



## QUALITY ACCOUNTS 2014/2015

### Our Locations

#### **Surgical/Medical Centres**

1. Marie Stopes Birmingham Centre - Edgbaston
2. Marie Stopes Bristol Clinic
3. Marie Stopes Central London
4. Marie Stopes Essex Centre – Buckhurst Hill
5. Marie Stopes Leeds Centre
6. Marie Stopes Maidstone Centre
7. Marie Stopes Manchester Centre
8. Marie Stopes Norwich Centre
9. Marie Stopes South London Centre – Brixton
10. Marie Stopes West London Centre - Ealing

#### **Surgical/Medical Centres in NHS sites**

1. Sandwell Clinic – Birmingham
2. North London Clinic

## Early Medical Units

1. Ashton Under-Lyme
2. Batley
3. Blackpool
4. Bolton
5. Bradford
6. Bristol
7. Bury
8. Cambridge
9. Central Birmingham
10. Central Manchester
11. Croydon
12. Dagenham
13. Dorchester
14. Earls Court
15. Enfield
16. Erdington
17. Finsbury Park
18. Greenwich
19. Guildford
20. Handsworth
21. Hemel Hempstead
22. Hillingdon
23. Hounslow
24. Huddersfield
25. Ilford
26. Kings Lynn

27. Leeds Central
28. Lewisham
29. North Finchley
30. Oldham
31. Peterborough
32. Preston
33. Rochdale
34. Romford
35. Sparkhill
36. Southend
37. South Shields
38. Stevenage
39. Stockport
40. Sutton Coldfield

## Vasectomy Services

1. Ampthill
2. Camberley
3. Cambridge
4. Dartford
5. Isle of Wight
6. Milton Keynes
7. Peterborough
8. Stevenage
9. Swindon
10. Tewkesbury
11. Wakefield
12. Woking

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## Foreword by Mike Dimond

This UK report focuses on our commitment to ensuring we are delivering the best standard of service for our clients and showing our achievements in 2014-2015, as well as our vision around our clinical and governance standards. We strive to ensure that from the moment someone dials our 24hr support and booking call centre they're in safe, caring hands.

Here in the UK, in 2014 we were able to provide over 64,000 women with terminations. This was through our commitment to expanding our network of local accessible services in over 70 locations across England and Northern Ireland. We believe everyone is entitled to choose the contraception and pregnancy option that suits them the most. Our clients' care and wellbeing are our driving passions, and we're proud to say that 98% gave our service the highest ratings. Everything we do is based on our respect for our clients' individual needs, their time, confidentiality and dignity.

Thanks to the skill and expertise of our staff, our clinical abortion and vasectomy services are the highest quality and the safest in the country. We have an excellent compliance record with the Care Quality Commission and will strive to improve this in 2015-16.

This report is created with information to the best of our knowledge at time of production. Our priorities next year will be built around the details laid out in this report and will ensure we continue to listen to our clients and invest in our services to enable high quality locally accessed services.

We are proud to be part of the world's leading reproductive and sexual health charity Marie Stopes International. Marie Stopes UK reaches some of the most vulnerable women and men in developing countries as our international teams offer education and advice on contraception and sexual health. Our work here in the UK helps to provide the services that have prevented 3.9 million unsafe abortions, and given access to services in the most inaccessible of areas in over 40 countries around the world.

# PART 2

## What is Quality?

### What is a Quality Report?

Quality Accounts were introduced by the Health Act 2009 with the aim of demonstrating accountability and showing improvements in the service delivery to the local communities and stakeholders.

The quality of the services is measured by looking at patient safety, the effectiveness of treatments that patients receive and patient feedback about the care provided.

#### The Expectation:

Quality Accounts are designed to be both retrospective and forward-looking. They look back on the previous year's information regarding quality of services, explaining both where a provider is doing well and where improvement is needed. Importantly, Quality Accounts also provide a forward look, explaining what a provider has identified (through evidence and/or engagement) as priorities for improvement over the following reporting period and how they will achieve and measure these.

The legal duty to publish Quality Account applies to all providers of NHS-funded healthcare services (whether NHS, independent or voluntary sector), including mental health and ambulance services. Providers of primary care services and NHS continuing care are currently exempt under the regulations. The content is set by the National Health Service (Quality Report) *Regulations 2012* and Monitor's *detailed requirements for quality reports 2014-2015*

Marie Stopes United Kingdom (MSUK) an Independent Sector registered charity follows the NHS guidance for our quality report where applicable.

We have used the following CQC key lines of enquiry headings within our report:

**Caring**  
**Effective**  
**Safe**  
**Responsive**

## Introduction

Embracing the Fundamental Standards and Care Quality Commission’s approach to monitoring quality using five key lines of enquiry in addition to the Marie Stopes International Partnership Core Values, MSUK has been working to align our processes and organisational structures to best support our clients and teams, with particular emphasis on the following :

### **CARING** - Mission Driven - Customer Focussed

Putting our clients at the centre of everything we do to meet their needs and exceed expectation. Never being judgemental, respecting decisions and ensuring 24hr support to enable more women to have children by choice, not chance

With ten main surgical centres and over 60 early medical units, MSUK remains the largest UK Independent Sector abortion provider and now completes 33% of all abortions in England, more than anyone else.

