



Woodlands
Hospital

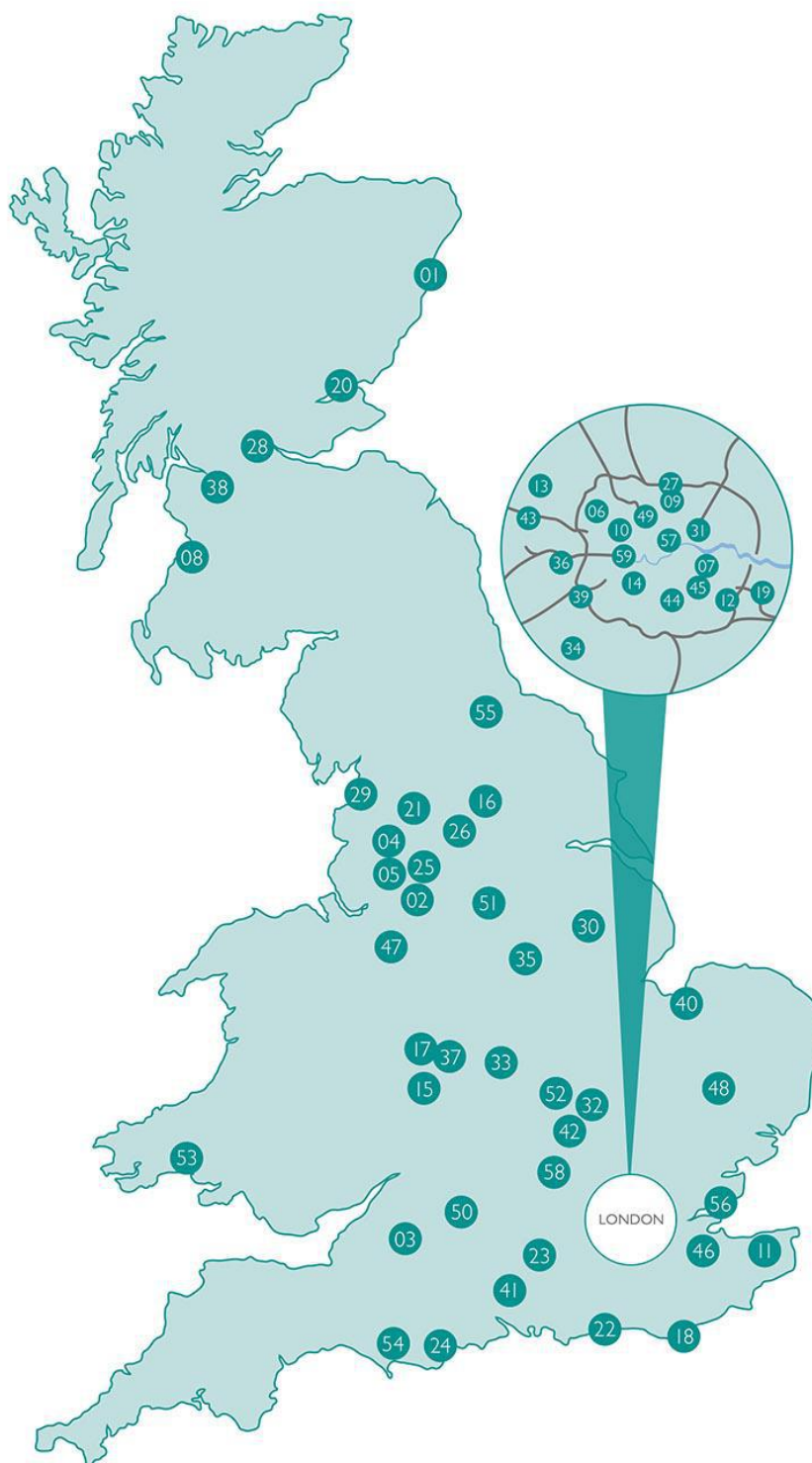
QUALITY ACCOUNTS 2018

Contents

Our network of hospitals	3
Group Chief Executive’s Statement.....	4
Hospital Information.....	6
Safety.....	9
Patient Led Assessment of the Care Environment (PLACE)	11
Duty of Candour.....	12
Venous Thrombo-embolism (VTE)	13
Patient Reported Outcome Measures (PROMS).....	14
Learnings from Deaths	16
Patient Experience.....	17
Patient Satisfaction	17
Complaints.....	21
CQUINS	22
Safeguarding.....	22
National Clinical Audits.....	22
Priorities for Service Development and Improvement.....	24
Safety Thermometer	24
Staff Survey & Staff Safety Culture Questionnaire.....	24
Staff Recommendation Results	25
Quality Indicators	26
Patient Recommendation Results	28

Our network of hospitals

BMI Healthcare is the largest private hospital group in the UK, offering a broad range of services to patients funded by PMI, the NHS and through self-funding. BMI Healthcare offers services through 59 sites, which include acute hospitals, day case only facilities and outpatient clinics.



Group Chief Executive's Statement



The BMI Healthcare Quality Account for 2018 is a measure of the quality of the care provided at our 59 hospitals and clinics across the UK.

When I joined BMI Healthcare in October 2017, I asked all our hospitals and corporate teams to align around a shared objective of improving quality of patient care. Our regulators – the Care Quality Commission in England, Health Improvement Scotland and Healthcare Inspectorate Wales – inspect our hospitals and provide us with valuable feedback and I am pleased to report a constructive relationship with each of our regulators.

Together, we have been working to both celebrate and share good practice and also to focus on areas where we needed to improve. All our hospitals are working through individual action plans designed to improve patient care, and our hospital and corporate teams are increasingly aligned and supporting each other around this common purpose. As a consequence, I have confidence that we will continue to improve our regulatory rankings.

Over the course of the year, we have invested in our hospitals to meet the standards required by our regulators, and that our patients expect us to achieve.

We have enhanced the clinical support for our hospital teams, with the appointment of a full-time Group Medical Director and by reinstating the role of Regional Director of Clinical Services. These important appointments are crucial if we are to achieve our clinical objectives, with all staff and all Consultants working to the same level of compliance and quality right across our hospital network.

The safety of our patients remains paramount. We have participated in the Surgical Site Infection Surveillance Service coordinated by Public Health England and Health Protection Scotland and have seen a year on year improvement since we started taking part in 2015. We were the first private hospital group to sign up to the Safer Surgery Commitment and recognise the importance of adherence to the World Health Organisation's checklist for safe surgery.

Our cancer centres are achieving Macmillan Quality Environment Marks for the high standard of the environment within which people are treated. Similarly we have a number of hospitals which have achieved Joint Advisory Group (JAG) accreditation for their endoscopy services. Our other endoscopy units are also making progress towards the same goal.

Digital technology increasingly gives us the opportunity to improve how we handle information in order to improve patient care. We already use e-prescribing across our cancer centres, enabling all health professionals in contact with a particular patient to access the same tumour protocols and see the same up-to-date patient information to better inform prescribing decisions and minimise risk. We are moving towards a new system of electronic patient records that will give the same high level of assurance for all patients choosing BMI for their healthcare.

From a corporate and governance point of view, we have rationalised and refocused our committees at both a business and a hospital level, giving each clear areas of responsibility and providing a line of sight between head office and hospital. We continue to adopt an integrated audit approach, so that we can maintain a holistic overview of how hospitals and teams are performing against agreed standards and procedures.

Ultimately, we are here for our patients; their feedback is important both for reassurance that we are working in line with their expectations and to help highlight areas where we need to pay closer attention. Each year we ask our patients if they would recommend us to their friends and family – in 2017, 98.5% of those asked agreed that they would.

The information in this Quality Account has been reviewed by our Governance Committee and I am reassured that this information is accurate.

The data and graphs provide us with an indication of performance, but they only start to tell the story of our committed and dedicated staff. Their experience and expertise has led to positive outcomes and, in many cases, life-changing procedures for so many of our patients.

To our hospital and corporate teams, I would like to say thank you.

A handwritten signature in black ink that reads "Karen." with a period at the end. The signature is written in a cursive, slightly slanted style.

Dr Karen Prins

Hospital Information



BMI Woodlands Hospital is set within a 5.25 acre site at Morton Park, Darlington. The hospital operates 37 beds comprising of 22 en-suite private rooms, a five bedded area and a six bedded area which have been modelled to provide ambulatory care and a bedded close observation area.

