

## Group Chief Executive's Statement

I am pleased to welcome you to our Quality Accounts 2016.

Our 2016 Quality Accounts provide a transparent picture of BMI Healthcare's performance over the period covered and present the outcomes of objective metrics on the quality status of our 59 hospitals and clinics.

Across BMI Healthcare, we have adopted a systems-based approach to the management of clinical risk with the focus being on establishing effective systems, processes and controls across the business, rather than focusing on the acts or omissions of individual employees. Our goal is to establish a managerial culture which promotes proactive consideration of clinical risks, so that appropriate mechanisms and strategies are put in place to control and minimise future risk.

A comprehensive clinical governance framework exists across BMI Healthcare to ensure patient safety. As part of the framework, every effort has been made to ensure strategies are in place to look both prospectively and retrospectively across the organisation. This means that our focus is on both preventing risk and identifying clinical outcome trends across the business, as well as ensuring appropriate controls are in place at all levels.

Because of the inherent risks associated with being a patient in a healthcare system and our continued and consistent focus on patient safety, a key part of our plan is to ensure that every effort is made to reduce the likelihood and consequence of an adverse event or outcome associated with the treatment of a patient in our hospital. No healthcare provider can afford to be complacent and whilst I believe BMI Healthcare's hospitals provide safe and effective care, we are always striving for improvement. And indeed, our internal audit processes continue to identify areas for ongoing improvement and investment. During the last year, we have also seen the onset of the new Care Quality Commission (CQC) inspection regime and a number of our hospitals have now been through the new process, with a steady flow of inspections expected over the next 12 months.

BMI Healthcare's brand promise is to be "serious about health, passionate about care". Its four core themes – safety, clinical effectiveness, patient experience and quality assurance – provide our staff with the platform to consistently deliver the care that patients, their insurers and commissioners expect and deserve. We continue seek new ways to enhance engagement with our Consultants and Allied Health Professionals, as well as our own staff, around important clinical governance topics like the focus on Duty of Candour. During the year we held a workshop for our medical leaders at our National Medical Advisory Conference for the Chairs of our hospital Medical Advisory Committees and provided updated policies and guidance for our staff. We regularly communicate with our staff and Consultants the importance of using the recognised procedures such as the World Health Organisation 'Safer Surgery Checklist' and we are clear that patient safety remains our top priority. As a learning organisation, we make sure that learning from incidents and a culture where it is safe to speak up are cultivated and nurtured by our leaders.

We are shortly to introduce Patient Recorded Outcome Measures ('PROMs') for all our private patients, as well as those outcomes we already capture for our NHS patients. The new national Private Healthcare Information Network (PHIN) website, which will launched shortly will also enable patients to make informed choices about their Consultants and care, through a comprehensive website covering the most popular private procedures and their outcomes.

BMI Healthcare strives to provide superior patient care, but ultimately our patients are the best judge of their care and treatment. We are committed to monitoring every aspect of the care we provide, and we invest significantly in obtaining patient feedback on all aspects of their stay with us. We also measure national survey information such as the 'Friends and Family' test and use all patient feedback to guide our investment plans, the treatments we offer and the all-round high quality patient experience we aspire to give. Even with relatively high scores, we strive to improve, and in the most recent figures at the end of 2015, patient satisfaction with overall quality of care had risen to 98.1%, with some of our hospitals scoring 100%.

The information available here in the Quality Accounts has been reviewed by the BMI Healthcare Clinical Governance Committee and I declare that, as far as I am aware, the information contained in these reports is accurate.

Finally I would like to thank all the staff whose dedication to caring for our patients and commitment to improvement are recognised here and in the positive experiences of the patients we serve every day.



**Jill Watts, Group Chief Executive**

## **BMI The Somerfield Hospital Information**



BMI The Somerfield Hospital is set in a beautiful Grade 2 listed building. Originally 4 houses we have 31 acute beds admitting a variety of surgical and medical conditions. We offer a large range of specialties including orthopaedics, gynaecology and ophthalmology. We also are skilled in the care of medical emergency patients including abdominal and chest conditions. All our rooms are private with en suite facilities and many display the original features of the building including unique fireplaces and ceilings.