Our share of the market has been steadily growing year on year so we have been expanding our portfolio of early medical units to bring services even closer to the community and will continue in this process of expansion during 2015-16.

### **EFFECTIVE** - Results Orientated - Sustainable

Achieving measurable outcomes rather than focussing on input or processes, building effective programmes and change behaviours to have a lasting impact for individuals

Our main centres provide both surgical and medical treatment options providing public health services including sexually transmitted infection (STI) testing and a wide range of contraception methods to assist in preventing repeat pregnancies.

Our ability to closely monitor the efficiency and effectiveness of team members ensures our training is targeted appropriately to provide the skills and knowledge to support our ‘Enhancing Care’ projects. We introduced a new nurse role into our team during 2014 – the ‘MSI Nurse’. Our first candidates will be completing their training Autumn 2015 and will be ambassadors for our organisation leading by example and results driven. To further enhance these initiatives we are creating a Centre of Excellence that will be our training Centre, promoting consistency of approach to care, developing our competency frameworks and pushing new innovations.

### **SAFE**

Key reports: The National Advisory Group on the Safety of Patients in England and Robert Francis review of failings in Mid Staffordshire, play an important role in how we engage with clients, enact our duty of candour and apply lessons learn from incidents.

During 2014 we have been busy with refurbishment programmes to improve our client environments and enhance both client and team member facilities. We have committed to replacing our current client record system (CRS) working with Blithe Computer Systems to develop a bespoke electronic CRS that will improve our client’s participation in booking appointments as well as this we have been developing our website and growing our media platforms.

### **RESPONSIVE** - Pioneering

Through learning, innovation and risk taking we will remain at the forefront of safe abortion, family

- **People Centred** planning and reproductive healthcare.

## Quality Priorities 2015-2016

### PRIORITY 1

In a highly specialised and emotionally sensitive service it is essential we have the client at the focus of our thoughts and actions. We actively ask our clients accessing either our abortion or male sterilisation services to complete a questionnaire to tell us how we have met their expectations. MSUK has engaged an independent company to carry out the analysis and provide quarterly reports. We ask questions on how well we have supported clients from the first point of contact to discharge. MSUK has an impressive level of client satisfaction achieving 96% for this reporting period, but in order to improve on this we will commit to learning and improving from all feedback we receive from all clients.

MS UK have chosen to support and embed the nursing strategy into the nursing practice and promote the 6Cs initiative as an area for improvement. We need to further embed our Nursing Strategy within the clinical teams and grow our MSI Nurse presence throughout the Centres.

KLOE	AIM	MEASURE of ACHIEVEMENT
Caring	<p>Ensure all our nursing teams fully embrace the 6 C's approach to our clients - care, compassion, competence, communication, courage and commitment</p> <p>Increase the number of nurses meeting the criteria to access our MSI Nurse course</p>	<p>All Centres to achieve the minimum of 95% client satisfaction score quarterly.</p> <p>Each site will have published individual performance figures month on month</p> <p>Key performance indicators (KPIs) for long acting reversible contraception (LARC) and STI testing will be met</p>

**PRIORITY 2**

With the expansion of our services to a wider community, we have to further develop our clinical teams to enhance their knowledge and skills so that we have flexible, highly skilled, mobile teams delivering an efficient and effective service within our many facilities.

We are not just listening to our clients but also trying to engage more with our team members following our latest staff survey results. We have committed to listening more to the staff and individuals who are passionate about what they do, work hard and are proud to work for MSUK. We want our team members to feel MSUK is a great organisation to work for and would happily recommend MSUK as a great place to work.

In 2015MSIUK set up an engagement group between senior managers and representatives from all our centres to ensure we give our team members the protected platform to give honest opinions on what is working well or not so well at centre level, share their ideas on quality improvements and ensure the messaging back to their colleagues promotes active change.

We have looked at two key areas that we believe will generate the improvements needed:

KLOE	AIM	MEASURE
<b>Effective</b>		
	<p>Develop a Centre of Excellence to support our leaning and development needs to enhance nurse recruitment and retention</p> <p>Improve the effectiveness of UK Communications and Engagement group to ensure everyone has a ‘voice’.</p>	<p>Improved retention figures Improved absence levels Key competencies will be achieved within probation period</p> <p>Evidence of improved staff engagement from results of audits, KPIs, Evidence of Centre team members knowledge of and buy into the MSUK strategy and the associated projects to deliver on this</p>

**Priority 3**

Safety has to remain paramount to all our activities. We have seen an escalation in the number of protesters around our centres that we believe adds to our clients' anxieties and we have needed to increase our engagement with local police services to help support both clients and team members. In addition we have introduced a volunteer escort service for our Belfast clients, where we have had significant challenges. MSUK is committed to ensuring ongoing improvement for the personal safety and wellbeing of staff and ultimately our clients.

