Lancashire Teaching Hospitals NHS
NHS Foundation Trust

STAR Quality Assurance Framework

STAR Accreditation Visit Report

Date:	31st July 2026	**Specialty:**	Workforce
Area:	Lancashire Clinical Research Facility (10th Visit)	**Director of Continuous Improvement, Research & Innovation:** **Deputy Director of Research & Innovation:**	Alisa Bortherton Paul Brown
Ward / Department Manager:	Jacqueline Bramley	**Matron / Professional Lead:**	Mark Verlander

Visit Team:	**Job Role / Designation**	**Star Assessment Element**
Lucy Bully	Quality Assurance Facilitator	Environment, Documentation and Patient Feedback
Charlotte Connell	Quality Assurance Facilitator	Staff Feedback and 15 Steps

Feedback Attendees:	
Paul Brown	Deputy Director of Research & Innovation -Continuous Improvement Team
Mark Verlander	Matron

Report Written by	Lucy Bully – Quality Assurance Facilitator
Report Issued on	31.07.2026
Serious Incident/Concerns	None Identified
Critical Standards	Achieved
Re-visit due:	Within 6 Months

Visit Scoring

Red	**An overall score of less than 80%**	**Inadequate**
Amber	**An overall score of between 80% to 89%**	**Requires improvement**

Green	**An overall score of 90% to 100%**	**Good 105/105=100%**

Visit Score

						STAR critical standards achieved (Achieved/Not achieved = red/green)					
Date of Visit	**Score (% plus, RAG)**	Documentation	Environment	Staff	Patient	Essentials of Care	Risk Assessments	IPC	STAR actions	Mandatory Training	15 Steps
31.07.26	100%	100%	100%	100%	100%	Achieved	Not Applicable	Achieved	Achieved	Achieved	A
19.11.25	100%	100%	100%	100%	100%	Achieved	Not Applicable	Achieved	Achieved	Achieved	A

Visit Scores (including all previous visits)

Date of visit	Score (% plus, RAG)	Documentation	Environment	Staff	Patient	15 Steps
29.05.25	97%	100%	97%	94%	100%	A
16.10.24	99%	100%	98%	100%	100%	A
23.02.24	97%	88%	96%	100%	100%	A
17.05.23	94%	93%	98%	92%	90%	A
25.08.22	92%	86%	91%	98%	83%	A
24.03.21	97%	79%	98%	100%	100%	A
24.08.20	95%	93%	93%	9 6%	100%	A
15.11.19	100%	100%	100%	100%	100%	A

Are Action plans from previous visits completed?

Number Completed	Number not completed	Number in progress
100%	100%	100%

Data and Reporting

All reported Datix Incidents for previous six months: Themes and trends:6 recorded

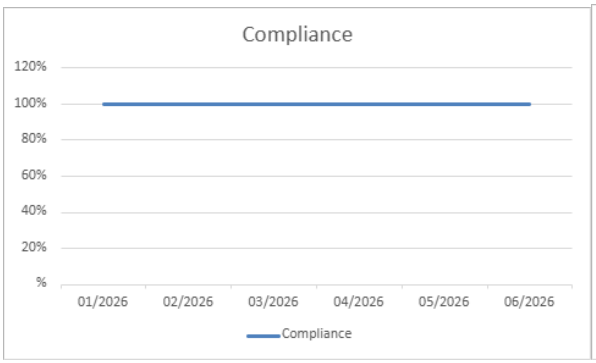
- Confidentiality Breach
- Supply
- Medical Devices/Equipment - Delivered incorrectly
- Failure/Incomplete/Insufficient monitoring of a patient
- Administration Error

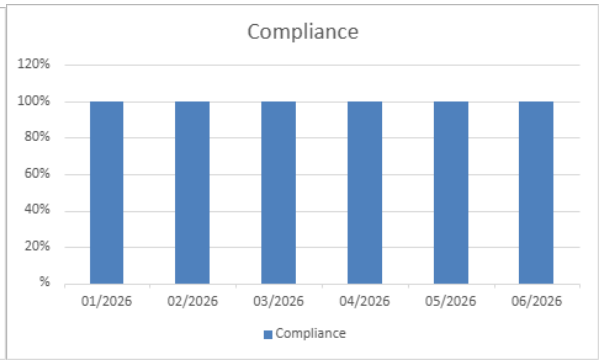
Risk Register: 0

Formal Complaints and concerns in the previous six months: 0

Safeguarding incidents in previous six months: Unable to obtain data

STAR Monthly audit results for previous six months:





Ward Audit Compliance:

Audit overview

Audit	Frequency	Compliance over last 6 periods						Current	Improvement	Overdue actions
Commode Audit	M	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%			
Hand Hygiene	M	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%			0
Mattress Audit	M	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%			0
Adult Outpatient STAR Monthly Review	M	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%			0

Well-Led Question Results:

Well Led Questions results	10/10=100%

Patient Relative Question Results:

Patient Relative questions results	1/1=100%

Friends and Family Test Feedback in previous 6 months:

FFT Response	Comment
	No data found

Areas of good practice:

- Excellent patient feedback- Patients and relatives spoke very highly of the service, staff and the facilities (See comments below). Patients were also very complimentary about the free car parking and meal vouchers offered to them
- Well Led – All staff were very complimentary about their senior managers. They feel very supported and well informed. Matron implemented daily team dinner breaks where all staff stop work and take their half an hour break- staff feel this has improved team moral and enhances a health team culture.
- Excellent evidence of daily checks including temperatures and cleaning
- Information displays – excellent eye-catching displays including – 'you said we did', Single improvement plan, staff survey and student board
- Use of Reasonable adjustment – for patient with a speech impairment
- Facilities including- car parking, refreshments and an overnight room with TV and bathroom
- Wall mounted activities for children
- Staff were very knowledgeable, welcoming and helpful

Areas of concerns

Critical Standards:

Achieved

Immediate Risks:

None Identified

Serious Concerns:

None Identified

Concerns:

None Identified

15 Steps rating: A

(Attached to the email)

Areas for improvement outside the ward/department control:

Limited storage available within the department

Patient Experience/Feedback:

'Absolutely excellent, the facilities are great, including the carparking. The staff are very accommodating with any requests, and they always go above and beyond. I always have very good chats; I am given all the information I need with lots of time to ask what ever questions I need. The doctor (David) is great. I have been here so many times now and I honestly couldn't criticise one thing. The staff are like family to me. If my wife is unable to bring me, they get me a Taxi and if my wife hasn't made me lunch the staff give me a voucher for a meal in the canteen.'

'Everything is excellent. The staff are excellent. It has all been 100% every time'

Relative feedback

‘Fantastic, couldn't ask for more’.

Any other supporting evidence:

Date revisited	Incidents/Concerns	Resolution/Evidence

Please access AMaT for full details of your visit, each element scores and comments.

This should be referred to when developing any improvement plans and these should be completed within two weeks.

Thank you.