

Our strategy continued



2. Building on quality

We remain fully focused on quality and patient safety across the organisation, underpinned by an open, learning and quality improvement culture.



Our goals

- 100% of our inspected locations achieve ‘Good’ or ‘Outstanding’ ratings from regulators in England, Scotland and Wales
- Sector-leading patient satisfaction
- Above average patient reported outcomes

Highlights and priorities

Highlights of 2023

- Started implementing the NHS England Patient Safety Incident Response Framework (PSIRF)
- Quality Improvement strategy fully embedded across our sites
- Continued to strengthen our governance standards including increased compliance with the National Joint Registry
- Launched our new Driving Clinical Excellence in Practice programme

Priorities for 2024

- Complete the implementation of PSIRF
- Continue to use our Quality Improvement strategy to maximum effect
- Use our new patient experience and engagement framework to further enhance patient experience
- Work with our new services to ensure we have excellence in governance and learning across the group

Outstanding clinical quality

Quality underpins everything we do, with the delivery of patient safety and high-quality patient care central to Spire Healthcare’s operations and embedded in our purpose and culture. 96% of our patients rated their experience as ‘very good’ or ‘good’, while 98% of our inspected hospitals and clinics are currently rated ‘Good’ or ‘Outstanding’ or the equivalent by regulators in England, Scotland and Wales. We are still awaiting reinspection of Spire Alexandra, our one remaining site which has a ‘Requires Improvement’ rating, which has not been inspected since 2016/17. Inspected VHG locations are currently rated 100% ‘Good’ by CQC.

Achieving 100% ‘Good’ or ‘Outstanding’ ratings across the group is a key target for us, and we aim to deliver care to the highest possible standards at all sites, all the time. This means being uncompromising on patient safety, and we aspire to the highest levels of incident reporting and the lowest level of patient harm incidents. We work hard to support our colleagues and consultants to ensure they have the skills and the facilities they need to ensure patient safety.

Driving clinical excellence

During the year, we developed a new Driving Clinical Excellence in Practice programme, to support our registered nurses and allied health professionals’ continuing professional development and the requirements of their professional revalidation. Read more on page 28. Aligned to this programme, in early 2024 we are rolling out the national Diseases Attacking the Immune System (DAISY) award to recognise extraordinary registered nurses and nursing associates who go above and beyond, and the Inclusive Recognition of Inspirational Staff (IRIS) award, recognising registered allied health professionals’ excellent care to our patients.

Our strategy continued

Our framework for continuous improvement

We speak with patients every day to better understand their experience in our care. We want to find out more about their experience with us, their outcomes, and their broader patient experience before and after they came into our care. We use online feedback and patient forums with a direct loop to our hospitals and clinics so we can learn across all parts of the patient pathway. We have introduced a new Patient Experience Framework which provides a toolkit for listening to patients, standardised guidance on running effective patient forums and support with responding to issues raised. We relaunched and strengthened our hospital's patient forums in 2023.

Hospital leaders attend a daily safety briefing with a standard agenda, to share key developments, and determine any improvements we can make. This is complemented by a weekly 10@10 meeting – 10 minutes at 10 am – for all our central function colleagues. Another fortnightly meeting for senior leaders is hospital focused and supported by a detailed weekly briefing for cascade. We think it is important to create safe spaces for our leaders to reflect on these matters and hold professional conversations and coaching discussions when required. All this means that vital information is shared swiftly to improve safety and encourage continuous improvement, and that conversations are happening across the organisation to make sure all lessons are learned.

Governance and oversight

We continue to strengthen our governance standards, assurance and board oversight, using data to support hospitals through comprehensive reporting processes on quality and rigorous ward-to-board assurance. We are extending our governance approach to all parts of the business, including the services we provide outside of hospitals, seeking to share learning as we integrate newly acquired services and develop new ones.

Our integrated quality assurance framework includes a suite of key performance indicators (KPIs) that is reported monthly to the board. Our framework is based on the NHS National Quality Board framework, with KPIs grouped under safe, effective, experience, well led, and money and people. An expanded report with a full suite of KPIs is used to provide information,

context and actions to board members to support robust conversations around assurance. The committee reviews all KPIs and forensically probes for themes, trends or opportunities for patient safety improvement. It scrutinises consultant performance; identifies quality outliers by consultant, hospital, or procedure; ensures full compliance with our policies around multidisciplinary meetings, especially in cancer; and reviews specialist services such as cardiac and young people's services. It reviews any learnings arising from mortality reviews and always receives a presentation from hospitals on patient safety improvement. To read more, see page 101.

Quality and safety

We continue to ensure that we benchmark our quality standards against best practice, including using appropriate accreditation programmes. We have earned JAG accreditation for our endoscopy services at 14 sites – two hospitals achieved first-time accreditation in 2023, three were reaccredited. This accreditation is awarded by the Royal College of Physicians' Joint Advisory Group on Gastrointestinal Endoscopy. In addition, 15 of our 16 chemotherapy sites have Macmillan Quality Environment Mark (MQEM) accreditation, which champions cancer environments that go above and beyond to create welcoming and friendly spaces for patients.

We continue to build our capacity to provide more complex care for patients in our hospitals. This opens up new areas of care we can provide, and makes Spire Healthcare more self-supporting, by ensuring that we need to do fewer transfers out where critical care needs arise.

Regulatory inspections (with 6 reports published in 2023)

7

2022: 10 inspection reports

Net promoter score among corporate customers towards VHG's employee assistance plans

97

Source: NPS scores, Vita Health Group.



