



ASCENTI

Quality Account 2018/19

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Part one

Statement from our Leadership Team

We have helped over 1.1 million people to elevate their health and live active lives by providing safe and effective treatments that are a cut above. As a trusted partner to more than 20 NHS organisations and 400 private businesses, this is something we look forward to continuing doing.

This Quality Account meets the requirements set out by the Health and Social Care Act 2012 and the Care Quality Commission (CQC). It reports on the quality of our services during 2018/19 and key areas of accountability, including: safety, effectiveness of treatment, clinical quality, safeguarding and patient experience.

We recap some of the many successes we have celebrated over the last year, including the consolidation of a new clinical banding structure and training package that has enhanced the professional development of our physiotherapists and improved our services for patients. We have implemented shared decision making tools and have made preparations for an undergraduate placement programme to contribute to the development of the next generation of physiotherapists, to all of which the clinical expertise of our leaders has been central.

As well as reflecting on the developments made in the last 12 months, we also look ahead to the next year. Our main focus will be on digitally enabled care with the launch of our patient and physio facing engagement app, PhysioNow. We will continue to pursue equality and diversity in the workplace while also exploring vocational rehabilitation outcomes.

I would like to thank all of our staff for their continued dedication and hard work, and for consistently providing our patients with the highest possible standard of care.

This Quality Account has been endorsed by our Leadership Team and we confirm that the content reflects a balanced view of the quality of our services. We believe, to the best of our knowledge, that the information contained in this document is accurate and informative.



Stephanie Dobrikova
CEO



We are Ascenti



The leading independent provider of physiotherapy and associated therapies in the UK – helping people to elevate their health and live active lives.

We are a dynamic and progressive company working to make physiotherapy treatment more accessible to all, while raising standards and improving methodologies to increase impact. Treating a variety of patients including NHS, private, medico-legal and occupational health, our distinct clinical philosophy comes from over 20 years of successfully treating more than 1.1 million people, from office workers to professional athletes.

Our business was founded and continues to be led by top physiotherapists constantly shaping and improving our clinical approach.

Our leaders



Stephanie Dobrikova
Chief Executive Officer



Kevin Doyle
Managing Director
(Physiotherapist)



Chris Jessop
Non-Executive Director



Ryan Allen
Associate Director, Clinical
Operations (Physiotherapist)



Joel Booth
Associate Director,
Governance & Quality
(Physiotherapist)



Adam Jarvis
Associate Director,
Transformation &
Government Services
(Physiotherapist)



Sophie Harper
Associate Director,
Communications



Dan Pemberton
Associate Director,
Customer Support
Services

Clinical Development Team

Our Clinical Development Team comprises a nationwide network of Regional Development Leads and Clinical Mentors led by our National Lead Clinician (Consultant Physiotherapist) and Clinical Training and Curriculum Lead (Advanced Physiotherapy Practitioner & Educator).



Nick Worth

National Lead Clinician

Appointed in 2018, Nick has over 25 years' experience in physiotherapy, with over 20 of those in elite professional football.

Nick has an MSc in Musculoskeletal Medicine and is a fellow of the Society of Musculoskeletal Medicine, teaching on their Foundation and Injection Therapy courses. He also lectures for Salford University to a range of professions.

He has been instrumental in establishing the clinical development programme which supports all levels of physios within Ascenti to improve their clinical skills and competencies.

Alison Day

Clinical Training and Curriculum Lead

Appointed in 2018, Alison takes responsibility for the creation and development of our national clinical development programme, as well as leading on the appraisal and promotion pathway.

She has acquired a deep understanding of teaching and curriculum design, working for five years as a Lecturer at a top ranking physiotherapy school within Cardiff University.

Alison holds an MSc in Manual Therapy as well as fellowship of the Higher Education Academy. She has 16 years of NHS experience as a Senior and Advanced Physiotherapy Practitioner.



Our values

These are more than just words. Our core values shape the way we work and behave. Our values are embedded into every part of our business. They are used to define progress and success in our new appraisal process, as well as being incorporated in our recruitment forms and promoted on our patient-facing website.



Pioneering

We're a passionate bunch of people, who aren't afraid to innovate and try new ideas to raise the bar.

Much of the last year has been spent developing a brand new patient and physio facing app, PhysioNow, ready to launch in 2019/20. This sets us apart from competitors by directly integrating with our bespoke patient management system to offer a seamless digitally-enabled patient experience.



United

We believe that unity lifts us above the competition, so we work together with partners, teams and communities.

Our staff receive regular updates from the wider business through our popular weekly newsletter and have new virtual opportunities to engage with each other on our intranet. This was also the first year that we held a company-wide Christmas party where physiotherapists, office staff and management came together to celebrate.



Caring

We care about what we do and want to achieve the highest standards for everyone we work with.

We have created channels to communicate praise with staff. These include sharing patient and customer compliments and a colleague appreciation initiative, enabling our staff to share their appreciation of other colleagues on our new intranet. We have also changed our approach to charity work and selected the MS Society as our 2018/19 charity partner of the year, which the whole company got behind to support.



Dependable

We deliver on our promises and provide accessible, reliable and effective treatments that are a cut above.

We are a trusted partner to more than 20 NHS organisations and 400 private businesses, so you can depend on us to provide safe, effective and high quality services. Throughout the year we have won a number of new contracts, as well as renewing and expanding existing ones, showing how we are considered a strong partner to our clients.

Some statistics from 2018/19



81,900

NHS referrals

99%

of our NHS patients were satisfied or very satisfied with our service

99%

of urgent patients contacted within one working day of referral



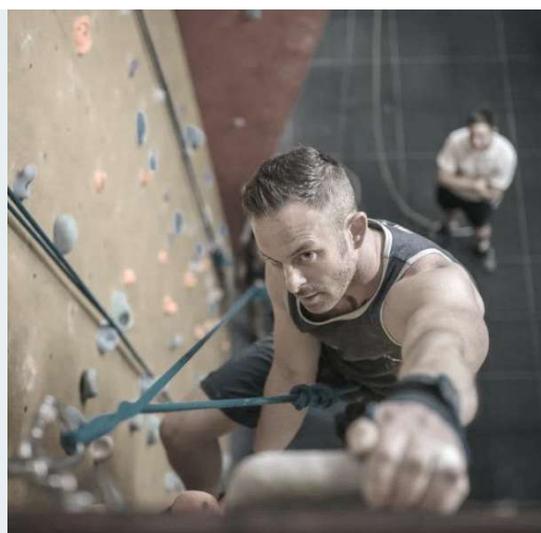
20+

the number of Clinical Commissioning Groups we worked with in 2018/19

"I had an elbow injury which was beginning to affect my everyday life. Having physio with Ascenti has helped me enormously.

