

The New Foscote Hospital Quality Report 2024 - 2025

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What Matters to Us



Monthly patient surveys showing 98% patient satisfaction.



Zero return to theatre.



Zero rate of infection as a result of surgery.



99% compliance with all aspects on control of infection.



360° feedback discussed at Senior Leadership Team meetings.



Named in The Telegraph in the Top 10 private & NHS hospitals in the UK.



We have a shared vision, strategy and culture focused on excellent patient care.



17 graduates employed, gaining experience across all hospital services.



Career Professional Development promoted with courses via Middlesex University.



Gold award from the National Joint Registry (NJR) for data quality.

Aims, Values and Behaviours

Our Aims

Professional Service

- Provide a holistic service that caters to the different needs of the individuals we serve, in a dignified and personal way.
- Observe patient confidentiality.
- Receive and act upon feedback.

Clinical Excellence

- Provide the latest, reliable medical equipment, checked and serviced consistently.
- Provide the right treatments at the highest standards.
- Ensure our patients receive the finest clinical outcomes.

Quality Care

- Create positive experiences for all our patients by always listening.
- Engage and support our patients throughout their care journey.
- Provide safe, efficient, effective, and equitable healthcare.

Our Values and Behaviours

Community – We serve our community best by being part of it. We treat our team members and our patients like part of our community by demonstrating teamwork, reliability, and using good communication.

Integrity - Representing as individuals, and as a team, that we are trustworthy and loyal, as well as being accountable as part of a team.

Vigour – By demonstrating vigour through our positivity, enthusiasm, and productivity.

Innovation – Understanding that innovation can come in the simplest of forms, and welcoming creativity and adaptability that improves efficiency and safety.

Compassion – Our goal is to create a family environment for both our patients and staff, and we expect and encourage kindness, empathy, and mutual respect from everyone in the hospital.



Chief Executive Statement



Mike Moran MBE

A commitment to excellence

I am delighted to be introducing The New Foscote Hospital's Quality Report. The New Foscote Hospital is focused above all on excellence in patient care, safety, and optimising outcomes. I believe that these priorities enable us to increase our appeal to patients, private medical insurers and to NHS commissioners.

Our Matron has developed our Clinical Effectiveness model that underpins our quality assurance framework, and which encapsulates the core principles of delivering safe, effective, patient-centred care, whether they be private, private medically insured, of NHS. We treat everybody equally, with dignity, and without labels.

Governance

The Senior Leadership Team (SLT) recognises their responsibilities in relation to regulatory compliance and champions the 'well-led' framework described by the Care Quality Commission (CQC). Transparency and high standards of business conduct are vital in a healthcare setting and our Governance Team should be commended for their diligence and support of the staff in delivering excellent patient care.

We have now embedded RADAR to support our commitment to reducing risk, for the development of action and improvement plans, and for analytics and reporting. The benefit of RADAR is that all our risk strategies are now in one place and accessible to all staff.

Patient Safety Incident Response Framework (PSIRF)

We are proud champions of the NHS's Patient Safety Incident Response Framework (PSIRF) which came into effect in 2024. We particularly support the approach of learning and improvement, which closely relate to our own ethos of analysing what went wrong and identifying ways in which to minimise the errors and incidents. In addition, PSIRF has assisted us to use our duty of candour policy and better inform patients, relatives and staff when things go wrong with an opportunity for reflections and sharing lessons learnt. PSIRF has now been embedded into our quality assurance framework.

Investment - Delivering a sustainable future

To help deliver a high-quality service, we prioritised investing in our facilities. Investing multi-millions in a second operating theatre, the development of a Theatre Sterile Services Unit, the refurbishment of the hospital, upgraded

computer hardware and software, and new accommodation for our Resident Medical Officers.

The investments have been strategic in nature, focussed on sustainable growth, and reducing the reliance on third-party delivery of critical functions of service delivery, allowing us to take more ownership of the delivery of quality outputs.

Our staff, values and behaviours

Over the past year we have continued to invest in our staff, their welfare, well-being, and professional development. We are proud of the benefits that we offer staff which include a generous private pension, private medical insurance, an extra day's leave on their birthday, bike to work scheme, fleet solutions, subsidised food, and family and friend's discount.

In keeping with our culture of safe, effective, patient-centred care, we have continued with our policy not to employ agency staff. We firmly believe that the ad hoc use of agency staff increases risk and may well impact on patient safety. We are always looking to bring on the next generation of hospital managers through our Graduate Programme. We currently have 17 graduates who rotate through departments to gain experience across all hospital services. This year, we have introduced a new graduate programme, in collaboration with The University of Buckingham. Graduates on the scheme can enrol in an 18-month Level 7 course in Leadership, followed by a 6-month MBA programme, all of which is funded by the hospital.