We use Sentinel - a risk management system for logging incidents, this allows us to manage, analyse and put processes in place to reduce risks. We recognise it will only be as good as the information entered, so we are concentrating on improving data quality, timeliness of entries and ensuring all enquiries are closed correctly. Our corporate and local risk registers have been going through a review process and we will be building on these processes during the coming year.

Our London support office has started an organisational restructure with the creation of four directorates: Health Services, Operations, Learning & Development and Finance which clearly define responsibility and accountability to ensure delivery of both our contractual requirements but fundamentally the good quality of care that is delivered at each site.

The four points below will be our focus for 2015-16

KLOE	AIM	MEASURE
<b>Safe</b>		
	<p>Ensuring a systematic approach to all our incidents, complaints and risks for ongoing improvement of the quality of documentation, investigation reporting both and complete actions within agreed timescales</p> <p>Restructure our Clinical Services Directorate to strengthen our assurance framework</p> <p>Risk assessments and risk registers to be further developed</p> <p>All Managers and key personnel to undertake IOSH training</p>	<p>Quarterly review of all incidents by the Central Governance Committee                      RCAs and external reporting to CCGs/CQC completed                      Corrective Action Plans will be kept 'live' in all Centres</p> <p>Clear lines of responsibilities shown on organograms and available to teams and our customers/ clients</p> <p>All centres and EMU's will have completed the core risk assessments, reflected on local risk registers and to be evidenced at their governance review meetings.</p>

All managers trained by the end of reporting year

**Priority 4**

Whereby a client is not suitable for care at MS UK, each centre will ensure the client is safely and efficiently referred on to an alternative. There are two ways in which we refer our clients on, either through the dedicated team in our call centre - One Call, or by the team within the Centres or Early Medical Units. We have found the referral times can vary between these two methods and this now needs to be addressed.

Our intention will be to start, on a rolling basis, to move all centre based referrals to a centralised system so that by the end of 2015-16 we will have a quick, responsive and reliable method of assisting clients to access treatment in the appropriate facility with one point of contact for GPs, Consultants and clients.

Our clients have also told us that at times they are waiting longer than expected during the day of their treatment.

KLOE	AIM	MEASURE
Responsive	<p>To move the process of referrals to the management of a central team</p> <p>To improve the information and usability of our website</p> <p>To complete the review process of all client information leaflets</p>	<p>Client referrals times will be monitored monthly and actions put in place to ensure 5 day KPI target is met</p> <p>Marketing team to monitor website activity and report at commercial meetings</p> <p>All Centres will be able to demonstrate they hold up to date, referenced information leaflets</p> <p>Client satisfaction, comments and complaints will be monitored</p> <p>We will be adapting and improving our information so that it follows standards set by NHS England's Information Standard best practices and processes around creating evidence based, relevant, and clear information to enable clients to feel confident they have high quality information to make a health decision. This includes printed, digital and scripted information. A 2 year review process on all information is to be put in place from 2016 going forward.</p>

**Priority 5**

A new UK Executive Board was initiated meeting bi-monthly to give focussed support to the UK sector of Marie Stopes International (MSUK) and receives assurance on compliance to Standards and Regulatory requirements.

Our surgical and early medical centres operate under a hub and spoke system, divided into 3 regions under the leadership of Regional Managers. The centre functions have during 2014 been further strengthened in terms of administration and organisational activities by the creation of a dedicated team within the London Support Office. This centralisation of functions has enabled easy access to all KPI results and allows comparisons across regions to be made by all the Directorates. At the start of 2015 we moved towards a centrally held and maintained training matrix for all mandatory training attendance that is available for all team members to view on our intranet site. We are further developing this to include full transparency of any training course attendance and will be setting up a matrix for competency sign off.

We changed the format for reviewing governance within the organisation moving to assurance dashboards and an outcomes focus.

During 2014-15 following performance management and regional structure changes we have taken longer than expected to recruit to three CQC Registered Manager posts. We now have all posts filled and applications are being processed.