Patient Safety Incident Response Framework

We are implementing the new NHS England Patient Safety Incident Response Framework (PSIRF). PSIRF promotes a new, more proportionate approach to responding to patient safety incidents within a wider system of improvement, with compassionate engagement and involvement of those affected by patient safety incidents. It recommends a system approach to learning from incidents, with considered and proportionate responses, with supportive oversight focused on strengthening response systems and improvement.

PSIRF builds on our open and learning culture, and we have trained all the people who need to be trained in our hospitals, ready for the full implementation in 2024. Ahead of full rollout, we have trialled the new PSIRF processes at three sites: Spire Bristol, Spire Wellesley in Southend-on-Sea, and Spire St Anthony's in Sutton.

Quality improvement

Our Quality Improvement (QI) Strategy reflects our continuous improvement approach to safety and quality, with a standard QI methodology we use across the business to enhance our quality improvement culture.

The strategy is underpinned by Spire Healthcare's QI principles:

- Pursue value and quality as defined by our customers and our stakeholders
- Understand through observation – go, look, see and measure
- Remove waste – work or systems and processes that add no value and increase workload
- Create flow – optimise efficiency in all that we do
- Make it visible so you can see what is happening
- Standardise, document and continuously improve operations

We put in place a QI framework in 2023 confirming our QI priorities, and all our hospitals have agreed their own QI priorities based on these. To date, we have run more than 200 QI projects, which have improved patient outcomes and experience, driven efficiency and reduced waste.

Projects have included a nurse-led approach to reduce incidences of hyponatraemia which was a finalist in the Nursing Times Awards 2023, a project to reduce the average length of stay for hip and knee surgery patients, efforts to use fewer opiates for pain relief at discharge for orthopaedics, a nationwide project to improve resuscitation skills which was a finalist at the LaingBuisson Awards 2023, and a multi-year project to improve patient discharge scores across the group.

Our strategy continued



Strategy in action

Resuscitation quality improvement

Our resuscitation quality improvement (RQI) programme was delivered as part of a collaborative partnership with Netherlands-based Laerdal Medical.

They are a world leader in resuscitation initiatives, such as simulation skills, and worked with us to develop our clinical colleagues' skills.

We adapted what we learned from Laerdal to create a new centralised training overview, which has led to a standardised approach to resuscitation throughout our hospitals nationally. This has

brought a level of consistency and clinical skill across the group that would normally be seen as a challenge for one large hospital site alone to achieve, never mind a series of sites across the country.

The RQI initiative has been recognised as an example of 'Excellence in Training', having been selected as a finalist in the 2023 LaingBuisson Awards.

Colleagues receive training in our QI methodology through our QI Academy. To date, more than 13,000 colleagues have accessed the QI training, either virtually or in face-to-face sessions, and we now have more than 280 QI trained practitioners. We also deliver bespoke QI training to our medical advisory committee chairs, business unit directors, directors of clinical services, finance managers, and Freedom to Speak Up Guardians.

Freedom to speak up

Like everyone working in healthcare, we have reflected on the terrible crimes of Lucy Letby, committed at an NHS Trust. It has reinforced the importance of our Freedom to Speak Up (FTSU) culture, and we are proud of our network of 58 FTSU Guardians across Spire Healthcare locations, with 90% of colleagues knowing who their FTSU guardian is, plus a network of ambassadors who can receive concerns. But having that culture in place does not mean we are ever complacent. We regularly re-emphasise to our colleagues and consultant partners that we encourage them to speak up, and inform them that they will always be listened to and supported. We believe that having the right culture where people feel psychologically safe is a prerequisite for improving quality and providing safe care.

Colleagues can submit a Freedom to Speak Up concern via a dedicated module on Datix, our risk management software. The concern is managed by one of our trained FTSU guardians. We also have 31 consultant ambassadors to receive concerns.

We surveyed our Spire Healthcare Limited FTSU guardians in 2023 and used their responses and feedback alongside listening sessions to shape our speak up strategy. We have issued clear communications from our Chief Executive Officer, Justin Ash, and Group Medical Director, Dr Cathy Cale: 'Whatever method you use, our message to you is this – if you have a concern about patient safety, please raise it immediately. We will protect anyone who raises a concern they reasonably believe to be true (proven or not) from suffering any form of reprisal or other detriment as a result.' To support this message we have launched the National Guardian's Office Speak Up training modules, 'Speak Up, Listen

Up and Follow Up', aimed at building awareness of the importance of speaking up. 'Speak Up' is mandatory for all colleagues, we will be adding it to our mandatory training for consultants who practise at Spire Healthcare and VHG will be introducing in 2024. 'Listen Up' and 'Follow Up' are for managers.

Colleagues also have access to a confidential whistleblowing helpline, managed by an independent third-party provider, enabling them to raise any concerns anonymously.

In 2023 Vita Health Group (VHG) updated their Speak Up policy and enriched their established Freedom to Speak Up Guardian roles to embed a culture where individuals confidently raise concerns in confidence and identify opportunities to improve standards of care, working environments, and colleague wellbeing. The Doctors Clinic Group has two guardians who have started their National Guardian's Office training programme. Spire Healthcare and VHG both hold a dedicated FTSU month each October – aligned to the National Guardian's Office national campaign – to raise the profile of speaking up and of the guardians, and to offer further support and training to ensure colleagues know who they are and how to contact them. In 2023 the theme was overcoming barriers.

Inspected locations rated 'Good' or 'Outstanding' or equivalent by regulators England, Scotland and Wales

98%

2022: 98%

Patients say they felt 'cared for' or 'looked after' when receiving care at Spire Healthcare hospitals

94%

2022: New question for 2023
Source: Patient Discharge Survey