

# Nuffield Health NHS Quality Account Prescribed Information 2018/19

### **NHS Quality Account Prescribed Information 2018/19**

#### **Chief Quality and Assurance Officer Statement**



Our aspiration is to be the best, the safest, most effective health and wellbeing provider there is – an organisation where our patients, customers and partners have a truly exceptional experience and feel confident in recommending us to family and friends.

As an independent healthcare provider, our aim is to deliver the highest levels of patient safety, care and service. To do this, we believe our people must be the most highly skilled professionals; our processes and procedures must meet or exceed healthcare sector standards; and our equipment should be leading edge. Quality is at the heart of everything we do, so even in areas such as data protection and information security we aim to maintain the highest standards to ensure patient trust.

Our Quality Assurance Framework supports the planning, delivery, monitoring and continuous improvement of all the care and support we provide. As a charity, we always put Quality, safety and patient care above financial performance, and everything we do is evaluated against the following factors:

- Safety meeting the highest possible standards by avoiding harm, upholding professional standards and acting responsibly
- Effectiveness providing evidence-based health and wellbeing expertise and services that lead to excellent outcomes
- Experience being a trusted partner to our patients and customers by giving them a positive, reassuring and personalised experience

External groups monitor the Quality and safety of the care we provide. In England, the Care Quality Commission (CQC) regulates our hospitals and clinics; in Scotland and Wales, our regulators are Health Improvement Scotland (HIS) and Health Inspectorate Wales (HIW) and we are pleased to report that 94% of our hospitals have been rated 'good' or 'outstanding' by national regulators (Please see page 103 of the Nuffield Health Annual Report 2018 for further details).

The Quality of care and safety of our patients is fundamental to everything we do, and we are always looking for opportunities to enhance and improve. Our Improvement Plan for 2019 can be read on page 27 of the Nuffield Health Annual Report 2018.

In 2018/19, Nuffield Health carried out 49,000 procedures (to the nearest thousand) for NHS funded patients. This represented 22.9% of all relevant activity.

This is the fourth year that Nuffield Health has presented NHS core Quality account indicators in the specific format required by the NHS. The information provided below is the format prescribed by NHS England for 2018/19 for the indicators that are most relevant to the services provided by Nuffield Health's hospitals.

The main body of the Nuffield Health Quality Account provides the statements on Quality improvement, accuracy and assurance that apply to all our products and services and shows data and information over the reporting period.

This document should be viewed in line with the Nuffield Health Annual Report 2018. For additional information, please visit the Nuffield Heath website: www.nuffieldhealth.com

Quite.

Caroline Smith

CHIEF QUALITY AND ASSURANCE OFFICER

The data made available to the provider with regard to:

- (a) The value and banding of the Summary Hospital-level Mortality Indicator (SHMI) for the trust for the reporting period; and
- (b) The percentage of patient deaths with palliative care coded at either diagnosis or specialty level for the trust for the reporting period.

#### **Nuffield Health Statement**

Nuffield Health is an independent health provider and is currently not eligible to submit to the NHS' SHMI. All deaths (either in-patient or within 30 days of discharge (where known) are reported to the Care Quality Commission (CQC) and therefore the number reported below will include patients who have died in NHS Trusts and will be recorded in those SHMI results:

• One NHS patient unexpectedly died during the reporting period (a rate of 0.003%) Following local and independent review, no significant findings were identified.

Nuffield Health considers that this data is as described for the following reasons; people are treated / cared for in a safe environment and protected from avoidable harm.

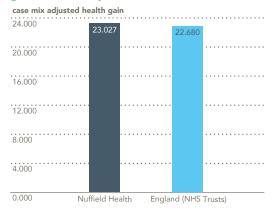
Nuffield Health strives to continually improve the safety, effectiveness and Quality of its services year on year. All unexpected deaths are investigated and independently reviewed by our Learning from Deaths Committee utilising the Royal College of Physicians' Structured Judgment Review framework. Comprehensive investigation and thematic review enables us to identify key learnings that can be used to reduce the risk of future incidence by improving patient safety and enhancing the Quality of care delivery.