Our key aims:

KLOE	AIM	MEASURE
Well Led		
	Centralised full training attendance matrix Centralised competency matrix  Assurance dashboards for all aspects of CQC standards	Matrices will be visible to all employees All statutory training will have be achieved Delivery on all contractual obligations  RAG rated dashboards will be used within quarterly governance reviews and monitored for improvements

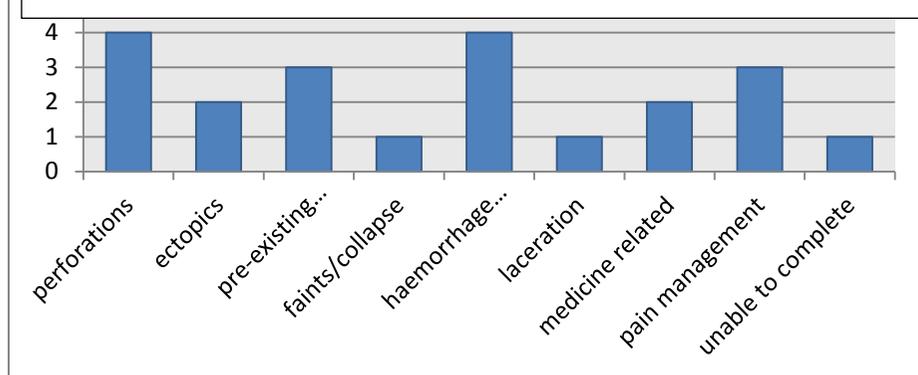
# Part 3

## How have we done 2014-15?

The following information demonstrates the key activities for 2014/15 that include; Transfers, Continuing Pregnancy and Retained Products, Client Satisfaction, Complaints and a Staff Survey.

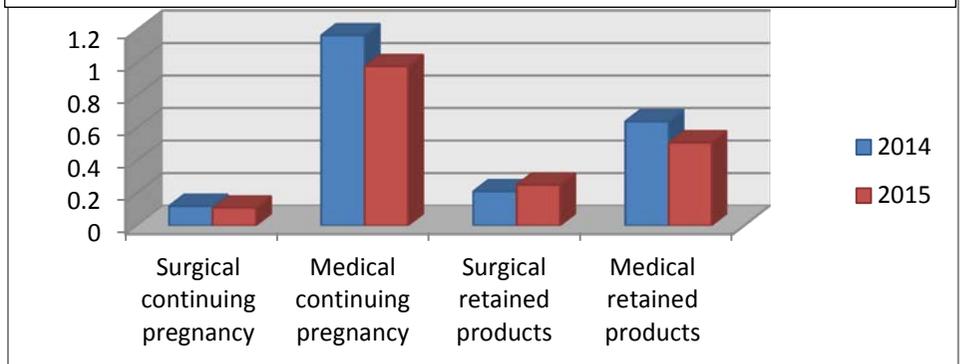
### Reasons for Transfers

There are recognised risks associated with surgical abortion and the chart below illustrates the actual numbers of transfers to an NHS facility for continuing care this reporting period. Perforations are reported as serious untoward incidents (SUIs)



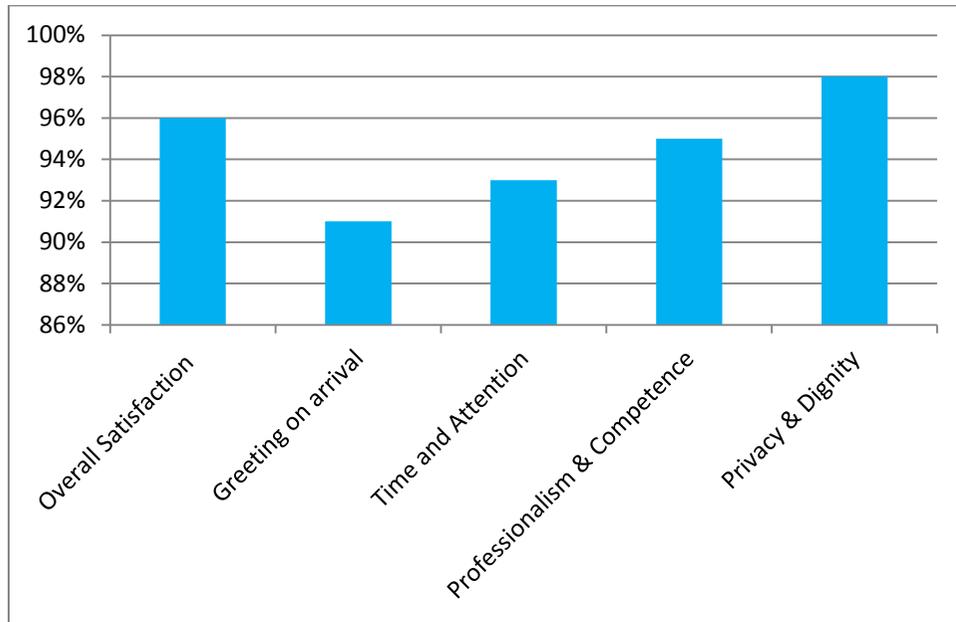
### Continuing Pregnancy and Retained Products

