

Oxford University Hospitals NHS Foundation Trust

Inspection report

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

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

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

Ratings

Overall rating for this trust

Requires improvement 

Are services safe?

Requires improvement 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Requires improvement 

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

Summary of findings

Background to the trust

Oxford University Hospitals (OUH) is one of the largest NHS teaching trusts in the UK.

The trust is made up of four hospitals - the John Radcliffe Hospital (which includes the Children's Hospital, West Wing, Eye Hospital, Heart Centre and Women's Centre), the Churchill Hospital and the Nuffield Orthopaedic Centre, all located in Oxford, and the Horton General Hospital in Banbury, North Oxfordshire.

The trust provides a wide range of clinical services, specialist services (including cardiac, cancer, musculoskeletal and neurological rehabilitation) medical education, training and research. Most services are provided in their hospitals, but over six percent are delivered from 44 other locations across the region, and some in patients' homes.

The trust's collaboration with the University of Oxford underpins the quality of the care that is provided to patients, from the delivery of quality research, bringing innovation from the laboratory bench to the bedside, to the delivery of education and training of doctors.

Existing collaborations include research programmes established through the Oxford Biomedical Research Centre (BRC), funded by the National Institute for Health Research (NIHR), located on the John Radcliffe Hospital site and at the Biomedical Research Unit in musculoskeletal disease at the Nuffield Orthopaedic Centre.

The trust is also working towards achieving Magnet[®] Recognition, an organisational credential awarded to exceptional healthcare organisations that meet the ANCC (American Nurses' Credentialing Centre) standards for quality patient care, nursing and midwifery excellence and innovations in professional nursing and midwifery practice.

Overall summary

Our rating of this trust went down since our last inspection. We rated it as Requires improvement



What this trust does

The John Radcliffe Hospital (JR) is Oxfordshire's main accident and emergency site. The JR provides acute medical and surgical services including trauma, intensive care and cardiothoracic services. It is situated in Headington, about three miles east of Oxford city centre. It is the largest of the trust's hospitals, covering around 66 acres, and includes the Children's Hospital; the Eye Hospital; the Heart Centre; the West Wing and the Women's Centre.

The John Radcliffe site also houses many departments of Oxford University Medical School, is home to the George Pickering Education Centre and base for most medical students who are trained throughout the Trust.

The Churchill Hospital is a centre for cancer services and other specialties, including renal services and transplant, clinical and medical oncology, dermatology, haemophilia, chest medicine and palliative care. It incorporates the Oxford Centre for Diabetes, Endocrinology and Metabolism (OCDEM) - a collaboration between the local university, the NHS and three partner companies - which is a world-class centre for clinical research on diabetes, endocrine and metabolic disorders, along with clinical treatment and education.

The Nuffield Orthopaedic Centre has been treating patients with bone and joint problems for more than 80 years, providing orthopaedic, rheumatology and rehabilitation services. The hospital also undertakes specialist services such as the treatment of bone infection and bone tumours, limb reconstruction and the rehabilitation of those with limb amputation or complex neurological disabilities.

The Horton General Hospital in Banbury serves the growing population in the north of Oxfordshire and surrounding areas. This is an acute general hospital providing a wide range of services, including an emergency department (with an

Summary of findings

emergency admission unit); acute general medicine and elective day case surgery; trauma; maternity (midwifery-led unit) and gynaecology; paediatrics; critical care and the Brodey Centre (treatment for cancer). The majority of these services have inpatient beds and outpatient clinics, with the outpatient department running clinics with visiting consultants from Oxford.

Key questions and ratings

We inspect and regulate healthcare service providers in England.

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

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

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

What we inspected and why

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

We inspected Oxford University Hospitals NHS Foundation Trust on 19 to 21 November 2018, 7 December 2018 and the 8 to 10 January 2019. The core services we inspected as part of our continual checks on the safety and quality of healthcare services were urgent and emergency care, medical care and surgery, maternity, and gynaecology. We selected the services for inclusion in this inspection based on the intelligence information we held on these areas. These core service inspections were unannounced.

Our comprehensive inspections of NHS trusts have shown a strong link between the quality of overall management of a trust and the quality of its services. For that reason, all trust inspections now include inspection of the well-led key question for the trust overall. What we found is summarised in the section headed; Is this organisation well-led?