Climbing is a strength endurance sport, so the physio I have received has been an invaluable part of my training for the World Championships."

Richard, Ascenti patient and Team GB paraclimber



"I decided to visit my doctor after years of nagging pain in my knee. I received physiotherapy treatment for about three months which was great and I saw a huge improvement. I then attended the NHS knee exercise classes run by Ascenti.

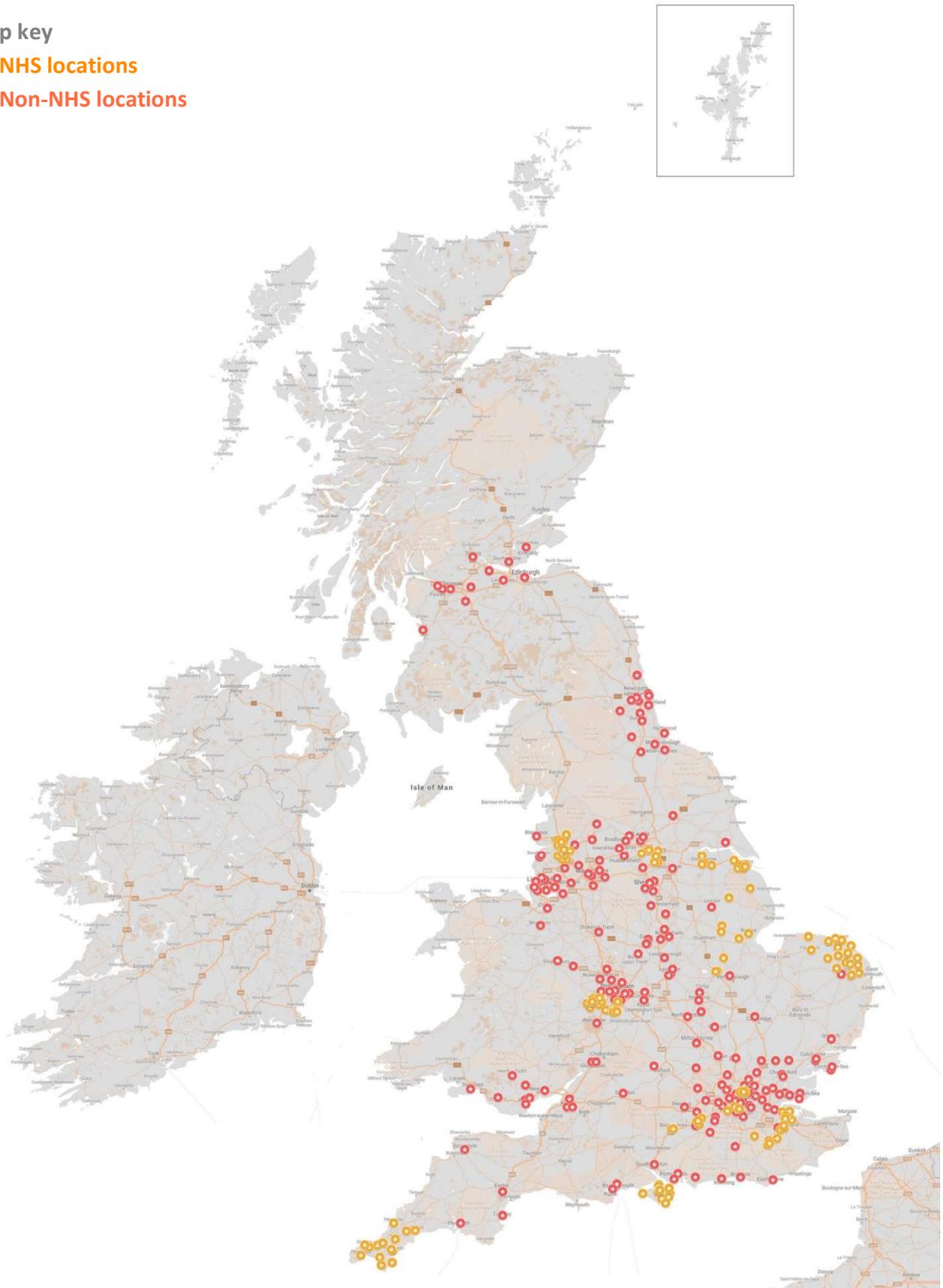
Beverley who runs the classes is so lovely and made it very enjoyable. The exercises have really helped and I will continue to do them at home to strengthen my knee."

Kayleigh, Ascenti patient

Ascenti clinic locations

Map key

- ★ NHS locations
- ★ Non-NHS locations



Part two

Quality improvement priorities 2019 / 20

Throughout the year, progress against our quality priorities will be monitored by Ascenti's Leadership Team.

Priority 1

Digitally-enabled care

An ambition of the [NHS Long Term Plan \(2019\)](#) is for digitally-enabled care to go mainstream across the NHS. Developments in capability and the shift in culture towards large scale adoption of technology in everyday life open up significant opportunities for innovation in healthcare.

Through our commitment to this priority, Ascenti will make significant investment in the development and implementation of best-in-class and truly integrated digital healthcare services. Our digital services will make care more accessible, enhance patient experience, enable greater levels of patient engagement and support the effectiveness of traditional services whilst also opening up new ways to deliver treatment.

Domain(s)	How we will achieve this	How we will measure this
Clinical effectiveness Innovation Patient experience	Development of an integrated suite of digitally-enabled services Launch of our PhysioNow service	Successful implementation of digital services Analytics Patient feedback

Priority 2

Implement a comprehensive equality and diversity (E&D) system

Organisations that operate equality and diversity (E&D) systems provide improved services for the local communities they serve and better working environments for their employees. Through this quality priority Ascenti will further enhance our work and systems in this area and build upon the engagement work already undertaken with patients and staff.

Domain(s)	How we will achieve this	How we will measure this
Patient experience Staff experience	Engage with stakeholders Completing the project plan Commence the 3-year outcomes programme	Evidence of stakeholder involvement Completion of the 13 step project plan Assembly of evidence to grade cycle 1

Priority 3

Promoting work as a health outcome (vocational rehabilitation)

The '[Improving lives: the future of work, health and disability](#)' policy paper sets out clear ambitions to reduce the disability and employment gap. The downward spiral of declining health and absence from work is identified as a major injustice in our society.

Ascenti endorse the recommendations to reinforce work as a health outcome. Through this priority, Ascenti will equip our staff with the skills and knowledge to become work champions in primary care, contributing to their role in overall vocational rehabilitation, focusing on work and the achievement of work outcomes.