Our Consulting Suite offers a varied selection of appointment times and has 150 Consultants of differing specialties. Here we can see children over 3 years of age for an appointment with one of our experienced Consultants. We can also offer a range of diagnostic tests in the department including hysteroscopies and cystoscopies in our comfortable, dedicated treatment rooms.

Our committed radiology department has on site services including ultrasound, bone densitometry and a one stop breast clinic which includes digital mammography. We also enjoy a partnership with Allied Healthcare to provide an on-site wide bore MRI scanner. We can offer a CT appointment in our mobile CT scanner that visits us three times a month to ensure that our clients are given the quickest and best possible service.

We have 3 theatres including an endoscopy suite and minor ops unit and have a fully equipped physiotherapy suite that also offers hydrotherapy, pilates and group sessions.

Our Medical Centre offers a choice of health screens and an experienced travel and vaccination clinic both at a corporate level and to our local community.

This year we have continued our refurbishment programme. This has included the majority of the internal outpatient areas being decorated. We are continually investing in new, modern equipment so that we are confident that we are offering the very best to the patients under our care.

Over 50% of our patients are referred to us directly from the NHS either via Choose and Book or Spot contracts. These can include a whole array of procedures from purely diagnostic tests to a full surgical pathway.

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 The Somerfield Hospital is registered as a location for the following regulated services:-

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

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 3<sup>rd</sup> February 2014 and found

Consent to care and treatment	✓
Care and welfare of people who use services	✓
Management of Medicines	✓
Requirements relating to workers	✓
Assessing and monitoring the quality of service provision	✓

BMI The Somerfield 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.

## CQC Ratings Grid

We have not been inspected using the new inspection framework yet but have worked through all the actions from our last visit and are constantly looking for areas where we can improve our service.

## 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 The Somerfield 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 2015 to March 2016, the hospital had:

- 0 MRSA bacteraemia cases/100,000 bed days
- 0 MSSA bacteraemia cases /100,000 bed days
- 0 E.coli bacteraemia cases/ 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;
  - 0 Hips
  - 0.00962 Knees



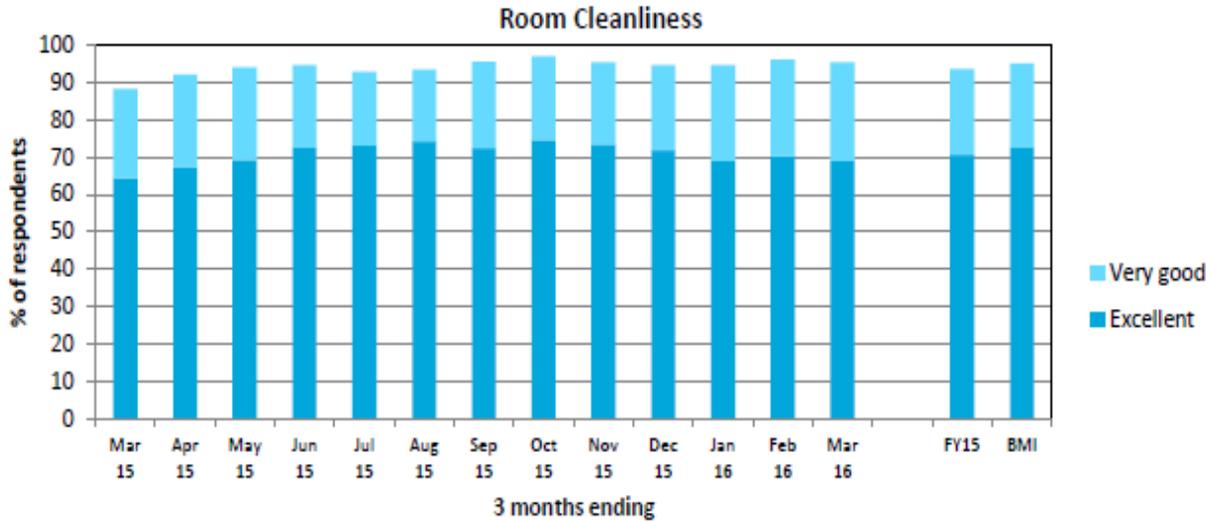
Different aspects of infection control are audited monthly and include hand hygiene for staff and our Consultants and the wearing of a correct uniform. Details of all these audits are discussed with Department Managers and staff alike and a comprehensive action tracker commenced for any areas not at 100%. The audit scores have improved over the year and are now consistently over 95% and usually at 100%.