What we found

Overall trust

Our rating of the trust went down. We rated it as requires improvement because:

- *We rated, effective, caring and responsive as good, and safe and well led as requires improvement.*
- *At the John Radcliffe Hospital, we rated two of the trust's services as good and three as requires improvement. In rating the trust, we took into account the current ratings of the four services not inspected this time.*
- *At the Churchill Hospital we rated one of the trust's services as good and one as requires improvement. In rating the trust, we took into account the current ratings of the four services not inspected this time.*
- *At the Horton General Hospital, we rated one of the trust's service as good and one as requires improvement. In rating the trust, we took into account the current ratings of the six services not inspected this time.*
- *At the Nuffield Orthopaedic Centre, we rated one of the trust's services as good. In rating the trust, we took into account the current ratings of the two services not inspected this time.*
- *We rated well-led for the trust overall as requires improvement.*

Summary of findings

Are services safe?

Our rating of safe went down. We rated it as requires improvement because:

- The services provided mandatory training in key skills to all staff but not everyone had completed it. Nursing staff compliance was significantly higher than medical staff.
- Staff understood how to protect patients from abuse and the service worked well with other agencies to do so. However, medical staff's compliance with safeguarding training on how to recognise and report abuse was significantly below the trust target for adults and children modules. There was a risk patients may not be safeguarded from harm.
- Staff kept records of patients' care and treatment and they were easily available to all staff providing care. However, patient notes were not always fully completed and in some areas, they were not securely stored.
- In general, services followed best practice when prescribing, giving and recording medicines, but in some areas medicine storage was not in line with best practice.
- Services mainly had suitable premises and equipment and mostly looked after them well. There was a mix of old and new estate which did present the trust with challenges which they were monitoring and addressing. However, in some areas the environment had not been maintained to a satisfactory standard and the entrance to the children's emergency department was not always secure.
- Services had processes in place to manage the risk of infection and in most areas staff kept themselves, equipment, and the premises clean. However, within surgery, gynaecology, emergency department and maternity service there were areas where these processes were not being constantly applied.
- In some areas within surgery the incident reporting system was not being effectively used to report events which had resulted in harm or where there was risk as a result of damage to the fabric of the building.
- Not all services always had enough nursing staff, with the right mix of qualification and skills, although they were working hard to remedy this. The Midwifery service did not have the planned numbers of midwifery and nursing staff which impacted on the women's choice. Staff worked flexibly to provide a safe service although there was not enough midwifery staffing to reach the Royal College of Obstetricians and Gynaecology (RCOG) recommended midwife ratio of 1:28.
- As a major trauma centre the service did not meet the national requirements regarding consultant cover. However, the service had enough medical staff with the right mix of qualification and skills, to keep patients safe and provide the right care and treatment.

However

- Staff completed and updated risk assessments for each patient. They kept records and asked for support where necessary.
- Services took a flexible approach to ensuring they had enough nursing staff with the right qualifications, skills, training and experience to keep people safe from avoidable harm and to provide the right care and treatment.
- Services had enough medical staff with the right qualifications, skills, training and experience to keep people safe from avoidable harm and to provide the right care and treatment.
- Services managed patient safety incidents well. Most staff recognised incidents and reported them appropriately. Managers investigated incidents and shared lessons learned with the whole team and the wider service. When things went wrong, staff apologised and gave patients honest information and suitable support.

Summary of findings

Are services effective?

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

- Services provided care and treatment based on national guidance and evidence of its effectiveness. Managers checked to make sure staff followed guidance.
- Staff gave patients enough food and drink to meet their needs and improve their health. They used special feeding and hydration techniques when necessary. The service could cater for patients' religious, cultural and other preferences.
- Staff assessed and monitored patients regularly to see if they were in pain. They supported those unable to communicate using suitable assessment tools and gave additional pain relief to ease pain.
- Managers monitored the effectiveness of care and treatment and used the findings to improve them. They compared local results with those of other services to learn from them.
- Staff worked well together for the benefit of patients. Doctors, nurses and other healthcare professionals supported each other to provide good care.
- Services collected performance data against clinical standards for seven days working. The Trust had produced a seven-day service guide, which all staff we spoke with were very positive about.
- People who use services were empowered and supported to manage their own health, care and wellbeing to maximise their independence.
- Staff understood how and when to assess whether a patient had the capacity to make decisions about their care. They followed the trust policy and procedures when a patient could not give consent.

