

# Liverpool Heart and Chest Hospital NHS Foundation Trust

## Inspection report

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We plan our next inspections based on everything we know about services, including whether they appear to be getting better or worse. Each report explains the reason for the inspection.

This report describes our judgement of the quality of care provided by this trust. We based it on a combination of what we found when we inspected and other information available to us. It included information given to us from people who use the service, the public and other organisations.

This report is a summary of our inspection findings. You can find more detailed information about the service and what we found during our inspection in the related Evidence appendix.

## Ratings

### Overall rating for this trust

Outstanding 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Outstanding 

Are services responsive?

Outstanding 

Are services well-led?

Outstanding 

We rated well-led (leadership) from our inspection of trust management, taking into account what we found about leadership in individual services. We rated other key questions by combining the service ratings and using our professional judgement.

# Summary of findings

## Background to the trust

Liverpool Heart and Chest Hospital became an NHS Foundation Trust in December 2009. The trust is situated in the Broadgreen area of Liverpool and provides specialist heart and chest services for the North West of England, including North Wales and the Isle of Man. The trust serves a catchment area of 2.8 million people, spanning Merseyside, Cheshire, North Wales and the Isle of Man, and increasingly receive referrals from outside these areas. In 2018 the trust acquired the regional congenital heart disease service.

The trust has 183 inpatient beds across nine inpatient wards. In addition to this, they run 266 outpatient's clinics per week including 115 physical healthcare clinics. From June 2017 to May 2018 the trust had 10,470 inpatient admissions, 75,107 outpatient attendances (20% increase) and 204 patient deaths (5% increase). The trust has 1,647 staff which includes 146 medical staff and 496 nursing staff. The trust's operating revenue was £144.5 million.

At the time of our inspection the trust provided:

- Medical care;
- Surgery;
- Critical Care;
- Children and Young People service;
- End of life care;
- Community services; and
- Outpatients

We last inspected the trust in September 2016. We rated the trust overall as outstanding. The core services at Liverpool Heart and Chest Hospital were rated overall as good.

## Overall summary

**Our rating of this trust stayed the same since our last inspection. We rated it as Outstanding** 

## What this trust does

Liverpool Heart and Chest NHS Foundation Trust provide specialist heart and chest services from the trust's main hospital site but also community locations throughout Merseyside.

## Key questions and ratings

We inspect and regulate healthcare service providers in England.

To get to the heart of patients' experiences of care and treatment, we ask the same five questions of all services: are they safe, effective, caring, responsive to people's needs, and well-led?

Where we have a legal duty to do so, we rate the quality of services against each key question as outstanding, good, requires improvement or inadequate.

Where necessary, we take action against service providers that break the regulations and help them to improve the quality of their services.

# Summary of findings

## What we inspected and why

We plan our inspections based on everything we know about services, including whether they appear to be getting better or worse.

We inspected one of the acute services provided by this trust as part of our continual checks on the safety and quality of healthcare services.

## What we found

### Overall trust

Our rating of the trust stayed the same. We rated it as outstanding because:

We rated safe and effective as good. We rated caring, responsive and well-led as outstanding.

We rated surgery, one of the trust's five services, as outstanding. In rating the trust, we took into account the current ratings of the four services not inspected this time.

We rated well-led for the trust overall as outstanding.

Our full Inspection report summarising what we found and the supporting Evidence appendix containing detailed evidence and data about the trust is available on our website – [www.cqc.org.uk/provider/RBQ/reports](http://www.cqc.org.uk/provider/RBQ/reports).

### Are services safe?

Our rating of safe stayed the same. **We took into account the current ratings of services not inspected this time.** We rated it as good because:

- Patients wellbeing was central to what the trust did.
- A proactive approach to anticipating and managing risks to patients was embedded and all staff recognised their responsibilities to protect patients.
- There was a genuinely open culture in which all safety concerns raised by staff, patients and carers were valued as being integral to learning and improvement. There were safety systems in place that empowered patients, carers and staff to raise any safety concerns immediately.
- The service followed best practice when prescribing, giving, recording and storing medicines.
- Patients records were detailed, specific and accurately reflected the care planned and delivered.
- Staffing levels and skill mix had been planned, implemented and reviewed to keep patients safe. Any staff shortages were responded to quickly.