High Impact Intervention Care bundles are in place and closely monitored for compliance. An action tracker ensures areas of non compliance are focused on and improved. As a direct result of this the correct dating of peripheral lines has improved due to new, simpler paperwork being developed.

All staff undertake training in infection prevention and control relevant to their area of work. This includes practical assessments.

Environmental cleanliness is also an important factor in infection prevention and our patients rate the cleanliness of our facilities highly.





### Patient Led Assessment of the Care Environment (PLACE)

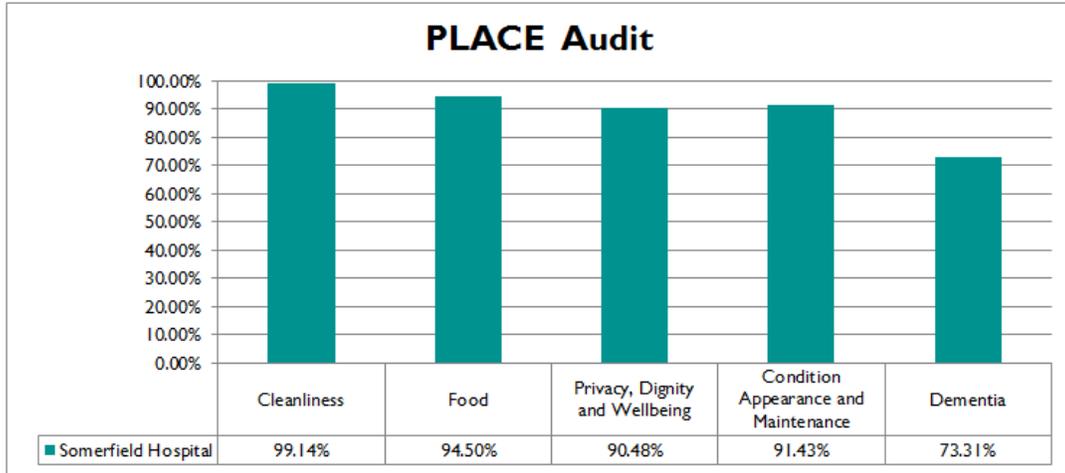
At BMI Healthcare, we believe a patient should be cared for with compassion and dignity in a clean, safe environment. Where standards fall short, they should be able to draw it to the attention of managers and hold the service to account. PLACE assessments will provide motivation for improvement by providing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

Hospital	Cleanliness	Food	Privacy, Dignity and Wellbeing	Condition Appearance and Maintenance	Dementia
Somerfield Hospital	99.14%	94.50%	90.48%	91.43%	73.31%



This audit was held on 10 March 2016. We will be looking at raising our dementia score in the coming year through clearer signage and lighting. All clinical staff complete mandatory dementia training.

## 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.

At The Somerfield communication with our patients is of the utmost importance, we ensure all staff are aware of their responsibilities around Duty of Candour and are open with our patients at all times.