In 2019, Nuffield Health intends on taking the following action as part of its Quality improvement plan which aims to improve the safety and Quality of its clinical services:

- improving the safety and Quality of our cancer services
- continued focus on theatre safety, robust pre-operative assessment, VTE prevention and medicines management (in line with national guidance)
- increasing the competence of our clinical teams through training and simulation to enhance clinical reasoning and technical skills e.g. recognition of the deteriorating patient
- developing evidence-based care pathways that facilitate the delivery of clinical excellence e.g. Cataract care pathway
- enhancing our incident management processes with continued focus on high-Quality incident reporting, investigation and learning
- + See pages 22 and 104 of Nuffield Health Annual Report for further detail

The data made available with regard to the provider's patient reported outcome measures core, during the reporting period, for (i) hip replacement surgery.

# PROMs – Hip replacement adjusted health gain (Oxford Hip score)



#### **Nuffield Health statement**

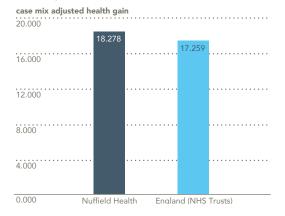
Nuffield Health's Patient Reported Outcome Measures (PROMs) for NHS patients undergoing primary hip replacement surgery showed two of our hospitals (Brentwood and Oxford) in the national top 10. This scores 0.347 higher than the England average and 0.530 higher than the NHS average.

Nuffield Health considers that this data is as described for the following reasons; our positive performance is a result of continued investment into PROMSs and sustained Quality improvement in our hospitals. Consequentially, people are helped to recover from episodes of ill health or following injury.

Patient outcomes are a fundamental part of our organisational strategy and Nuffield Health aims to continually invest in this area for the future benefit of our patients.

The data made available with regard to the provider's patient reported outcome measures core, during the reporting period, for (ii) knee replacement surgery.

# PROMs – Knee replacement adjusted health gain (Oxford Knee score)



Nuffield Health's Patient Reported Outcome Measures (PROMs) for NHS patients undergoing primary knee replacement surgery showed three Nuffield hospitals (Shrewsbury, Cambridge and Tees) in the national top 10. This scores 1.019 higher that the England average and 1.153 higher than the NHS average.

Nuffield Health considers that this data is as described for the following reasons; our positive performance is a result of continued investment into PROMSs and sustained Quality improvement in our hospitals. Consequentially, people are helped to recover from episodes of ill health or following injury.

Patient outcomes are a fundamental part of our organisational strategy and Nuffield Health aims to continually invest in this area for the future benefit of our patients.

The data made available to the provider with regard to the percentage of patients readmitted to a hospital which forms part of the provider within 28 days of being discharged from a hospital which forms part of the provider, during the reporting period, for patients aged:

- (i) 0 to 15 years; and
- (ii) 16 years or over

#### **Nuffield Health statement**

The percentage of NHS patients readmitted to a Nuffield Health hospital within 28 days of being discharged from a Nuffield Health hospital for the reporting period was:

- 0 to 15 years: not applicable
- 16 years or over: **0.08%** (a decrease from 0.13% in 2017/18)

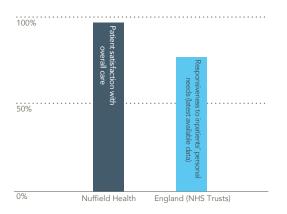
Nuffield Health considers that this data is as described for the following reasons; the readmission rate to a Nuffield Health hospital (within 28 days) is very low because people are effectively optimised and helped to recover from episodes of ill-health or following injury.

Nuffield Health intends to take the following action to continually improve its readmission rate, and so the Quality of services, through:

- continued focus on patient optimisation and enhancement of existing pre-assessment services via process standardisation, staff education and skills training, and service development (in line with evidence-based guidelines).
- enhancing our perioperative pathways, ensuring that these are evidence-based and informed by best-practice standards and quidelines.
- continued focus on the early recognition of deteriorating patients through the NEWS2 algorithm, staff education and simulation and the use of evidence-informed discharge protocols that facilitate a safe and effective discharge.
- systematic risk assessment and evaluation, ensuring that in-patient and outpatient pathways and protocols are clinically effective, and the patient journey is seamless
- independent review of readmission episodes, ensuring that the trends and learnings from case and thematic analysis are understood and used to inform patient safety and Quality improvement activity.