However,

- Staff had not received up-to-date mandatory training in all safety systems, processes and practices. Compliance for medical staff was particularly low. This had been recognised and actions put into place to increase access to training.

### Are services effective?

Our rating of effective stayed the same. **We took into account the current ratings of services not inspected this time.** We rated it as good because:

- Most outcomes for patients were consistently above national averages.

# Summary of findings

- There was a holistic approach to assessing, planning and delivering care and treatment to patients. This included meeting patients' specific needs in relation to food, drink and pain relief.
- Accurate and up-to-date information about effectiveness was shared internally and externally and was understood by staff. This was used to improve patient care and treatment and improvements had been checked and monitored.
- All staff had the skills and experiences they needed to carry out their roles effectively and in line with best practice. Staff were supported to deliver effective care and treatment, including meaningful and timely supervision and appraisal.
- The service was consistent in supporting patients to live healthier lives, including identifying those who need extra support.
- Practices around consent and records were actively monitored and reviewed to improve how patients were involved in making decisions about their care and treatment.

However,

- There was insufficient training for medical staff with regard to Deprivation of Liberty safeguarding and the Mental Capacity Act 2005.

## Are services caring?

Our rating of caring stayed the same. **We took into account the current ratings of services not inspected this time.** We rated it as outstanding because:

- Staff cared for patients with compassion. Patients were respected and were empowered as partners in their care, practically and emotionally, by an exceptional and distinctive service.
- Feedback from patients, carers and stakeholders was continually positive about the way staff treated them. Patients thought that staff went the extra mile and their care and support exceeded their expectations
- Staff recognised and respected patients' individual and specific needs. They always took patients personal, cultural, social and religious needs into account. Staff involved patients and those close to them in decisions about their care and treatment.
- Patients emotional and social needs were seen as being as important as their physical needs. 24 hour visiting was in place to support patients emotional and cultural wishes.
- Patients were always treated with dignity by all those involved in their care.
- Patients and their carers were active partners in their care. Staff were fully committed to working in partnership with people and making this a reality for each person.

## Are services responsive?

Our rating of responsive stayed the same. **We took into account the current ratings of services not inspected this time.** We rated it as outstanding because:

- Services were tailored to meet the needs of individuals. Patients had been involved in the planning of services. These were monitored to ensure that they continued to be delivering flexibility, allowing for choice and continuity of care for the patients.
- There was a proactive approach to understanding the needs and preferences of different groups of people and to delivering care in a way that meets these needs, which was accessible and promoted equality.
- Technology was used innovatively to ensure people have timely access to treatment, support and care.

# Summary of findings

- Patients and carers were involved in regular reviews of how the service managed and responded to complaints. The service demonstrated where improvements had been made because of learning from reviews of safety and care and treatment.
- The service used innovative ways of considering improvements, including using external people and professionals to make sure there was an independent and objective approach. A review had been undertaken for the service by external experts with their recommendations used to improve the service.

## Are services well-led?

Our rating of well-led stayed the same. **We took into account the current ratings of services not inspected this time.** We rated it as outstanding because:

- The leadership, governance and culture were used to drive and improve the delivery of high quality person centred care. Leadership was compassionate, inclusive and effective. Leaders at all levels demonstrated the high levels of experience, capacity and capability needed to deliver excellent and sustainable care. Leaders had a deep understanding of issues, challenges and priorities for their service.
- There was a systematic and integrated approach to monitoring, reviewing and providing evidence of progress against the services strategy and plans. Safe innovation was celebrated. There was a clear, systematic and proactive approach to seeking out and embedding new and more sustainable models of care.
- Staff were proud of the organisation as a place to work and spoke highly of the culture.
- There was strong collaboration, team-working and support across all functions and a common focus on improving the quality and sustainability of care.
- Innovative practice included the usage of robotic assistance in surgery to improve patient outcomes.
- Governance arrangements were proactively reviewed and reflected best practice. A systematic approach was taken to working with other organisations to improve care outcomes.
- Services were developed with the full participation of those who used them, staff and external partners were viewed as equal partners.