Our figures are displayed as rates against activity

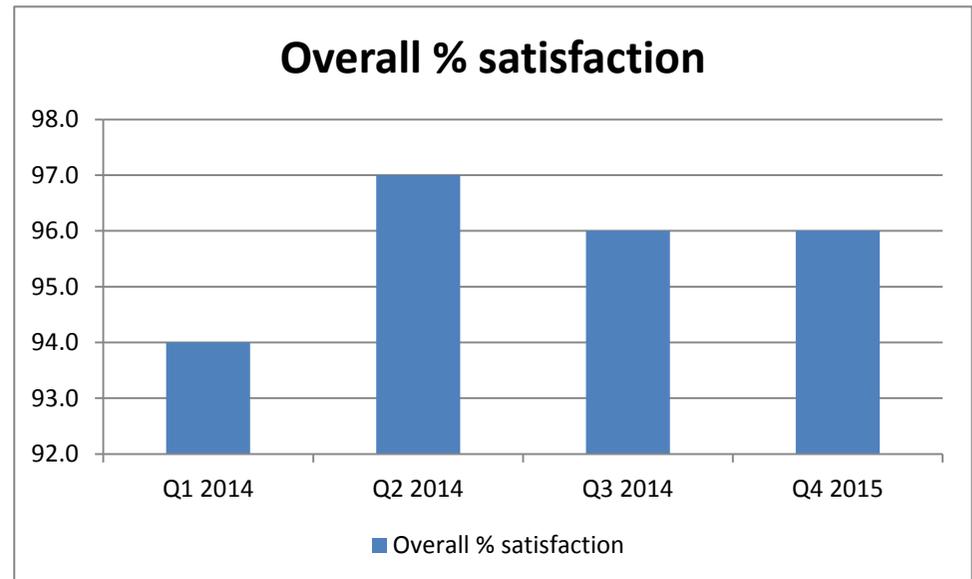


## What our Client Satisfaction Results Tell Us

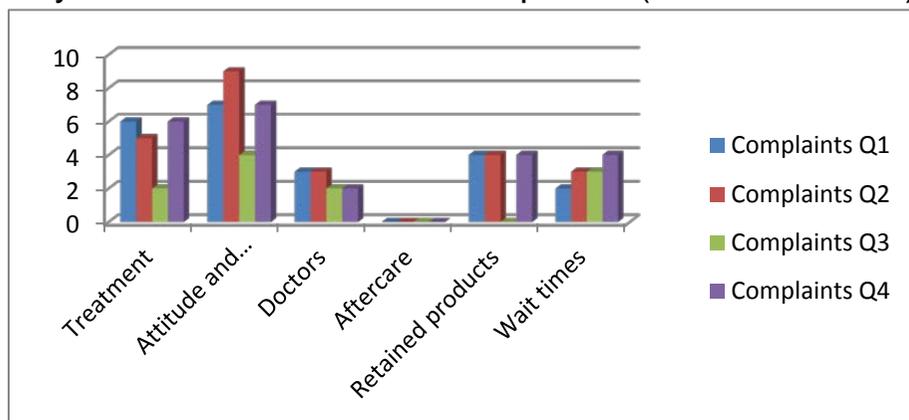
### Abortion Services



### Vasectomy Service



### Key Themes from Written Complaints (actual numbers)



### What our Staff Survey Results Show

	2013 /14	2014/15
<b>Our overall score</b>	78%	78%
Happy to go the 'extra mile' when required	77%	86%
Felt committed to MSUK goals	87%	85.00%
Are proud to work at MSUK	84%	73%
Would recommend as a good place to work	67%	68%

# Part 4

## Reporting against Regulatory Requirements

### Regulatory Statements for our services 2014-2015

In line with the National Health Service (Quality Account) Regulations 2011, Marie Stopes United Kingdom (MS UK) is required to provide information on a range of quality activities.

The Department of Health requires all healthcare providers to safeguard the people who use their services from abuse. The Care Quality Commission outcome statement says: “people who use services should be protected from abuse or the risk of abuse, and their human rights be respected and upheld”.

MSUK takes the responsibilities around safeguarding young people and vulnerable adults extremely seriously. MSUK ensures that all staff are trained in line with the intercollegiate document for children’s safeguarding.

In summary - safeguarding:

- MSUK has a policy and a clear process for carrying out DBS checks pre-employment and three yearly thereafter
- MSUK has a Safeguarding policy for children and vulnerable adults which has been reviewed within the last year
- Safeguarding including training on the Mental Capacity Act, is included in induction and mandatory training
- There is a named lead for safeguarding with a comprehensive network of link supports the Centres
- Safeguarding activity and compliance to training forms part of our quarterly Integrated Governance Committee papers
- Incidents around safeguarding are investigated and reported to relevant external bodies

#### **Participation in clinical research**

MSUK has not been involved in any clinical research within this reporting period.

#### **Participation in Information Governance**

The IG Toolkit is an online system which allows NHS organisations and partners to assess themselves against Department of Health Information Governance policies and standards. MSUK assessment was reviewed and satisfactory we had no submissions to the Information Commissioners Office ( ICO ) for this reporting period

**Care Quality Commission (CQC) registration**

Marie Stopes UK is required to register with the CQC and must comply with the Health and Social Care Act 2008 (regulated activities) Regulations (2010) and the CQC (Registration) Regulations 2009 (Essential standards of quality and safety 2010).