Domain(s)	How we will achieve this	How we will measure this
Patient experience	Training and education	Statistical analysis of outcomes
Clinical effectiveness	Workshops	Staff feedback
Quality	Embedding vocational rehabilitation into clinical practice	Patient feedback Training statistics

Achievements against 2018 / 19 quality improvement objectives

Priority 1

Fully embed shared decision making (SDM) tools into clinical practice



Shared decision making allows patients to have open conversations with their physiotherapist to reach a combined decision regarding the patient's care options. We have piloted SDM in clinical practice within our North West NHS services, enabling patients to be included in their healthcare journey and understand that they play a key role in their healthcare decisions.

Work to develop shared decision making across the whole Ascenti network is ongoing, however strides have been made and we have evidence to demonstrate the benefits of shared decision making in a community physiotherapy service.

Ascenti clinicians based in the North West received training in September 2018 as an 'introduction to shared decision making' delivered by AQuA (Advancing Quality Alliance). Physiotherapists have also received training on motivational interviewing and solution-focused training, both aimed to direct the patient and healthcare professional to a joint healthcare decision.

Many patients struggle to understand the options available to them in terms of their healthcare decisions; therefore we have equipped our clinicians with decision making aids to help patients

consider and understand their options. These leaflets also help improve health literacy and educate patients about their care and what choices they have available to them.

To ensure shared decision making is a key focus throughout the patient’s journey with us we have adapted our appointment letters to include 3 questions to help patients consider their options from the very start.

Ask 3 questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

- *What are my options?*
- *What are the pros and cons of each option for me?*
- *How do I get support to help me make a decision that is right for me?*



We strive to offer choice throughout every part of the patient’s journey and this is supported with positive feedback from patients. Our community physiotherapy patients in our North West NHS service discharged from our care are contacted to complete a telephone survey; we have included the CollaboRATE 3 questions relating to shared decision making and are pleased with the outcomes.

How much effort was made to help you understand your health issues?

No effort was made	1%
A little effort was made	5%
Some effort was made	9%
A lot of effort was made	59%
Every effort was made	26%

How much effort was made to listen to the things that matter most to you about your health issues?

No effort was made	1%
A little effort was made	3%
Some effort was made	11%
A lot of effort was made	58%
Every effort was made	27%

How much effort was made to include what matters most to you in choosing what to do next to do next?

No effort was made	1%
A little effort was made	4%
Some effort was made	9%
A lot of effort was made	57%
Every effort was made	29%

Shared decision making remains a priority for Ascenti. Moving forward from this successful pilot, we continue to grow our services with SDM embedded within them. Our training and development programmes include shared decision making and we continue to explore decision making aids, tools, methods and resources.

Fully embed shared decision making (SDM) tools into clinical practice

Domain(s)	Success measures	2018 / 19 progress	Status
Clinical effectiveness	100% of clinical staff complete training on shared decision making within our Central Lancashire Moving Well Service	100% of staff completed AQuA Shared Decision Making training throughout August – November 2018.	Achieved
	Leaflets detailing services and options to be available to all staff and patients	Produced decision making leaflets explaining all iMSK services available to all patients in all clinics. Helping inform our patients about the choices available to them.	Achieved
	Patient documentation updated to include shared decision making ‘3 questions’	Confirmation of appointment letters and leaflets updated to include ‘3 questions’ helping patients make better informed decisions.	Achieved
	CollaborATE patient surveys completed to monitor patient satisfaction around SDM	Ask additional patient survey questions, requesting feedback on the shared decision making process.	Achieved & ongoing
	Motivational Interviewing training to be completed to complement SDM	MSK Physiotherapy Service Lead completed motivational interviewing training in 2018. Extending training to remaining staff members.	Achieved
	Complete audits of treatment notes to determine the use of SDM within clinical practice	Audits of treatment notes are completed on a regular basis to ensure SDM conversations are taking place. Further system development is also in place for 2019 to allow the physiotherapist to	Achieved

<p>Embed shared decision making</p>	<p>record the content of the conversation, this will improve our ability to report on SDM and improve visibility for training and development.</p> <p>Development of bespoke patient record system and EMIS to include SDM coding – recorded via goal setting and additional comments.</p>	<p>Achieved</p>
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“My therapist was polite and understanding. All staff were friendly throughout and I felt comfortable at all times.”

Ascenti patient, Lancashire



Priority 2



Work towards implementing a comprehensive equality and diversity (E&D) system

To achieve this objective, the initial focus during 2018/19 has been on understanding the workings and objectives of a comprehensive and effective equality and diversity system, and how we can apply this to Ascenti. This has included the appointment of an EDS Project Manager and implementation of an Equality, Diversity and Inclusion (EDI) committee.

Achievements in 2018/19 have laid the foundations in readiness for implementation of a comprehensive equality and diversity (E&D) system in 2019/20:

- The first EDI committee meetings have now taken place. The EDI committee is a newly formed group of Ascenti employees with representatives from different parts of the business. The committee has been formed to take a proactive role in promoting equality, diversity and inclusion, both within the business for our employees and for the patients that access our services.
- A project plan was created following 13 steps to implement an Ascenti equality and diversity system. On completion of the project plan the outcomes (objectives) should link to the Ascenti

values and the first outcome (objective) should be graded. Once the project plan is finalised, we plan to implement the remaining outcomes (objectives) following a 3 year programme.

- The project plan was presented to key internal stakeholders and leadership commitment was confirmed by the CEO.
- In conjunction with the EDI committee we have identified several potential stakeholders to include in the development of the Ascenti E&D system and to include in the grading of our performance. The stakeholders will include Ascenti staff members and external organisations that work closely with Ascenti.

	Task	March 2019	June 2019	Sept 2019	Dec 2019	March 2020
1	Determine relevant stakeholders					
2	Determine leadership commitment (Equality Policy)					
3	Create a 3/5 year 'outcomes programme'					
4	Reword the outcomes and create links to Ascenti values					
5	Engage with stakeholders					
6	Determine governance arrangements					
7	Communicate AEDS progress and plans to management					
8	Assemble evidence					
9	Analyse performance					
10	Agree grades for cycle 1					
11	Prepare objectives following cycle 1 grades					
12	Create plans to realise cycle 1 objectives					
13	Communicate the outcomes from cycle 1 effectively					

“Implementing an Ascenti Equality and Diversity System focuses us to look at all the steps we are already taking as well as getting others involved to help us find new ways to promote inclusion.

With a new Equality, Diversity and Inclusion committee we have created a platform for everyone who wants to be involved and it gives everyone the opportunity to offer ideas to help us grow.