## Ratings tables

The ratings tables in our full report show the ratings overall and for each key question, for each service, hospital and service type, and for the whole trust. They also show the current ratings for services or parts of them not inspected this time. We took all ratings into account in deciding overall ratings. Our decisions on overall ratings also took into account factors including the relative size of services, and we used our professional judgement to reach fair and balanced ratings.

## Outstanding practice

We found examples of outstanding practice in surgery at Liverpool Heart and Chest Hospital.

For more information, see the Outstanding practice section of this report.

## Areas for improvement

We found two things that the trust should improve to comply with a minor breach that did not justify regulatory action, to prevent breaching a legal requirement, or to improve service quality.

For more information, see the Areas for improvement section of this report.

# Summary of findings

## Action we have taken

We did not take any action against this provider. There are two areas for improvement, which are detailed in the areas for improvement.

## What happens next

We will make sure that the trust takes the necessary action to improve its services. We will continue to monitor the safety and quality of services through our continuing relationship with the trust and our regular inspections.

## Outstanding practice

- There were safety systems that empowered patients, carers and staff to raise any safety concerns immediately. A system known as HALT (a process where staff can stop care or treatment to prevent harm to patients) was fully embedded.
- The trust had developed a model for patient and family centred care, the model included several key elements such as the care partner programme, shadowing, patients and family centred care ward rounds and the environment of care. The model of care was underpinned by patient and family shadowing which gave staff valuable insight into the experience of being in hospital.
- Staff used the admission process to inform and orient patients to the ward and to the service. For patients and their carers who were particularly anxious a visit to theatre and wards could be arranged prior to the patients' surgery to help them be prepared and less anxious about the experience.
- There were criteria within surgery that supported patients with more complex needs to have two surgeons perform surgery. This included surgeons from other trusts.
- Twenty-four-hour visiting was in place to support patients emotional and cultural wishes.
- In response to patient wishes all the surgical wards had a family room and kitchen available for patients and families to spend time together.
- The trust used innovative practice such as the usage of robotic assistance in surgery to improve patient outcomes.

## Areas for improvement

- The trust should ensure all staff complete mandatory training in line with trust targets.
- The trust should consider how to support medical staff to receive training in the Mental Capacity Act 2005 and Deprivation of Liberty safeguards.

## Is this organisation well-led?

Our comprehensive inspections of NHS trusts have shown a strong link between the quality of overall management of a trust and the quality of its services. For that reason, we look at the quality of leadership at every level. We also look at how well a trust manages the governance of its services – in other words, how well leaders continually improve the quality of services and safeguard high standards of care by creating an environment for excellence in clinical care to flourish.

# Summary of findings

We rated well-led at the trust as Outstanding because:

- Leaders had an inspiring shared purpose and strived to deliver and motivate staff to succeed. There were high levels of satisfaction across all staff. There was a strong collaboration, team working and support across all functions and a common focus on improving the quality and sustainability of care and people's experiences.
- Leaders maintained visibility with frontline staff through a structured schedule of executive and non-executive walkabouts and the chief executive led a daily safety huddle with representatives from all areas of the trust.
- There was a trust strategy in place which was aligned to the trust vision and values. There was a clear process for the monitoring and oversight of progress against the trust strategy and each division had its own set of objectives.
- The trust's strategy, vision and values underpinned a culture which was patient centred. Staff were empowered to make positive changes to benefit patient care.
- The trust had effective structures, systems and processes to support the delivery of its strategy.
- Leaders were aware of the challenges in the organisation to ensure quality of care and patient safety. There was an oversight framework to manage performance. The trust used a systematic approach to continually improve the quality of its services and safeguarding high standards of care by creating an environment in which excellence in clinical care would flourish.
- The service invested in innovative and best practice information systems and processes. We found the information used in reporting, performance management and delivering quality care was consistently found to be accurate, valid, reliable, timely and relevant.
- Learning from incidents was supported by the emphasis on human factors training and the development of human factors champions. There were work based simulations to re-enact situations to understand and change practice to prevent incidents.
- The trust had a structured and systematic approach to engaging with staff, people who use services, those close to them and their representatives.
- When things went wrong, staff were encouraged to report incidents, even if there was no consequence, so that learning could be captured. Public stakeholders were involved in managing risks where there was an impact on them.
- There was a strong focus on quality improvement. The approach aimed to bring together cost, quality and innovation. There were several improvement projects across the divisions, including medicines flow reducing readmission to critical care and the emergency and high risk acute coronary syndromes pilot.
- Board members were sighted on the financial challenges of the trust. There was a strong financial focus in the organisation which did not compromise patient care. The trust was supporting its financial sustainability through the development of new business opportunities outside of the NHS.