All of our services are registered with the CQC and work to ensure they are compliant with the fundamental standards of quality and safety.

CQC did not inspect any of our Centres during this reporting period 2014 – 15

**Department of Health**

Approval of Independent Sector Places for the Termination of Pregnancy under Section 1(3) of the Abortion Act was applied for in July 2014

The Secretary of State for Health approved, (under section 1(3) of the Abortion Act 1967), all MSUK premises as a place for the treatment for termination of pregnancy. This approval is valid until 31 July 2018.

**Participation in Commission for Quality and Innovation (CQUIN)**

In April 2009, the Department of Health launched the CQUIN framework to encourage healthcare providers to share and continually improve how care is provided.

The CQUIN payment framework enables commissioners to reward excellence, by linking a proportion of English healthcare providers' Income to the achievement of local quality improvement goals.

Our Business Development Team works closely with Commissioners to agree suitable CQUIN targets for our service. Each CCG has slightly differing targets and our results are shown against the average target figure. For Long Acting Reversible Contraception (LARC) MSUK has overall performed slightly better with LARC exceeding the national 40% and our average 41% target

CQUIN	Target	Achiev
<b>LARC</b>	41%	44%
<b>Chlamydia</b>	66%	56%
<b>Venous thromboembolism assessments</b>	100%	100%
<b>Vasectomy access to service</b>	100%	100%
<b>Vasectomy service satisfaction</b>	100%	100 %