Our patient accommodation has been designed to be spacious, comfortable and bright; ensuring the patients' stay with us is as restful as possible. As part of the rolling refurbishment programme the flooring in all the patients' rooms and bathrooms on the ward have been upgraded to Forbo external wood (warm oak) in line with the BMI specification.

Each private en-suite room is fitted with a remote controlled flat screen television, a telephone and a nurse call system. The 5 and 6 bed wards each have a shared TV and individual nurse call system and shared bathroom facilities. The wards areas have been assessed by the Commissioners as compliant with the requirements to eliminate mixed sex accommodation and accommodation for the ambulatory care unit.

Throughout the patient areas there is free Wi-Fi installed for patient and visitor use also there is free parking available at the hospital.

The hospital has a wide bore fixed MRI scanner which can accommodate patients who have claustrophobia or have a high body mass index (BMI). We offer a mobile CT scanning service, have a fully equipped gymnasium and an endoscopy/ ambulatory care theatre in addition to two laminar flow theatres.

We offer an extensive range of inpatient/day case/short stay and outpatient services, supported by over 150 experienced consultants. We provide the very highest standards of modern medical care.

The hospital sees a mix of private and NHS patients on an outpatient and inpatient or day case basis. From 1 October 2017 – 31st March 2018 the case mix was 27.1% private and 72.9% NHS. There is a 'Standard Acute Contract' with the local Clinical Commissioning Groups (CCGs) and services such as Orthopaedics, Gynaecology, Urology, General Surgery, Ear Nose and Throat (ENT), Ophthalmology and Spinal Surgery all form part of this contract.

BMI Healthcare are registered as a provider with the Care Quality Commission (CQC) under the Health & Social Care Act 2008 as well with the Hospital Improvement Scotland (HIS) and Healthcare Inspectorate Wales (HIW) for our hospitals outside of England. BMI Hospital Name is registered as a location for the following regulated services:-

- Treatment of disease, disorder and injury
- Surgical procedures
- Diagnostic and screening
- Family Planning

These regulatory bodies carry out inspections of our hospitals periodically to ensure a maintained compliance with regulatory standards.

The CQC carried out an unannounced inspection on 22 & 23 February 2016 and rated overall as Good across the 5 key lines of enquiry as outlined below:

<p>Overall Good</p> <p>Read overall summary</p>	Safe	Good ●
	Effective	Good ●
	Caring	Good ●
	Responsive	Good ●
	Well-led	Good ●

BMI Woodlands Hospital has a local framework through which clinical effectiveness, clinical incidents and clinical quality is monitored and analysed. Where appropriate, action is taken to continuously improve the quality of care. This is through the work of a multidisciplinary group and the Medical Advisory Committee.

At a Corporate Level, BMI Healthcare's Clinical Governance Board has an overview and provides the strategic leadership for corporate learning and quality improvement.

There has been ongoing focus on robust reporting of all incidents, near misses and outcomes. Data quality has been improved by ongoing training and database improvements. New reporting modules have increased the speed at which reports are available and the range of fields for analysis. This ensures the availability of information for effective clinical governance with implementation of appropriate actions to prevent recurrences in order to improve quality and safety for patients, visitors and staff.

At present we provide full, standardised information to the NHS, including coding of procedures, diagnoses and co-morbidities and PROMs for NHS patients. There are additional external reporting requirements for CQC/HIS/HIW, Public Health England (Previously HPA) CCGs and Insurers

BMI Healthcare is a founding member of the Private Healthcare Information Network (PHIN) UK – where we produce a data set of all patient episodes approaching HES-equivalency and submit this to PHIN for publication.

This data (once PHIN is fully established and finalised) will be made available to common standards for inclusion in comparative metrics, and is published on the PHIN website <http://www.phin.org.uk>.

This website gives patients information to help them choose or find out more about an independent hospital including the ability to search by location and procedure.

Safety



Infection Prevention and Control

The focus on Infection Prevention and Control continues under the leadership of the Group Head of Infection Prevention and Control, in liaison with the link nurse in BMI Woodlands Hospital.

The focus on Infection Prevention and Control continues under the leadership of the Group Director of Infection Prevention and Control and Group Head of Infection Prevention and Control, in liaison with the Infection Prevention and Control Lead.

Between April 2017 to March 2018, the hospital had:

- 0 MRSA bacteraemia cases per 100,000 bed days
- 0 MSSA bacteraemia cases per 100,000 bed days
- 0 E.coli bacteraemia cases per 100,000 bed days
- 0 cases of hospital apportioned Clostridium difficile in the last 12 months

- SSI data is also submitted to Public Health England for Orthopaedic surgical procedures. Our rates of infection are;

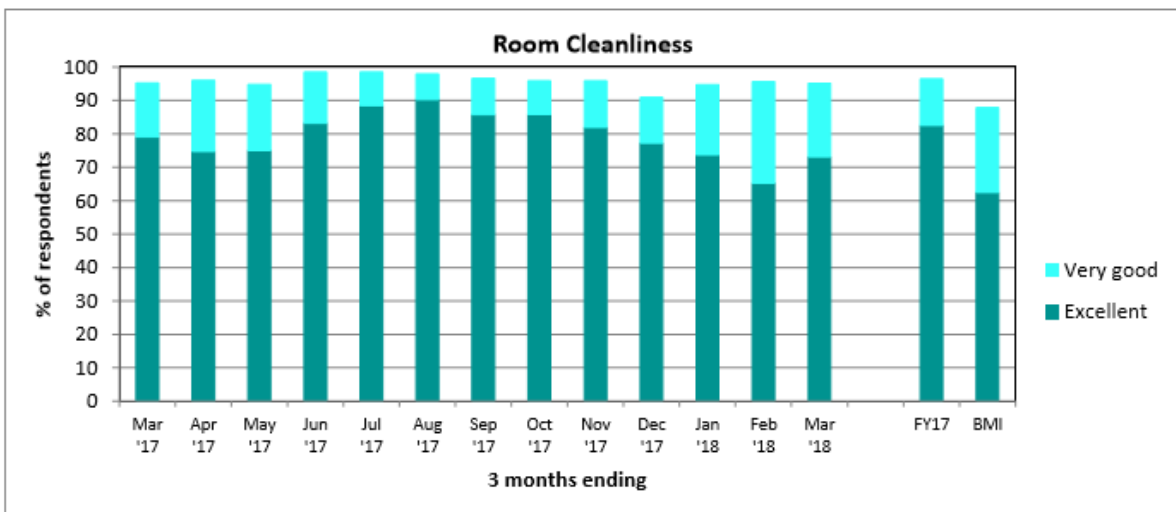
Measure	Rate (per 100 procedures)
Hips	0.00000
Knees	0.00766

A full hospital Infection Control and Prevention Programme is in place at BMI Woodlands Hospital which includes monthly audits of high impact care bundles to identify compliance with infection control processes covering:-

- Surgical Site Infection
- Peripheral Lines
- Central Lines
- Urinary Catheter Care
- Aseptic non-touch technique

Audit reports demonstrate full compliance with the above care bundle pathways on a monthly basis. Hand hygiene audits are also carried out monthly in all areas to reinforce the importance of this in maintaining an infection free environment. Personal toggles with hand gel have also been introduced for clinical staff in effort to further reinforce hand hygiene standards by clinical staff, and the IPC Lead nurse has completed additional training in Aseptic Non-Touch Technique standards.