## Ratings tables

Key to tables					
Ratings	Not rated	Inadequate	Requires improvement	Good	Outstanding
Rating change since last inspection	Same	Up one rating	Up two ratings	Down one rating	Down two ratings
Symbol *	→←	↑	↑↑	↓	↓↓
Month Year = Date last rating published					

\* Where there is no symbol showing how a rating has changed, it means either that:

- we have not inspected this aspect of the service before or
- we have not inspected it this time or
- changes to how we inspect make comparisons with a previous inspection unreliable.

### Ratings for the whole trust

Safe	Effective	Caring	Responsive	Well-led	Overall
Good →← Jul 2019	Good →← Jul 2019	Outstanding →← Jul 2019	Outstanding →← Jul 2019	Outstanding →← Jul 2019	Outstanding →← Jul 2019

The rating for well-led is based on our inspection at trust level, taking into account what we found in individual services. Ratings for other key questions are from combining ratings for services and using our professional judgement.



## Ratings for Liverpool Heart and Chest

	Safe	Effective	Caring	Responsive	Well-led	Overall
Medical care (including older people's care)	Good Sept 2016	Good Sept 2016	Outstanding Sept 2016	Outstanding Sept 2016	Outstanding Sept 2016	Outstanding Sept 2016
Surgery	Good ↔ Jul 2019	Good ↔ Jul 2019	Outstanding ↑ Jul 2019	Good ↔ Jul 2019	Outstanding ↑ Jul 2019	Outstanding ↑ Jul 2019
Critical care	Good Sept 2016	Good Sept 2016	Good Sept 2016	Requires improvement Sept 2016	Good Sept 2016	Good Sept 2016
End of life care	Good Sept 2016	Good Sept 2016	Outstanding Sept 2016	Good Sept 2016	Good Sept 2016	Good Aug 2016
Outpatients and diagnostics imaging	Good Sept 2016	N/A	Good Sept 2016	Good Sept 2016	Good Sept 2016	Good Sept 2016
<b>Overall*</b>	Good ↔ Jul 2019	Good ↔ Jul 2019	Outstanding ↔ Jul 2019	Good ↔ Jul 2019	Outstanding ↑ Jul 2019	Outstanding ↑ Jul 2018

\*Overall ratings for this hospital are from combining ratings for services. Our decisions on overall ratings take into account the relative size of services. We use our professional judgement to reach fair and balanced ratings.

## Ratings for community health services

	Safe	Effective	Caring	Responsive	Well-led	Overall
Community health services for adults	Good Sept 2016	Outstanding Sept 2016	Outstanding Sept 2016	Outstanding Sept 2016	Outstanding Sept 2016	Outstanding Sept 2016
<b>Overall*</b>	Good Sept 2016	Outstanding Sept 2016	Outstanding Sept 2016	Outstanding Sept 2016	Outstanding Sept 2016	Outstanding Sept 2016

\*Overall ratings for community health services are from combining ratings for services. Our decisions on overall ratings take into account the relative size of services. We use our professional judgement to reach fair and balanced ratings.

# Liverpool Heart and Chest Hospital

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Liverpool  
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## Key facts and figures

Liverpool Heart and Chest Hospital is situated in the Broadgreen area of Liverpool. The hospital provides specialist heart and chest services for the North West of England, including North Wales and the Isle of Man. The hospital has 183 inpatient beds split across nine inpatient wards. In addition to this, they run 266 outpatient's clinics per week including 115 physical healthcare clinics. From June 2017 to May 2018 the hospital had 10,470 inpatient admissions, 75,107 outpatient attendances (20% increase) and 204 patient deaths (20% increase). The hospital has 1,457 staff which includes 146 medical staff and 496 nursing staff.