It is great to be a part of this conscious decision made to focus on being a diverse and inclusive business, to proactively take steps to ensure we are doing all we can as a business to promote equality is very exciting.”

**Manous, Training and Development Coordinator
EDI committee member**

Work towards implementing a comprehensive equality and diversity (E&D) system

Domain(s)	Success measures	2018 / 19 progress	Status
Patient experience Staff experience	Research EDS2 and gain a good understanding of the system and how this is implemented	Ascenti has appointed an EDS project manager. They have researched EDS2 and applied this to Ascenti. The Ascenti E&D system was then shared with other key members of staff.	Achieved
	Create an E&D project plan	A project plan is now in place with 13 steps to implement an Ascenti equality and diversity system.	Achieved
	Implement an E&D working group	An equality and diversity committee was set up and their first meeting took place on 5/10/2018. Meetings will continue on a quarterly basis and will link closely with the E&D system outcomes.	Achieved
	Identify E&D stakeholders	Several stakeholders were identified to include in the development of the Ascenti E&D system and to include in the grading of our performance. The stakeholders will include Ascenti staff members and external organisations that work closely with Ascenti.	Achieved

Priority 3



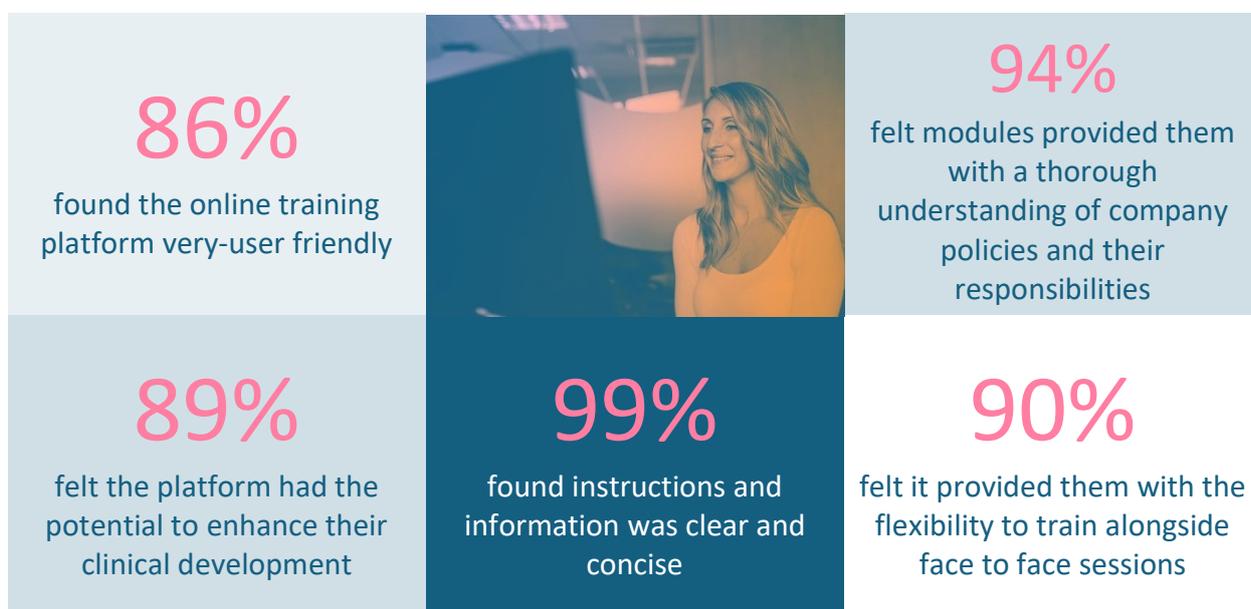
Develop a new, comprehensive, high-quality learning and development framework

During 2018/19 we have made significant investments in our learning and development. This has included key appointments; our National Lead Clinician and Clinical Training and Curriculum Lead. Throughout 2018/19 we have achieved the following:

- Development of a new Ascenti Knowledge and Skills Framework and appraisal process. 109 of our physiotherapists went through this new, professional and rigorous process. This led to the successful clinical progression of 95 staff within their clinical banding. The second opportunity

has seen 93 staff enter this process, and is the first opportunity for people to sit the practical viva exam which will facilitate promotion to a more senior band.

- Several workshops for network managers and mentors have been delivered throughout 2018/19. These covered the process of scoring, using performance indicators, how to set the level and expectations between bands and how to avoid bias. There were activities to help those scoring achieve satisfactory consensus regarding scoring, increasing the credibility and reliability of the process across regions.
- Weekly calls with managers were held to troubleshoot any borderline marks and to enable everyone to moderate their scores against the performance of similar banded physiotherapists in other regions, again increasing the rigour and quality of the process.
- The appraisal framework competencies were linked to expectations during the probation period and linking into the recruitment phase, aligning these 3 phases (recruitment, probation and promotion).



- An 8-week training cycle was developed, designed to create a blended learning approach incorporating independent CPD time for self-directed learning, direct mentor support (1:1), small group teaching sessions, regional webinars and teleconferences, national webinars and national development days. Each 8-week cycle is themed around the online module that is current for that period of time.

"I know we review the modules in the evaluation section, but I just wanted to say thank you so much for the modules so far, I have found them really helpful with solidifying my knowledge and in clinic and really enjoyed going through them!"

Alexandra, Band A Physiotherapist

“I'd also like to add that these online modules are excellent and is providing a greater sense of direction in relation to the new banding structure”.

Chih-Sheng, Band B Physiotherapist and Disability Analyst

- Two Band C development days (North and South) were held, focusing on clinical reasoning and practical workshops to improve handling skills.
- Two national summer roadshows were held (North and South) with a strong clinical focus on pain understanding, exercise and rehabilitation and improving communication.
- New training roles were developed, appointing regional development leads (RDLs) in each region. Their role includes responsibility for ensuring the 8-week cycle runs smoothly and conforms to the expectations in terms of content theme and quality of delivery, while allowing for flexibility and autonomy over the style and specific content to enable clinicians to develop their own skills in adult learning and teaching.
- A Clinical Development area on our intranet was developed. This contains information about: (i) promotion pathways; (ii) the 8-week training cycle; (iii) becoming a mentor; (iv) a guide to a professional portfolio and resources to aid personal development; and (v) events, upcoming CPD opportunities and clinical news articles.
- A series of Practice Alerts have been developed throughout 2018/19 and we continue to develop these, linking in with Clinical Governance and topics relating to high risk areas of clinical practice. These are short easy-to-read updates which impact directly on practice. Examples of content include raising awareness of rare conditions, masqueraders or changes to practice in light of concerns raised through Governance.
- Ongoing development of the online learning platform; currently 5 MSK specific modules have been released, one every 2-3 months since July 2018 with engagement statistics shown in the following table. The modules are clearly aligned to different competencies within the Knowledge and Skills Framework and Appraisal Framework, with clear learning outcomes:



“I am challenged to review body parts and injuries that I may not be familiar with. It keeps it exciting and I am always learning.”

