



Spire Healthcare



Rece

# Spire Healthcare Quality Account 2022-23

*Looking after you.*

# Contents

|   |    |
|---|----|
| Service coverage map                          | 3  |
| Chief executive officer's strategic review    | 4  |
| Building on quality                           | 9  |
| Looking after our workforce                   | 16 |
| Sustainability and respecting the environment | 20 |
| How we performed                              | 28 |
| Our plans                                     | 31 |
| Review and assurance                          | 32 |
| Hospital performance data                     | 38 |
| CCG statement                                 | 40 |
| Contact us                                    | 42 |

# Who we are

One of Britain's largest independent healthcare companies, operating across England, Wales and Scotland.

# Our purpose

Making a positive difference to people's lives through outstanding personalised care.

# What we do

- Primary care: one of the largest network of independent GPs
- Diagnostics
- Treatment and surgery: from orthopaedics to cancer and complex care
- Physiotherapy, recovery and rehabilitation
- Occupational health
- Developing care at home for people with chronic conditions

# Our values

- Driving clinical excellence
- Doing the right thing
- Caring is our passion
- Keeping it simple
- Delivering on our promises
- Succeeding and celebrating together

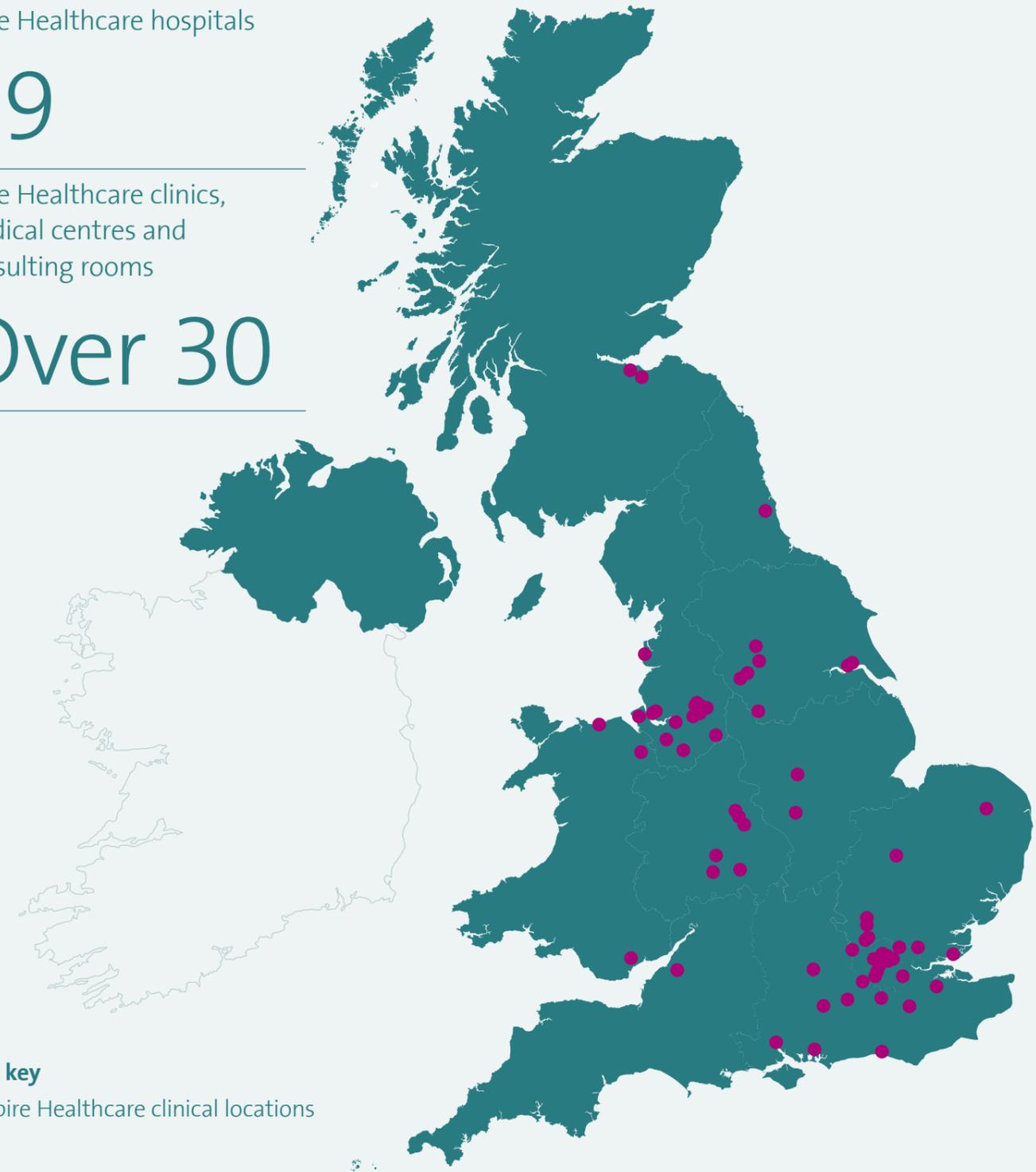
# Where we operate

Spire Healthcare hospitals

39

Spire Healthcare clinics, medical centres and consulting rooms

Over 30



### Map key

● Spire Healthcare clinical locations

**Justin Ash**  
Chief Executive Officer



## Chief executive officer's strategic review

I am delighted to say that 2022 was a year of strong performance across the group. We maintained the high-quality care our people work so hard to achieve, we have evolved our purpose and strategy to take account of the changing demands and dynamics of our market, and we not only delivered a solid financial performance, but also have moved the business forward in our sustainability agenda and in expanding our offering.

### Safety and quality care

Naturally, patient safety remains our top priority at Spire Healthcare, allied to our ongoing investments in quality, which are vital to our aim to lead this area. In 2022, we embedded our new Quality Improvement strategy, and in our latest survey 96% of patients rated their experience as 'Good' or 'Very Good', unchanged from 2021. We also produce an integrated clinical governance report every month, for review by the board and the executive team. I was pleased that all 10 hospitals inspected in 2022 were rated 'Good' or 'Outstanding' by the CQC, or the equivalent in Scotland or Wales, with Manchester re-rated as 'Outstanding' for a second time, South Bank uprated to 'Good', Cardiff receiving excellent feedback and Murrayfield Edinburgh rated 'Good'. 98% of our inspected hospitals and clinics have now achieved these ratings, an improvement from 90% at the end of 2021, one of the strongest offerings in the independent sector. Spire Alexandra hospital awaits re-inspection but remains uninspected since 2016.

### Increasing demand for private healthcare

Demand for private healthcare remained strong in 2022, with patients seeking prompt, safe and effective diagnosis and treatment amidst increasing NHS waiting lists. We saw continued growth in demand from self-paying patients, and strong rebound in our private medical insurance (PMI) business. This reflects changing market dynamics, as people turn to private care to meet their treatment needs.

### Supporting the NHS

2022 saw growth in our NHS work and, by the end of the year, we were seeing more NHS patients than pre-pandemic. We were pleased to support the NHS in caring for those patients who had been waiting the longest, helping to treat patients waiting more than two years and reducing the number of people waiting more than a year and a half. In December 2022, I was delighted to join the launch, with the Prime Minister, of the government's Elective Recovery Taskforce for England. I hope this will result in a long-term partnership between the NHS and the independent sector, where the sector is part of the solution for reducing the backlog in care. In particular, I hope it will result in a greater promotion of patients' right to choose a provider offering shorter wait times.

### Broadening our purpose

The increased demand for healthcare is not only seen in hospital care but also in out-of-hospital, primary and community healthcare, and we have broadened our purpose and strategy to maximise the opportunities this creates. We are in a strong position to do this now because of the journey we have been on in recent years, focusing internally on quality and patient safety, and building the clinical and financial position we have today. Our purpose has changed from making a positive difference to 'patients' lives' to 'people's lives', broadening our offer of outstanding personalised care to more people in a wider range of settings. We aim to be involved in people's healthcare across both pre- and post-hospital care, responding to the demand we know is out there.

### A strategy to meet Britain's healthcare needs

To deliver on this new purpose, we have refreshed our strategy. We aim to help meet Britain's health needs by running great hospitals and developing new services.

The new strategy contains five key pillars:

1. We will drive hospital performance, by continuing to grow our existing hospital estate with increasing margins
2. We will build on quality and patient safety to make it a competitive advantage in all our activities
3. We will continue to invest in our workforce through strong recruitment, retention, and development programmes
4. We will champion sustainability, as we aim to be recognised as a leader in our sector
5. We will expand our proposition through selective investments in new services that will attract new patients by meeting more of their healthcare needs

All this will help us focus on delivering a strong financial performance with a particular emphasis on cash generation, improving our return on capital, and delivering strong shareholder returns.

### Expanding our healthcare proposition

Spire Healthcare is now working towards becoming an integrated healthcare provider, with services in primary care, diagnosis, occupational health and long-term condition management. While our desire to expand our proposition is not new, including it as a key pillar of our strategy gives our efforts in this area a new energy, and I believe this can play a significant part in taking our business forward. Our primary care services, Spire GP, are now present at most of our hospitals, and we are getting strong support from other GPs who want to work with us. This private GP service grew by 46% in 2022, reflecting the desire of an increasing number of patients for fast access to longer face-to-face appointments with a GP.

Our acquisition of The Doctors Clinic Group in December 2022 adds further capacity to our GP offering as well as entering the occupational health sector, with the acquisition of Maitland Medical and Soma Health as part of the same transaction. This aligns with our plans to target 10 new clinics to meet the growing healthcare needs in our communities, as well as digital services we seek to offer patients in the future.

### Supporting and developing our workforce

One of the biggest challenges for our sector is the shortage of skilled healthcare staff in the UK and internationally. This places pressure on our costs, especially when it comes to agency usage, and can limit capacity. This is why investing in our workforce is also a vital part of our strategy. As a people business, we recognise our key role in addressing this shortage, and work hard to recruit and retain talented people, offering colleagues genuine opportunities to grow and develop their careers with us and in the NHS. One of the group's most successful initiatives – our nurse degree apprenticeship programme, run in partnership with the University of Sunderland – is aimed at building a talent pipeline for our business and the broader healthcare sector. This sector-leading programme continues to grow. Across a broader range of clinical and non-clinical roles, I am delighted that we now have around 550 apprentices in all, representing some 5% of our total permanent workforce.

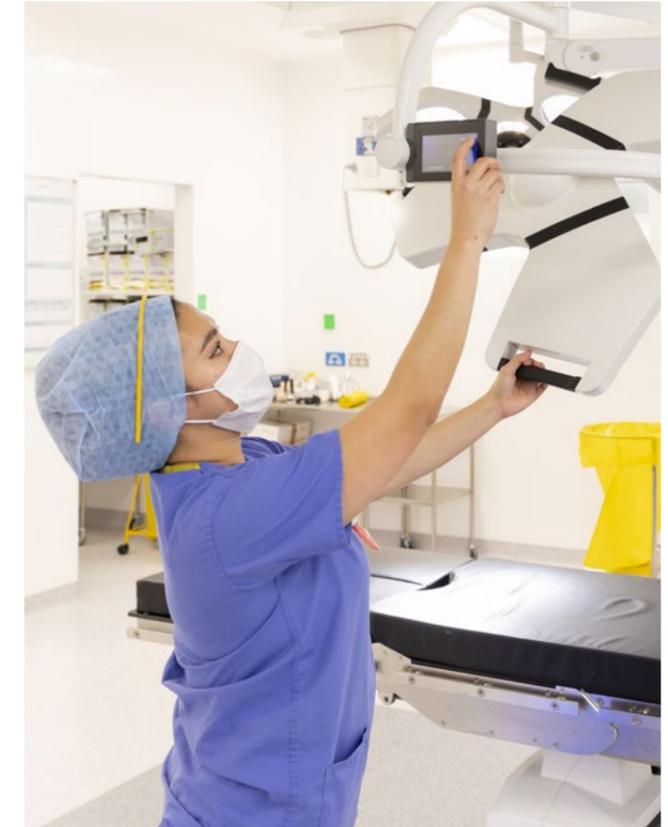
We continue to focus on colleagues' learning and development with more than 1,000 colleagues on professional and other development programmes. We also have around 520 overseas nurses across the business. We are committed to ethical recruitment – only recruiting actively from 'green' countries under the World Health Organization definition. Of course, we provide training and development opportunities for them so that, if they wish, these nurses can take home a range of new skills and opportunities.

