation was encouraged among all staff groups and there were examples where improvements were made following staff proposing new ideas.
- There were annual clinical audit competitions to encourage all staff groups to present or display a poster and encourage a culture of improvement.
- The research and development department was a fundamental element to improvement within the organisation across many specialities.
- As a consequence of the trust having a surplus consistently there was evidence that investment into services was made as a consequence such as the A&E department, the day surgery unit and a new cardiology wing and heart attack centre.
- The development of the A&E department was based on international research and comments from the public when redesigning the services.
- The ophthalmology macular service had been developed in an innovative way to provide a one stop service closer to home for patients. This service has been recognised internationally with groups worldwide visiting to understand the service.

Summary of findings

- Frimley Park Hospital had developed diabetic retinopathy screening throughout Zambia.

Overview of ratings

Our ratings for Frimley Park Hospital

	Safe	Effective	Caring	Responsive	Well-led	Overall
A&E	Outstanding	Not rated	Good	Outstanding	Outstanding	Outstanding
Medical care	Good	Good	Outstanding	Outstanding	Outstanding	Outstanding
Surgery	Good	Good	Good	Outstanding	Outstanding	Outstanding
Critical care	Outstanding	Good	Outstanding	Good	Outstanding	Outstanding
Maternity & Family planning	Good	Good	Good	Good	Good	Good
Services for children and young people	Requires improvement	Good	Outstanding	Good	Good	Good
End of life care	Good	Outstanding	Outstanding	Outstanding	Outstanding	Outstanding
Outpatients	Good	Not rated	Good	Outstanding	Good	Good
Overall	Good	Good	Outstanding	Outstanding	Outstanding	Outstanding

Our ratings for Frimley Park Hospital NHS Foundation Trust

	Safe	Effective	Caring	Responsive	Well-led	Overall
Overall trust	Good	Good	Outstanding	Outstanding	Outstanding	Outstanding

Notes

We are currently not confident that we are collecting sufficient evidence to rate effectiveness for both Accident and Emergency and Outpatients.

Outstanding practice and areas for improvement

Outstanding practice

- The A&E department had been redesigned by taking patients' views into account, and provided an environment that helped to deliver exceptional patient care (including specific dementia-friendly areas).
- The four-hour target was consistently met, and the other core services that worked with the A&E department acknowledged that the target was everyone's responsibility.
- Joint working between the elderly care physicians and the A&E department led to improved patient experience and reduced unnecessary admissions.
- 'Round table' discussions were used as a learning tool, and there were well-developed Mortality and Morbidity (M&M) meetings, which included dissemination to all levels of staff.
- There was a drive to increase incident reporting by all staff groups, especially medical staff (i.e. doctors).
- The management of medical outliers, including the method of communicating with teams, ensured ownership and daily (early) review.
- Specialist advice was available for GPs and the A&E department and rapid access clinics reduced unnecessary admissions.
- Theatre utilisation had improved, and resulted in a cancellation rate of 0.6% between October 2013 and June 2014.
- There were communal dining areas on the orthopaedic wards.
- There was a high standard of care provided for patients at the end of their life, and we saw that staff went to great lengths to respect and accommodate the wishes of patients and their families, including the use of the 'Time Garden'.
- The trust used and audited the trust wide 'Personalised Care Plans for the Dying Patient' in place of the previously used Liverpool Care Pathway.
- The A&E department used memorial boxes for recently bereaved relatives and contacted them six weeks following the death of a relative.
- The ophthalmology service had received a 'Clinical Service of the Year' award from the Macular Society
- Joint working with specialist providers allowed patients to attend outpatient clinics closer to their home rather than having to travel to another provider further away.

Areas for improvement

Action the trust **MUST** take to improve

Action the hospital **SHOULD** take to improve

- Review nursing staffing levels and skill mix in Paediatrics (services for children).
- Ensure paediatric staff have the necessary skills to identify and manage the deteriorating child.
- Review how training data is recorded within paediatrics to ensure that records are accurate.