Mo, Ascenti physiotherapist

Module title	Released	Overall score (/5)
MSK Introduction	Jul 18	4.57
Module 1: Communication	Sept 18	4.38
Module 2: Subjective Assessment	Nov 18	4.65
Module 3: Objective Assessment Pt1	Jan 19	4.64
Module 4: Objective Assessment Pt2	Mar 19	4.63

Our development of high quality training modules continues releasing a new module every 12 weeks and supporting our educational training modules within our 8-week training cycle.



“There has been lots of positive feedback from our clinical teams about the new clinical support and training structure. They enjoy being able to contribute to all sessions, having autonomy over their development and engaging with other team members on a regular basis.

They are very impressed with the resources available including Pulse (our intranet), online modules and discussion boards.

The clinical support and training has enabled them to have structure and direction and has assisted their ability to progress up the banding system. They look forward to the addition of new modules.”

Angela Shott, Network Manager

“I truly believe that what we are offering is unique. There is nothing else like it beyond university.

Our training package not only ensures you have the skills you need in clinic, but also gives you the autonomy to develop the areas that you are interested in personally.

It’s designed to help you stay on the cutting edge of the latest treatments and thinking.”

Nick Worth, National Lead Clinician





“The banding structure here is really competitive and gives the company an edge. You are enhancing your skills, knowledge and experiences but also your salary will increase too.

There are so many different avenues you can go down with Ascenti and the support network is fantastic.”

Patrick, Band E Physiotherapist and Regional Development Lead

Develop a new, comprehensive, high-quality learning and development framework

Domain(s)	Success measures	2018 / 19 progress	Status
Clinical effectiveness	Enhanced knowledge & skills framework (KSF)	Complete redesign of KSF	Achieved
		New digital tools used to enhance online training materials and increase interactivity	Achieved
Patient safety	Enhancement of online virtual training platform	Developed new 8-week training cycle	Achieved
Clinical quality		Appointed 8 regional development leads	Achieved
	Redesign of training materials, content & framework	Training workshops	Ongoing
		Development of learning and development intranet pages	Ongoing
		Developed series of practice alerts	Ongoing
		Developed 5 new comprehensive training modules	Ongoing
		Complete redesign of appraisal framework linking to KSF	Achieved
		Redeveloped banding systems, assessment and exam processes	Achieved

Priority 4



Provide undergraduate physiotherapy placement opportunities

As a large national physiotherapy company that provides services to the NHS, Ascenti is able to provide an enriched learning environment for undergraduate Physiotherapists.

We recognise that through the provision of placements for Physiotherapy students, Ascenti is able to contribute to the professional development of physiotherapists, enhance the physiotherapy profession itself and also create close links with universities.

During the reporting period 2018/19 we have undertaken the required risk assessments and compliance requirements, established policies, procedures and frameworks, and developed a platform for offering the highest quality placements for student Physiotherapists.

Having established our systems and frameworks for supporting student learning, we are welcoming a number of students to Ascenti over the 2019/20 period. We look forward to helping and supporting the development of undergraduate physiotherapists and contributing to the development of the physiotherapy profession.

Provide undergraduate physiotherapy placement opportunities

Domain(s)	Success measures	2018 / 19 progress	Status	
Service development	University placements agreements	Placement agreements established with a number of universities	Ongoing	
	Clinical educator training	Staff have attended clinical educator training	Ongoing	
	Student placement framework	Risk assessments completed		Completed
		Policy framework developed - Supporting learning in practice: Physiotherapy student placements		Completed
		Student welcome pack developed		Completed
	HR & Governance frameworks established		Completed	

Statement of assurance from our Leadership Team

During 2018/19 Ascenti provided NHS Community Physiotherapy and Musculoskeletal Clinical Assessment and Treatment Services (MCATS) to over 20 NHS organisations. Ascenti has reviewed all available data regarding the quality of the NHS services we have delivered.



Participation in clinical audits and confidential enquiries

During the reporting period 2018/19, no national clinical audits and no confidential enquiries covered the NHS services that Ascenti provides. The local audits performed in 2018/19 are listed in Appendix 1.

The reports of all local audits were reviewed by Ascenti in 2018/19 and Ascenti intends to take the following actions to improve the quality of healthcare provided and contribute to our continuous cycle of quality improvement and risk management:

- Digitise our medicines management system
- Decentralise infection prevention control audits



Participation in clinical research

Participation in clinical research demonstrates Ascenti's commitment to improving the quality of care we offer and to making our contribution to wider health improvement.

During 2018/2019, our Clinical Development Lead presented the results of a small study she co-supervised, as a poster and podium presentation at Physiotherapy UK 2018. The study investigated the effects of spinal manual therapy on the range of motion of the lumbar spine in healthy individuals and has contributed to the growing body of evidence in this subject. It is hoped in the future, the study could be repeated with a symptomatic group as part of a small clinical study within the organisation.



Care Quality Commission

Ascenti is required to register with the Care Quality Commission (CQC) for the regulated activity of 'treatment of disease, disorder or injury'. Ascenti has no conditions placed on its registration and there have been no inspections to report on. The CQC has not taken any enforcement action against Ascenti during 2018/19. Ascenti has not participated in any special reviews or investigations by the CQC during the reporting period.

During 2018/19 our Registered Manager supported by two CQC Clinical Support Officers, continued to evaluate our systems, processes and services to ensure we maintain high standards of service,

compliance with CQC regulations and ensure we continue to be: safe, effective, caring, responsive and well-led.



Secondary uses services

During 2018/19, Ascenti did not submit records to the 'Secondary Uses Service' for inclusion in the Hospital Episode Statistics.



Payment by results

Ascenti was not subject to the payment by results clinical coding audit during 2018/19 by the Audit Commission.



Commissioning for quality and innovation payment framework (CQUIN)

A proportion of Ascenti's income in 2018/19 was conditional on achieving quality improvement and innovation goals agreed between Ascenti and our North Norfolk, Preston and Isle of Wight NHS contracts through the CQUIN framework. These schemes include:

- Self-care initiatives
- Foot/ankle pathway designs
- Patient focus groups
- Early intervention
- GP education
- Physiotherapy training
- Patient experience
- Shared decision making



Duty of candour

Our duty of candour and whistleblowing policies are available to all staff and are aligned with CQC regulation 20. We aim for the highest ethical standards by encouraging a culture of openness, transparency and candour throughout our organisation. To support this, we have developed specific duty of candour training for our induction and mandatory training programme. We have also integrated duty of candour triggers into our risk based complaint and incident pathways.