However

- Services were supportive of staff development with a strong desire to ensure they were competent for their role. However, managers did not always appraise staff work and performance.
- Managers monitored the effectiveness of care and treatment and used the findings to improve them. However, the emergency department (ED) at John Radcliffe hospital failed to meet any of the national standards for the three Royal College of Emergency Medicine audits in which it participated.

Are services caring?

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

- Staff cared for patients with compassion and kindness. Feedback from patients was consistently positive about the way staff treated them.
- Staff provided emotional support to patients to minimise their distress
- Staff involved patients and those close to them in decisions about their care and treatment.

However

- We observed some instances where a patients' privacy and dignity was not respected.

Are services responsive?

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

- Services planned and provided services in a way that met the needs of local people.

Summary of findings

- Service took account of patients' individual needs. This included refurbishment of the complex medical wards to make them more dementia friendly and the development of treatment pathways such as direct admission and ambulatory care.
- In general people could access the service when they needed it. Waiting times from referral to treatment and arrangements to admit and treat patients were being monitored and action had been taken by the trust to assess the risk to patients and improve performance in areas where this had been poor.
- Services investigated concerns and complaints and learned lessons from the results, and shared these with staff.

However

- A proportion of patients experienced a delayed discharge.
- Services responses to complaints were not always completed in a timely manner.
- Due to staffing challenges the endoscopy procedure rooms sometimes at the Horton General Hospital, which had extended the waiting list for non-cancer patients.
- In the emergency department at the John Radcliffe hospital found demand for services frequently outstripped the availability of appropriate clinical spaces to assess, treat and care for patients.
- Generally, people could access the services when they needed it. However, in the emergency department waiting times from referral to treatment and arrangements to admit, treat and discharge patients did not always meet national standards. In the gynaecology service patients could not always access the service when they needed it. Waiting times from referral to treatment and arrangements to admit, treat and discharge patients were not always in line with good practice.

Are services well-led?

Our rating of well-led went down. We rated it as requires improvement because:

- Services had systems for identifying risks, planning to eliminate or reduce them, and coping with both the expected and unexpected. These were not always effective as we found risks in some services which had not been identified as such.
- The services collected, analysed, managed and used information to support all its activities, using secure electronic systems with security safeguards. However, there was a lot of information and not always enough analytic support available to interpret and present the information in a usable format in a timely way.
- Re organisation had in turn led to a change in the staff with accountability for the governance of some services. These services were working to ensure there was an agreed and sustained systematic approach to continually improve the quality of its services and safeguarding high standards of care. However, the arrangements for governance and performance management had not always operated effectively.

However

- Most managers had the right skills and abilities to run a service providing high quality sustainable care.
- Services had a vision for what they wanted to achieve and workable plans to turn it into action developed with involvement from staff, patients and key groups representing the local community.
- Managers across the services and wider trust promoted a positive culture that supported and valued staff, creating a sense of common purpose based on shared values.
- Most services used a systematic approach to continually improving the quality of their service and safeguarding high standards of care by creating an environment in which excellence in clinical care would flourish.

Summary of findings

- Services engaged well with patients, staff, the public and local organisations to plan and manage appropriate services, and collaborated with partner organisations effectively.
- Services were committed to improving services by learning from when things went well and when they went wrong, promoting training, research and innovation.

Ratings tables

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

Outstanding practice

We found an example of outstanding practice in medicine. For more information, see the Outstanding practice section of this report.

Areas for improvement

We found areas for improvement including 35 breaches of legal requirements that the trust must put right. We found 24 things that the trust should improve to comply with a minor breach that did not justify regulatory action, to prevent breaching a legal requirement, or to improve service quality.

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

Action we have taken

We issued five requirement notices to the trust and took one enforcement action. Our action related to breaches of two legal requirements at a trust-wide level and five in a number of core services.

For more information on action we have taken, see the sections on Areas for improvement and Regulatory action.