### Sustainability

Alongside integrating sustainability into our business strategy, we have developed and articulated our sustainability strategy this year and I was delighted that we were highly commended in the BusinessGreen Leaders Awards this year, for Net Zero Strategy of the Year. We have made it clear how championing the environment, social and governance issues, and sustainability as a whole, is integral to the way we operate, and our aim is to lead the sector. During the year, we established our waste management strategy, helping us to increase recycling rates, and mitigating, where possible, the waste we send to landfill. We remain on target to reach net zero carbon by 2030, though our trajectory has been slower this year due to a shortage of electricity from green sources. We will aim to buy more green energy in the future, and are replacing gas-powered boilers, and installing electric vehicle charging points.

### Success recognised internally and externally

I'd like to thank my management team, all our leaders out in the business, and all our hospital teams and support services for their continued efforts to achieve such an impressive performance in a challenging operating environment. What has made me especially proud this year is that these efforts have been recognised outside the business too. I was delighted to see that Spire Healthcare won both the 'Hospital Group of the Year' and 'Nursing Practice' awards at the annual LaingBuisson awards in November. The latter award acknowledged the success of our excellent Electronic Pre-Operative Assessment programme, which has provided a better patient experience, while driving efficiency by freeing up nursing time and hospital consulting rooms.



### Ready to meet the healthcare challenges of the mid-2020s

Overall, demand remains very good, not just for hospital care, but for out-of-hospital care. With the development of new propositions as part of our strategy, the business is now well placed to help meet that demand. I believe we are well positioned to navigate uncertain times for the healthcare sector – be that due to workforce pressures, the macro-economic environment, or the ongoing impact of COVID-19 on the health of the nation that we will continue to manage. Quality will always remain at the heart of what we do and, as a business, we look forwards with real confidence. I believe we have the right priorities and strategy, and are powered by a thoughtful and engaged team, equipped with the tools we need to succeed in the years ahead.

**Justin Ash**  
Chief Executive Officer

## Our goals

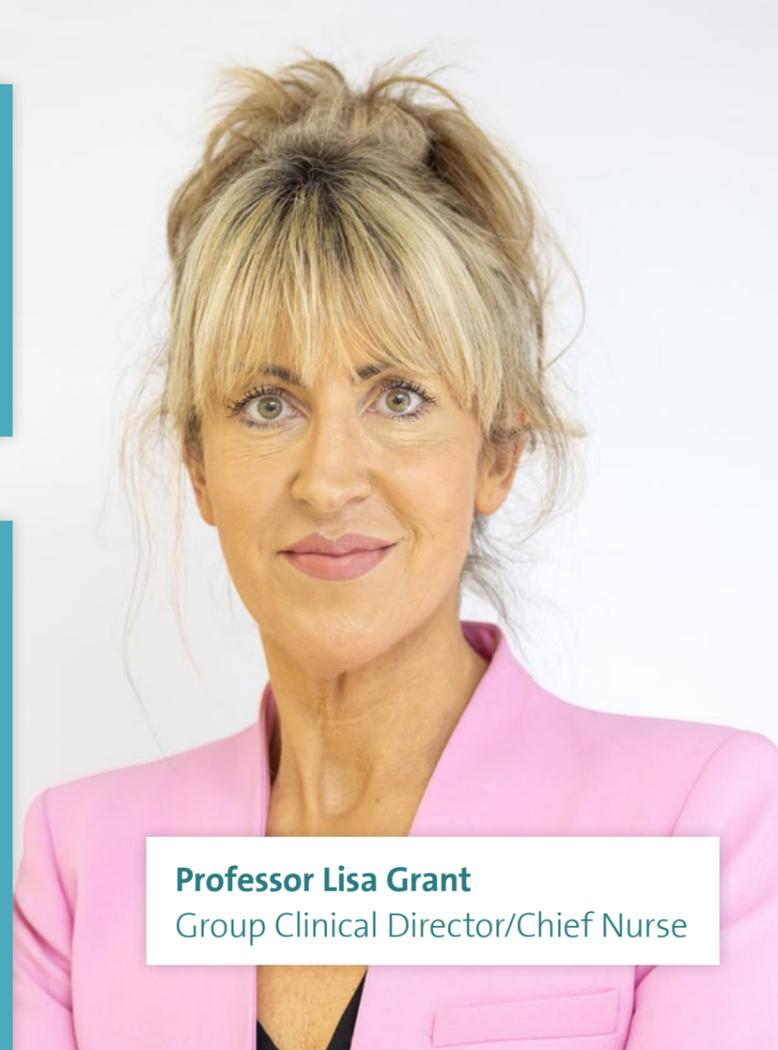
- 100% of our inspected locations achieve 'Good' or 'Outstanding' ratings from CQC (or equivalent in Scotland and Wales)
- Sector leading patient satisfaction
- Above average patient reported outcomes

## Our performance Progress during 2022

- 10 sites inspected and all good or outstanding ratings from CQC (or equivalent in Scotland and Wales)
- Embedding our new Quality Improvement strategy
- Introduced the role of Surgical Care Nurse Practitioners to enhance patient experience
- Continued to strengthen all of our clinical governance standards
- Launched our new Nursing and Allied Health Professional (AHP) Strategy Framework

## Priorities for 2023

- Implement the Patient Safety Incident Response Framework
- Continue to strengthen our clinical governance and learning frameworks
- Prepare for the changes in CQC assessment
- Roll out surgical care practitioner nursing role more widely and plan to introduce new clinical apprenticeship roles



**Professor Lisa Grant**  
Group Clinical Director/Chief Nurse



**Dr Cathy Cale**  
Group Medical Director

## Building on quality

### Outstanding clinical quality

Quality underpins everything we do. It is an essential part of delivering on our purpose to make a positive difference to people's lives through outstanding personalised care. At a clinical level, we are committed to matching, then exceeding best in class, with 'Good' or 'Outstanding' CQC ratings (or equivalent in Scotland and Wales) across all our sites and a focus on consistently good patient engagement and feedback. 98% of our inspected hospitals and clinics – including 10 hospitals inspected in 2022 – have now achieved 'Good' or 'Outstanding' from CQC or the equivalent in Scotland and Wales. We have processes in place to support our hospitals when they face challenges, with shared learning across the group that helps us to achieve consistently high quality standards. We are also uncompromising on patient safety, and aspire to have high levels of incident reporting, but the lowest level of patient harm incidents in the sector – we work hard to ensure our colleagues and consultants have the skills and support they need to improve patient safety in the entire system.

### Governance

We work with 8,760 consultants, who operate as self-employed practitioners in our business. They are experts in their fields, drawn from all medical disciplines, who are granted privileges to practise in our hospitals, in line with our stringent medical governance procedures. We meet with consultants to plan individual procedures, understand their future needs and horizon scan for developing clinical innovation. They are invited to complete an annual feedback survey. In addition, each hospital has its own medical advisory committee (MAC) to advise the hospital director and the director of clinical services on any matter relating to the proper, safe, efficient and ethical medical and dental use of the hospital; they meet quarterly. Each medical specialty is represented on the MAC.

Topics including clinical quality, learning from concerns, incidents and complaints are discussed, plus feedback from members about matters concerning consultants. MACs are governed by standard terms of reference, and all discuss the same key items using a standard agenda. The medical director and associate medical directors attend MACs at hospitals, with the aim of attending all MACs at least annually. In addition, hospitals hold an AGM for their whole medical society, to which all consultants are invited.

Feedback from our annual consultant survey is reviewed by the board's clinical governance and safety committee and we use this to enhance the offer we provide to consultants. The clinical, governance and safety committee promotes a culture of high-quality and safe patient care and monitors specific non-financial risks. Three board members are from a clinical background and the committee meets four times a year.

Board and executive committee members visit hospitals regularly to listen, learn and guide and there are biannual reviews with hospital directors. There are also listening sessions with board members and hospital teams and fortnightly listening calls with the chief operating officer for hospital directors.

### A framework for continuous improvement

We speak with patients every day to better understand their experience with us. We want to know about their experience of care, their outcomes, what they thought of the discharge process, 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 so we can learn across all parts of the patient pathway and national best practice.

All senior leaders, attend a Monday ‘10@10’ meeting – 10 minutes at 10am to share key developments. Another fortnightly meeting is hospital focused and supported by a detailed weekly briefing for cascade. Hospitals also attend a daily safety briefing with a standard agenda. These measures ensure vital information is shared for safety and continuous improvement. We recognise that much of a patient’s journey will be affected directly by the nursing and allied health professional care they receive. That’s why we have launched our new Nursing and Allied Health Professional (AHP) Strategy Framework this year. The framework sets requirements to continually improve our services, and is focused on:

- Making sure we have the right colleagues and the right skills, in the right place at the right time
- Quality Improvement (QI)
- Having a team structure to deliver high-quality care
- Investing in clinical education
- Providing excellence in care

We aim for the framework to increase further our focus on quality and the care we provide. We also want to encourage the best national and international nurses and AHPs to join Spire Healthcare, and work with us to improve the patient experience.

### New surgical care practitioner roles

We are also introducing more advanced nursing roles across the organisation. The first of these are the two new Surgical Care Practitioners (SCP) we have recruited at Spire Cambridge Lea and Spire Bushey in Watford. Both are nurses with advanced qualifications who can support consultants’ practice at our hospitals. They will help with continuity across the patient pathway – support in all areas, including clinics. An SCP is all about improving patient care and experience, improving efficiency and effectiveness in theatres

and making it easier for consultants to do business with us, and so far we have received good patient and consultant feedback on these appointments.

### Getting reporting right, getting assurance right

We continue to strengthen all of our governance standards, having improved our reporting processes on quality to streamline ward-to-board assurance. Our integrated Quality Assurance Framework includes a suite of key performance indicators (KPIs) that is reported monthly to the board. Our Quality Assurance Framework is based on the NHS National Quality Board framework, with KPIs grouped under safe, effective, experience, well led, and money and people. The report is carefully constructed to provide information, not just data, giving executive committee and board members context, so that they can focus on conversations around assurance rather than seeking data. Items measured include patient experience, complaints, deaths within 31 days of surgery, and colleague turnover and others.

### Treating higher acuity conditions and demonstrating quality

We have been ambitious in delivering new higher acuity units throughout many of our hospitals, in line with our strategy and national Intensive Care Society standards. This enables our hospitals to be increasingly resilient, and helps to reduce burden on the NHS to support acute deterioration clinical transfers. Increasing our acuity provision has enabled new surgical case mix to be considered, such as cardiac surgery on two new sites.

We continue to validate our quality standards, and have now earned JAG accreditation, which is awarded by the Royal College of Physicians’ Joint Advisory Group on Gastrointestinal Endoscopy, for our endoscopy services at 13 sites with three further sites applying for accreditation in 2023.

A national clinical specialist for endoscopy and perioperative services supports hospitals through the JAG accreditation process. In addition, 15 of our 17 chemotherapy sites have Macmillan Quality Environment Mark (MOEM) accreditation, which champions cancer environments that go above and beyond to create welcoming and friendly spaces for patients.