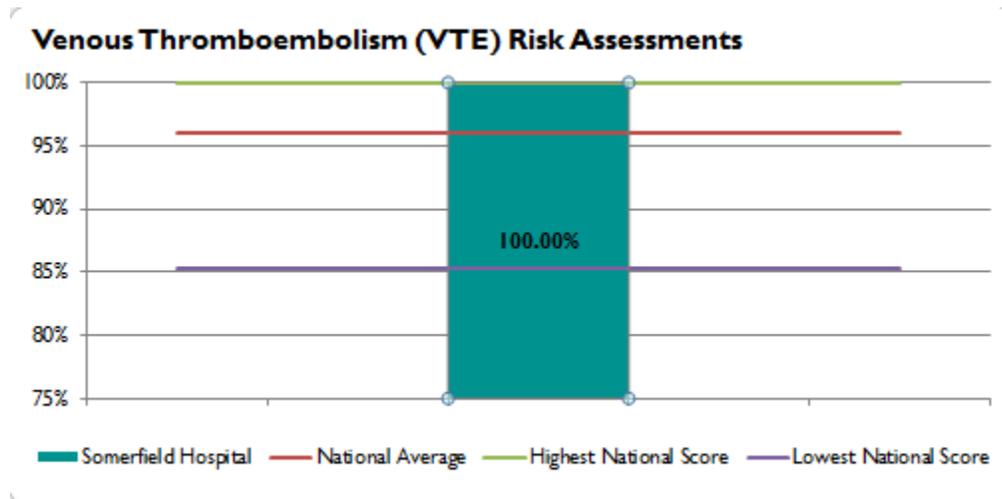
## Venous Thrombo-embolism (VTE)

BMI Healthcare, holds VTE Exemplar Centre status by the Department of Health across its whole network of hospitals including, BMI The Somerfield 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

100% of our patients are risk assessed for VTEs.

BMI The Somerfield 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.



## Sign Up for Safety Campaign

In December 2015 BMI Health applied to Sign up for Safety by submitting our actions for the following five pledges:

- **Put safety first** – Committing to reduce avoidable harm in the NHS by half through taking a systematic approach to safety and making public your locally developed goals, plans and progress. Instill a preoccupation with failure so that systems are designed to prevent error and avoidable harm
- **Continually learn** – Reviewing your incident reporting and investigation processes to make sure that you are truly learning from them and using these lessons to make your organisation more resilient to risks. Listen, learn and act on the feedback from patients and staff and by constantly measuring and monitoring how safe your services are
- **Be honest** – Being open and transparent with people about your progress to tackle patient safety issues and support staff to be candid with patients and their families if something goes wrong
- **Collaborate** – Stepping up and actively collaborating with other organisations and teams; share your work, your ideas and your learning to create a truly national approach to safety. Work together with others, join forces and create partnerships that ensure a sustained approach to sharing and learning across the system
- **Be supportive** – Be kind to your staff, help them bring joy and pride to their work. Be thoughtful when things go wrong; help staff cope and create a positive just culture that asks why things go wrong in order to put them right. Give staff the time, resources and support to work safely and to work on improvements. Thank your staff, reward and recognise their efforts and celebrate your progress towards safer care.

BMI Healthcare as a company was successful in their application with Sign up for Safety in March 2016. Sign up for safety is a campaign to make all our healthcare services the safest in the world. Whilst predominantly focused on the NHS the campaign welcomes independent healthcare companies or individual hospitals to participate to make all healthcare services safer. The ambition of sign up to safety is to halve avoidable harm over the next three years and save 6,000 lives as a result.

By signing up to the campaign we have committed to listening to patients, carers and staff, learning from what they say when things go wrong and taking action to improve patient's safety helping to ensure patients get harm free care every time, everywhere.