Environmental cleanliness is also an important factor in infection prevention and control and our patients rate the cleanliness of our facilities highly as demonstrated in the graphs below which are taken from our monthly patient satisfaction returns:





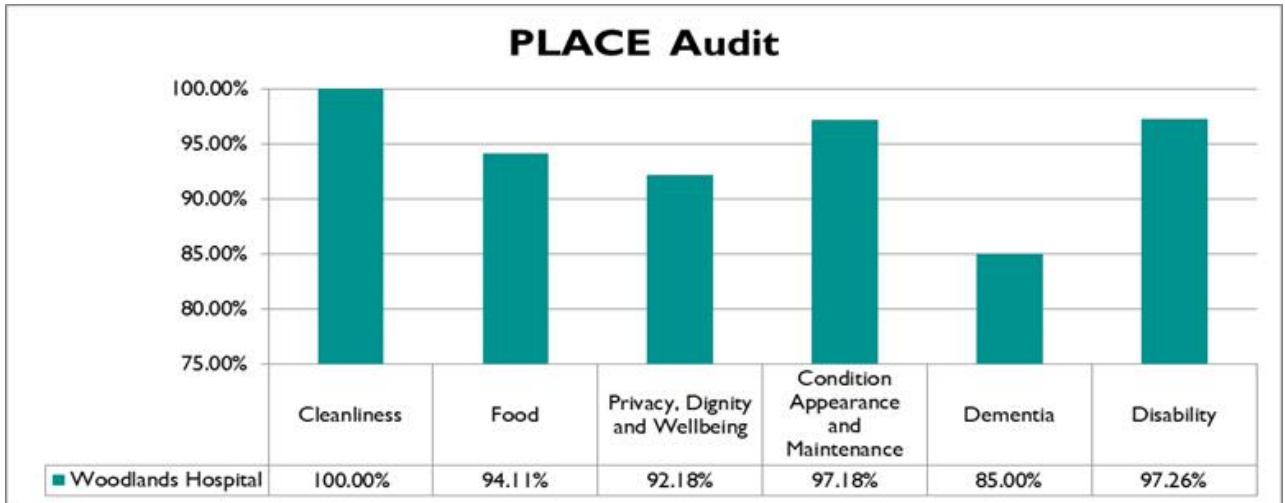
Patient Led Assessment of the Care Environment (PLACE)

At BMI Healthcare, we believe a patient should be cared for with compassion and dignity in a clean, safe environment. Where standards fall short, they should be able to draw it to the attention of managers and hold the service to account. PLACE assessments will provide motivation for improvement by providing a clear message, directly from patients, about how the environment or services might be enhanced.

Since 2013, PLACE has been used for assessing the quality of the patient environment, replacing the old Patient Environment Action Team (PEAT) inspections.

The assessments involve patients and staff who assess the hospital and how the environment supports patient’s privacy and dignity, food, cleanliness and general building maintenance. It focuses entirely on the care environment and does not cover clinical care provision or how well staff are doing their job.

The results will show how hospitals are performing nationally and locally. The results for BMI Woodlands Hospital across the four categories assessed for 2017 are demonstrated on the graph below:-



The results demonstrate that BMI Woodlands Hospital performs consistently higher than the national average in most categories. For dementia friendly surroundings, adjustments have been made this year to two of the hospital rooms to improve facilities for patients with dementia.

Duty of Candour

A culture of Candour is a prerequisite to improving the safety of patients, staff and visitors as well as the quality of Healthcare Systems.

Patients should be well informed about all elements of their care and treatment and all staff have a responsibility to be open and honest. This is even more important when errors happen.

As part of our Duty of Candour we will make sure that if mistakes are made the affected person:

- Will be given an opportunity to discuss what went wrong.
- What can be done to deal with any harm caused
- What will be done to prevent it happening again
- Will receive an apology.

To achieve this, BMI Healthcare has a clear policy - BMI Being Open and Duty of Candour policy.

We are undertaking a targeted training programme for identified members of staff to ensure understanding and implementation in relation to the Duty of Candour.

BMI Woodlands Hospital had three incidents between October 2016 to September 2017 which we formally implemented the Duty of Candour Policy. For each incident we wrote formally to the patient concerned offering them an opportunity to discuss their care and treatment. Some patients took up the opportunity of meeting with us to include the consultant, to discuss what went wrong and what actions have been taken to prevent incidents occurring again.

The three incidents were related to surgical complications during the procedures undertaken or after. One incident involved a surgical complication during a procedure which resulted in further

treatment for which a thorough root cause analysis and an external review was under taken. Following this, processes were put in to place to prevent this from happening again. The hospital team and consultant were open and honest with the patient involved.

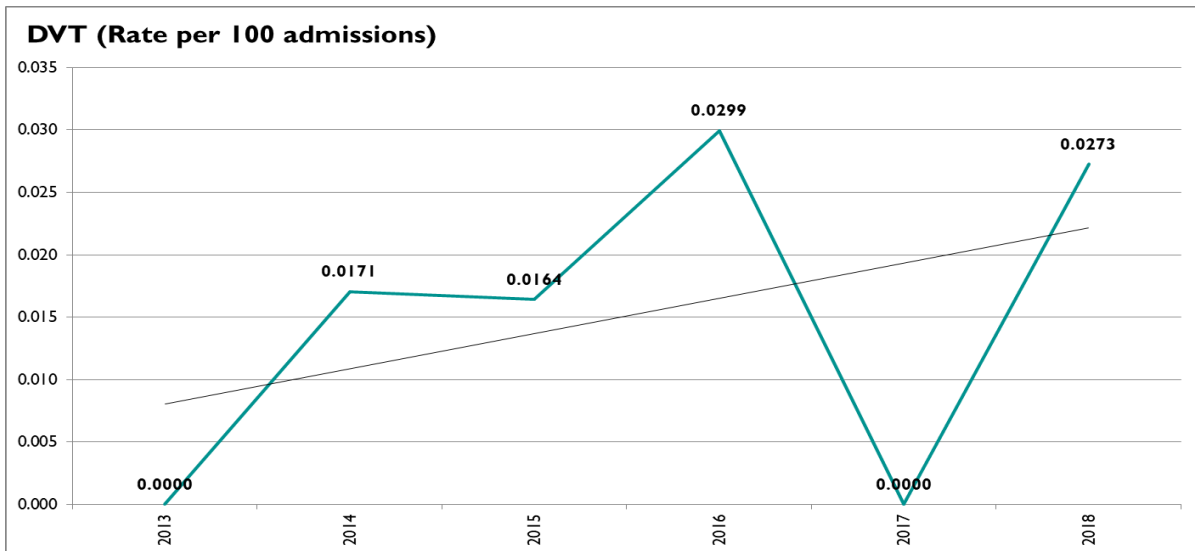
Venous Thrombo-embolism (VTE)

BMI Healthcare, holds VTE Exemplar Centre status by the Department of Health across its whole network of hospitals including, BMI Woodlands Hospital. BMI Healthcare was awarded the Best VTE Education Initiative Award category by Lifeblood in February 2013 and was the Runners up in the Best VTE Patient Information category.

We see this as an important initiative to further assure patient safety and care. We audit our compliance with our requirement to VTE risk assessment every patient who is admitted to our facility and the results of our audit on this has shown

Woodlands Hospital	VTE			
2018	2017	National Average	Highest National Score	Lowest National Score
100.00%	100.00%	95.77%	100.00%	81.60%

BMI Woodlands Hospital reports the incidence of Venous Thromboembolism (VTE) through the corporate clinical incident system. It is acknowledged that the challenge is receiving information for patients who may return to their GPs or other hospitals for diagnosis and/or treatment of VTE post discharge from the hospital. As such we may not be made aware of them. We continue to work with our Consultants and referrers in order to ensure that we have as much data as possible. .



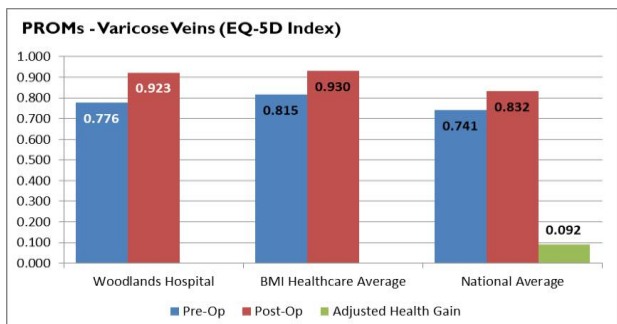
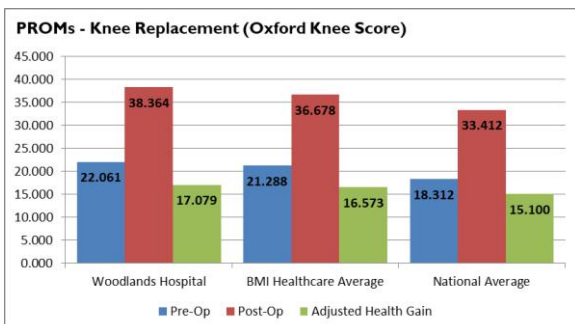
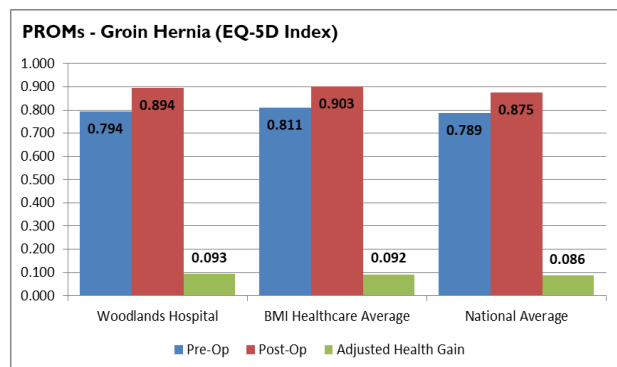
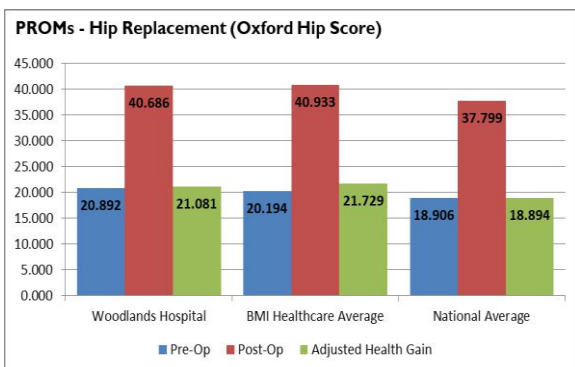