### Quality improvement

Our Quality Improvement (QI) Strategy, developed and launched in 2021, is designed to build on the progress on safety and quality we have made in recent years, and has introduced a standard QI methodology 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

Projects have included an initiative to improve the flow through an imaging department, which has reduced waiting times from 20 minutes to just five minutes, delivering a better patient experience and a more efficient process.

Elsewhere, with knee and hip replacements, we have been working to reduce a patient’s need to stay in hospital – achieving small but significant reductions of 0.3 days for knees (from 2.61 to 2.31 days) and 0.33 days for hips (from 2.59 to 2.26) on average. Our hospitals have sought to implement 23 hour pathways for joint replacement as this is shown to give improved outcomes for patients. This means the patient is in hospital less than

23 hours from admission to discharge – with the benefits of a lower risk of deep vein thrombosis, less muscle loss, and better recovery times and outcomes for patients. Now that our QI Strategy is embedded across the organisation, each hospital runs its own QI programme. To date, we have run more than 120 QI projects, not only to improve patient outcomes and their experiences in our care, but also to drive efficiency and reduce waste. As part of the strategy, we set up a QI Academy, aiming to train all our colleagues in QI methodology. To date, more than 11,000 colleagues have accessed the QI training, either virtually or in face-to-face sessions, and we now have more than 150 QI trained practitioners. We have also delivered bespoke QI training to our medical advisory committee chairs, business unit directors, directors of clinical services, finance managers, and Freedom to Speak Up Guardians.

### Serious Incidents

Our hospitals reported 225 clinical adverse events/near misses per 1,000 bed days in 2022 (excluding cancellations). The comparable rate in 2021 was 269. The vast majority (94.4%) of reported incidents were graded as resulting in no or low harm. It is important to note that the number of incidents reported is influenced by a strong reporting culture, particularly for near misses and incidents resulting in no harm, with a high number of incidents representing a good reporting culture.

### Reported incidents by grade of harm

| Grade of harm                               | Rate per 1,000 bed days | % of total |
|---|-------------------------|------------|
| None (no harm caused)                       | 165                     | 73.10      |
| Low (minimal harm caused)                   | 48                      | 21.36      |
| Moderate (short term harm caused)           | 11                      | 5.02       |
| Severe (permanent or long term harm caused) | 0.3                     | 0.15       |
| Death                                       | 0.8                     | 0.37       |

All reported incidents requiring investigation are currently reviewed at the weekly national incident review working group meeting and any incidents identified as meeting the NHS England serious incident framework threshold are escalated to Serious Incident Requiring Investigation (SIRI) status.

Learning from investigations into serious incidents is reviewed by Spire Healthcare's national incident review committee to ensure any lessons are captured and shared, for example through our 48 hour flash reports and monthly safety bulletins.

### 48 hour flash reports

Circulated by Spire Healthcare's group clinical director to hospital senior management teams within 48 hours of a serious incident report, including information on contributory factors and preventative measures identified from an initial review of the incident.

### Safety bulletins

Circulated to hospitals every month, including information on policy updates, other safety alerts and shared learning (a more detailed description of learning and action taken following a specific incident or complaint).

Numbers of reported clinical incidents and incident trends, including incidence of severe harm and reported deaths are monitored via our monthly integrated quality and safety report. Introduced in 2021, and building on our previous clinical scorecard and associated dashboards, this is available at hospital level across the group to enable ward-to-board reporting and monitoring of key clinical quality and safety indicators. A board level report also includes a summary of our key metrics, including analysis of the data presented and outcomes of focused reviews and workstreams undertaken by our hospitals and central teams.

### Introduction of the patient safety incident response framework (PSIRF)

A priority for 2023 is to implement PSIRF. The PSIRF will replace the current serious incident framework and is a key part of the NHS patient safety strategy. It is designed to support the development and maintenance of an effective patient safety incident response system that integrates four key aims:

- Compassionate engagement and involvement of those affected by patient safety incidents
- Application of a range of system-based approaches to learning from patient safety incidents
- Considered and proportionate responses to patient safety incidents
- Supportive oversight focused on strengthening response system functioning and improvement

Implementation of PSIRF requires work to design a new set of systems and processes alongside maintaining current practice to support incident response. During the transition period, we will run an extensive training programme across our hospitals and central teams to cover:

- Systems approach to learning from patient safety incidents
- Oversight of learning from patient safety incidents
- Involving those affected by incidents in the learning process

By October, 31 training modules will be complete across the group, delivering training to over 600 Spire Healthcare colleagues.

### Implementing the recommendations of the Paterson Inquiry

During the year, we continued to work with the Department of Health and Social Care, NHS England, IHPN, the CQC and others to implement the recommendations of the Independent Inquiry into Ian Paterson. As part of this work, we led jointly a project involving these stakeholders in 2021 to develop a national toolkit for patient reviews and recalls. The work was completed in 2022, and the toolkit was adopted across the healthcare sector and published by the National Quality Board. Meanwhile, during 2022, we continued to take steps to ensure that there were no outstanding patients of Ian Paterson who had not been contacted and offered support, and we completed a complex analysis of historic legacy IT systems that were in use at the start of Paterson's practice, over 20 years ago. This resulted in the identification of around 1,500 patients, and these patients were contacted in early 2023.

### Maximising our capacity

As we evolve our strategy, the core of our business remains running great hospitals. With demand for healthcare at record levels, the biggest focus for our hospital directors, directors of clinical services and other hospital leaders has been on making the best possible use of our capacity to meet that demand. This has tested our teams' flexibility, and our ability to back-fill cancelled appointments where patients had to cancel because they were unwell or had decided to delay their procedure for another reason. We have also been more creative with the space we have and increased capacity by 8% in 2022 – redesignating administration areas as clinical space, and increasing weekend appointments and operations. Making sure we always have patients identified who can come in for their treatment at short notice has helped us reduce 'lost' capacity, although one of the biggest challenges to scheduling and maintaining lists in the face of the COVID waves in 2022 has been ensuring we have the workforce available.

### The challenge of COVID

While COVID-19 restrictions have eased during the year, we started 2022 with the Omicron variant at its peak, so following all NHS, government and UKHSA guidance was of the utmost importance. The agility and resourcefulness of our people remained vital, as we continued to face challenges and pressures, due to employee and patient illness or changing rules. We responded carefully to these challenges, with the support and guidance of our medical advisory committees, while keeping our colleagues, consultants and patients safe at all times, focused on the highest quality standards. Illness among our own teams, and people trying to catch up with holidays accrued during the pandemic, have made resource planning a very high priority.

### Better patient experience

We have made efforts to deliver an enhanced patient experience, while offering patients both electronic bookings and electronic pre-operative assessments (ePOA). We have great teams working in partnership with our consultants, with whom they have developed excellent relationships. The success of our ePOA programme was recognised with an award for 'Nursing Practice' at the annual LaingBuisson awards in 2022. Using ePOA improves the patient experience, while freeing up both nurses' time and our hospital consulting rooms. It also provides us with real-time data on where our patients are in their pathway. Patients access their pre-operative assessment questionnaires via MySpire – our secure online patient portal – and 242,740 electronic pre-operative assessment questionnaires were sent to patients in 2022, up from 75,000 last year.

We have worked closely with the NHS as part of our ePOA programme so that we have access to GPs' summary care records – so from a patient safety perspective we can view critical information that ensures we treat people safely.

Across all of our feedback surveys we receive over 100,000 responses a year. We support our hospitals to make active use of feedback provided by our patients, and have systems in place to prompt hospitals to directly contact any patients who indicate they would like to speak to someone at the hospital. We conduct safety reviews on any feedback in which a patient states they haven't had a good experience. These processes enable us to learn, adapt and further improve areas of our service as identified by our patients, and our board regularly reviews patient feedback at their safety, quality and risk committee and clinical governance and safety committee. Our website and customer experience was further enhanced in 2022 by the addition of live chat for patients seeking appointments, advice or answers to their questions.

### Investing in our estate

We continued our investments in quality, our core estate and digital systems in 2022, as part of our ongoing five-year investment plan, accounting for an overall capital expenditure of £90.1 million. This included five MRI and CT scanner replacements, with five further units to be replaced in 2023. A further investment of around £10 million across the estate was made in 13 x-ray/fluoroscopy rooms, 12 mobile x-ray machines, two mammography units (with five to be completed in 2023), four C-arm medical imaging devices, and six ultrasound machines. In addition to all this, further significant investments are planned for 2023 on anaesthetic machines and monitoring, camera stacks, and flexible endoscopy.

These investments in state-of-the-art technology will benefit both our patients and hospitals, and provide the best environment for consultants to work with us.

### Major investment projects have included:

- An £11 million development by Spire Yale Hospital to convert administrative buildings into an outpatient centre, which opened in early 2023. This delivers a more comfortable environment where people can receive much needed diagnoses – making use of a new MRI scanner that will enable more patients to be scanned for cardiac disease, urological, orthopaedic and other conditions than ever before
- An £8.5 million investment at Spire Shawfair Park in Edinburgh which has enabled it to accommodate overnight patients for the first time. This has been accompanied by additional recovery and new ambulatory care and daycase facilities, and a new operating theatre
- Further investments have been made at a number of other hospitals in the group, such as Spire Norwich (£1.7 million), Spire Cambridge (£1.3 million), and Spire Tunbridge Wells (£1.2 million)

### Our partnership with the NHS

The independent sector can help to tackle the backlog in elective care by working in partnership with the NHS. Our volume of NHS work increased during 2022. By the end of the year, we were treating more NHS patients than before the pandemic and the flow of patients through the electronic referral system was strong. We also helped the NHS to treat patients who had been waiting longer than two years, making a significant contribution to the reduction of patients waiting this length of time. We have now treated over 500,000 NHS patients since the start of the pandemic in March 2020. We look forward to continuing to support the NHS through the outcomes of the Elective Recovery Taskforce.



### Working with Integrated Care Systems

2022 saw the formation of Integrated Care Systems (ICS) that support the NHS. ICSs are partnerships that bring together providers and commissioners of health and care services across a geographical area, and we are involved in discussions around decision-making. Our new hub hospital director roles are a great opportunity to work directly with ICSs, giving a single point of contact across the ICS geography, allowing us to place work where it fits best. We will continue to engage closely with the NHS during 2023 as plans develop for the future.

### Highlights

- Regulatory inspections (hospital inspection reports published during 2022): **10**  
2021: 10 inspection reports
- Inspected hospitals and clinics rated 'Good' or 'Outstanding' by the CQC or the equivalent in Wales and Scotland in 2022: **98%**  
2021: 90%
- Patients say they 'felt in safe hands' when receiving care at Spire Healthcare in 2022: **97.0%**  
2021: 97.3%

Source: Patient Discharge Survey



**Rachel King**  
Group People Director

## Looking after our workforce

### Positive working environment

Making a positive difference to people's lives is what we're here for at Spire Healthcare. Not just as a company, but every one of us, from our nurses, theatre teams and allied health professionals, to our non-clinical support teams and bank colleagues. And that principle extends to the way we look after our people. We recognise that none of us have experienced the combination of factors we all face today – COVID-19, recession, political turmoil, and societal unrest. The need for wellbeing, inclusion, and a positive, rewarding working environment has never been greater. That's why we work hard to share a welcoming culture that is characterised by openness, respect, collaborative working, a focus on clinical safety, and a spirit of continuous improvement. Attracting, retaining and developing great people is a high priority for us, and we can only do this if colleagues feel valued, rewarded, motivated, and supported by clearly defined career paths.

### 'Be your brilliant self'

Resourcing remains a challenge in the current healthcare market, and is the most significant barrier to building capacity across our services. We have developed our own in-house resourcing service to help us attract talented people to our teams, alongside actively recruiting people to new roles from within Spire Healthcare. Both permanent and bank staff recruitment moved in-house in 2023. Our recruitment branding 'Be your brilliant self' is based around authenticity, personal culture, and a personable employment experience.