What happens next

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

Outstanding practice

The medicine service employed two registrars under the chief registrar scheme in Ambulatory Care. Most hospitals do not have a chief registrar scheme, so this was unusual. The aim of the placement was to identify treatment options which could safely be delivered in an ambulatory care setting.

An example of the innovation putting the patient at the centre was the introduction of frailty team at the front door in the emergency department. Therapists were seeing patients and assessing their needs, without the need for a formal referral with the aim of facilitating an earlier discharge.

The pharmacy team had been at the forefront of planning for the new Falsified Medicines Directive, taking a national role to pilot the work. The trust responded promptly to national concerns and had taken action to improve their oversight of controlled drugs prescribing in light of the Gosport Independent Panel report. A culture of learning and improvement was shown through the work streams and plans; for example, training technicians to undertake different roles supporting the pharmacists.

Summary of findings

A spasticity clinic had been developed. There was a specialist physiotherapist who using imaging techniques were able to guide injections to more accurate locations within agreed guidelines.

Areas for improvement

Action the trust MUST take is necessary to comply with its legal obligations. Action a trust SHOULD take is to comply with a minor breach that did not justify regulatory action, to prevent it failing to comply with legal requirements in future, or to improve services.

Action the trust MUST take to improve

We told the trust that it must take action to bring services into line with the legal requirements.

Action the trust MUST take to improve

Trust Level

- The trust must ensure they have the right people with the right skills at executive level.
- The trust must ensure there is a board level development plan which reflects the needs of the board and supports them in developing the knowledge required to maintain oversight of the organisation's priorities.
- The trust must ensure the effectiveness of the board is monitored in a formal way.
- The trust must ensure managers appraise staffs' work performance.
- The trust must ensure information is collected, analysed, managed, and used in such a way to ensure information is presented in a clear, easily understood way, which can be used to provide assurance.
- The trust must review the effectiveness of their processes for ensuring risks are recognised and actions taken to mitigate the impact of such risks.

Emergency Department

- The trust must ensure all staff complete their mandatory training and the required level of safeguarding training for their role.
- The trust must ensure security to the children's ED entrance is maintained.
- The trust must review the safe storage of all items stored on trolleys in the children's ED.
- The trust must ensure the service meets its major trauma centre requirements for consultant cover.
- The trust must ensure patient health records are stored securely in all areas of the ED and Emergency Assessment Unit (EAU).
- The trust must ensure medicines are safely and securely managed and stored at all times.
- The trust must ensure that all relevant staff sign Patient Group Directions documentation to indicate they understand them and will work with the framework as described.
- The trust must ensure staff are competent for their roles and managers appraise staff's work performance.
- The trust must ensure privacy and dignity of patients is maintained in the ED and EAU.
- The trust must ensure all staff adhere to trust policy regarding infection prevention and control.

Medicine Core Service

Summary of findings

- The trust must ensure all staff complete their mandatory training, safeguarding training, and appraisals.
- The trust must ensure substances hazardous to health are always stored safely.
- The trust must ensure medicines are stored safely and securely at all times.
- The trust must ensure patient records are fully completed.
- The trust must ensure staff are competent for their roles and managers appraise staff's work performance.

Surgery Core service

- The trust must ensure all staff complete their mandatory and safeguarding training.
- The trust must ensure risks relating to the fabric of the environment are assessed and take action to ensure the environment is safe and fit for purpose.
- The trust must ensure s
- The trust must ensure there are sufficient number of staff the right qualifications, skills, training and experience to keep people safe from avoidable harm and to provide the right care and treatment.
- The trust must ensure patients privacy and dignity is maintained when they are asleep, unconscious or lack capacity.
- The trust must ensure operating rooms are suitable for the purpose they are used for, for example have ultra clean ventilation. The theatre departments are clean and maintained properly to ensure adequate cleaning can be carried out.
- The trust must ensure risk registers reflect the current risks to their departments, the level of escalation of those risks and their mitigation. These must be reviewed on a regular basis. Risks to the health, safety and/or welfare of people who use services must be escalated within the organisation or to a relevant external body as appropriate.