We set our own standards at The New Foscote Hospital, and we have zero tolerance for abuse, whether directed towards patients or staff. Our Values and Behaviours of Community, Integrity, Vigour, Innovation, and Compassion, are embedded in our culture, and are reinforced through education and awareness sessions. We encourage all staff to be the best colleagues that they can be, and to treat each other with the same dignity and respect that they treat our patients with.

Summary

In summary, I am proud of the patient-centred care that we provide across all our services. It is an honour to lead such a dedicated team of professionals, and to watch them grow and develop as we introduce improvements in the way we do things, and the services that we offer. I would like to express my thanks to all staff, our success this year would not have been possible without their support, for which I am grateful.

Hospital profile

The New Foscote Hospital is a private hospital facility in Banbury which can accommodate 18 patients in private rooms, all of which are equipped with a nurse-call system, private bathroom facilities, Wi-Fi access and a television.

In addition, there are 6 outpatient rooms, two Physiotherapy suites, two laminar flow operating theatres and one Endoscopy suite.

Radiology facilities include:

- X-Ray Room with up-to-date Digital Radiography.
- Dedicated Ultrasound Imaging room.
- 1.5T MRI unit which accepts private patients with waiting time of same day or any day to meet the needs of the patient. The MRI also performs scans for NHS patients under an NHS agreement.

In December 2024, the hospital established a dedicated surgical instruments sterilisation unit including endoscopy washer - dryers.

The hospital provides surgical and medical treatments for patients using private medical insurance, Self-pay and NHS ERS and inter-provider NHS referrals.

For full scope of services, please see https://thefoscotehospital.co.uk/.

Care Quality Commission Report

The New Foscote Hospital is registered as a provider with the Care Quality Commission (CQC) under the Health & Social Care Act 2008. The New Foscote Hospital is registered as a location for the following regulated services:

- Treatment of disease, disorder and injury.
- Surgical procedures.
- Diagnostic and screening.
- Family Planning.
- Services in slimming clinics.

The services also include children's services from age of 0-16 years old for outpatients and diagnostics procedures. Individuals aged 16-18 are offered surgical services, if they request to have treatment as an adult.

The last inspection report in 2021 from Care Quality Commission rated the hospital as good in all areas.

Executive Board Structure

- Senior Leadership team SLT meets weekly.
- Operational Team Structure.
- Staff Roles Chart.
- Annual Meeting Planner Including Terms of Reference.
- Biannual Medical Advisory Committee meeting.

The organisation has a management structure with all senior leadership meeting on a weekly basis and on advice from staff, resolving all the operational issues. Monthly meetings are formal and include slide packs and progress against any actions. The group has a dynamic leadership concept of resolving and discussing issues as and when they arise with full leadership respect for all the decisions made.

There is an on-call rota for the senior leaders to manage unexpected matters that may arise out of hours. There is an escalation policy to alert the leadership team in an emergency.

Staff Employed at The New Foscote Hospital

The New Foscote Hospital recruits appropriately qualified professionals to deliver services. All hospital employees have the appropriate mandatory qualifications and experience to undertake the work for which they are employed. All healthcare professionals are registered with and regulated by the appropriate governing body, such as the Nursing and Midwifery Council (NMC), and the Health and Care Professions Council (HCPC), General Medical council (GMC), Royal college of Radiographers (RCR). The majority of team members have additional specialist training, striving to deliver a consistently high level of safe care.

<u>Clinical Governance and Compliance Structure</u>

The Hospital has implemented a clinical governance structure:

- Group Director of Governance and Governance Coordinator.
- Group Director of Nursing.
- Group Medica Director.
- Group Finance Director.
- Robust administration support team to ensure compliance with regulatory requirements.

The Governance compliance is via RADAR incident and compliance reporting IT system.

Medical Advisory Committee - MAC

The Medical Advisory Committee meets every six months with full consultant attendance. Minutes of the meetings and all actions are kept for governance

purposes. The practicing privileges of all new consultant applicants are reviewed and amended. The agenda for MAC meetings are standardised and incorporates new NICE guidelines, medicine management issues, request for additional equipment and technology, morbidity and mortality data, and unplanned events.

Governance Committees and Groups

The following Governance led committees and groups have been established to ensure full compliance:

- Infection Prevention Committee including Water Safety.
- Radiation Safety Group.
- Medical Advisory Committee incorporating Medicines Management.
- Senior Leadership Team Meeting.
- Heads of Departments Meeting.
- Resuscitation Committee.
- Ward and theatres meetings.

External reviews and Audits

The new Foscote Hospital has an established network of external professional organisations who provide reviews of our processes. Examples include:

- Monmouth Partners for clinical Coding.
- Control of infection audit via external expert company.