We continue to build awareness and recognition of the Spire Healthcare brand through television advertising and other media channels, including with our 50,000+ followers on LinkedIn, and refreshed recruitment web content with better functionality.

### Valuing and rewarding colleagues

We're committed to supporting colleagues as they develop and grow with us, while ensuring that everyone is fairly rewarded for their contribution. We made an exceptional annual salary award for permanent, eligible colleagues from September in 2022 with increases of up to 16% for the lowest paid colleagues. These rises were in addition to a series of thank you payments paid to colleagues to recognise work done during the pandemic, and the increases more than 4,000 colleagues received in April. We continue to work on our Spire Healthcare employee proposition and building on our job and career framework.

### Spotlight on engagement

We want our colleagues to have a successful and rewarding experience working at Spire Healthcare, where they feel engaged and can perform at their best. We place paramount importance on effective communication with colleagues and use a range of engagement channels to make this successful. These channels include our Ryalto colleague communications tool, which is used to build employee communities, publish key information and videos to colleagues from our chief executive officer, Justin Ash, and members of the executive committee every month. We launched our 'Little book of making a positive difference: spotlight on engagement' in September 2022. This provides practical ideas to improve engagement at Spire Healthcare, taking into consideration the different stages of a colleague's experience at work. We have also refitted our London headquarters at 3 Dorset Rise – creating a venue where people can collaborate from across the group.

### Colleague surveys

We also used Ryalto to hold a mid-year temperature check on colleague engagement, which was followed up by our full annual survey in October 2022. The overall response rate was 77%,

with 80% of colleagues proud to work for Spire Healthcare (-4% from 2021, level with 2020) and 84% of colleagues get personal satisfaction from the work they do. 83% of colleagues would be happy if their friends or family needed treatment at Spire Healthcare and 72% would recommend it as a place to work. Following these results, teams across the business are developing action plans collaboratively to drive improvements.

### Our equity, diversity and inclusion strategy

Diversity and inclusion is core to everything that we do, and we are committed to delivering an environment where everyone is respected and cared for, and where difference is celebrated, which makes us stronger as a team and as an organisation. It is only by ensuring all of our colleagues feel confident to bring their whole selves to work that we can be truly successful as a business. Everyone's contribution is to create a working environment in which our people are able to realise their potential in a workplace where they feel comfortable to share their views and experiences. That's why we have launched our Equity, Diversity and Inclusion Strategy around four commitments that ensure that: (i) we recognise the value of diversity, (ii) we understand how it will help us deliver our purpose, (iii) we respect and appreciate each other for who we are, and (iv) we include diverse colleagues in our problem solving to make better, faster decisions.

Of those colleagues who disclose their ethnicity, 17.3% reported having a non-white background in 2022, up from 16.5% in 2021. 21.9% of new starters in 2022 who reported their ethnicity to us are non-white. Our board and executive committee combined was 37% female at the end of 2022, moving to 45% in 2023, and 8% non-white representation.



### Investing in apprenticeships

The continued success of our apprenticeships have enabled learning for around 550 colleagues across the business in a wide range of clinical areas such as biomedical science, physiotherapy, medical laboratory technicians, as well as non-clinical disciplines. In 2022, we introduced a new apprenticeship in cardiac physiology, and are exploring other expansion options. Our most significant scheme is our nurse degree apprenticeship programme in England, with 175 nurse apprentices on the programme.

### International nurses programme making a lasting difference to people's lives

The recruitment of overseas nurses and other clinical specialities has also proven highly beneficial to Spire Healthcare – not just adding valuable colleagues and capacity, but also broadening the cultures of our clinical colleagues. It has proved popular with our colleagues joining from other countries, with many commenting on the welcoming experience of working with clinicians in our hospitals.

By the end of the year, we had 520 international colleagues working in the business. We are committed to ethical recruitment. This means that we only recruit actively from 'green' countries under the World Health Organization definition. Overseas colleagues are supported to connect with others making the journey. Each new nurse goes for Objective Standard Clinical Examination (OSCE) training and is individually welcomed, and we provide them with access to support teams 24/7.

### Mental health and wellbeing

We continue to build on the wide range of practical and emotional support we put in place for colleagues, with Mental Health First Aiders (MHFAs) at all of our sites, and access to support networks. We also offer a comprehensive Employee Assistance Programme providing confidential advice and support online and via a free helpline, available 24 hours a day, 365 days a year and access to mental health services. While ordinarily mental health and wellbeing is not typically recognised as a diversity strand, it is such a huge and important workforce issue that we have included it in our new Equity, Diversity and Inclusion Strategy.

This focus will further bolster our support for colleagues, and we will create a new network for all of our MHFAs to support them in what they do. We will also continue with wellbeing 1:1s to ensure that managers are having regular conversations with all colleagues about their wellbeing, and understand more about their experiences.

### Freedom to Speak Up

We want all colleagues to feel confident and empowered to raise any issues, concerns or quality improvement suggestions they may have. This is part of a healthy culture in which concerns are identified and speaking up is not only encouraged, but also embedded across all areas of the business. All colleagues can submit a Freedom to Speak Up (FTSU) concern via a dedicated module on our risk management software. The handler for the concern is a trained guardian. We have a dedicated FTSU month each October which raises the profile of speaking up and of the guardians at our sites, together with further support and training to ensure colleagues know who they are and how to contact them. Colleagues also have access to a confidential whistleblowing helpline, managed by an independent third-party provider, enabling them to raise any concerns anonymously. We now submit regular data to the National Guardian's Office.

### Making a positive difference to each other

With the pressures of the past few years compounded by the cost of living, high inflation, and recession in the economy, supporting our colleagues' health and wellbeing is a top priority. We launched our Helping Hand initiative in September with bespoke notice boards now available at all sites where our people can ask for help, or share what they can help their colleagues with, from donating or loaning useful items to offering their skills and time to help. To support colleagues with the rising cost of living, we launched affordable take home meals across all hospitals – with nutritionally balanced frozen

foods available at cost price, ready for colleagues to cook at home. We also offer supermarket savings via our online colleague support network Spire for You, and have promoted Blue Light cards, which provide more than 15,000 discounts from national retailers to local businesses on holidays, cars, days out, fashion, insurance, phones, and more.

### Absence and turnover

Managing absence and turnover is key to understanding and supporting colleagues and ensuring they are valued and rewarded. We use sickness absence and employee turnover data to flex our workforce and ensure we have sufficient capacity and resilience in our teams. Our absence rates showed a reduction in 2022 as the pressures of COVID-19 started to ease. Our focus on retention will continue to be on career development, talent and succession planning. The market for talented people remains highly competitive, with the demand for nurses particularly high. We are pleased however to see sustained and improving recruitment, and in early 2023 we brought this in-house to further improve the recruitment experience for new joiners.

# Sustainability and respecting the environment

## Sustainability is core to Spire Healthcare

Championing sustainability is a core pillar of the group’s strategy and fundamental to our success and future. By managing sustainability successfully, we aim to create lasting social economic value. 2022 saw Spire Healthcare develop its first ever sustainability strategy. The strategy is a progressive journey in which the group is evolving from risk management to providing social value and driving opportunities for sustainable growth. We actively collaborate with our stakeholders, including patients, colleagues, consultants, local communities and partners, to enrich lives and be a net contributor to society, not just through the services we provide, but in everything we do.

## Our sustainability strategy

We are positioning ourselves to better understand and predict people’s healthcare needs while maximising our contribution to both the communities we serve and wider society. We’re looking to drive positive change in the workplace, our local communities and the environment, as we challenge our workforce to factor sustainability into all aspects of their work. Our sustainability strategy is as follows:



## Respect the environment

We continually seek ways to reduce our impact on the environment. We are reducing our carbon emissions, focusing our efforts on waste and recycling, including reducing the use of single-use plastics, while working with our suppliers to align goals to develop healthcare in sympathy with a sustainable planet. In 2022, we made good progress towards our aim of becoming net zero carbon by 2030 and were highly commended in the BusinessGreen awards for Net Zero Strategy of the Year this summer. During the year, we installed 15 electric vehicle chargers, and replaced gas-fired boilers with more efficient steam boilers in four hospitals. We increased the amount of dry mixed waste we recycled – more than doubling since 2021 – and began a project to reduce piped nitrous oxide from our hospitals, removing it in almost one quarter of the estate.

## Our 10-year carbon reduction target

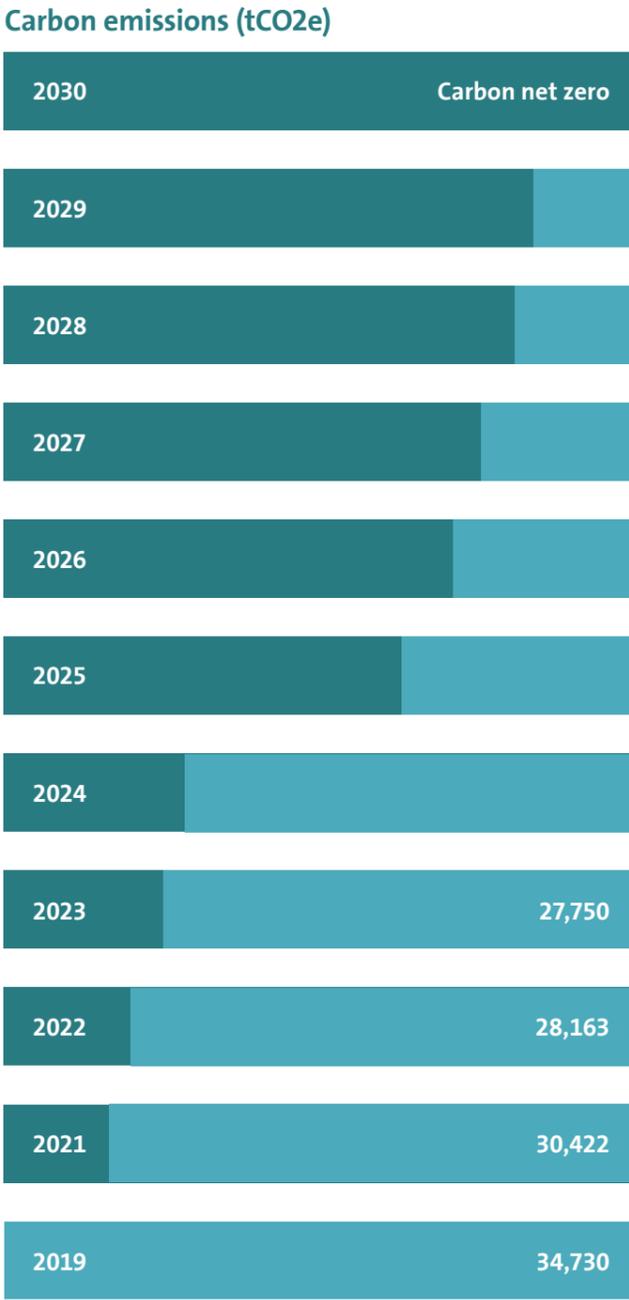
Our work continues to reduce the harmful impact on our planet of climate change through a robust decarbonisation strategy and delivery programme that is designed to achieve net zero carbon emissions by 31 December 2030. We were the

first large independent sector hospital provider to make such a commitment, along with a dedicated investment of £16.0 million to help achieve this aim by 2030. We use the intensity metric of carbon emissions per £ revenue, which increases in proportion to the growth in our business. We have mapped out our carbon reduction plans to net zero in 2030, using 2019 as our reference base year. The projected timeline has changed this year from that

originally set in 2020 to reflect the unanticipated reversion to brown electricity tariff between April 2022 and October 2024 as a consequence of our energy supplier reneging upon its commitment to supply renewable electricity. The overall reduction target remains unchanged and against our original plan, excluding electrical emissions, we are 8% ahead of target which is a great achievement by all involved and provides confidence in our plan.