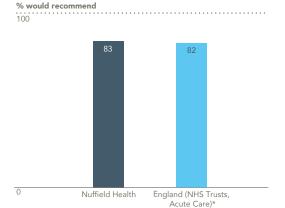
The data made available to the provider with regard to the provider's responsiveness to the personal needs of its patients during the reporting period.

#### Patient satisfaction measures 2018-19



The data made available to the provider with regard to the percentage of staff employed during the reporting period who would recommend the provider as a provider of care to their friends or family.

### Staff friends and family recommendation (2019)



\* Q4 2018-19 data, as reported by NHS England. Source: www.england.nhs. uk/publication/staff-friends-and-family-test-fft-data-quarter-4-2018-19/

#### **Nuffield Health statement**

Nuffield Health's Patient Satisfaction Survey (PSS) is provided to all in-patients (NHS and Private) and measures the responsiveness to the personal needs of our patients. During the reporting period, this score confirmed:

96% satisfaction with overall care

Nuffield Health considers this excellent feedback to be the result of our continued focus on patient experience and is committed towards ensuring that we provide people with a positive experience of care.

Nuffield Health intends to take the following action to maintain this percentage, and so the Quality of its services, by:

- continuing to engage with and listen to patients in a range of ways (digital, patient forums) and continually striving to exceed their expectations.
- focusing on how we respond to concerns and complaints and seeking to identify innovative and more effective ways in which we can share lessons learned from complaints and poor experiences of in-patient care (as defined in the NHS toolkit).

Nuffield Health's 'Your Voice' Survey is an engagement tool that is used to measure staff satisfaction and engagement. This includes a broad range of questions, including: 'How likely are you to recommend our products and services to friends and family?'

 During the reporting period, 83% of our hospital staff responded that they were 'likely' or 'very likely' to recommend our products and services to friends and family.

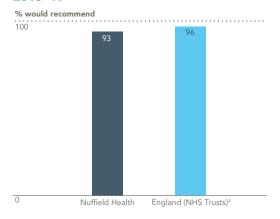
Nuffield Health considers this positive score to be the result of our concerted efforts to engage staff in our purpose and aspiration to build the best health and wellbeing brand. Nuffield Health is committed towards ensuring that people have a positive experience of care; this is acknowledged by our staff and is likely to have contributed towards the overall percentage captured in the survey.

Nuffield Health intends to take the following action to maintain this engagement score, and so the Quality of its services, by;

- continuing to engage with and listen to our patients in a range of ways (digital, patient forums) and continually striving to exceed their expectations.
- focusing on how we respond to concerns and complaints and seeking to identify innovative and more effective ways in which we can share lessons learned from complaints and poor experiences of in-patient care (as defined in the NHS toolkit).
- continuing to engage with our staff, ensuring that they feel connected to our purpose and that they recognise and understand our achievements e.g. Awards and accolades, Inspection data.

Friends and Family Test – Patient: The data made available to the provider for all acute providers of adult NHS funded care, covering services for inpatients and patients discharged from Accident and Emergency (types 1 and 2)<sup>2</sup>

### Patients' friends and family test outcomes 2018–19



- $^{\rm 2}\,$  Accident and Emergency discharges are not applicable
- <sup>3</sup> 3 April 2019 Inpatient score (response rate 24%) as reported by NHS England. Source: www.england.nhs.uk/publication/friends-and-family-testdata-april-2019/

#### **Nuffield Health statement**

Nuffield Health has a specific patient Friends and Family Test (FFT) that is consistent with the questions asked of all NHS patients. At the end of the reporting period:

• 93% of our in-patients would recommend us to their friends and family.

Nuffield Health considers that this data is as described for the following reasons; Nuffield Health strives to ensure that people have a positive experience of care; friends and family recommendations (and a willingness to recommend) are suggestive of a positive experience.

Nuffield Health intends to take the following action to improve this score, and so the Quality of its services, by:

- continued focus upon patient experience and the embedding of our service standards
- enhancing the capability of our leaders, ensuring that they
  embed our WE CARE values in our hospitals, which strive to
  ensure that we put patients, customers and colleagues at the
  heart of everything that we do
- continued focus upon Quality improvement activity that contributes towards patient experience and the delivery of seamless clinical care

The data made available to the provider with regard to the percentage of patients who were admitted to hospital and who were risk assessed for Venous Thromboembolism (VTE) during the reporting period.