Maternity Core Service

- The trust must ensure there are sufficient numbers of suitably qualified, competent skilled and experienced staff to meet the needs of the service, both midwifery and medical.
- The trust must ensure there is a robust process in place to monitor compliance with mandatory training across all maternity staff groups.
- The trust must ensure all relevant maternity staff complete safeguarding children training level 3.
- The trust must ensure staff are competent for their roles and managers appraise staff's work performance.

Gynaecology Core Service

- The trust must ensure infection prevention and control processes are effective and practiced by all staff.
- The trust must review auditing processes to ensure they are effective in identifying areas for improvement and driving positive change.
- The trust must work to improve and meet the national target for patients from referral to appointment of 52 weeks.

Action the trust SHOULD take to improve

Trust Level

- The trust should consider identifying a board level lead in relation to the freedom to speak up initiative.

Summary of findings

- The trust should ensure their equality and diversity action plan is given sufficient attention for the actions to be completed and progress made.
- The trust should review the provision of analytic support.

Emergency Department

- The trust should consider reviewing signage within the John Radcliffe Hospital ED and ED reception area so patients and relatives can be sure of where to go.

Medicine Core service

- The trust should ensure complaints are managed in a timely way.
- The trust should consider sharing more detailed data in meetings to enhance information sharing to support quality of care.

Surgery Core Service

- The trust should make sure staff are aware who is responsible for the maintenance and testing of equipment and what the assurance process was to ensure these were all current.
- The trust should ensure anaesthetic equipment is checked in line with professional guidance, so staff can be assured it is and fit for purpose.
- The trust should ensure records are stored securely at all times when not in use.
- The trust should ensure medicines have opening dates annotated to know when these will expire.
- The trust should ensure they meet national standards for care and treatment in hip surgery.
- The service should work to improve its
- The trust should work to improve cancellations rates.
- The trust should improve its timeliness in answering complaints.
- The trust should ensure theatre staff adhere to infection control policies and procedures and wear the appropriate coving to scrubs when leaving the department.
- The trust should ensure they continue to work towards meeting national standards such as re-admission rates for elective and non-elective urology and colorectal patients.
- The trust should ensure they continue to reduce the length of stay for all elective and non- elective patients.

Maternity Core Service

- The trust should review the maintenance contract for the Horton General hospital maternity led unit and ensure the environment and equipment meets agreed standards.
- The trust should ensure medicines are stored securely and at the correct temperatures.
- The trust should ensure maternity service guidelines are reviewed against current best practice or national guidance.
- The service should investigate complaints within in the time frames detailed in its own complaints policy.

Gynaecology Core Service

- The trust should ensure medical and nursing staff comply with all mandatory training targets.
- The trust should ensure patient records are securely stored at all times.

Summary of findings

- The trust should ensure temperature checks are completed of medicine storage rooms to ensure they remain suitable for use and liquid medicines, when used, are dated with clear expiry dates noted.

Is this organisation well-led?

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

Our rating of well-led at the trust went down. We rated well-led as requires improvement because:

- In general managers had the right skills and abilities to run a service providing high-quality sustainable care. At executive level it was acknowledged there were some key areas where the team lacked the expertise required. There was a focus on the development of future leaders, however there was no formal board development plan.
- The trust had a vision for what it wanted to achieve and workable plans to turn it into action developed with involvement from staff, patients, and key groups representing the local community.
- The trust used a systematic approach to continually improve the quality of its services and safeguarding high standards of care by creating an environment in which excellence in clinical care would flourish. However, the effectiveness of the board was not being assessed and with a lack of a standardised agenda for governance meetings across the trust the effectiveness of these was difficult to assess.
- Managers across the trust did not always promote a positive culture that supported and valued staff, creating a sense of common purpose based on shared values. Staff development was not always given sufficient priority as appraisals were not always seen as a priority. Equality and diversity were not consistently promoted and the causes of workforce inequality were not being adequately addressed. Staff, including those with particular protected characteristics under the Equality Act, did not always feel they were treated equitably.
- The trust had systems for identifying risks, planning to eliminate or reduce them, and coping with both the expected and unexpected. However, these were not always effective, as we identified areas where poor practices which were presenting a risk, had not been recognised as such.
- The trust collected, analysed, managed and used information to support all its activities, using secure electronic systems with security safeguards. The triangulation and analysis of information needed to be strengthened.
- The trust engaged well with patients, staff, the public and local organisations to plan and manage appropriate services and collaborated with partner organisations effectively.
- The trust was committed to improving services by learning from when things went well and when they went wrong, promoting training, research and innovation.