Patient Reported Outcome Measures (PROMS)

Patient Reported Outcome Measures (PROMs) are a means of collecting information on the effectiveness of care delivered to NHS patients as perceived by the patients themselves. PROMs are a Department of Health led programme.

For the current reporting period, the tables below demonstrate that the health gain between Questionnaire 1 (Pre-Operative) and Questionnaire 2 (Post-Operative) for patients undergoing hip replacement and knee replacement at BMI Woodlands Hospital.

Latest PROMs data available from HSCIC (Period: April 2016 – March 2017)

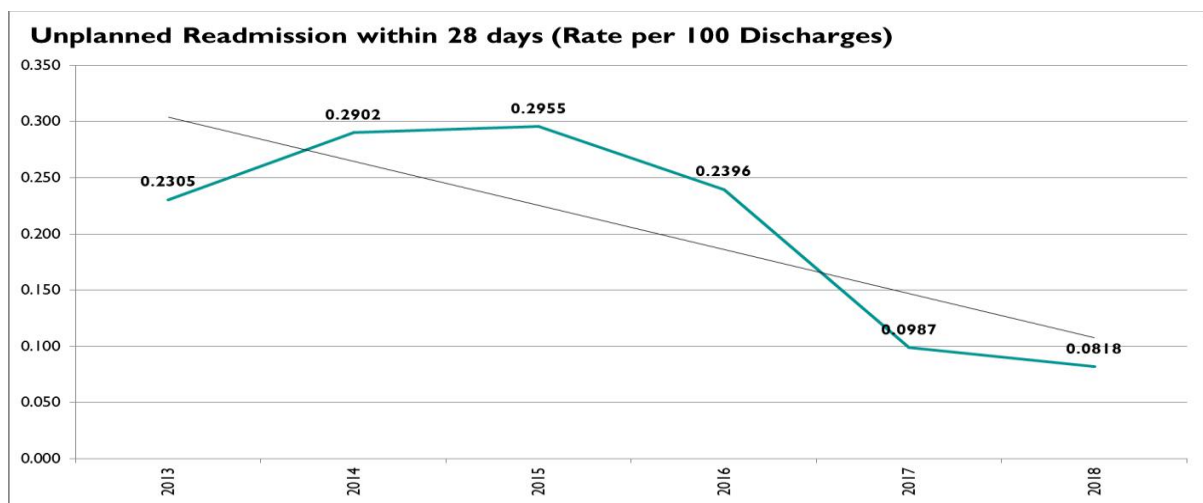


The data shows that BMI Woodlands Hospital are comparative with the national average health gain for the Oxford hip and Knee Score and for Groin Hernia’s demonstrating the effectiveness of care and treatment provided at BMI Woodlands Hospital. The numbers for Varicose Veins health gain are too small to be statistically significant.

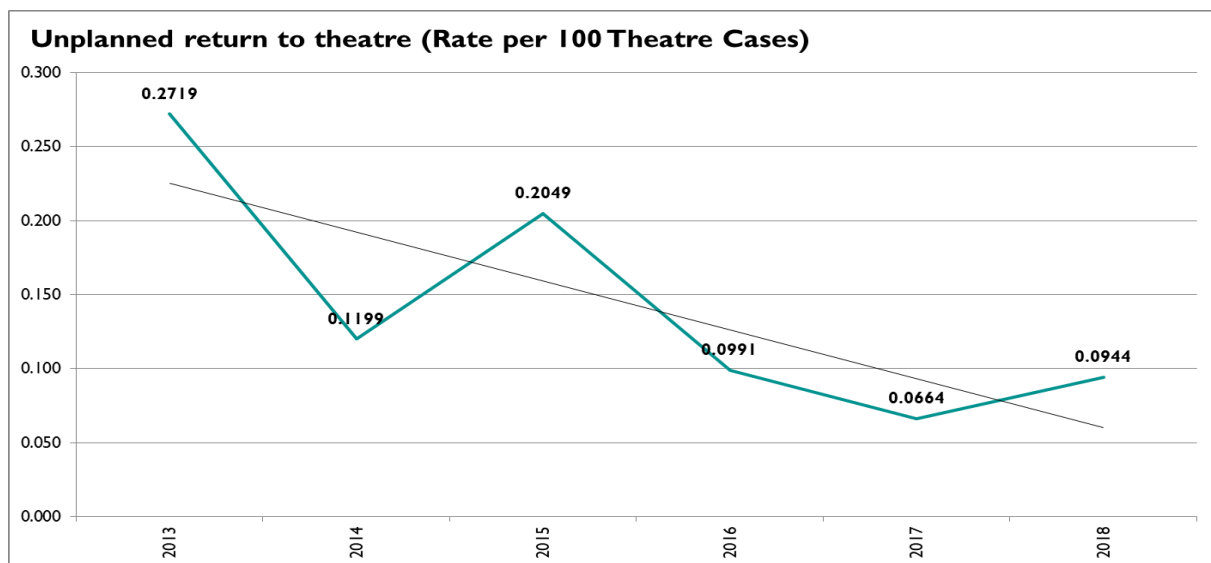
Unplanned Readmissions & Unplanned Returns to Theatre

Unplanned readmissions and Unplanned Returns to Theatre are normally due to a clinical complication related to the original surgery.

The chart below shows the total average unplanned readmission rates per 100 discharges for the past 5 years. As the chart demonstrates, unplanned readmissions to BMI Woodlands Hospital are very low with the average rate for 2017 being 0.0987 per 100 discharges. This is a very good performance for the hospital against a month on month increase in activity for the same period.



BMI Woodlands Hospital also has a very low rate of unplanned returns to theatre as demonstrated in the chart below. The average for 2017 was 0.0664 per 100 theatre cases and year to date 2018 the rate is slightly higher at 0.0944. This is a key priority for BMI Woodlands in its drive to provide safer surgery for our patients.



Learnings from Deaths

Preservation of life and avoidance of unnecessary death is an essential objective for healthcare providers; BMI Healthcare recognises this and is committed to ensuring that its hospitals and the organisation as a whole learn from the death of any patient whilst under our care. Sharing these lessons learnt is vital in order to ensure excellent quality of our care is provided across the company.

The Care Quality Commission (CQC) conducted a review in December 2016. This found that some providers were not sufficiently prioritising the learnings from deaths, and as a result, opportunities were being missed to identify and improve upon quality of care. This review was discussed by BMI Healthcare through the Clinical Governance Committee so that as an organisation, we could ensure we were following the best practice as suggested through this review.

All deaths, whether expected or unexpected, are reported to the regulators (CQC, HIS, HIW). They are also reported via our hospitals incident management system and therefore managed in line with the company's Incident Management Policy. When an unexpected patient death has occurred, a Root Cause Analysis (RCA) is conducted to understand the event; the contributing factors relating to a death, identify potential areas for change in practice and develop recommendations which deliver safer care to our patients. The findings from RCAs are reported as part of the hospital's Clinical Governance reporting requirements, and shared with the Regional and Corporate Quality teams. These findings are also shared with the patients' families in line with BMI Healthcare's Duty of Candour policy and its behaviours surrounding transparency.

All deaths are discussed at a hospital Clinical Governance Committee, and further escalated to the Regional Quality Assurance Committee and National Clinical Governance Committee for review as appropriate; this ensures that lessons learnt from deaths are discussed at all levels and findings are then shared to all hospitals through the National monthly Clinical Governance Bulletin, to ensure lessons are learnt across the company.