## The roadmap to carbon net zero

| Actions/Progress   | Targets   |
|--|---|
| Finalise roll-out and use carbon offsets for other emissions   | Complete heat pump projects and carbon offset                 |
| Rolling programme of updates to heat and DHW systems   | Heat pump rollout   |
|  | Energy efficiency + enabling works                            |
| All replacement and refurbishment work to consider displacement of gas   |   |
| Longer payback projects such as heat and chiller recovery  |   |
| LED lighting, controls, insulation, high efficiency replacement of end-of-life equipment   | Energy efficiency projects – best paybacks first              |
| Procurement of 100% renewable electricity  | Sustainability planning – investment and end of life projects |
| Update of our carbon and environmental policy and energy awareness campaign, develop appropriate delivery and governance arrangements. |   |



## Energy monitoring

Business utility and sustainability consultancy Inenco produce quarterly performance reports that chart our results against our carbon reduction targets. We also separately monitor our hospitals on a monthly basis, and issue energy reports detailing their utilities consumption and benchmark them against similar sized hospitals within the group. The reports include dashboards at site and group level detailing year-on-year performance. Our regional engineering team audits and monitors our hospitals' carbon reduction action plans as part of our annual compliance auditing programme.

## Capital investment in low carbon infrastructure

We continue to invest in our estate and engineering infrastructure to improve our energy efficiencies. Key projects this year included:

- Replacing gas-powered primary steam boilers with more efficient electrically powered equipment at Spire Cardiff, Clare Park in Farnham, Little Aston in Sutton Coldfield and Edinburgh Murrayfield
- Introducing high efficiency heating, cooling and ventilation – through the upgrade of critical ventilation systems at Cambridge, replacement of chiller plant at Spire Wellesley in Southend and Spire Cambridge incorporating heat recovery systems and optimised BMS systems at Spire Leeds and Cheshire
- Continuing to replace the remaining older lighting across the estate with LED fittings that are 50% to 60% more energy efficient
- Planning and design is in the advanced stages for installing roof and ground-mounted photovoltaic (PV) solar panels at Spire Wirral that will generate up to 12% of the hospital's electricity

- Installation of EV charging points to two-thirds of our hospitals with the remainder planned for 2023
- Improving insulation in our buildings at Liverpool Penny Lane and Wirral hospital as part of planned roof replacement works
- Removal of R22 refrigerant gases from old air conditioning systems
- Pipework and ducting insulation upgrades and replacement of old inefficient single glazed windows requested via carbon champions at Spire Hull, Little Aston, Bristol, Leicester

Alongside these investments, all of our carbon champions continue to receive training and guidance to help them produce local action plans and identify opportunities for operational improvements and efficiencies. Their action plans are reviewed twice yearly to monitor and track progress.

## Legislation

Since becoming a publicly listed company in 2014, Spire Healthcare has discharged its responsibilities under the government's CRC Energy Efficiency Scheme, and we will continue to report on our energy consumption in line with the requirements of the upcoming Streamlined Energy and Carbon Reporting legislation. Spire Healthcare was invited to participate in the CDP (formerly Carbon Disclosure Project) again in 2022. We made our eighth annual submission to the CDP and received a 'B' grading, improving on previous 'C' rating for 2021 placing Spire Healthcare well above the market sector average of 'D', and demonstrating our knowledge and understanding of our impact on climate change issues.

## Greenhouse gas emissions in 2022

This section provides the emissions data and supporting information required by the Companies Act 2006 (Strategic Report and Directors' Report) Regulations 2013 and the Companies (Directors' Report) and Limited Liability Partnerships (Energy and Carbon Report) Regulations 2018.

Total greenhouse gas (GHG) emissions for Spire Healthcare for January to December 2022 were 27,091 tCO<sub>2</sub>e, down 6% on 2021. The table shows this, broken down by emissions source.

|  | 2018                 | 2019                 | 2020                 | 2021                 | 2022                 | Share       | YoY %       |
|--|----------------------|----------------------|----------------------|----------------------|----------------------|-------------|-------------|
| Emissions source                           | (tCO <sub>2</sub> e) | (%)         | Change      |
| Fuel combustion: stationary                | 12,917               | 12,098               | 11,590               | 12,539               | <b>10,943</b>        | 40%         | -13%        |
| Fuel combustion: mobile                    | 1,145                | 1,209                | 1,447                | 1,325                | <b>1,346</b>         | 5%          | 2%          |
| Fugitive emissions                         | 6,936                | 5,895                | 5,018                | 5,139                | <b>4,703</b>         | 17%         | -8%         |
| Purchased electricity                      | 17,151               | 15,193               | 13,330               | 9,802                | <b>9,837</b>         | 36%         | <1%         |
| Air travel                                 |                      |                      |                      |                      | <b>40</b>            | <1%         |             |
| Rail travel                                |                      |                      |                      |                      | <b>40</b>            | <1%         |             |
| Hotel                                      |                      |                      |                      |                      | <b>75</b>            | <1%         |             |
| Waste                                      |                      |                      |                      |                      | <b>106</b>           | <1%         |             |
| <b>Total emissions</b>                     | <b>38,148</b>        | <b>34,395</b>        | <b>31,384</b>        | <b>28,805</b>        | <b>27,091</b>        | <b>100%</b> | <b>-6%</b>  |
| Revenue (£m)                               | 931.1                | 980.8                | 919.9                | 1,106.2              | <b>1,198.5</b>       |             | 8%          |
| <b>Intensity (tCO<sub>2</sub>e per £m)</b> | <b>41.0</b>          | <b>35.1</b>          | <b>34.1</b>          | <b>26.0</b>          | <b>22.6</b>          |             | <b>-13%</b> |

|                            | 2018           | 2019           | 2020           | 2021           | 2022           | Share       | YoY %      |
|----------------------------|----------------|----------------|----------------|----------------|----------------|-------------|------------|
| Energy consumption by year | (MWh)          | (MWh)          | (MWh)          | (MWh)          | (MWh)          | (%)         | Change     |
| Natural gas                | 69,462         | 65,285         | 63,032         | 67,766         | <b>59,648</b>  | 48%         | -12%       |
| Electricity                | 55,829         | 54,788         | 52,647         | 54,704         | <b>59,717</b>  | 48%         | 9%         |
| Transport fuel             | 4,622          | 4,883          | 5,386          | 5,363          | <b>5,407</b>   | 4%          | 1%         |
| Gas oil                    | 503            | 374            | 369            | 384            | <b>212</b>     | <1%         | -45%       |
| <b>Total</b>               | <b>130,416</b> | <b>125,330</b> | <b>121,434</b> | <b>128,217</b> | <b>124,984</b> | <b>100%</b> | <b>-3%</b> |

#### Notes to the emissions source table:

##### a) Scope 2/purchased electricity emissions reporting

The figure for emissions from purchased electricity above reflects our investment in a zero-carbon electricity tariff across all of our sites from October 2021. We have calculated emissions for the period January to October following the location-based method and for October to December following the market-based method (to reflect our zero-carbon tariff). If we apply the location-based method across the year, our emissions from purchased electricity were 12,662 tCO<sub>2</sub>e. If we apply the market-based method across the year, our emissions from purchased electricity were 13,824 tCO<sub>2</sub>e.

##### b) Footprint boundary

An operational control approach has been used to define the GHG emissions boundary, as defined in the Department for Environment, Food and Rural Affairs' latest environmental reporting guidelines: "Your organisation has operational control over an operation if it, or one of its subsidiaries, has the full authority to introduce and implement its operating policies at the operation." For Spire Healthcare, this captures emissions associated with the operation of all our hospitals and other buildings such as clinics, offices and our National Distribution Centre, plus Company-owned and leased transport. As Spire Healthcare has no overseas operations, all emissions refer to UK operations only.

##### c) Emission sources

All material Scope 1 and Scope 2 emissions are included, plus Scope 3 electricity transmission and distribution losses. These include emissions associated with:

- Fuel combustion: stationary (natural gas and red diesel for backup generators) and mobile (vehicle fuel)
- Purchased electricity
- Fugitive emissions (refrigerants, medical gases)

##### d) Methodology and emissions factors

This information was collected and reported in line with the methodology set out in the UK Government's Environmental Reporting Guidelines, 2019. Emissions factors are taken from the Department for Business, Energy and Industrial Strategy emissions factor update published in 2021. There are no notable omissions from the mandatory scope 1 and 2 emissions. Approximately 9.4% of emissions are based on estimated data.

##### e) Fugitive emissions

These are attributable to the use of medical gases; carbon dioxide and nitrous oxide, (3,482 tCO<sub>2</sub>e), and leakage of refrigerant gases (1,656 tCO<sub>2</sub>e).



## Looking ahead

In the year ahead we will continue to prioritise our approach to carbon reduction and energy saving to effect the required target emission savings concentrating on those projects that will offer the greatest reduction opportunity including but not limited to the following:

- Continuing LED replacements
- Optimisation of building management systems (BMS)
- Replacement of the remaining gas-powered primary steam boilers in the estate at Spire Claremont in Sheffield
- Removal of the remaining piped nitrous oxide across the estate
- Further PV installations and thermal upgrades as part of roofing replacements
- Completion of the EV charging point roll out across the estate

## Engage our people and communities

Having a dedicated and engaged workforce is fundamental to the delivery of our purpose. We celebrate having a large number of long-standing colleagues who bring experience and dedication. We're continuing to invest in our workforce through strong recruitment, retention and development programmes. Our aim is to provide a stimulating, diverse, inclusive and healthy working environment within which colleagues can thrive and achieve their career goals and aspirations. We have narrowed our overall median gender pay gap in Spire Healthcare Limited from 7.1% in 2021 to 6.2% in 2022.

A key way we ensure the sustainability of our business is through our award-winning learning and development programmes. Our sector-leading nurse apprenticeship scheme continues to grow, as do our other apprenticeship programmes for both clinical and non-clinical colleagues. In 2022 we introduced a new apprenticeship in cardio physiology. 5% of our permanent workforce are now apprentices.

These schemes also contribute to the sustainability of the whole healthcare sector, because many of the graduates from the programmes will go on to careers in the NHS and elsewhere – something we encourage. Further investment has been through our new equity, diversity and inclusion strategy. We are developing networks across six diversity strands – ethnicity, sexuality, age, gender, disability, and mental health and wellbeing – and will work with these diversity network groups to improve the way we attract, recruit, develop and promote diverse, talented colleagues. Closely linked is the way we engage with the communities in which we operate. As well as expanding to provide services in the community, we also fundraise to support charities in the areas around our hospitals.

## Operate responsibly

Ethical and responsible behaviour is borne out of a culture that is based on core values. We have a relentless focus on delivering the highest standards of healthcare and prioritising patient safety at all times. We aim to maintain robust standards of clinical and corporate governance in line with best practice while promoting an open and learning culture for all colleagues. Operating responsibly

also requires strict compliance with the law. We continue to monitor all aspects of the group's operations to ensure compliance with all applicable laws, including competition law, anti-bribery law, anti-tax evasion facilitation law, healthcare regulations and data protection law.

## Strengthening information and data security

Security can never be risk free, but Spire Healthcare has demonstrated commitment and support for continual improvement through investment in people, processes and technology to mitigate against cyber risk. Spire Healthcare has invested time, attention and capital to reduce risk and strengthen the group's information governance and data security position.



# Process map for discharge



# How we performed

## Priorities for improvement 2022-23

In the last Quality Account, Spire Healthcare set out the following three priorities for improvement as part of our Quality Improvement programme during 2022–23:

- Improving patient experience (with a focus on discharge)
- Improving participation in patient reported outcome measures (PROMs – hip and knee replacements)
- Reducing avoidable cancellations

## Improving patient experience (with a focus on discharge)

Satisfaction with discharge is a key indicator of overall patient experience and effective discharge planning can help recovery and reduce the risk of readmission. NHS England also suggests that unnecessary delays in being discharged from hospital are a problem that too many people experience.