#### **Nuffield Health statement**

 100% of our patients admitted to hospital received a VTE risk assessment during the reporting period.

Nuffield Health considers that this data is as described for the following reasons; Nuffield Health is committed towards treating and caring for people in a safe environment and protecting them from avoidable harm.

Nuffield Health has undertaken a significant amount of Quality improvement activity during the reporting period, with the aim of enhancing the clinical effectiveness of care that is delivered across our hospitals. This has included the:

- development and implementation of a new VTE Assessment & Risk Reduction Policy which reflects the evidence-base and latest best-practice guidance.
- development and deployment of a revised VTE risk assessment tool and accompanying learning resources (e-learn, competency toolkit) that are designed to improve understanding and facilitate embedding at practice level.

Nuffield Health intends to continue with its VTE Quality improvement initiatives and take the following action to maintain the percentage aforementioned, and so the Quality of its services, by:

- continuing to focus upon embedding of both the policy and the risk assessment tool
- auditing policy compliance (this will contain a patient feedback component that can be used to determine the effectiveness of the VTE education our patients have received as part of their care)
- continuing to monitor and analyse all VTE events and identify any further opportunities for care delivery improvement.

The data made available to the provider with regard to the rate per 100,000 bed days of cases of C difficile infection reported within the provider among patients aged 2 years or over during the reporting period.

Nuffield Health's rate of cases of C difficile infection is:

• 0.0 per 100,000 bed days.

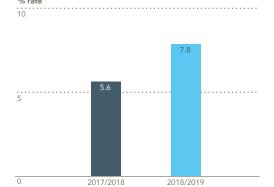
Nuffield Health considers that this data is as described for the following reasons; Nuffield Health treats and cares for people in a safe environment and protects them from avoidable harm by having clearly defined infection control policies and procedures, high standards of infection prevention and control training and continued investment in our hospital facilities.

Nuffield Health intends to take the following actions to maintain this rate, and so the Quality of its services, by:

 continuing to seek opportunities to enhance our existing high standards of Infection Prevention (IP) through staff training and education, clinical effectiveness activity e.g. audit, and engagement in IP initiatives that facilitate improvements in care delivery and management.

The data made available to the provider with regard to the number and, where available, rate of patient safety incidents reported within the provider during the reporting period, and the number and percentage of such patient safety incidents that resulted in severe harm or death.

#### Percentage of patient safety incidents



#### **Nuffield Health statement**

Nuffield Health had the following patient safety incidents relating to NHS patients during the reporting period:

- number of total patient safety incidents (including those that resulted in severe harm, moderate harm, low harm and/or death): 3817
- rate (percentage of episodes): 7.8%
- number resulting in severe harm/death: 35
- rate (percentage severe harm/death): 0.07%

Nuffield Health considers that this data is as described for the following reasons; people are treated and cared for in a safe environment and protected from avoidable harm.

Nuffield Health strives to build a just safety culture that is grounded in openness, transparency and accountability. Although our incident rate continues to remain low, our incident count and percentage of episodes have increased from the previous reporting period. This is deemed a result of a concerted effort to build a reporting culture in which incidents of all severities are reported, investigated and utilised as opportunities for learning and preventative action. Nuffield Health continues to prioritise patient safety and intends to take the following actions to improve this rate and so the Quality of its services, by:

- continuing to utilise robust internal assurance mechanisms that facilitate the delivery of safe and clinically effective care e.g. Audit, Benchmarking, Quality Assurance Reviews (QARs), 'Share & Learn' events.
- continuing to drive an open and transparent reporting culture where all incidents (incl. near-misses) are accurately reported, and systematically investigated with key learnings captured and cascaded.
- acting with integrity, being open and honest when things do go wrong.
- continuing to develop and refine our reporting infrastructure, incident management system (Datix) and reporting processes.
- embedding initiatives that have been launched in 2018 e.g.
  'Be Bold, Be Brave & Speak Out', 'Freedom to Speak Up',
  'Safecall', which aim to empower our staff to speak out
  should they have concerns over patient safety and / or the
  delivery of Quality care.