Patient Experience

Patient Satisfaction



BMI Healthcare is committed to providing the highest levels of quality of care to all of our patients. We continually monitor how we are performing by asking patients to complete a patient satisfaction questionnaire. Patient satisfaction surveys are administered by an independent third party.

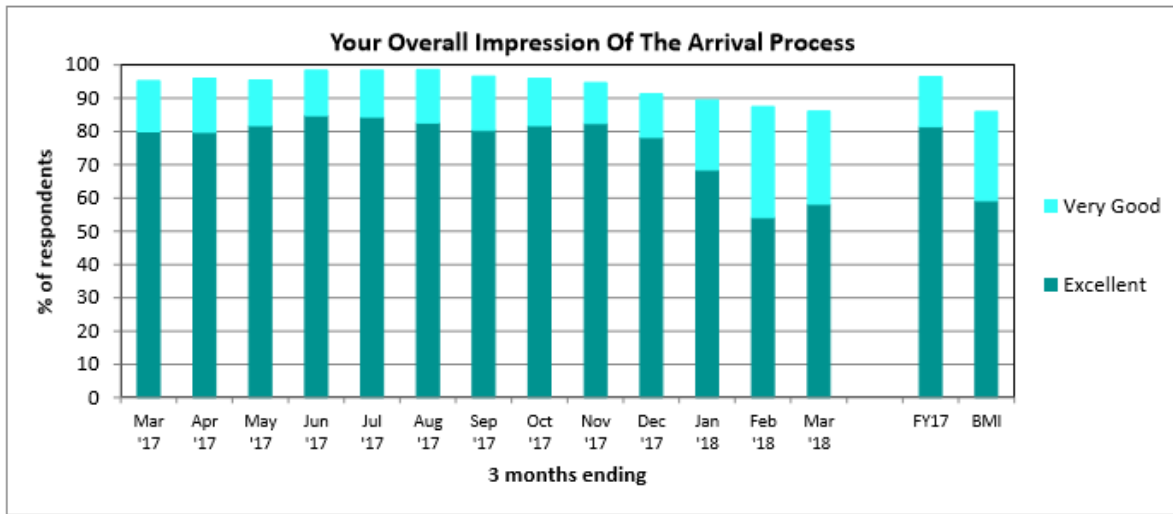
From October 2017 the patient satisfaction surveys changed from paper format to online questionnaires. This has had a significant impact on responses received from patients as not all patients are familiar with online services.

The questionnaire still asks specific questions around all aspects of their care during their journey such as the Arrival Process, Nursing Care, Accommodation, Catering, Departure Process and Overall Quality of Care. Some of the results are covered below:

Overall Impression of the Arrival Process

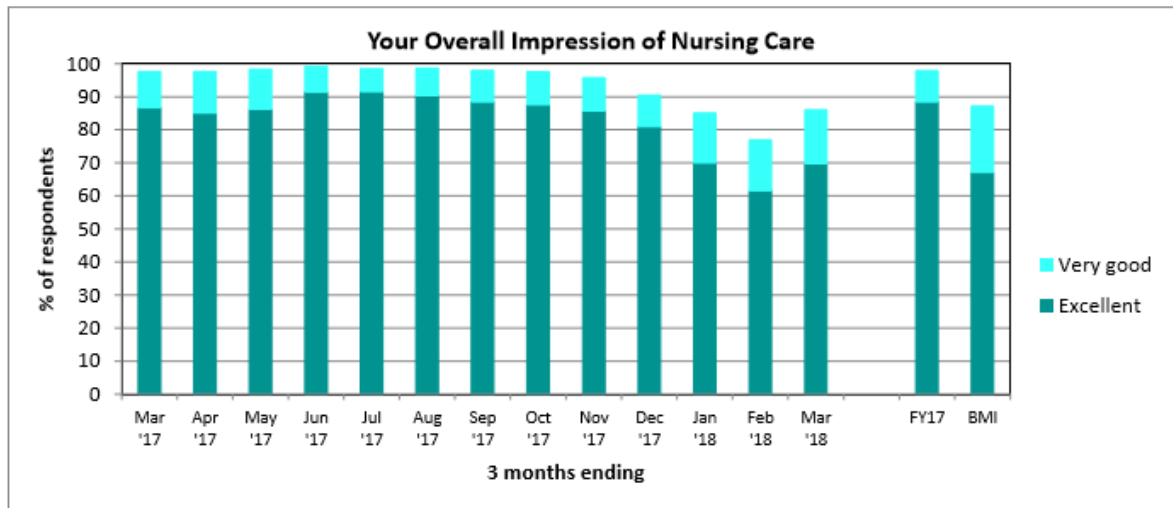
On the graph below, the results overall for 2017 the patient survey demonstrate 86% of patients rated BMI Woodlands Hospital's Arrival Process as excellent and 95% of patients rated the process as very good. This is a slight improvement from the previous year; however from October 2017 there is a reduction in responses resulting in a decline in satisfaction feedback results at 59% for March 2018 which was impacted by the change to online surveying.

Improving the patient experience with the arrival process across all reception areas has been a focal point as we recognise how important this is to patients at the beginning of their journey through their care pathway with us.



Overall Satisfaction with Nursing Care

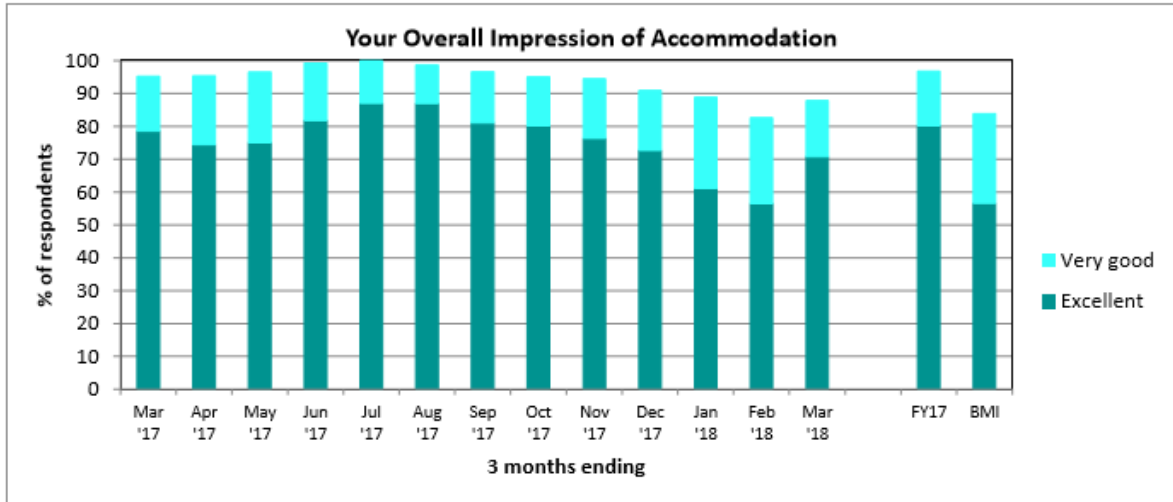
The chart below demonstrates patient satisfaction with all aspects of nursing care over the year and demonstrates that in 2017 89% of patients rated the nursing care as excellent at the hospital and 98% of respondents rated it as very good.



Comparing this to last year’s results the overall satisfaction with nursing care has improved from the previous year. The results from March 2018 have improved since the decision was taken to re-introduce paper questionnaires for patients as well as offer an online service. The results demonstrate BMI Woodlands nursing team’s commitment to delivering a high standard of nursing care to all of its patients admitted to the hospital.