Risk Register

 Risk registers are completed and combined into one risk register on the RADAR system. The register is regularly reviewed.

External Reporting

We have established systems and protocols to submit all the mandatory external reports in a timely manner. Current external reporting includes:

- GMC liaison for consultants.
- Private Healthcare Information Network (PHIN).
- NHS ERS outcome reports and audits.
- Financial and IT audit.
- National Joint Registry.

Staff Training

An IT training platform "Flexebee" is used managed by human resources and all staff have access to online training and certification. The database also sets the renewal intervals and informs individual member of staff when their next training is due.

Regular face to face training on resuscitation also takes place. This includes internal and external speakers. External training includes a contract with Middlesex university.

Our staff training database has recorded 95% compliance with staff mandatory training. This is in line with 85% standard set by the governance team. Some of this can also be attributed to staff leaving and new employees who are now encouraged to complete their mandatory training within the first week of employment.

Control of Infection Audit

An audit was carried out in October 2024 by an external provider and there was 99% compliance with all the aspects on control of infection.

Our records indicate zero rate of infection as a result of any surgery, however one knee replacement patient retuned with post-surgery infection which was as a result of not following post-surgery advice.

General Data Protection Regulation (GDPR) Compliance

A GDPR compliance and Data Protection Officer – DPO has been appointed. Annual returns are completed, and a certificate of compliance has been issued. In addition, all software used, has been identified with each member of staff being signed off as to what system they have access to in compliance with GDPR.

Patient Surveys and Feedback

Patient feedback is important to us, and we actively seek it out, not to garner affirmation, but to understand where we are failing to meet their expectations. This year, we changed how we captured patient feedback which has had a positive impact on the volume of surveys being returned. This has allowed us to identify areas that we can improve on which led to creating more parking spaces for patients, and to changing the layout of the reception area to improve the patient experience.

To underscore our focus on patient satisfaction, we were delighted to be named in The Telegraph in the top 10 private and NHS hospitals in the UK based on 100% patient satisfaction via the Private Healthcare Information Network. This can only be achieved by the dedication of staff being focused on patient centred care, something that we are extremely proud of.

Monthly patient surveys are consistently demonstrating above 98% patient satisfaction. In 2024, The New Foscote Hospital was voted amongst the top 10 NHS and Private providers, rated by patients. The themes of patient comments are varied from praising staff to a recent one where the corridor had acted as an echo chamber and patient had heard conversations in the corridor. This was

resolved by informing all staff that conversations should not take place in the corridors and a letter of thanks was sent to the patient.

On average around 675 patients did respond to our surveys and some of the comments received were:

"Best gluten free sandwich I have ever had, exemplary care from all the staff from reception to discharge".

"Having been referred from the NHS I found the staff extremely friendly and felt my treatment was delivered".

"The nursing staff were all caring, polite, friendly, and nothing was too much trouble for all of them".

Incident Reporting and PSIRF

The RADAR database is used to record all the incidents which are investigated via PSIRF as appropriate, protocol and outcomes are documented and shared with relevant staff and SLT.

The PSIRF transition has assisted the hospital that in the event of any incidents to engage with staff from all levels and carry out patient open and transparent safety huddles, with no blame culture and discuss the issue.

A recent example was sending of blood results to the patient without the consultant approval. A safety huddle took place with operational manager, director of nursing, director of governance and the receptionist. A full audit of pathway was carried out, outcome of which was a new robust protocol and flowchart with timelines and responsibilities. This was then distributed to all relevant staff and face to face training took place. No more incidents have been reported.

Complaints and Compliments

The Hospital has an established complaints procedure. External reviews (stage 3) for private patients are referred to ISCAS. All the complaints are managed via the RADAR reporting system. No complaints have been escalated to external agencies.

Lessons learnt and reflections

The New Foscote Hospital relies on 360-degree feedback. Every patient complaint, adverse reporting and feed backs from staff, patients, and relatives are discussed weekly in the SLT meetings. The material is reflected upon and used as a guide to improvement of services.

Clinical Effectiveness

A protocol has been established and is in operation which monitors all our clinical activity. The Clinical Effectiveness Model also links into our annual selected audit, such as joint replacement and VTE with links and guidelines ensuring using the principle of getting it right first time – GIRFT.

The New Foscote hospital was recently voted as one of the top 10 private hospitals.

Sustainable development goals

We have established a plan for reduction of carbon emission and the document has been widely distributed. The plan for reduction in printing and move to a clinician app and an acceptable paperless environment is in progress. Additional qualified and dedicated staff have been appointed to enable this.