Details of ways in which the provider's staff can speak up (including how feedback is given to those who speak up) and how they ensure staff do not suffer detriment.

#### **Nuffield Health statement**

Nuffield Health is committed to creating an open and honest environment, where our people feel free to speak up and voice any concerns that they may have. As a values-led organisation, we always investigate and address unethical practices or behaviours in a rigorous and timely manner.

In 2018, we implemented a 'speak out' framework in which employees can raise concerns via several different channels:

- employees can raise concerns internally to their direct leader or direct leader's leader (if this is more appropriate); any issues or concerns can be raised informally, or formally in line with Nuffield Health's Grievance Policy and Process.
- employees can freely contact our organisational Freedom to Speak Up Guardian whose role is to champion a speak up culture of openness and support and advocate on behalf of our employees.
- employees are also able to raise any concerns that they may have through the use of 'Safecall', our external, independent, secure contact service, should they feel unable to highlight them with their direct leader.

These processes are further detailed in our Whistleblowing Policy and Process.

Nuffield Health understands the importance of appropriate feedback to our employees when issues are raised. All individuals will be provided with an outcome report, whether they raised their concerns via Safecall or our grievance process if concerns are raised formally. If concerns are raised anonymously via Safecall and where appropriate to do so, we will attempt to provide feedback via Safecall.

Our grievance policy confirms that where concerns or complaints are identified they will be dealt with promptly, fairly and consistently and that no individual will be disadvantaged for raising a grievance. All managers are expected to follow this policy and we have an Employee Relations team in place to provide support to grievance managers on the application of the grievance policy and process. Should a team member feel they have suffered detriment for speaking up, they should raise this with the grievance manager and their concerns would be investigated by an impartial manager.

Patient safety is paramount in all areas of clinical practice. With patients especially vulnerable during surgery, we have made a concerted effort in 2018 to enhance our perioperative safety processes and build a culture where all staff, irrespective of grade, are empowered to 'Be Bold, Be Brave & Speak Out'.

The messages promoted in the Nuffield Health speak up campaign have been further embedded in a training solution that encourages openness and transparency. It reiterates the need for the standardised use of evidence-based processes, such as the World Health Organisation (WHO) safety checklist, which is considered the gold standard in operating theatre safety.

#### **Nuffield Health statement**

Nuffield Health continues to prioritise patient safety and intends to take the following actions to further embed a speak up culture by:

- seeking opportunities to enhance our current processes and identify new and innovative ways in which staff can be empowered to speak up and voice any concerns
- continuing to foster and embed a culture of openness and transparency in which staff can truly advocate
- ensuring that those who do speak up are supported and that they receive timely feedback

#### **National and Local Audit**

The reports of three national clinical audits and 2052 local clinical audits were reviewed by the provider in 2018–19 and Nuffield Health intends to take the following actions to improve the Quality of healthcare provided:

- Develop a more consistent approach towards patient involvement and the provision of individualised care that is informed by Equality & Diversity best-practice.
- Ensure that documentation pertaining to incident management (as recorded on Datix) is recorded more consistently and comprehensively e.g. uploading of supporting documents and closure of action plans.
- Develop clearer and more robust out-of-hours arrangements and testing of safety practices e.g. simulation, ensuring that these are fully reflective of a wide range of scenarios.
- Enhance consultant governance arrangements and continue to facilitate a more consistent approach towards the management, review and renewal of practising privileges.
- Refine data protection practices in line with GDPR requirements e.g. password protection and encryption.
- Introduce a more consistent governance framework that standardises hospital committee arrangements using standardised template agendas and reporting documentation.
- Implement training and performance plans following audit of clinical records and identification of weaknesses in record keeping and documentation.
- Improve IT infrastructure following persistent issues with the completion and upload of the Physiotherapy Patient Registration Record (identified by GDPR audit).
- Deploy local action plans in sites where audit has demonstrated weaknesses in the utilisation of the WHO Checklist. These focus on systematic, attentive and consistent use of the checklist (in line with policy and evidence-based guidelines).



### Contact and registered office details

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All our hospitals in England, and those clinics delivering regulated activities, are registered with the Care Quality Commission. Our hospital in Glasgow is registered with Healthcare Improvement Scotland and our hospital and clinic in Cardiff are registered with Healthcare Inspectorate Wales.