Overall Satisfaction with Accommodation

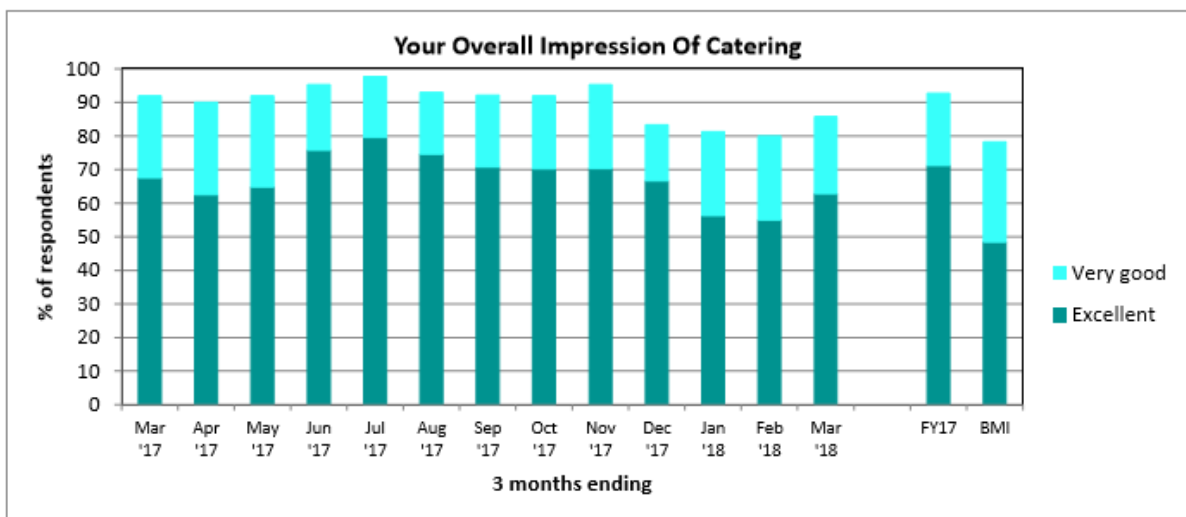
One of the areas we focus upon is patient satisfaction with the accommodation provided to our patients at BMI Woodlands Hospital, as we recognize this is key to maintaining privacy and dignity for patients and improving patient wellbeing. The chart below shows the results for the period:



This year we have made changes to the single ensuite rooms on the ward and have removed carpets and replaced the flooring to the rooms and ensuite bathrooms which has improved the positive feedback from patients regarding accommodation.

Overall Satisfaction with Catering

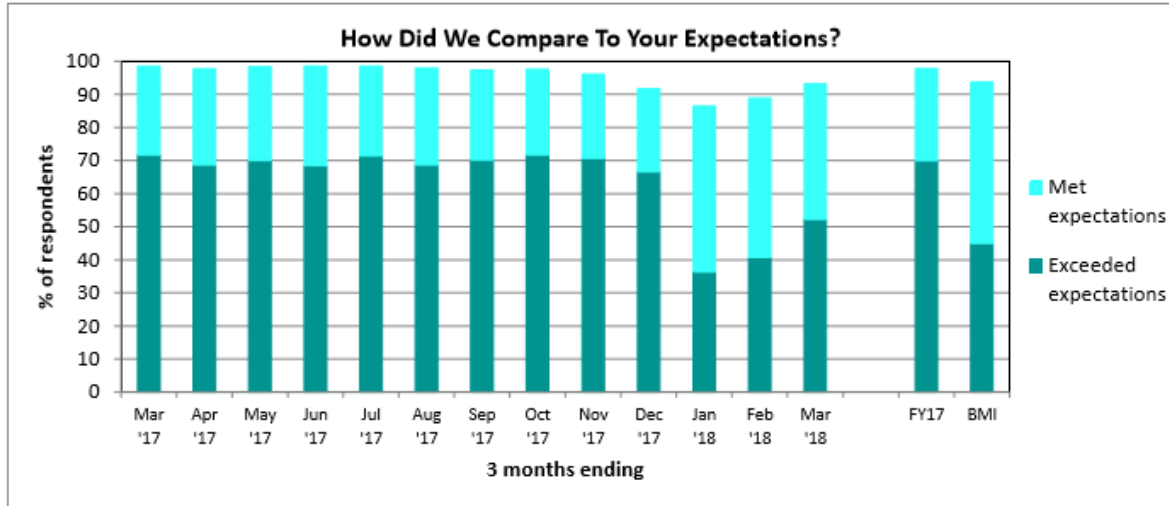
BMI Woodlands Hospital also seeks patient feedback on the catering service provided to patients and the results are presented below:



BMI Woodlands catering is provided by Compass and feedback remains positive from patients regarding the food offered to all of our patients.

Meeting or Exceeding Expectations

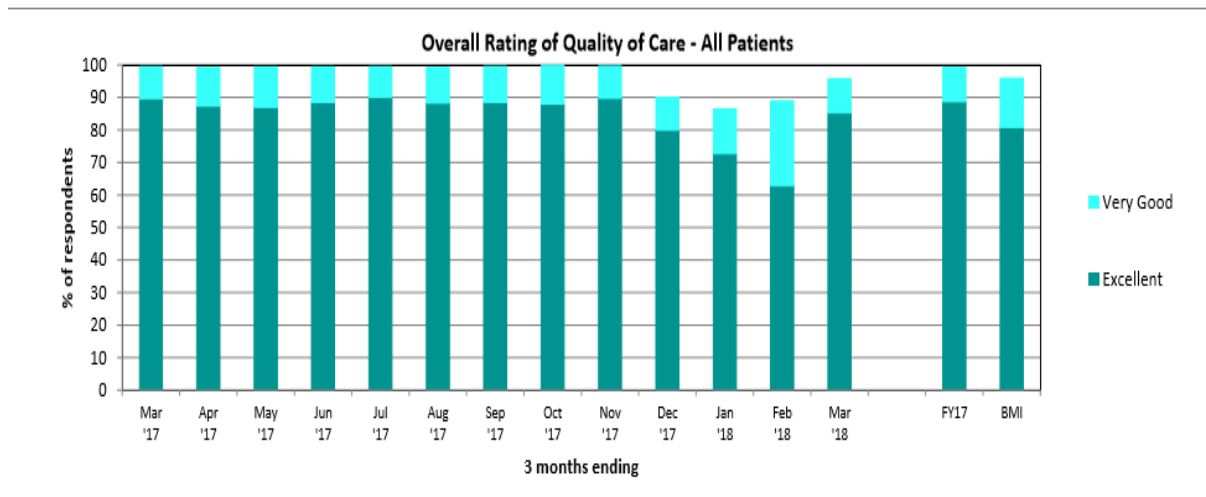
The chart below from March 2018 patient satisfaction survey shows how our patients rated us in terms of meeting or exceeding their expectations:



The chart demonstrates that 70% of our patients said we exceeded their expectations in 2017. In 2018 year to date the response rates are improving monthly following re-introduction of paper questionnaires.

Overall Quality of Care to Patients

The chart below shows how BMI Woodlands Hospital performed in terms of patient feedback regarding the overall Quality of Care to patients. This takes into account all areas of patient care and treatment throughout the patient journey.



The percentage of respondents who rated the hospital as excellent in providing care in March 2018 slightly below last year at 84%, but there has been an increase from February 2018 since the paper

copies of the patient questionnaire was re-introduced. This feedback from patients demonstrates our commitment to continuously driving quality and patient safety as key priorities across the year taking into account a significant increase in the total volume of activity.

Complaints

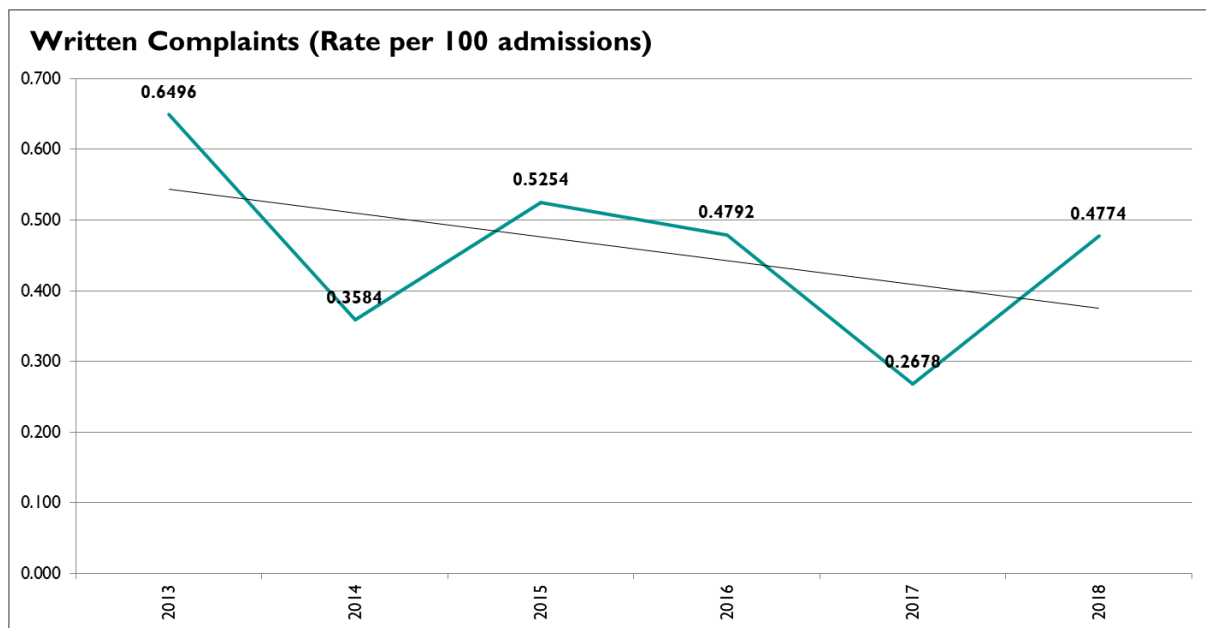
In addition to providing all patients with an opportunity to complete a Satisfaction Survey BMI Woodlands Hospital actively encourages feedback both informally and formally. Patients are supported through a robust complaints procedure, operated over three stages:

Stage 1: Hospital resolution

Stage 2: Corporate resolution

Stage 3: Patients can refer their complaint to Independent Adjudication if they are not satisfied with the outcome at the other 2 stages.

The chart below illustrates the number of written complaints per 100 admissions to BMI Woodlands Hospital for the past 5 years. As the data demonstrates the complaint rate has increased from 2017 to 0.47 per 100 admissions in 2018.



The main themes of complaints received by BMI Woodlands Hospital in 2017/18 include:-

- Patients unhappy with outcome of surgery
- Dissatisfaction with administrative and billing services

Of all the complaints received only 2 complaints were escalated to stage 2 of the complaints process in 2017/2018, both were progressed to stage 3 to the Independent Sector Complaints Adjudication Service (ISCAS). The majority of complaints were resolved at stage 1 by the hospital Senior Management Team.

CQUINS

The Standard Acute Contract that BMI Woodlands Hospital holds formally with local Clinical Commissioning Groups (CCGs) includes participation in the NHS Commissioning for Quality and Innovation Scheme (CQUIN) on an annual basis.

This involves staff working with Commissioners to deliver the national CQUIN initiatives set by the Department of Health and to identify local CQUIN initiatives which aim to improve the quality of care delivered to patients at a hospital level. Last year BMI Woodlands Hospital was commissioned to deliver NHS work via the Standard Acute Contract for all commissioners across County Durham and Darlington, Tees Valley and North Yorkshire.

National CQUIN initiatives were not deemed applicable to BMI Woodlands Hospital for 2017/18 due to the patient case mix and services provided therefore local CQUIN initiatives were agreed with commissioners. These included:

- Improve discharge processes through analysing a range of qualitative information and implementing a series of actions / improvements to address key issues.
- By joining the “Sign up to Safety” campaign, the hospital commits to creating lasting change and a future where patients and those who care for them are free from avoidable harm.

BMI Woodlands Hospital have met their CQUIN targets up to Quarter 3 in 2017 with Q4 still to be reviewed and agreed with commissioners.

Safeguarding

Safeguarding is about protecting people from abuse; preventing abuse from happening and making people aware of their rights. To enable us to do this better training has been enhanced and made available for staff and consultants within the hospital.

Adult abuse can happen to anyone over the age of 18 years of age and within BMI our staff are trained to adult safeguarding level 2, so they can identify, support and advise anyone who requires it.

Adult safeguarding level 3 is provided to senior members of the team to ensure that appropriate support can be provided to their staff in these situations.

Children and Young people abuse can happen to any person 18 years old or below and to ensure that that all children and young peoples are looked after appropriately all our clinical staff including consultants are trained to Level 3 children’s safeguarding our other staff members are trained to level 2.

There have been 0 recorded safeguarding incidents logged at BMI Woodlands Hospital during the reporting period however all staff are aware of the hospital Safeguarding Lead and the process to follow in the event that they have any concerns. Further training and education for all hospital staff is planned in the coming year to ensure that all aspects of the protecting vulnerable adults and children are covered.

National Clinical Audits

BMI Woodlands Hospital was only eligible to participate in the National Joint Registry audit and all joint replacements are submitted to this. The hospital's overall consent score for 2017 was 94%. Compliance results for the reporting period are as follows:

Totals for this hospital	2017	Year to date: 2018
Total completed ops	800	252
Hip procedures	381	120
Knee procedures	412	131
Ankle procedures	1	1
Elbow procedures	0	0
Shoulder procedures	6	0
NJR consent rate	94%	91%

2017		2018					
Month	Completed operations	Hips	Knees	Ankles	Elbows	Shoulders	Consent rate
January	83	31	52	0	0	0	93
February	59	29	29	0	0	1	94
March	79	41	38	0	0	0	97
April	55	27	28	0	0	0	98
May	67	29	36	1	0	1	95
June	72	33	38	0	0	1	91
July	56	33	23	0	0	0	96
August	73	37	36	0	0	0	89
September	75	29	45	0	0	1	97
October	63	29	33	0	0	1	92
November	82	44	37	0	0	1	96
December	36	19	17	0	0	0	88

2017		2018					
Month	Completed operations	Hips	Knees	Ankles	Elbows	Shoulders	Consent rate
January	79	34	45	0	0	0	96
February	77	39	37	1	0	0	90
March	77	37	40	0	0	0	90
April	19	10	9	0	0	0	84

Priorities for Service Development and Improvement

This year BMI Woodlands Hospital intends to improve and develop its services further with particular focus on the following:

- Continuing to drive patient safety and quality initiatives
- Introduction of Health Screening Service for patients
- Replacement of Radiology Equipment
- Replacement of all carpets from clinical areas and replacement of flooring to comply with IPC standards

Safety Thermometer

BMI Healthcare is fully compliant and supportive of the reporting guidelines in relation to the NHS Safety Thermometer. This is part of BMI Healthcare's hospitals' engagement with local Clinical Commissioning Groups nationwide. The measures reported on a monthly basis relate to the following;

VTE Risk Assessment & Treatment

Catheter related Urinary Tract Infection

Falls

Pressure Ulcers by Category

Staff Survey & Staff Safety Culture Questionnaire

A good safety culture is an important foundation of a safe organisation and we all have our part to play in embedding a robust safety culture; for our patients and those we work with. BMI Healthcare launched the Safe Culture Questionnaire in October 2017 to assess the safety culture across our hospitals and across BMI Healthcare.

Staff were asked to complete the questionnaire openly and honestly in order for the Senior Management Team of their hospital to be able to address any concerns with regards to safety and pick up on areas for improvement.

The online questionnaire was accessible by staff at 59 sites across England, Scotland and Wales. Staff from all areas of the hospitals were asked to rate up to 24 statements (England sites were asked 20 questions, Scotland sites were asked 24 questions and Wales sites were asked 22). Staff were asked to rate the statement with the following system: 1 (Inadequate), 2 (Poor), 3 (Good) and 4 (Excellent).

1571 responses were received across all sites. All statements asked within the questionnaire received an average rating of 'Good'. The statements with the highest rating averages were:

- I am aware of my obligations regarding mandatory training.
- I know how to report a patient safety incident or near miss.
- I am aware of my own departmental risks and how these are reflected within the overall risk register.
- I support the organisation’s plan to become recognised as 'Outstanding' CQC rated hospital (England and Wales sites) / with Health Care Improvement Scotland within the 5 Quality Themes as a 6 (Excellent) rated hospital (Scotland sites).

Results were reported to sites in three ways: a report of all site data, regional reports and individual hospital results for sites who received a response rate of 30% or more.



Staff Recommendation Results

Woodlands Hospital	Staff Recommendations				
	2018	2017	National Average	Highest National Score	Lowest National Score
93.00%	99.14%	73.18%	89.98%	50.44%	

The BMI Healthcare regularly survey their staff satisfaction and during the last survey the percentage of BMI Woodlands staff who would recommend the service to friends and family was 93% as demonstrated in the table above. This is a decline from the previous year’s result which was 99.14% and slightly lower than the national average, again affected by the change to surveying patients. Staff are committed to working at BMI Woodlands Hospital and believe that the standard of care offered is of a high standard but also recognise we need to continue to make improvements.