Use of resources

Please see the separate use of resources report for details of the assessment and the combined rating. The report is published on our website at www.cqc.org.uk/provider/RHT/Reports.

Ratings tables

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

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

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

Ratings for the whole trust

Safe	Effective	Caring	Responsive	Well-led	Overall
Requires improvement ↓ Jun	Good →← Jun 2019	Good →← Jun 2019	Good →← Jun 2019	Requires improvement ↓ Jun 2019	Requires improvement ↓ Jun 2019

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

Rating for acute services/acute trust

	Safe	Effective	Caring	Responsive	Well-led	Overall
John Radcliffe Hospital	Requires improvement ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Requires improvement ↔ Jun 2019	Requires improvement ↓ Jun 2019	Requires improvement ↔ Jun 2019
Churchill Hospital	Requires improvement ↓ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019
Nuffield Orthopaedic Hospital	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019
Horton General Hospital	Requires improvement ↓ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019
Overall trust	Requires improvement ↓ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019

Ratings for the trust are from combining ratings for hospitals. Our decisions on overall ratings take into account the relative size of services. We use our professional judgement to reach fair and balanced ratings.

Ratings for Horton General Hospital

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and emergency services	Requires improvement ↓ Jun	Good Jun	Good ↔ Jun	Requires improvement ↓ Jun	Requires improvement ↓ Jun	Requires improvement ↓ Jun
Medical care (including older people's care)	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019
Surgery	Good Jun 2019	Good Jun 2019	Good Jun	Good Jun	Good Jun	Jun
Critical care	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014
Maternity	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014
Services for children and young people	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014
End of life care	Good May 2014	Good May 2014	Good May 2014	May 2014	Good May 2014	May 2014
Outpatients	Good May 2014	N/A	Good May 2014	Good May 2014	Good May 2014	Good May 2014
Overall*	Requires improvement ↓ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019

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

Ratings for John Radcliffe Hospital

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and emergency services	Requires improvement ↔ Jun 2019	Requires improvement ↔ Jun 2019	Good ↔ Jun 2019	Requires improvement ↔ Jun 2019	Requires improvement ↔ Jun 2019	Requires improvement ↔ Jun 2019
Medical care (including older people's care)	Requires improvement ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019
Surgery	Requires improvement ↓ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Requires improvement ↓ Jun 2019	Requires improvement ↓ Jun 2019
Critical care	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014
Maternity	Requires improvement ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019
Gynaecology	Requires improvement Jun 2019	Good Jun 2019	Good Jun 2019	Requires improvement Jun 2019	Requires improvement Jun 2019	Requires improvement Jun 2019
Services for children and young people	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014
End of life care	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014
Outpatients	Good May 2014	N/A	Good May 2014	Requires improvement May 2014	Good May 2014	Good May 2014
Diagnostic imaging						
Overall*	Requires improvement ↔ May 2019	Good ↔ May 2019	Good ↔ May 2019	Requires improvement ↔ May 2019	Requires improvement ↓ May 2019	Requires improvement ↔ May 2019

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

Ratings for Churchill Hospital

	Safe	Effective	Caring	Responsive	Well-led	Overall
Medical care (including older people's care)	Requires improvement May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014
Surgery	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019
Critical care	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014
Gynaecology	Requires improvement Jun 2019	Good Jun 2019	Good Jun 2019	Requires improvement Jun 2019	Requires improvement Jun 2019	Requires improvement Jun 2019
End of life care	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014
Outpatients	Good May 2014	N/A	Good May 2014	Good May 2014	Good May 2014	Good May 2014
Overall*	Requires improvement ↓ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019

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

Ratings for Nuffield Orthopaedic Centre

	Safe	Effective	Caring	Responsive	Well-led	Overall
Medical care (including older people's care)	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019	Good ↔ Jun 2019
Surgery	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014
Outpatients	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014	Good May 2014
Diagnostic imaging						
Overall*	Good Jun 2019	Good Jun 2019	Good Jun 2019	Good Jun 2019	Good Jun 2019	Good Jun 2019

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