# Part 5

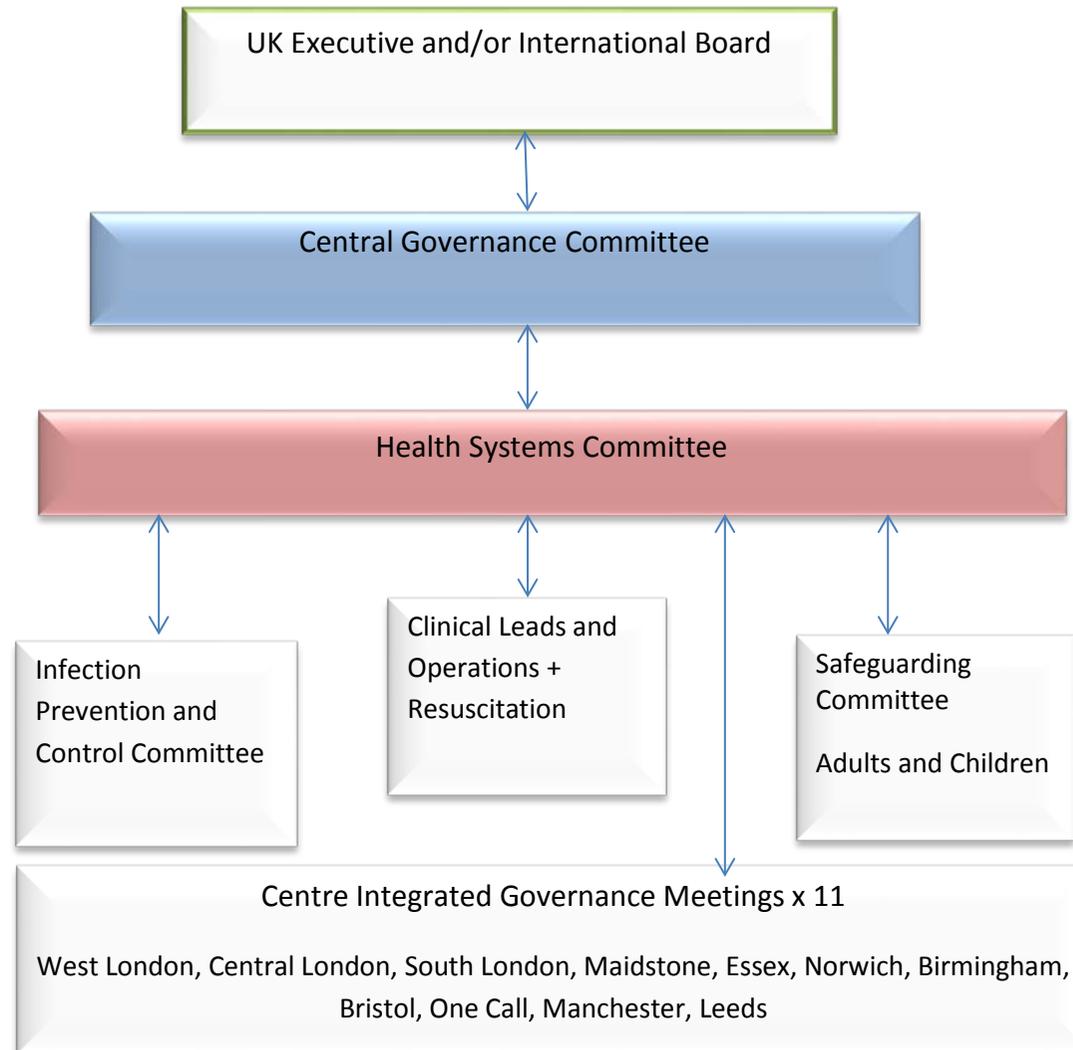
## How we will ensure our Quality

### Marie Stopes UK Assurance Framework

SET AGENDA WITH STATUTORY ITEMS ACROSS ALL COMMITTEES

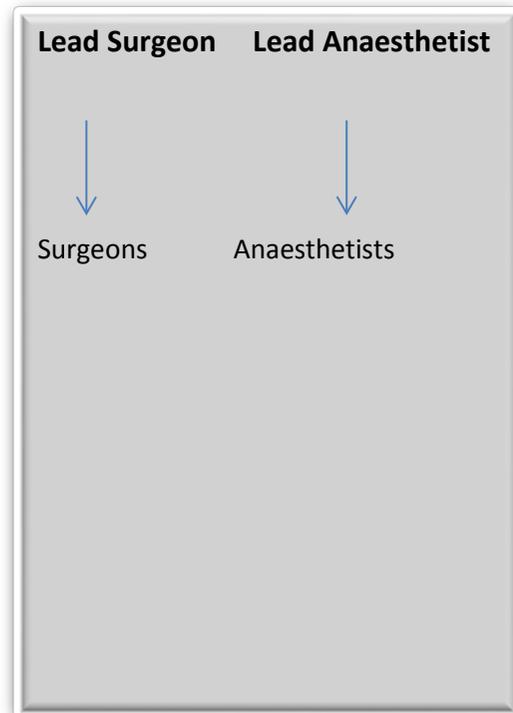
- Internal & External Reports
- Infection Prevention and Control
- Safeguarding
- Client Experience
- Facilities and Health & Safety
- Information Governance
- Incidents
- Risk Register
- Risk Assessments
- Medicines Management
- Mandatory Training
- CAS Alerts
- HR/Workforce
- Business Finance

+ Committee specific data



# Health Services Directorate

**UK Health Services  
Director**



**Director of Governance**

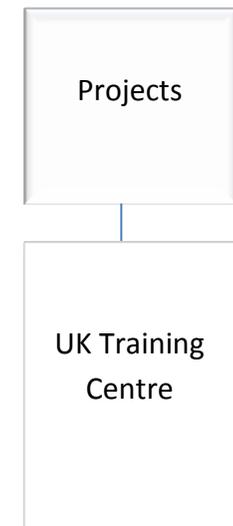
Head of Governance  
Health & Safety Advisor  
Head of Quality  
3 Governance Assistants