Data quality

Ascenti operates management systems that ensure the quality and integrity of our data. Good quality information is essential for effective patient care and quality, through being able to measure, monitor and report upon our data.

We have a dedicated Management Information team and all members are employed for their attention to detail and analytical skills. Quality is assured via a number of procedures and ensuring all SQL queries and codes used for data retrieval from our bespoke database are peer reviewed.



Data Security and Protection Toolkit

For 2018/19, Ascenti completed our Data Security and Protection Toolkit submission and are compliant with the National Data Guardian's Data Security Standards, meeting statutory obligations on data protection and data security.

We continue our commitment to maintain both an effective ISO 27001 management system and our quarterly meetings that focus on ensuring the quality, integrity and security of our data.



Safeguarding

Safeguarding is fundamental within Ascenti and our Leadership Team continue to have ultimate responsibility for safeguarding. This ensures people are protected against any risk of abuse or avoidable harm, their welfare is promoted and their human rights are respected.

Safeguarding training

To enable us to discharge our safeguarding responsibility to an even higher standard, we have enhanced our training provision and made it available to all our clinical staff via our e-learning platform.

Our safeguarding training covers:

- Mental capacity act
- Safeguarding children and young people
- Safeguarding adults at risk and vulnerable people
- PREVENT
- Child Sexual Exploitation
- Domestic violence and abuse
- Female Genital Mutilation
- Forced marriage
- Modern slavery
- Trafficking

All staff complete our training as part of mandatory training obligations.

Training levels were originally detailed in 'Working together to safeguard children' 2010, but were removed in 'Working together' 2013. Since 2013 there has been no national statutory guidance on

the content of safeguarding training. Local safeguarding children/adults boards still have a duty to provide, monitor and evaluate the effectiveness of training in their area.

To ensure our staff meet the appropriate training standards proportionate to their role, we have developed our training in line with the training specifications contained within the intercollegiate document.

Safeguarding supervision

In 2019/20 we will be implementing our safeguarding supervision framework for frontline clinical staff, our safeguarding team and safeguarding champions within Ascenti. Ascenti are committed to supporting staff at all levels with maintaining good professional standards and support with safeguarding concerns. We recognise the need to remain up-to-date and maintain continued awareness of safeguarding issues in relation to adults at risk of abuse, vulnerable people and child protection in all areas of the business.

Safeguarding supervision offers a formal process of professional support and learning and is about the 'how' of safeguarding practice; it provides a framework for examining and reflecting on a case from different perspectives. It also facilitates the analysis of the risk and protective (resilience) factors involved through discussing cases of actual abuse and discussing cases at varying levels of concern, from the high risk to the cases with very early potential indicators, in order to ensure safe practice. Safeguarding supervision should help to ensure that practice is soundly based and consistent with Ascenti's safeguarding policies which are underpinned by both Children and Adult Safeguarding boards.

Safeguarding team

In line with the growth of Ascenti, our safeguarding team now consists of seven multidisciplinary health professionals including nurses, physiotherapists and compliance officers, each undertaking designated safeguarding roles within Ascenti. This ensures that clinical environments, reception areas and administrative teams are appropriately supported whilst delivering our services. The team is overseen by a designated safeguarding lead.

Ascenti has not had any reportable safeguarding incidents within the reporting period for our NHS services.

"The staff were excellent, they were always on time and were very pleasant people. I could not fault how we were treated.

I noticed a huge difference after my treatment and most of the time I feel like I am back to myself."

Florence, 74 from Birmingham



CQC Registered Manager statement of assurance

Ascenti remains a registered provider with the Care Quality Commission (CQC) under the Health and Social Care Act 2008. Ascenti Physio is registered as a location for the regulated activity 'treatment of disease, disorder or injury (TDDI)'.

Ascenti does not have any conditions placed on its services and the Care Quality Commission has not taken enforcement action against us during the reporting period to year ending 31/03/2019. Ascenti has not participated in any special reviews or investigations by the CQC during the reporting period. We are awaiting a formal CQC inspection which will provide validation of the quality and safety of care that we deliver.

The last year has seen a lot of changes within Ascenti with a focus on quality driven services. Changes have included a new Leadership Team and additional committees led by senior managers across the business, all of which support patient safety, clinical effectiveness and patient experience. These changes will ensure our regulated services are continually challenged and benchmarked for quality improvement.

The Registered Manager will shortly be taking over the additional role of Nominated Individual to manage and oversee the regulated activities that we provide. We feel that this dual role will be more effective for the services that we provide.

Our regulated services have seen changes in our approach to medicines management and the introduction of Adrenaline ampoules within anaphylaxis kits to replace Adrenaline Auto Injectors (AAI's). This demonstrates our responsiveness to the recommended change in practice (CAS alert 29/09/18) regarding EpiPen shortages and our regulated activity TDDI.

We introduced an innovative training day for all injection therapists nationally delivering regulated activities, to come together and share their experiences and enhance their skills in an environment where all staff deliver the same or similar services across varying NHS contracts. This was well received and as such will form part of a cyclical annual training and update programme.

In May 2019 we moved our Registered Location to a more central venue in Edgbaston. This location offers better transport links making it more accessible for patients and service users.

We are in the process of setting up approximately 7 satellite clinics nationally that are governed by our Provider Office Location in Fareham and Registered Clinical Location in Edgbaston; our aim is to have wider geographical coverage to ensure patients have a greater choice of venues nationally, to make their treatment more accessible, therefore enhancing their experience.

Our next mock inspection will be undertaken once we have moved into our new Registered Location, and will be undertaken by our 2 Clinical CQC Support Officers. The inspection tool has been redesigned following last year's mock inspection and continues to support governance and quality processes within Ascenti for quality improvement at our registered location, whilst informing our annual audit programme.



Yvonne Attwell, CQC Registered Manager

Infection Prevention Control statement of assurance

Ascenti is committed to complying with the requirements of the Code of Practice for health and adult social care on the prevention and control of infections and related guidance.

Within the reporting period an Infection Prevention and Control Lead has been appointed and a multidisciplinary infection prevention and control committee established. The committee meet monthly, they report to the Clinical Quality and Governance Committee providing information to assess assurances.