During 2022, after introducing our new patient brochure ‘Your guide to having a procedure with Spire Healthcare,’ our focus switched to supporting the team in one of our hospitals with a quality improvement project aiming to increase satisfaction with discharge. The hospital (Spire Yale) subsequently achieved a 9.4% increase in respondents who agreed, or strongly agreed, to the statement “discharge was organised and efficient”. As part of this project, the team developed improved processes for follow-up appointments, providing take-home medications and physiotherapy services. As this project has been successful, we will take forward this learning and start a number of similar projects at other Spire Healthcare hospitals in the coming year.

## Improving participation in patient reported outcome measures (PROMs – hip and knee replacement)

### Why is this priority important?

One of the outcome measures available to us is Patient Recorded Outcome Measures (PROMs), which compare the response from patients to the same questions before and after treatment. PROMs generate three key metrics:

- Health gain: the difference between the pre-operative and post-operative survey scores provides an indication of how much patients’ symptoms have improved after treatment
- Follow-up: the post-operative score provides an indication of how close patients are being to symptom-free
- The percentage of patients reporting an improvement in symptoms

This data is not only important to help track the progress of patients after treatment, it also supports our consultants to demonstrate that they provide excellent care for patients.

As part of the NHS PROMs programme, we invite patients to complete the Oxford Hip and Knee Score questionnaire for hip and knee replacement procedures respectively. Like many providers, we saw participation from patients fall during the first part of the COVID-19 pandemic; 55% of eligible patients completed the pre-operative survey in 2020-21, compared to the national average of 66% and the 88% that our hospitals achieved the previous year.

As high levels of participation help generate more robust outcome data, our aim for 2022 was to return our participation levels to above the national average for PROMs.



Throughout the year we held a number of additional training sessions for our PROMs leads, worked with a number of hospitals to identify and share best practice and we also automated the invite to patients to complete their pre-op survey based on their booked procedure code. As the NHS are not currently publishing PROMs data because of changes made to the processing of Hospital Episode Statistics (HES) data in 2021, we’re not able to compare our current participation rates with the national average.

However, our internal data shows that we still have work to do in this area with considerable variation across hospitals in the number of patients who complete their pre-op PROM. Improving participation will continue to be a focus for us in 2023 and our plans include reviewing the patient registration process and the reports we provide to hospitals on outcomes.

## Reducing avoidable cancellations

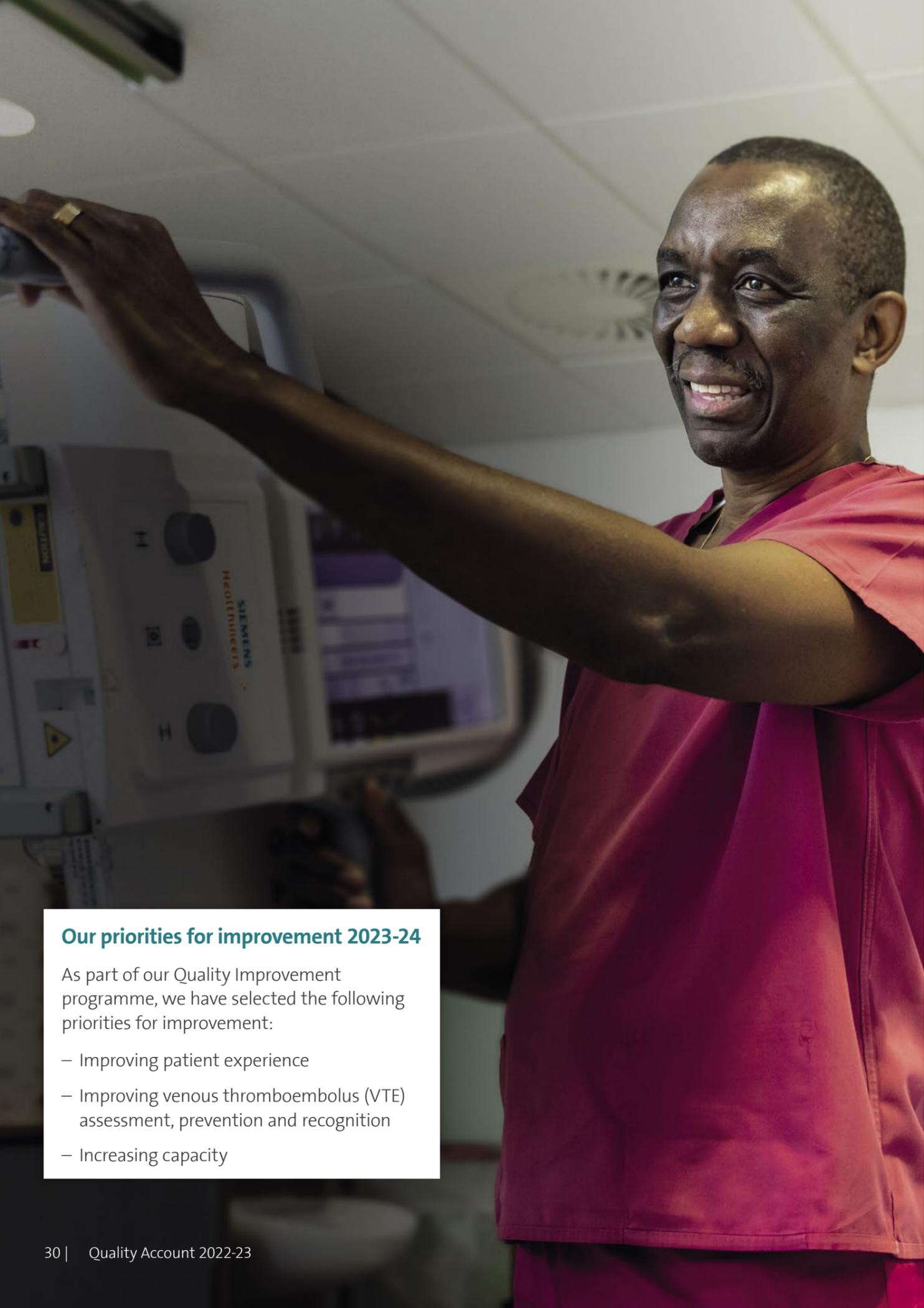
### Why is this priority important?

In keeping with other healthcare providers, the COVID-19 pandemic increased the number of cancelled procedures and appointments, many

of which were due to restrictions on elective care (and other restrictions) or due to staff or patient sickness. However, some cancellations are avoidable and are caused by process failures including unavailability or late return of blood results, equipment not arriving in time or other issues such as overrunning operating or clinic lists. Not only are cancelled operations distressing and inconvenient for patients, they are also a waste of time and resources.

Our aim last year was to reduce incidence of avoidable cancellations for surgical episodes by 20% during 2022. Overall, we made some progress against this priority, with a reduction of 11% group-wide and our ‘index’ hospitals (who piloted specific high impact interventions) exceeding the target including Fylde Coast (83%) and Nottingham (60%).

These interventions are now being reviewed by our operations board to assess the potential for a wider-roll out in 2023.



### Our priorities for improvement 2023-24

As part of our Quality Improvement programme, we have selected the following priorities for improvement:

- Improving patient experience
- Improving venous thromboembolus (VTE) assessment, prevention and recognition
- Increasing capacity

## Our plans

### Improving patient experience

#### Why is this priority important?

The patient is at the centre of everything we do at Spire Healthcare and our aim is to continue to improve that experience in the coming year. We will be rolling out the solutions which have proved effective in our trial at Spire Yale in 2022, but also looking at the whole patient journey to seek other opportunities for improvement.

Communication is often an area mentioned in feedback so we are reviewing how we communicate with our patients, and making changes to this to better meet their needs. We are particularly working to engage patients in these changes, working to co-produce solutions.

#### Our aim/goals

To improve the percentage of patients agreeing their experience was very good by 3% by April 2024 (from 82% in 2022).

#### How will progress to achieve this priority be monitored by Spire Healthcare?

The impact of Quality Improvement projects in this area will be reported through to the quality improvement programme committee and the safety, quality and risk committee.

### Improving the assessment, prevention and recognition of venous thromboembolism (VTE)

#### Why is this priority important?

VTE is a potentially fatal condition and it is possible to reduce the risk of VTE events following surgery through high-impact interventions. While Spire Healthcare hospitals report low numbers of VTE overall, we are looking to ensure all VTE which could have been avoided, are avoided. As part of introducing PSIRF, we have commenced a system engineering initiative for patient safety (SEIPS) review of our VTE systems, engaging with frontline workers throughout Spire Healthcare for their views and opinions.

#### Our aim/goals

To reduce the rate of potentially avoidable VTE by 50% by April 2024

#### How will progress to achieve this priority be monitored by Spire Healthcare?

The impact of Quality Improvement projects in this area will be reported through to the Quality Improvement programme committee and the safety, quality and risk committee.

### Increasing capacity

#### Why is this priority important?

Increasing capacity across our hospitals will enable us to treat more patients. This will also enable us to help the NHS to recover following the pandemic, reducing waiting lists by providing extra capacity. Orthopaedics is one of the areas with the highest waiting lists, and every person on that waiting list is enduring pain and reduced mobility during their wait.

We have therefore chosen to concentrate on increasing capacity by reducing the length of stay for joint patients undergoing hip and knee replacement.

#### Our aim/goals

To reduce the average length of stay for patients having a hip or knee replacement by 0.5 days by April 2024

#### How will progress to achieve this priority be monitored by Spire Healthcare?

The impact of Quality Improvement projects in this area will be reported through to the quality improvement programme committee and the safety, quality and risk committee.

# Review and assurance

## Data quality

Maintaining the excellent foundation provided by our efficient systems and processes to support the collection and reporting of NHS data, we are pleased to report that our overall data quality measures have been sustained through this year and continue to exceed the required national standards. Our hospitals and central NHS management information team remain focused on the core areas we see as underpinning our strategy:

- National data set reporting
- Secondary Uses Services (Commissioning Data Set) and
- UNIFY submissions and clinical coding to support Payment by Results

We continue to refine and develop our monthly reporting packs for our commissioners as we seek to ensure that we provide clear, timely and consistent performance and KPI information. commissioner feedback remains positive and there is ongoing evidence from our local contract management meetings that these have supported improved contract management, governance and activity monitoring, and data validation conversations.

The tables below show Spire Healthcare’s Secondary Uses Services data quality performance for April 2022 to March 2023 as issued by NHS Digital in April 2023. We are pleased to again report that we have market-leading data quality. Against each element, Spire Healthcare is highly rated, continues to equal or exceed the required standard and is significantly ahead of the national average.