At the time of our inspection the hospital provided:

- Medical care;
- Surgery;
- Critical Care;
- Children and Young People service;
- End of life care;
- Community services; and
- Outpatients

Services are provided 24 hours a day seven days a week. During the inspection we:

- spoke with 12 patients, four carers and 24 staff.
- visited surgical wards and the theatre suite.
- had 26 meetings with staff and reviewed 15 care records and 10 prescription charts.

## Summary of services at Liverpool Heart and Chest Hospital

**Outstanding**  

Our rating of services improved. We rated it as outstanding because:

We rated safe, effective and responsive as good. We rated caring and well-led as outstanding.

# Summary of findings

We improved the ratings of surgery, the only service we inspected during this inspection.

Our rating of this service improved. We rated it as outstanding because:

- Patients were protected by a strong comprehensive safety system that all staff were aware of and worked to achieve. All staff worked well together to maintain patient safety and meet individual needs.
- Staffing levels and skill mix across all disciplines were planned, implemented and monitored to meet patients' needs.
- Patients cultural, personal preferences and individual needs were reflected in the care delivered.
- Patients care was monitored and appropriate action taken in order that effective outcomes were achieved.
- The service actively engaged with local networks and other trusts to increase learning and best practice.
- There was a holistic approach to assessing, planning and delivering care and treatment to patients. This included supporting patients to live healthier lives.
- There was an emphasis on recognising the service areas for improvement. All staff were committed to ensuring that improvements could be recognised and addressed.
- There was a strong culture of staff working in partnership with patients and their carers.
- Technology was used in a variety of ways to make sure that the latest developments could be implemented safely.
- Leaders at all levels demonstrated the high levels of experience, capacity and capability needed to deliver sustainable care.

However,

- Some areas of mandatory safety training were not meeting the trusts own targets.

# Surgery

Outstanding  

## Key facts and figures

Liverpool Heart and Chest Hospital NHS Foundation Trust provide surgical specialist services in cardiothoracic surgery, from the Liverpool Heart and Chest Hospital location.

They provide a full range of heart and chest services except for organ transplantation. Services include;

- The implantation of pacemakers and other devices and treatments used to control and restore the normal rhythm of the heart (arrhythmia management). Surgical procedures used to bypass coronary arteries, replace the valves of the heart, and complex surgical correction of the major vessels in the chest (cardiac surgery).
- Surgical procedures used to treat many major diseases affecting the lungs; these can include partial or complete lung removal.
- Surgical procedures used to treat many diseases affecting the gullet and stomach (thoracic surgery). The trust also provided drug management of asthma, chronic obstructive pulmonary disease and cystic fibrosis (respiratory medicine).

Wards for surgery included:

Aspen suite, a newly developed same day admission suite. Patients were admitted directly from home on the same day as surgery and transferred from this suite to theatre.

Cedar Ward, a cardiothoracic ward with 34 beds. Patients were admitted directly to the ward, transferred to theatre following a post-operative stay on critical care then will return to Cedar Ward until discharge.

Elm Ward, a 20-bed cardiothoracic ward. Those patients who have sustained any neurological injury or need rehabilitation, would normally return to Elm Ward following their post-operative stay on critical care.

Oak Ward, a thoracic surgery ward with 20 beds.

Theatres within surgery at the trust comprised:

- Six cardiac theatres.
- Two thoracic theatres.
- One pacing theatre.
- An endoscopy suite.

The service had 2,966 surgical admissions from June 2017 to May 2018. There had been 150 (5.1%) emergency admissions, and 229 (7.7%) day case, and the remaining 2,587 (87.2%) admissions were for elective surgery.

Our inspection was unannounced (staff did not know we were coming) to enable us to observe routine activity. We inspected the service using all key lines of enquiry across all five key questions (safe, effective, caring, responsive and well led).

Before the inspection, we reviewed information that we held about the service and information sent to us by the service.