Service developments, innovation and improvements

- Continued refurbishment and redecoration of, and investment in, the patient environment.
- Formation of strong relationship with local ICBs as a good performer.
- Second operating theatre has come into operation.
- Additional staff cabin, decontamination and purchasing cabins have been installed.
- A dedicated intranet and SharePoint is being created and is now fully operational.

Freedom to speak up

We foster a positive culture where people feel that they can speak up and that their voice will be heard. Staff and leaders act with openness, honesty and transparency and actively promote staff empowerment to drive improvement.

There is a culture of speaking up where staff actively raise concerns and those who do are supported, without fear of detriment. When concerns are raised, leaders investigate sensitively and confidentially, and lessons are shared and acted on. When something goes wrong, people receive a sincere and timely apology and are told about any actions being taken to prevent a recurrence.

We have three members of staff trained to act as speak up guardians and all staff are aware of who the speak up guardians are via daily huddle notes and posters around the organisation. This has benefited all staff who can speak up openly and this year we received two concerns, both of which were HR matters and were referred to HR for action.

Learning, improvement and innovation culture

We have a proactive and positive culture of safety based on openness, duty of candour and honesty, in which concerns about safety are listened to, safety

events are documented, investigated and reported thoroughly, and lessons are learned to continually identify and embed good practices.

We focus on continuous learning, innovation and improvement across our organisation and the local system. Staff and leaders have a good understanding of how to make improvement happen.

Governance, management and sustainability

We have clear responsibilities, roles, systems of accountability and good governance. We use these to manage and deliver good quality, sustainable care, treatment and support. We act on the best information about risk, performance and outcomes, and we share this securely with others when appropriate.

Shared direction and culture

We have a shared vision, strategy and culture. This is based on transparency, equity, equality and human rights, diversity and inclusion, engagement, and understanding challenges and the needs of people and our communities in order to meet these. Staff and leaders ensure any risks to delivering the strategy, including relevant local factors, are understood and have an action plan to address them. They monitor and review progress against delivery of the strategy and relevant local plans.

Environmental sustainability - sustainable development

We understand any negative impact of our activities on the environment, and we strive to make a positive contribution in reducing it and support people to do the same.

- Staff and leaders understand that climate change is a significant threat to the health of people who use services, their staff, and the wider population.
- Staff and leaders encourage a shared goal of preventative, high quality, low carbon care which has health benefits for staff and the population the providers serve, for example, how a reduction in air pollution will lead to significant reductions in coronary heart disease, stroke, and lung cancer, among others.
- Staff and leaders have Green Plans and take action to ensure the settings in which they provide care are as low carbon as possible, ensure energy efficiency, and use renewable energy sources where possible.
- In addition, we also have reduced use of single use items and plastic.
- We have recently invested in replacement of the hospital boilers which are more efficient and environmentally friendly.
- We have also installed electric chargers for us by staff and patients.

Information Technology Improvements Summary

Over the past 12 months, we have delivered a series of strategic IT enhancements aimed at improving resilience, security, interoperability, and overall digital maturity across the organisation.

We were among the first independent hospitals in the UK to implement the CIS2 Identity Assurance programme for NHS ERS, CIS, DLP and SDCS services, enabling us to securely access these systems without reliance on traditional HSCN lines. Our core Electronic Health Record (EHR) system was also successfully migrated from a locally hosted environment to the Microsoft Azure platform, significantly improving uptime, disaster recovery capability, and infrastructure scalability.

Cyber security measures were further strengthened through the introduction of quarterly air-gapped backups, enrolment in the NCSC Early Warning Service, and enhanced Role-Based Access Controls (RBAC) across both local systems and our EHR. Enterprise-grade perimeter protection was established through the deployment of advanced Palo Alto firewall routers.

We launched a comprehensive staff intranet, consolidating all operational resources, protocols, training materials and communication tools into a single secure platform. This was complemented by a structured review of internal network topology to support improved incident response and infrastructure transparency.

To support the move toward a paper-light environment, we introduced digital bed boards for clinical ward management and increased utilisation of automation features within the EHR. In parallel, we have commenced development of a bespoke integration engine to enable real-time data synchronisation across systems, ensuring clinical and operational decisions are always based on a single, authoritative source of truth.

Additional improvements include centralised email signature management to reduce the risk of brand misuse or impersonation, and the implementation of secure tokenised payment solutions to protect patient financial data during transactions.

These initiatives demonstrate our ongoing commitment to clinical safety, operational excellence and digital innovation, in line with national NHS priorities.

Workforce equality, diversity and inclusion

We value diversity in our workforce. We work towards an inclusive and fair culture by improving equality and equity for people who work for us. Leaders act to continually review and improve the culture of the organisation in the context of equality, diversity and inclusion. Staff feel empowered and are confident that their concerns and ideas result in positive change to shape services and create a more equitable and inclusive organisation.



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