## Secondary Uses Service data for April 2021 to March 2022, as issued by NHS Digital in April 2022

Spire Healthcare outpatient data, based upon 479,534 activities

| Data item               | % valid |
|-------------------------|---------|
| NHS number              | 100     |
| Patient pathway         | 100     |
| Treatment function      | 100     |
| Main specialty          | 100     |
| Reg. GP practice        | 99.9    |
| Postcode                | 100     |
| Org. of residence       | 99.6    |
| Commissioner            | 99.6    |
| NHS no status indicator | 99.7    |
| First attendance        | 100     |
| Attendance indicator    | 100     |
| Referral source         | 100     |
| Referral received date  | 100     |
| Attendance outcome      | 96.2    |
| Priority type           | 100     |
| Primary procedure       | 100     |
| Ethnic category         | 100     |
| Site of treatment code  | 100     |
| HRG4                    | 100     |

Spire Healthcare admitted patient data, based upon 64,001 activities

| Data item               | % valid |
|-------------------------|---------|
| NHS number              | 100     |
| NHS no status indicator | 99.8    |
| Patient pathway         | 100     |
| Treatment function      | 100     |
| Main specialty          | 100     |
| Reg. GP practice        | 99.8    |
| Postcode                | 100     |
| Org. of residence       | 99.7    |
| Commissioner            | 99.7    |
| Ethnic category         | 100     |
| Primary diagnosis       | 99.5    |
| Primary procedure       | 99.9    |
| Site of treatment       | 100     |
| HRG4                    | 100     |

## Clinical coding

Our in-house clinical coding team of three, led by our head of clinical coding and audit assurance, continues to achieve high accuracy levels with a rolling programme of audit and reviews of our inpatient and daycase activity. The team, who are all NHS Digital approved clinical coding auditors, strive to identify areas in need of improvement and work closely with the hospital sites and the external clinical coding team to ensure that regular support and feedback is given to protect our high accuracy levels. Since launching the remote audit service business wide, all hospitals now have the opportunity to have more activity reviewed on a frequent basis, with the majority of our hospitals now having this service firmly embedded in their regular processes. This gives greater confidence that issues and errors are being identified at the earliest opportunity, corrected and training guidance given. Additional coding education is delivered to consultants and hospital staff and clinician validation documents are regularly reviewed and updated when new guidance is published.

## Clinical coding accuracy

Spire Healthcare undertakes comprehensive internal audits across the group, following the NHS Digital clinical coding audit methodology v16.0. This provides assurance that coding error rates and HRG errors are being maintained at acceptable levels. Financial year 2022-23 audits have been completed, giving an overall HRG error rate of 4.8%, which is the same as the previous year. Primary procedure recording has remained the same since 2017 at 97%. Primary diagnosis accuracy stands at 96%, secondary diagnosis at 97% and secondary procedure at 97%, meaning that each of these three areas have increased by one percentage point since the last full year audit.

The overall coding accuracy result for 2022-23 achieved the Data Security and Protection Toolkit (DSPT) ‘standards exceeded’ level (previously known as IGT level 3).

## Counter fraud

In 2022, we appointed Grant Thornton as our new Counter Fraud Specialist (CFS) to obtain a fresh perspective on our anti-fraud controls having being with our previous CFS for over eight years. With Grant Thornton, we have developed a new five-year strategy to guide the work of the CFS, reviewed our risk assessment, and put into place other improvement measures. Grant Thornton agree a yearly work plan with our Audit and Risk Committee, and are in the process of executing their first annual plan. The plan focusses on risk areas identified through the fraud risk assessment in line with the Government Counter Fraud Profession methodology required by the NHS Counter Fraud Authority. The Group Financial Controller is our nominated Fraud Champion. We submitted our eighth counter fraud self-assessment tool return to the NHS Counter Fraud Authority in May 2023. Our submission shows improvement against the prior year, with now an overall “green” rating (FY21-22 was “amber”). In total, against the 13 standards we fully met seven and partially met six, therefore none were not met.

## Clinical audit

During 2022, five national clinical audits covered the NHS services that Spire Healthcare provides. During that period, Spire Healthcare participated in 100% of the national clinical audits and national confidential enquiries in which it was eligible to participate.

The national clinical audits in which Spire Healthcare was eligible to participate during 2022 are as follows:

- National elective surgery: PROMs: patients undergoing hip replacement and knee replacement in England
- National Joint Registry (NJR): hip and knee replacement
- Adult cardiac surgery: coronary artery bypass graft (CABG) and valvular surgery
- Heart: coronary angioplasty (percutaneous coronary interventions)
- National Heart Rhythm Management Audit

The national clinical audits that Spire Healthcare participated in during 2022 are as follows:

- National elective surgery: PROMs: patients undergoing hip replacement and knee replacement in England
- NJR: hip and knee replacement
- Adult cardiac surgery: CABG and valvular surgery
- Heart: coronary angioplasty (percutaneous coronary interventions)
- National Heart Rhythm Management Audit

The national clinical audits in which Spire Healthcare participated, and for which data collection was completed during 2022, are listed as

follows, alongside the number of cases submitted to each audit or enquiry as a percentage of the number of registered cases required by the terms of that audit or enquiry:

- National elective surgery PROMs: patients undergoing hip replacement and knee replacement in England – This information is unavailable as the NHS have currently paused publishing PROMs following changes made to the processing of HES data in 2021. NHS England are working to update this linkage process and resume publication of this series as soon as they can but are currently unable to provide a timeframe for this
- NJR: hip and knee replacement – information unavailable (the cases submitted include a mix of both privately funded and NHS patients)
- Adult cardiac surgery: CABG and valvular surgery - information unavailable (the cases submitted include a mix of both privately funded and NHS patients)
- Heart: coronary angioplasty (percutaneous coronary interventions) – information unavailable (the cases submitted include a mix of both privately funded and NHS patients)
- National Heart Rhythm Management Audit – information unavailable (the cases submitted include a mix of both privately funded and NHS patients)

As a result of these audits, Spire Healthcare intends to take the following actions to improve the quality of healthcare provided:

- Improving PROMs participation remains a key focus for us in 2022. Additionally, we are planning to undertake a ‘deep-dive’ into outcomes following hip and knee replacement at a number of our hospitals to help share learning and best practice

Based on the NJR annual data quality audit, the following Spire Healthcare hospitals achieved ‘Quality Data Provider’ status:

- Spire Alexandra Hospital
- Spire Bristol Hospital
- Spire Bushey Hospital
- Spire Cambridge Lea Hospital
- Spire Cardiff Hospital
- Spire Clare Park Hospital
- Spire Fylde Coast Hospital
- Spire Harpenden Hospital
- Spire Hartswood Hospital
- Spire Hull and East Riding Hospital
- Spire Leeds Hospital
- Spire Leicester Hospital
- Spire Liverpool Hospital
- Spire London East Hospital
- Spire Manchester Hospital
- Spire Methley Park Hospital
- Spire Murrayfield Hospital (Wirral)
- Spire Norwich Hospital
- Spire Parkway Hospital
- Spire Portsmouth Hospital
- Spire Regency Hospital
- Spire Southampton Hospital
- Spire St Anthony’s
- Spire Tunbridge Wells Hospital
- Spire Washington Hospital

We will work with the hospitals that did not meet data quality targets in the coming year and continue to review data outliers in line with the process defined in our medical governance and assurance policy, when notified by the NJR.

During 2023, we will be piloting a clinical effectiveness dashboard including key metrics for PROMs and the NJR to help our hospitals meet targets in this area.

## Research

A number of patients receiving NHS services provided or subcontracted by Spire Healthcare in 2021 were recruited during the year to participate in research approved by a research ethics committee. In the majority of these cases, Spire Healthcare provided an ancillary service (for example, scans or investigations) to support primary research undertaken elsewhere, such as by a contract research organisation or NHS Trust.

## CQC inspections

A list of the CQC ratings of each of our hospitals, together with the date of their most recent inspection and report, is shown below.

| Hospital                | Inspection date | Publication date | Overall rating       |
|-------------------------|-----------------|------------------|----------------------|
| Spire Alexandra         | 19-Dec-16       | 06-Sep-17        | Requires Improvement |
| Spire Bristol           | 17-Feb-22       | 23-Jun-22        | Good                 |
| Spire Bushey            | 28-Sep-21       | 02-Dec-21        | Good                 |
| Spire Cambridge Lea     | 06-Jun-16       | 05-Dec-16        | Good                 |
| Spire Cheshire          | 18-Oct-16       | 17-May-17        | Outstanding          |
| Claremont Hospital      | 20-Feb-17       | 08-Aug-17        | Outstanding          |
| Spire Clare Park        | 21-Sep-22       | 15-Nov-22        | Good                 |
| Spire Dunedin           | 15-Feb-22       | 19-May-22        | Good                 |
| Spire Elland            | 09-Aug-16       | 21-Mar-17        | Good                 |
| Spire Fylde Coast       | 08-Apr-19       | 02-Sep-19        | Good                 |
| Spire Gatwick Park      | 26-Oct-21       | 17-Jan-22        | Good                 |
| Spire Harpenden         | 12-Apr-16       | 09-Jan-17        | Good                 |
| Spire Hartswood 3       | 01-Dec-21       | 22-Mar-22        | Good                 |
| Spire Hesslewood Clinic | 18-Sep-18       | 22-Nov-18        | Good                 |
| Spire Hull & ER         | 18-Sep-18       | 15-Nov-18        | Good                 |
| Spire Leeds             | 02-Mar-20       | 01-Jun-20        | Good                 |
| Spire Leicester         | 11-Aug-15       | 19-Feb-16        | Good                 |
| Spire Little Aston      | 11-Jun-19       | 18-Nov-19        | Good                 |
| Spire Liverpool         | 10-Aug-22       | 03-Oct-22        | Good                 |

| Hospital                       | Inspection date | Publication date | Overall rating |
|--------------------------------|-----------------|------------------|----------------|
| Spire London East              | 05-Nov-19       | 11-Feb-20        | Good           |
| Spire Manchester               | 24-Aug-22       | 20-Oct-22        | Outstanding    |
| Spire Methley Park             | 01-Nov-16       | 29-Mar-17        | Good           |
| Montefiore                     | 23-Jan-17       | 05-Jun-17        | Outstanding    |
| Spire Murrayfield Wirral       | 27-Apr-22       | 21-Jul-22        | Good           |
| Spire Norwich                  | 06-Apr-22       | 21-Jun-22        | Good           |
| Spire Nottingham               | 05-Feb-18       | 01-Jun-18        | Outstanding    |
| Spire Parkway 3                | 17-Sep-19       | 09-Dec-19        | Good           |
| Spire Portsmouth               | 13-Apr-16       | 07-Sep-16        | Good           |
| Spire Regency                  | 23-Nov-21       | 11-Feb-22        | Good           |
| Spire South Bank               | 02-Dec-21       | 10-Feb-22        | Good           |
| Spire Southampton              | 08-Jul-21       | 13-Sep-21        | Good           |
| Spire St Anthony's             | 29-Oct-19       | 28-Apr-20        | Good           |
| Spire Thames Valley            | 06-Nov-19       | 03-Feb-20        | Good           |
| Spire Tunbridge Wells          | 26-Jul-16       | 17-Nov-16        | Good           |
| Spire Washington               | 04-Dec-19       | 08-May-20        | Good           |
| Spire Wellesley                | 14-Sep-22       | 06-Mar-23        | Good           |
| Spire Bushey Diagnostic Centre | 28-Sep-21       | 02-Dec-21        | Good           |