We carried out an unannounced inspection visit on 16, 17 and 29 January 2019. During the inspection we:

# Surgery

- spoke with 12 patients and four carers.
- spoke with 24 staff including registered nurses, medical consultants, medical staff, healthcare assistants, managers and pharmacy technicians.
- reviewed 15 care records
- reviewed 10 prescription charts and associated documentation
- completed a tour of surgical wards and theatres.
- reviewed a variety of documents and governance information

The team included a CQC Inspection Manager, an inspector and an assistant inspector.

## Summary of this service

Our rating of this service improved. We rated it as outstanding because:

- Patients were protected by a strong comprehensive safety system that all staff were aware of and worked to achieve. All staff worked well together to maintain patient safety and meet individual needs.
- Staffing levels and skill mix across all disciplines were planned, implemented and monitored to meet patients' needs.
- Patients records were detailed, person centred and accurately reflected the care planned and delivered. Patients cultural, personal preferences and individual needs were reflected in the care delivered.
- Patients care was monitored and appropriate action taken in order that effective outcomes were achieved.
- The service actively engaged with local networks and other trusts to increase learning and best practice.
- There was a holistic approach to assessing, planning and delivering care and treatment to patients. This included supporting patients to live healthier lives.
- Patient and carers were treated with dignity and respect with the importance of their emotional needs recognised.
- There was an emphasis on recognising the service areas for improvement. All staff were committed to ensuring that improvements could be recognised and addressed.
- There was a strong culture of staff working in partnership with patients and their carers.
- Technology was used in a variety of ways to make sure that the latest developments could be implemented safely.
- Leaders at all levels demonstrated the high levels of experience, capacity and capability needed to deliver sustainable care.

However,

- Some areas of mandatory safety training were not meeting the trusts own targets.

## Is the service safe?

Good   

Our rating of safe stayed the same. We rated it as good because:

# Surgery

- Patients were protected by a strong comprehensive safety system, and a focus on openness, transparency and learning when things went wrong.
- Patients wellbeing was at the centre of the service to safeguard and protect them from discrimination and harm.
- A proactive approach to anticipating and managing risks to patients was embedded and recognised as the responsibility of all staff. There was a genuinely open culture in which all safety concerns raised by staff, patients and carers were valued as being integral to learning and improvement. There were safety systems in place that empowered patients, carers and staff to raise any safety concerns immediately.
- Learning was based on an ongoing analysis and investigation of safety incidents. All staff were encouraged to participate in learning to improve safety.
- Compliance with medicines policy and procedure was routinely monitored and action plans were always implemented promptly.
- Patients records were detailed, specific and accurately reflected the care planned and delivered. Records also reflected risks to patients and the mitigation that the service had planned to reduce the identified risks.
- Staffing levels and skill mix were planned, implemented and reviewed to keep patients safe. Any staff shortages were responded to in a timely manner.

However,

- Some staff had not received up-to-date mandatory training in all safety systems, processes and practices. Compliance for medical staff was particularly low. This had been recognised and actions put into place to increase access to training.

## Is the service effective?

**Good**   

Our rating of effective stayed the same. We rated it as good because:

- Most outcomes for patients were consistently above national averages.
- There was a holistic approach to assessing, planning and delivering care and treatment to patients. This included meeting patients' specific needs in relation to food, drink and pain relief.
- Accurate and up-to-date information about effectiveness was shared internally and externally and was understood by staff. It was used to improve patient care and treatment and improvements were checked and monitored.
- All staff were qualified and had the skills they needed to carry out their roles effectively and in line with best practice. Staff were supported to deliver effective care and treatment, including meaningful and timely supervision and appraisal.
- Patients were discharged at an appropriate time and when all necessary care arrangements were in place.
- The service was consistent in supporting patients to live healthier lives, including identifying those who need extra support.
- There were criteria within surgery that supported patients with more complex needs to have two surgeons perform surgery. This included surgeons from other trusts. Surgeons were assisted in their learning and patient safety was a priority.

# Surgery

- Practices around consent and records were actively monitored and reviewed to improve how patients were involved in making decisions about their care and treatment.

However,

- There was insufficient training for medical staff with regard to Deprivation of Liberty safeguarding and the Mental Capacity Act 2005.