Sign up to  
.....  
**SAFETY**  
**LISTEN LEARN ACT**

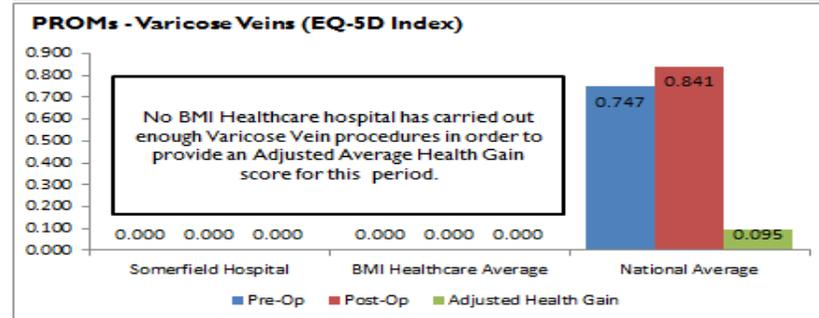
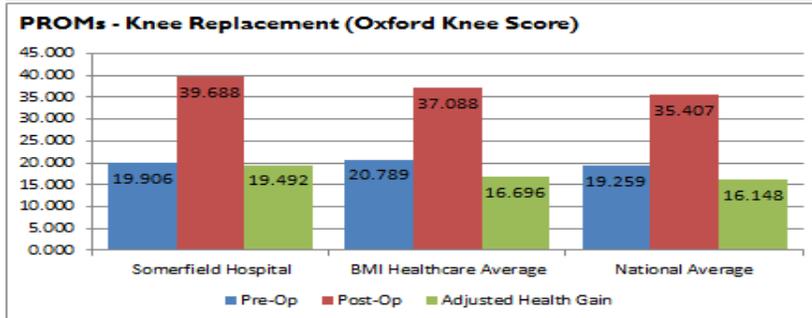
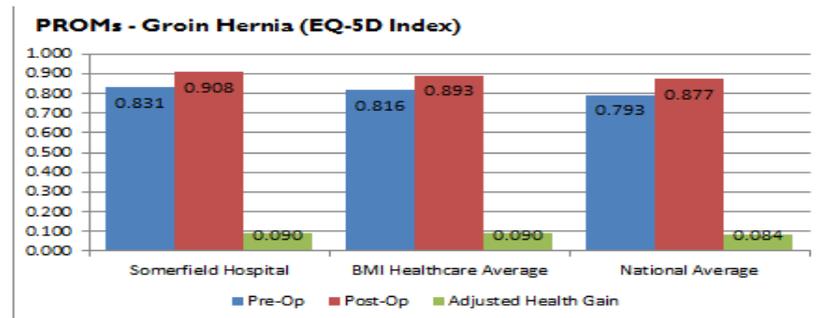
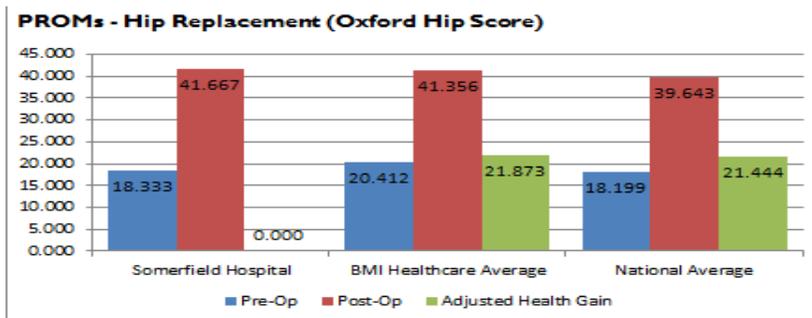
## Effectiveness

### 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 The Somerfield Hospital. In most areas our returns are above the national average. Patients are encouraged at all points to return them and their importance stressed.

### Latest PROMS data available from HSCIC (Period: April 2014 – March 2015)



## Enhanced Recovery Programme (ERP)

The ERP is about improving patient outcomes and speeding up a patient's recovery after surgery. ERP focuses on making sure patients are active participants in their own recovery and always receive evidence based care at the right time. It is often referred to as rapid recovery, is a new, evidence-based model of care that creates fitter patients who recover faster from major surgery. It is the modern way for treating patients where day surgery is not appropriate.