# Hospital performance data

|                 | Unplanned returns to theatre | Unplanned readmissions within 31 days of discharge | Unplanned transfers to level 2/3 facility | Reportable HCAI |                          |                  |
|-----------------|------------------------------|--|---|-----------------|--------------------------|------------------|
|                 | As a % of IPDC discharges    | As a % of IPDC discharges                          | As a % of IPDC discharges                 | Overall, number | Clostridioides Difficile | Escherichia coli |
| Alexandra       | 0.06%                        | 0.21%  | 0.06%                                     | 1               | 1                        | 0                |
| Bristol         | 0.15%                        | 0.37%  | 0.03%                                     | 4               | 2                        | 1                |
| Bushey          | 0.04%                        | 0.12%  | 0.03%                                     | 2               | 0                        | 2                |
| Cambridge Lea   | 0.30%                        | 0.16%  | 0.03%                                     | 0               | 0                        | 0                |
| Cheshire        | 0.34%                        | 0.24%  | 0.06%                                     | 1               | 0                        | 1                |
| Claremont       | 0.24%                        | 0.19%  | 0.05%                                     | 1               | 0                        | 1                |
| Clare Park      | 0.42%                        | 0.44%  | 0.00%                                     | 0               | 0                        | 0                |
| Dunedin         | 0.11%                        | 0.15%  | 0.09%                                     | 0               | 0                        | 0                |
| Elland          | 0.14%                        | 0.25%  | 0.04%                                     | 0               | 0                        | 0                |
| Fylde Coast     | 0.14%                        | 0.18%  | 0.00%                                     | 1               | 0                        | 0                |
| Gatwick Park    | 0.14%                        | 0.27%  | 0.02%                                     | 1               | 0                        | 1                |
| Harpenden       | 0.18%                        | 0.12%  | 0.02%                                     | 0               | 0                        | 0                |
| Hartswood       | 0.06%                        | 0.10%  | 0.05%                                     | 0               | 0                        | 0                |
| Hull            | 0.16%                        | 0.27%  | 0.03%                                     | 2               | 0                        | 1                |
| Leeds           | 0.14%                        | 0.11%  | 0.02%                                     | 4               | 1                        | 0                |
| Leicester       | 0.13%                        | 0.25%  | 0.05%                                     | 0               | 0                        | 0                |
| Little Aston    | 0.26%                        | 0.21%  | 0.00%                                     | 0               | 0                        | 0                |
| Liverpool       | 0.21%                        | 0.14%  | 0.00%                                     | 1               | 0                        | 0                |
| London East     | 0.07%                        | 0.18%  | 0.02%                                     | 0               | 0                        | 0                |
| Manchester      | 0.45%                        | 0.46%  | 0.04%                                     | 0               | 0                        | 0                |
| Methley Park    | 0.12%                        | 0.60%  | 0.02%                                     | 0               | 0                        | 0                |
| Montefiore      | 0.15%                        | 0.11%  | 0.06%                                     | 2               | 1                        | 0                |
| Norwich         | 0.24%                        | 0.41%  | 0.07%                                     | 0               | 0                        | 0                |
| Nottingham      | 0.45%                        | 0.22%  | 0.07%                                     | 2               | 1                        | 0                |
| Parkway         | 0.33%                        | 0.37%  | 0.00%                                     | 1               | 1                        | 0                |
| Portsmouth      | 0.12%                        | 0.18%  | 0.00%                                     | 0               | 0                        | 0                |
| Regency         | 0.03%                        | 0.03%  | 0.03%                                     | 0               | 0                        | 0                |
| Southampton     | 0.48%                        | 0.64%  | 0.16%                                     | 1               | 0                        | 0                |
| South Bank      | 0.07%                        | 0.11%  | 0.02%                                     | 0               | 0                        | 0                |
| St Anthony's    | 0.40%                        | 0.65%  | 0.05%                                     | 1               | 1                        | 0                |
| Thames Valley   | 0.20%                        | 0.23%  | 0.00%                                     | 0               | 0                        | 0                |
| Tunbridge Wells | 0.14%                        | 0.32%  | 0.00%                                     | 0               | 0                        | 0                |
| Washington      | 0.33%                        | 0.35%  | 0.00%                                     | 0               | 0                        | 0                |
| Wellesley       | 0.21%                        | 0.26%  | 0.00%                                     | 0               | 0                        | 0                |
| Wirral          | 0.10%                        | 0.00%  | 0.03%                                     | 0               | 0                        | 0                |

|          |          |                 | Falls                 | FFT 'Good' or 'Very Good' experience |
|----------|----------|-----------------|-----------------------|--------------------------------------|
| MRSA BSI | MSSA BSI | Pseudomonas BSI | As a % of IP bed days | % of responses                       |
| 0        | 0        | 0               | 0.20%                 | 95.%                                 |
| 0        | 1        | 0               | 0.33%                 | 97.%                                 |
| 0        | 0        | 0               | 0.54%                 | 95.%                                 |
| 0        | 0        | 0               | 0.29%                 | 95.%                                 |
| 0        | 0        | 0               | 0.53%                 | 95.%                                 |
| 0        | 0        | 0               | 0.30%                 | 96%                                  |
| 0        | 0        | 0               | 0.27%                 | 95.%                                 |
| 0        | 0        | 0               | 0.32%                 | 95.%                                 |
| 0        | 0        | 0               | 0.32%                 | 94.%                                 |
| 0        | 1        | 0               | 0.36%                 | 97.%                                 |
| 0        | 0        | 0               | 0.67%                 | 95.%                                 |
| 0        | 0        | 0               | 0.29%                 | 96.%                                 |
| 0        | 0        | 0               | 0.68%                 | 97.%                                 |
| 0        | 0        | 1               | 0.51%                 | 95.%                                 |
| 0        | 3        | 0               | 0.32%                 | 95.%                                 |
| 0        | 0        | 0               | 0.69%                 | 98.%                                 |
| 0        | 0        | 0               | 0.34%                 | 95.%                                 |
| 0        | 1        | 0               | 0.55%                 | 94.%                                 |
| 0        | 0        | 0               | 0.86%                 | 92.%                                 |
| 0        | 0        | 0               | 0.19%                 | 96.%                                 |
| 0        | 0        | 0               | 0.46%                 | 97.%                                 |
| 0        | 0        | 1               | 0.69%                 | 93.%                                 |
| 0        | 0        | 0               | 0.30%                 | 97.%                                 |
| 0        | 1        | 0               | 0.51%                 | 97.%                                 |
| 0        | 0        | 0               | 0.24%                 | 98.%                                 |
| 0        | 0        | 0               | 0.15%                 | 94.%                                 |
| 0        | 0        | 0               | 0.39%                 | 96.%                                 |
| 0        | 1        | 0               | 0.22%                 | 96.%                                 |
| 0        | 0        | 0               | 0.30%                 | 97.%                                 |
| 0        | 0        | 0               | 0.27%                 | 95.%                                 |
| 0        | 0        | 0               | 0.23%                 | 96.%                                 |
| 0        | 0        | 0               | 0.96%                 | 97.%                                 |
| 0        | 0        | 0               | 0.30%                 | 93.%                                 |
| 0        | 0        | 0               | 0.47%                 | 96.%                                 |
| 0        | 0        | 0               | 0.16%                 | 95.%                                 |

Clinical indicator data refers to calendar year 2022 and includes both NHS and privately funded patients admitted for treatment to Spire Healthcare hospitals in England. Data is not adjusted for case mix so direct comparisons between hospitals of different sizes and with differences in case mix complexity may not be appropriate.

FFT = Friends and Family Test. Friends and Family Test ratings are based on the percentage of patients responding 'very good' or 'good' to overall hospital experience.

The rates for 'Unplanned returns to theatre', 'Unplanned readmissions within 31 days of discharge', and 'Unplanned transfers to level 2/3 facility' are presented as a % of IPDC discharges.

The rates for 'falls' are presented as % of (IP) bed days.

# ICB statement

## NHS Cheshire and Merseyside Integrated Care Board and NHSE/I Specialist Commissioning

### Quality Account Statement 2022-23

#### Spire Healthcare

Partners express their thanks for the national quality account report. Cheshire and Merseyside ICB recognise the pressures and challenges for the organisation and the local health economy in the last year, particularly in respect to post-COVID pressures, winter pressures, industrial action, and mutual aid for Cheshire and Merseyside NHS Providers in relation to reducing over 18-week elective waits as well as addressing Spire Healthcare referrals and wait times.

We note the national priorities, key achievements and progress made in 2022-2023:

1. The panel acknowledged 10 sites nationally were inspected in 2022 and were successful in achieving good or outstanding ratings from CQC. The acknowledgement of processes and support for hospitals when challenges are faced is transparent and open. This underpins the organisation's commitment to achieving consistently high-quality standards, uncompromising patient safety and ensuring low levels of patient harm incidents. Whole staff support and skills continue to be a priority for the organisation to ensure patient safety is prioritised.
2. The embedding of the new Quality Improvement strategy. The patient voice is clearly evidenced within the account. Their experiences are used as learning to enhance patient pathways and to enhance best practice so both patients and staff benefit from successful, harm-free, effective outcomes. Having the right colleagues and the right skills, in the right place at the right time is evidenced throughout the report along with a strong team structure to ensure high quality care is delivered to the population the organisation serves.

3. The introduction of the role of the surgical care nurse practitioners has enhanced patient experience as well as ensuring continuity occurs across the patient pathways. The benefit to patients has been seen as an improvement for patients' care and experiences alongside ensuring efficiency and effectiveness allowing easier attraction of consultants.
4. The continued strengthening of clinical guidance standards – The clinical, governance and safety committee promotes a culture of high quality and safe patient care. Ward to board process has been streamlined including the monthly reporting of key performance indicators for the organisation. The importance of providing information alongside data has been seen to be informative and has ensured assurance and contextual conversations and discussions.
5. The introduction of higher acuity areas across the national Spire Healthcare network has enabled resilience alongside reducing the burden on the wider NHS system. The JAG accreditation has been achieved throughout 2022-2023 across the organisation. Macmillan Quality Environment Mark accreditation has also been achieved.
6. Partnership with the NHS – Nationally, Spire Healthcare has supported the backlog of elective care working collaboratively with the NHS. The organisation has supported NHS colleagues treating patients who have been identified with extended wait times. The organisation has identified their commitment to continuing to support the NHS through the outcomes of the Elective Recovery Taskforce.
7. The organisation has shown evidence of its continued development of the Quality Improvement strategy that was launched in 2021. As an example, an initiative to improve flow through an imaging department has shown positive benefits on reducing waiting

times, delivering a better patient experience and more efficient process. Reduced length of stay has also shown benefits in the outcomes for patients. Each Spire Healthcare hospital has implemented its own Quality Improvement programme.

8. The launch of the new Nursing and Allied Health Professional Strategy Framework.
9. Focus on serious incident reporting has ensured a robust reporting culture – particularly for near misses and no harm incidents. Spire Healthcare national incident review committee has ensured lessons are captured and shared across the Spire Healthcare organisation and the continued use of safety bulletins supports this cascade.
10. Enhanced patient experience by facilitating electronic bookings and electronic pre-operative assessments. This has also led to a Nursing Practice award in 2022. This initiative has allowed for collaboration with the NHS as part of the digital programme to allow for access to summary care records – allowing the promotion of patient safety with real time patient specific information.
11. Improving patient experience with a focus on discharge – A patient brochure was implemented in one of the organisation's hospitals with a 9.4% increase in positive response to an organised discharge. As a positive learning outcome of the initiative the project will be implemented at other Spire Healthcare hospitals during 2023-2024.

On behalf of Cheshire and Merseyside ICB / Liverpool Place have noted and accepted national Spire Healthcare's ambition and intention to continue the work in relation to PSIRF implementation.

The panel acknowledged the national organisation's need for a focus in 2023-2024 quality priorities on:

1. Improving patient experience
2. Improving venous thromboembolus assessment, prevention, and recognition
3. Increasing capacity

Cheshire and Merseyside ICB / Liverpool Place recognises the challenges for providers in the coming year. We look forward to continuing working with Spire Healthcare during 2023-2024 as you continue to deliver improvements in service quality, safety, and patient experience, as well as continuing to strengthen integrated partnership-working to deliver the greatest and fastest possible improvement in people's health and wellbeing within a strong, safe and sustainable health and care system.

Cheshire and Merseyside ICB / Liverpool Place would like to take this opportunity to say thank you to Spire Healthcare staff for their care, courage, and commitment to ensuring the population of Liverpool, Cheshire and Merseyside receive high quality, safe and effective care and for your on-going commitment locally to system partnership working.



**Jane Lunt**  
Associate Director for Quality and Safety Improvement  
Liverpool Place







**Spire Healthcare**

**Spire Healthcare**

3 Dorset Rise

London

EC4Y 8EN

[www.spirehealthcare.com](http://www.spirehealthcare.com)

*Looking after you.*