## Is the service caring?

**Outstanding**  

Our rating of caring improved. We rated it as outstanding because:

- Patients were respected and were empowered as partners in their care, practically and emotionally, by an exceptional and distinctive service.
- Feedback from patients, carers and stakeholders was continually positive about the way staff treat them. Patients thought that staff went the extra mile and their care and support exceeded their expectations.
- Staff recognised and respected patients' individual and specific needs. They always took patients personal, cultural, social and religious needs into account.
- Patients emotional and social needs were seen as being as important as their physical needs. 24 hour visiting was in place to support patients emotional and cultural wishes.
- Staff used the admission process to inform and orient patients to the ward and to the service. For patients and their carers who were particularly anxious a visit to theatre and wards could be arranged prior to the patients' surgery to help them be prepared and less anxious about the experience.
- Patients and their carers were active partners in their care. Staff were fully committed to working in partnership with people and making this a reality for each person.
- The service ensured that patients individual needs were understood.
- Patients were always treated with dignity by all those involved in their care.

## Is the service responsive?

**Good**   

Our rating of responsive improved. We rated it as outstanding because:

- Services were tailored to meet the needs of individuals. All services were planned and monitored with the aim of delivering flexibility, choice and continuity of care.
- Patients individual needs were a priority for the service to deliver appropriate and responsive care that met their needs.
- There was a proactive approach to understanding the needs and preferences of different groups of people and to delivering care in a way that meets these needs, which was accessible and promoted equality.
- Technology was used innovatively to ensure people have timely access to treatment, support and care.

# Surgery

- Patients and carers were involved in regular reviews of how the service managed and responded to complaints. The service demonstrated where improvements had been made because of learning from reviews of safety and care and treatment.
- The service used innovative ways of considering improvements, including using external people and professionals to make sure there was an independent and objective approach. A review had been undertaken for the service by external experts with their recommendations used to improve the service.
- In response to patient wishes all the surgical wards had a family room and kitchen available for patients and families to spend time together.

However

- Whilst the service's 18 week referral to treatment time had improved from the last inspection, it was still below the national standard.

## Is the service well-led?

**Outstanding** ☆ ↑

Our rating of well-led improved. We rated it as outstanding because:

- The leadership, governance and culture were used to drive and improve the delivery of high quality person centred care. Leadership was compassionate, inclusive and effective. Leaders at all levels demonstrated the high levels of experience, capacity and capability needed to deliver excellent and sustainable care. Leaders had a deep understanding of issues, challenges and priorities for their service.
- There was a systematic and integrated approach to monitoring, reviewing and providing evidence of progress against the services strategy and plans. Safe innovation was celebrated. There was a clear, systematic and proactive approach to seeking out and embedding new and more sustainable models of care.
- Staff were proud of the organisation as a place to work and spoke highly of the culture.
- There was strong collaboration, team-working and support across all functions and a common focus on improving the quality and sustainability of care.
- Innovative practice included the usage of robotic assistance in surgery to improve patient outcomes.
- Governance arrangements were proactively reviewed and reflected best practice. A systematic approach was taken to working with other organisations to improve care outcomes.
- Services were developed with the full participation of those who used them, staff and external partners were viewed as equal partners.

## Outstanding practice

We found examples of outstanding practice in this service.

- There were safety systems that empowered patients, carers and staff to raise any safety concerns immediately. A system known as HALT (a process where staff can stop care or treatment to prevent harm to patients) was fully embedded.



# Surgery

- The trust had developed a model for patient and family centred care, the model included several key elements such as the care partner programme, shadowing, patients and family centred care ward rounds and the environment of care. The model of care was underpinned by patient and family shadowing which gave staff valuable insight into the experience of being in hospital.
- Twenty-four hour visiting was in place to support patients emotional and cultural wishes.
- In response to patient wishes all the surgical wards had a family room and kitchen available for patients and families to spend time together.

## Areas for improvement

We found areas for improvement in this service.

- The trust should ensure all staff complete mandatory training in line with the trust targets.
- The trust should consider how to support medical staff to receive training in the Mental Capacity Act 2005 and Deprivation of Liberty safeguards.

# Our inspection team

Nicholas Smith and Judith Connor led this inspection. The team included an inspection manager, an inspector and one specialist advisers.

Specialist advisers are experts in their field who we do not directly employ.