A new infection prevention and control framework has been developed, this provides a strategy for continuous improvement in infection prevention and control which includes: risk assessment, reviewing and developing policies based on current best practice, ensuring resources are available at the point of care, converting policy into practice through education and training, carrying out regular audits, reviewing infection control incidents and providing an annual statement to the Leadership Team.

During this reporting period we have worked hard to engage and inform our staff on the importance of effective hand hygiene and maintaining a clean environment to prevent and control infections.

A handwritten signature in black ink that reads "Sealey". The signature is written in a cursive style with a large initial 'S'.

Carole Seale
IPC Nurse

Part three

Positive patient experience

At Ascenti we aspire to achieve high standards in all we do. Understanding the experience of our patients is essential to ensure we continually meet the standards of excellent care we strive to achieve.

We gather feedback from our patients and stakeholders in a variety of ways. Throughout 2019 / 20 we will explore new and innovative ways to engage with our patients to capture feedback.

Survey feedback

Survey data from **6,218** patients:



Service performance



Complaints

During the reporting period we received 0.3% complaints as a percentage of appointments delivered across all our NHS contracts.

"I would like to say what an efficient and effective service Ascenti provides to NHS patients. My physio has provided treatment and management strategies which have helped me to recover from a back problem.

He treats his patients with respect and puts them at ease. He encouraged me to try new exercise regimes which have improved my quality of life both physically and mentally."

Ascenti patient



Enhancing patient safety

At Ascenti we put the safety and wellbeing of our patients above all else. We recognise the importance of full and thorough evaluation of our services, to assure ourselves we are providing a safe service and that we use every opportunity as an occasion to learn and improve.

During 2018/19, we have focused on:

- Up-skilling our Clinical Governance team
- Embedding our incident reporting and systems of risk
- Integrating deeper systems of quality improvement into our services
- Enhancing our Safeguarding frameworks
- Enhancing our Infection Prevention and Control frameworks
- Configuring a digital risk management tool scheduled for implementation
- Development of a new quality assurance tool, our 'QT'

Our clinical governance training programme delivered to date, amongst other topics, includes:

2017/18	2018/19
<ul style="list-style-type: none">• Clinical human factors• Systems theory• Patient safety culture• Risk assessment and risk management• Root cause analysis investigation• Root cause analysis tools• Quality improvement methods in healthcare	<ul style="list-style-type: none">• Type I and Type II safety• Safeguarding• Communication tools in healthcare• Accessible information standard• Introduction to EDS2• Equality & Human Rights Impact Assessments• Infection prevention control

To enhance our effectiveness and commitment to ensuring patient safety, Ascenti will be implementing our patient safety/risk management software and will focus on embedding these systems into the organization supported with training, guidance and policy documentation.



Incidents

We actively promote the reporting of incidents and underpin this by creating a positive safety culture. Achieving a high level of reporting is essential for ensuring we actively identify opportunities to learn and improve our services, improving safety and satisfaction.

Incidents do not necessarily mean harm, rather a deviation from expected delivery, and can relate to matters such as procedures, policies and systems. Underpinning our incident reporting and investigation systems with 'human factors principles' provides significant advantages to the depth of technical analysis and learning opportunities we can achieve.

We recognise high incident reporting as a positive indication that our systems of reporting are effective. During the reporting period 0.12% learning events were reported as a percentage of appointments delivered across all our NHS contracts.

Serious incidents

We have had no serious incidents during the period 2018/19.



Safety alerts

Between April 2018 and March 2019 we received 7 safety alerts plus 1 update to an existing safety alert that had the potential to, and/or impact, upon our services. All alerts were reviewed and actioned in a timely manner in accordance with their level of risk to the service, and the action and completion dates stipulated within the alerts.

Potential to impact services

- 11/07/2018 – PHE alert; nerve gas incidents in the Salisbury and Amesbury areas
- 03/08/2018 – CAS alert; an organisation known as the Cyrus Project sent a number of unsolicited packages with accompanying literature
- 19/09/2018 – CAS alert; assessment of ligature points
- 30/11/2018 – CQC safety alert; fire risks from paraffin based products
- 11/01/2019 – CAS alert; portable fans in healthcare settings
- 01/03/2019 – CAS alert; cleaning and other COSHH products that have the ability to be ingested

These alerts have identified areas of our practice for further review and work is in progress as a result of these alerts that might have the potential to change existing practice.

Impacted services

- 28/09/2018 - CAS alert; EpiPen Adrenaline auto-injector (AAI) shortage
- 10/10/2018 – Update reinforcing the above shortage

These CAS alerts impacted our service due to the national shortage of AAI devices available, however as we had an existing stock this did not prevent our service from running safely. Contingency plans were put in place and a change of practice was introduced to replace AAIs with Adrenaline ampoules within anaphylaxis kits. As this change in practice was developed and introduced in a timely manner there were no interruptions to existing services.

All central alerting system (CAS) alerts were reviewed and there were no additional alerts other than those mentioned above that were applicable to our services and these continue to be monitored weekly.

In October 2016 we began monitoring the revoked and suspended licences for manufacturers and wholesalers of medicines within the UK; we continue to check the list on a monthly basis to ensure our suppliers are licenced to trade. To date, no concerns have been raised with our supply chain.