Quality Indicators

The below information provides an overview of the various Quality Indicators which form part of the annual Quality Accounts. Where relevant, information has been provided to explain any potential differences between the collection methods of BMI Healthcare and the NHS.

All data provided by BMI Healthcare is for the period **April 2017-March 2018** to remain consistent with previous Quality Accounts, whilst the NHS data may not be for the same period due to HSCIC data availability. The NHS data provided is the latest information available from the HSCIC Indicator Portal.

Indicator	Source	Information	NHS Date Period
Number of paediatric patients re-admitted within 28 days of discharge and number of adult patients (16+) re-admitted within 28 days of discharge.	BMI Healthcare Risk Management System	This figure provided is a rate per 1,000 amended discharges.	Apr 2011 - Mar 2012
Number of <i>C.difficile</i> infections reported	BMI Healthcare Risk Management System	This indicator relates to the number of hospital-apportioned infections.	Apr 2014 – Mar 2015
Responsiveness to Personal Needs of Patients	Quality Health Patient Satisfaction Report	The responsiveness score provided is an average of all categories applied to Patient Satisfaction questionnaires answered by BMI Healthcare inpatients.	Feb 2016 – Jan 2017
Number of admissions risk assessed for VTE	CQUIN Data	BMI Healthcare only collects this information currently for NHS patients.	Jan 2017 – Dec 2017
Number/Rate of Patient Safety Incidents reported	BMI Healthcare Risk Management System	Based upon Clinical Incidents with a patient involved where the NPSA Guidelines deem a severity applicable.	Oct 2015 – Sep 2016
Number/Rate of Patient Safety Incidents reported (Severe or Death)	BMI Healthcare Risk Management System	Based upon Clinical Incidents with a patient involved where the NPSA Guidelines deem a severity applicable.	Jul 16 – Jun 17

Further Indicator	Information
Percentage of BMI Healthcare Staff who would recommend the service to Friends & Family	This information is taken from BMI Healthcare’s Staff Survey which was conducted during 2017.

Re-Admissions within 28 Days of Discharge (Paediatric and Adult)

BMI Woodlands Hospital does not offer an inpatient service for Paediatrics therefore there is no data for this service. The table below shows the number of adult re-admissions within 28 days.

Woodlands Hospital	Re-Admissions (Aged 16+)			
2018	2017	National Average	Highest National Score	Lowest National Score
2.503	2.090	10.010	41.650	0.000

During the period April 2017 to March 2018 BMI Woodlands Hospital had a rate of 2.50 re-admissions per 100 bed days which is significantly lower than the national average. We consider this to be the case due to the safe standard of care that is provided to the patient whilst in hospital, the discharge information given and that a number of patients are followed up at 48 hours post discharge with a phone call offering support, guidance and assistance where necessary.

The rate per 100,000 bed days of cases of C difficile infection reported within the hospital

Woodlands Hospital	C.difficile (per 100,000 bed days)			
2018	2017	National Average	Highest National Score	Lowest National Score
0.000	0.000	35.928	147.455	0.000

BMI Woodlands Hospital considers that this data is as described because of the strong focus upon infection prevention and control (IPC) within the hospital. Staff aim to continue with the robust IPC programme and implementation of best practice to maintain this excellent standard.

Hospitals responsiveness to the personal needs of its patients

The following table demonstrates patient satisfaction with the responsiveness of BMI Woodlands staff to the personal needs of its patients. As can be seen the rate of patient satisfaction remains around the same level as last year, and is significantly higher than the highest national score.

Woodlands Hospital	Responsiveness			
2018	2017	National Average	Highest National Score	Lowest National Score
96.45%	96.69%	69.22%	78.00%	60.10%

The BMI Woodlands Hospital considers that this data is as described due to the drive to continually improve the patient experience by the hospital teams.

The 'Patient Environment and Improvement Group' (PEIG) is a patient forum which assist us to make improvements in line with patient feedback and observations. We also consistently review the feedback from patients via our satisfaction surveys and family and friends post cards so that we can make improvements in line with patient recommendations.

The percentage of patients who were admitted to hospital and who were risk assessed for VTE (Venous Thromboembolism)

Woodlands Hospital	VTE			
2018	2017	National Average	Highest National Score	Lowest National Score
100.00%	100.00%	95.77%	100.00%	81.60%

The table above shows the percentage of patients who were admitted to BMI Woodlands Hospital and who were risk assessed for venous thromboembolism during the reporting period.

BMI Woodlands Hospital has an excellent track record for this indicator, surpassing the national average and equalling the highest national score. The hospital staff will continue to implement best practice in VTE management in order to maintain this position.

Patient Safety Incidents

Woodlands Hospital	Patient Safety Incidents (Count)			
2018	2017	National Average	Highest National Score	Lowest National Score
434	275	3908	14506	31

Woodlands Hospital	Patient Safety Incidents (Rate per 1000 Bed Days)			
2018	2017	National Average	Highest National Score	Lowest National Score
120.690	82.090	43.292	149.700	11.200

BMI Woodlands Hospital reports all clinical incidents and patient safety related incidents. The number reported in the tables above includes a high proportion of patients who were planned as day cases and for clinical reasons stayed overnight for monitoring. There has been an increase of reported incidents as staff are encouraged to report all incidents via the BMI RiskMan incident management system that all staff have access to.

Patient Recommendation Results

Woodlands Hospital	Patient Recommendations			
2018	2017	National Average	Highest National Score	Lowest National Score
97.06%	99.22%	97.07%	100.00%	75.61%

The percentage of patients who would recommend BMI Woodlands Hospital to family and friends is demonstrated in the table above at 97.06%, this is comparable to the national average by 0.01%. BMI Woodlands Hospital team are proud of their results with regard to quality indicators and standards of care for patients which we believe are reflected in this score.

This concludes BMI Woodlands Quality Account. Any comments or queries regarding this can be directed to Debbie Dobbs Executive Director or Jill Neasham Director of Clinical Services for BMI Woodlands Hospital.

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Statement from Darlington Clinical Commissioning Group for BMI Woodlands Hospital Quality Account 2017/18

The Clinical Commissioning Group (CCG) welcomes the opportunity to review and comment on the Quality Account for BMI Woodlands Hospital for 2017/18 and would like to offer the following commentary.

As commissioners, Darlington CCG is committed to commissioning high quality services from BMI Woodlands Hospital and takes seriously their responsibility to ensure that patients' needs are met by the provision of safe, high quality services and that the views and expectations of patients and the public are listened to and acted upon.

The CCG continues to hold regular clinical quality review group meetings with BMI Woodlands Hospital which provides positive engagement for the monitoring, review and discussion of issues relating to the quality of patient care. In the last year the CCG carried out an assurance visit to the BMI site. This was a very positive visit with both patients and staff speaking very highly of BMI as provider of care and employer.

In so far as we have been able to check the factual details, the CCG view is that the quality account is an accurate representation of the services provided within the hospital during 2017/18. It is clearly presented and the information it contains accurately represents BMI Woodlands Hospital's quality profile. Overall, the CCG felt that the report was presented in a meaningful way for both stakeholders and patients.

It was pleasing to note the ongoing emphasis on incident reporting, near miss reporting and overall learning from incidents. The CCG also acknowledges the work done to produce the incident data and the effectiveness of governance procedures. The focus on infection prevention and control is evident in the supporting data. The CCG would also like to commend BMI Woodlands on the patient scores linked to cleanliness.

The quality account for 2017/18, shows very high patient satisfaction scores across BMI Woodlands in all areas which were surveyed. These results show a tremendous effort in ensuring patients are not only safe but are happy with the care they receive.

The CCG recognises the work that the hospital continues to undertake in maintaining a pleasant environment reflected in the successful 2017 Patient Led Assessment of the Care Environment (PLACE) assessments.

It was pleasing to note the findings of the Staff Survey and Staff Culture Questionnaire were positive; whilst this is a national BMI survey it shows that staff would recommend BMI as a place to work. The work carried out in these surveys also shows a healthy open and honest culture held by the organisation.

The CCG recognises the value of the quality improvement priorities for 2018/19 identified in the quality account and consider that these are appropriate areas to target for continued improvements. The CCG looks forward to seeing progress on these priorities at the clinical quality review group meetings with the hospital throughout the coming year.

The CCG look forward to continuing to work in partnership with BMI Woodlands Hospital to assure the quality of services commissioned in 2018/19.

Diane Murphy
Interim Chief Nurse
NHS Darlington Clinical Commissioning Group