**Director of Nursing**

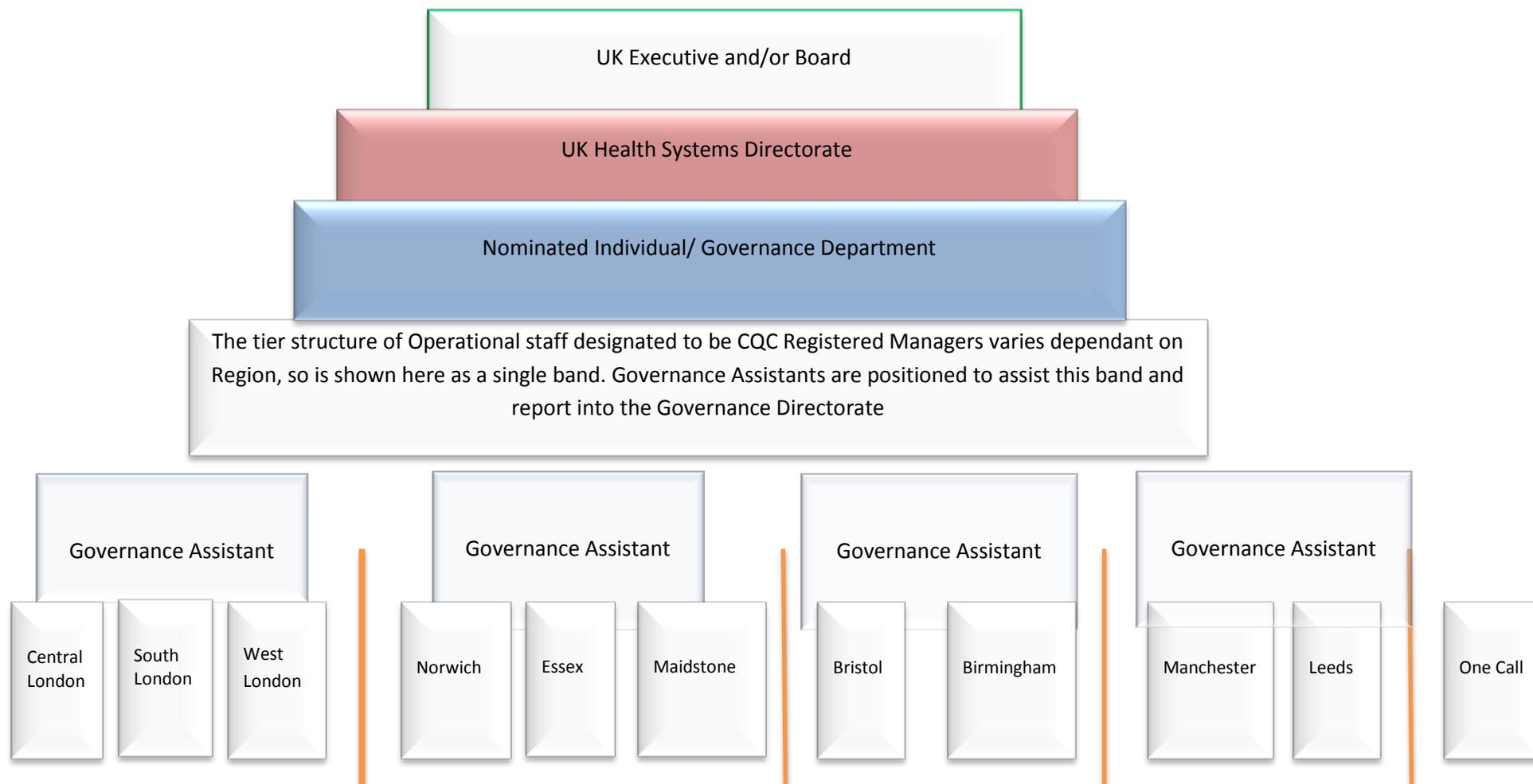
External Consultants

- Consultant Microbiologist
- IPC Nurse Advisor
- Pharmacy Advisor
- A to E Trainers

Nursing Structure  
Safeguarding  
Infection Prevention and Control  
Scanning



# ASSURANCE FRAMEWORK



## Infection Prevention and Control (IPC)

Royal College of Obstetricians and Gynaecology Guideline section 6.15 Services should offer antibiotic prophylaxis effective against *Chlamydia trachomatis* and anaerobes for both surgical abortion (evidence grade: A) and medical abortion (evidence grade: C).

Marie Stopes UK complies with RCOG guidelines on use of prophylactic antibiotics and has a very low infection rate of 0.008% against the national rate of 1%. We will continue to follow best practise guidelines for antibiotic use and where possible reduce the risks from over prescribing.

We have a programme of robust audits covering IPC and hand hygiene with a 95 % pass target. Three of our Centres fell just under the target for one of their audits. Every centre has an IPC lead and link person to drive the audit programme and put in corrective actions where identified. Our audits will continue to be reviewed and revised when necessary to embrace changes in practices and standards.

	Birmingham	Bristol	Central	Essex	Leeds	Maidstone	Manchester	South London	West London
IPC	97	99	94	97	99	98	97	93	98
Hand Hygiene	100	100	88	79	100	92	95	96	97

## Safeguarding

**Working together to safeguard children - A guide to inter-agency working to safeguard and promote the welfare of children** published March 2015

This guideline clearly defines the levels of training and responsibilities expected to be achieved for the clinical roles. MSUK is now working towards meeting these expectations and participating in the local networks. Our Safeguarding Advisor will be introducing a new toolkit for Centre teams and further training material generated to supports teams to recognise and act on the new PREVENT strategy and reporting of Female Genital Mutilation (FGM).

## Part 6 Sexual Health Award



### And the winner is...

**We are very proud to announce that Marie Stopes Northern Ireland's programme director Dawn Purvis has been named Sexual Health Professional of the Year.**

The award was presented on Friday 6 March at the UK Sexual Health Awards which is the only event of its kind to celebrate achievements in the field of sexual health. The award recognised Dawn's unfaltering commitment to women's reproductive rights in the face of direct opposition and stigma in Northern Ireland.



## Our Client's Comments



“ An experience that no one wants to go through, but if you have to then this level of care, smiles and overall understanding made me incredibly grateful and humble. Thank you so much and know that people are likely to have such a fantastic centre in central London. best wishes to you all ”

EVERYBODY IS LOVELY,  
WARM AND FILLED YOU  
WITH CONFIDENCE AND  
EASE.

THE CENTRE IS VERY  
NICE, CALM, CLEAN AND  
WELL PRESENTED

Central London Centre



WHAT YOU DO AND  
THE WAY IN WHICH IT  
IS DONE IS SUPERB.  
IT'S AN  
EXCELLENT SERVICE

Manchester Centre

THANK YOU TO ALL THE  
STAFF, THEY WERE  
VERY GOOD AND DIDN'T  
JUDGE ME FOR WHAT I  
WAS DOING. VERY  
PROFESSIONAL TEAM!