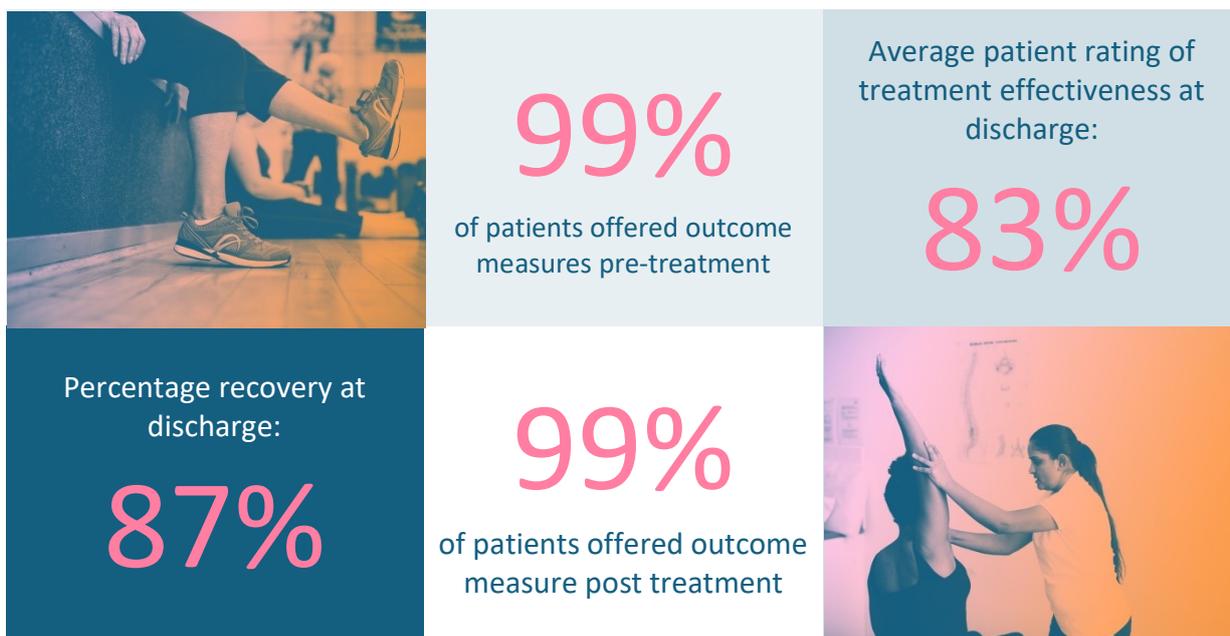
Risk management

We have taken steps to embed risk management principles into deeper levels of our systems and services. By doing this, Ascenti has achieved a greater awareness and visibility of risks within our organisation, creating a greater level of understanding and optimisation of controls within our systems and processes. This is a fundamental engineering of our service for safety and throughout 2019/20 we will continue to build upon the improvements we have made to date.

Elevating clinical effectiveness

Ascenti is committed to ensuring the care we provide is evidence-based, effective and based upon best practice principles. We monitor and improve patient outcomes by ensuring our clinicians are:

- Well trained
- Up-to-date with new and emerging research and practices
- Follow best practices informed by evidence and/or national guidelines
- Supported, supervised and developed by senior practitioners, mentors and trainers



The above statistics represent patient recovery at the point of discharge. Our patients are discharged from our service at the point of being able to continue their onward recovery independently through self-management.

PROMs measure	Sample size	% improvement
EQ-5D-5L	10835	87%
MSK-HQ	1232	78%

Staff development

During 2019 / 19 we have made significant investment in our learning and development, laying down the foundations for our pathway to excellence. Our Clinical Development Team are specialist practitioners in academia, clinical practice and training, and their dedicated tasks are to ensure we deliver a best-in-class learning and development programme for our staff.

Inspiring innovation

As one of the largest providers of physiotherapy services in the UK, Ascenti has a responsibility to ensure that we continue to find ways to advance the profession and services we provide. Through exploring new processes, systems, services and participating in research, we strive to find new ways to optimise the care we provide and create extra value for our patients and commissioners. The following are examples of new service designs and pilots delivered in 2018/19:

Wyre Forest Direct Access

We ran a pilot with Wyre Forest operating a First Contact Practitioner Service from three practices within the locality. These practices were selected due to the high percentages of Orthopaedic referrals. During this pilot we completed 3,396 referrals and achieved positive results:

- **Increased GP capacity by 180 slots per week**
Providing two clinical days per week, per surgery, created 180 extra appointment slots, enabling GPs to focus on patients with non-musculoskeletal conditions.
- **17% reduction in physiotherapy referrals**
The pilot resulted in a 16.8% reduction in referrals for physiotherapy across the three surgeries.
- **7.5% reduction in referrals to Trauma & Orthopaedics**
The pilot resulted in fewer patient referrals into secondary care, meaning more patients were treated in primary care.

Following this pilot we have worked with the CCG to develop a Single Point of Access (SPoA) MSK service. This SPoA pilot, which includes a triage service, is an integrated model working collaboratively with a range of other public and private sector organisations within the locality. This pilot continues at the time of this report and we look forward to reporting on the outcomes of this service.

First-contact physiotherapy services

We have developed excellent working relationships with GP practices and Clinical Commissioning Groups and through promoting the value and expertise of our physiotherapists, Ascenti has been delivering first-contact practitioner services. By deploying our physiotherapists to work alongside GPs in general practices and providing expert assessment and treatment for patients with musculoskeletal conditions, we are creating efficiencies and improving the patient experience. We continue to be a trusted partner to a number of GP practices around the country with many of our

services continuing into their second and third year. During this reporting period we have established additional first-contact practitioner services in South Lincolnshire and North Norfolk. Our services provide rapid access to physiotherapy and expert clinical assessment services such as injections, ordering investigations and optimising referrals into community physiotherapy or secondary care. These drive substantial savings and we will be able to report on the outcomes of these new services within our next quality account.

Statements from Commissioners

Lancashire Care NHS Foundation Trust has subcontracted Community Physiotherapy and MSK services to Ascenti and the two organisations are working collaboratively to deliver an innovative integrated MSK model. The organisations meet regularly to manage performance, risk and ensure effectiveness of pathways. There are established triage meetings, clinical governance meetings and educational meetings, which include all service lines. The two organisations are also working together to embed a Shared Decision Making culture across the service and are delivering a CQUIN around this.

Hannah Sellers

Service Manager - Central Lancashire Moving Well

Appendix 1 – Local audits

Audit	Description
Accessible information standard	Audit of our systems and services ensuring our compliance with the Accessible Information Standard.
Assurance audits	Our assurance audits provide a holistic audit of the patient journey, clinical standards and safety. This comprises an audit of accessibility, infection control, environment, patient involvement, patient experience, dignity and respect, personalised care and safeguarding.
Clinical notes	Audit of the standard of treatment notes and record keeping.
Clinical triage	Audit of clinical referral pathway decisions.
Complaints	Audit of complaints and complaint processes.
Hand hygiene	Audit of environment, equipment and compliance with hand hygiene technique, policies and procedures.
Incidents	Audit of incident and incident processes.
Infection control	Audit of the environment, equipment and compliance with infection control policies and procedures.
Information governance	Audit of data protection and information governance compliance.
Injection therapy notes	Audit of the standard of treatment notes, medicines and compliance with process and protocols.
Lone working	Audit of lone working clinics, lone working systems, policies and procedures.
Medicines management	Audit of the management of injectable medicines ensuring compliance with policies and processes.
New starter audits	Audit of new starter compliance, mandatory training, supervision and mentoring and clinical notes review.
NG59 audits	Audit of our treatments for low back pain patients against the NICE low back pain guidelines.
Safeguarding	Audit of safeguarding cases, safeguarding reporting processes, policies and training.
Sharps	Audit of sharps equipment, management, policy and procedures for injections and acupuncture.
Staff compliance	Audit of mandatory compliance requirements – professional registration/DBS clearance/insurance

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