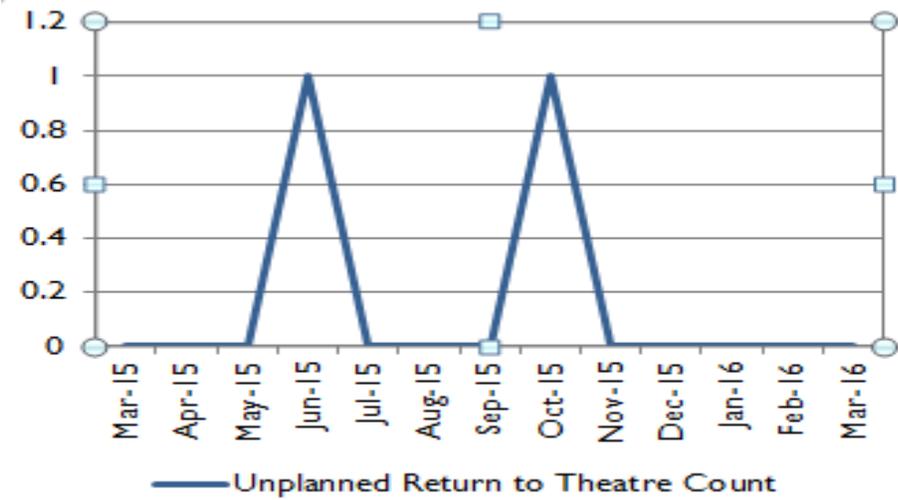
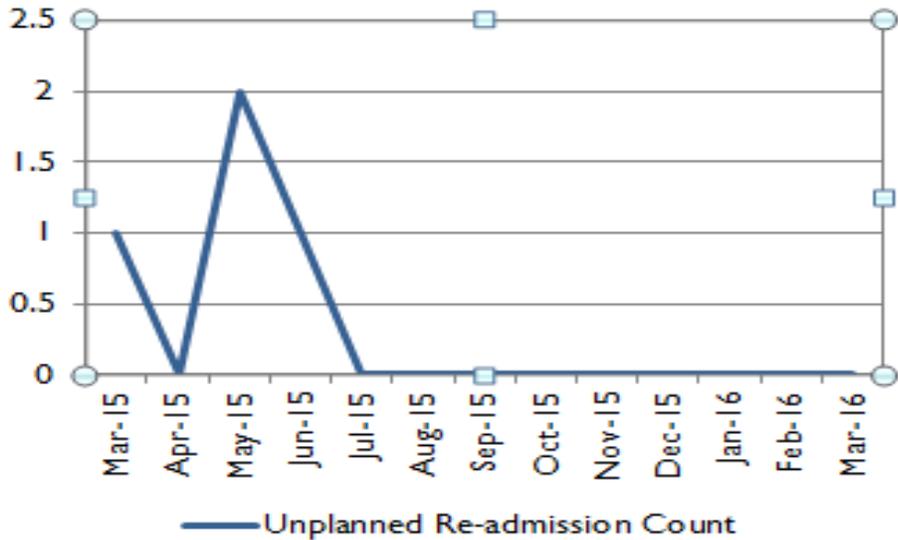
ERP is based on the following principles:-

1. All Patients are on a pathway of care
  - a. *Following best practice models of evidenced based care*
  - b. *Reduced length of stay*
2. Patient Preparation
  - a. *Pre Admission assessment undertaken*
  - b. *Group Education sessions*
  - c. *Optimizing the patient prior to admission – i.e. HB optimisation, control co-morbidities, medication assessment – stopping medication plan.*
  - d. *Commencement of discharge planning*
3. Proactive patient management
  - a. *Maintaining good pre-operative hydration*
  - b. *Minimising the risk of post-operative nausea and vomiting*
  - c. *Maintaining normothermia pre and post operatively*
  - d. *Early mobilisation*
4. Encouraging patients have an active role in their recovery
  - a. *Participate in the decision making process prior to surgery*
  - b. *Education of patient and family*
  - c. *Setting own goals daily*
  - d. *Participate in their discharge planning*

At the Somerfield Hospital we are within our target for all patients on the ERP pathway by 7.8% year to date. Our total hip replacement and total knee replacement patients are routinely discharged on the second day post operatively.

**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.

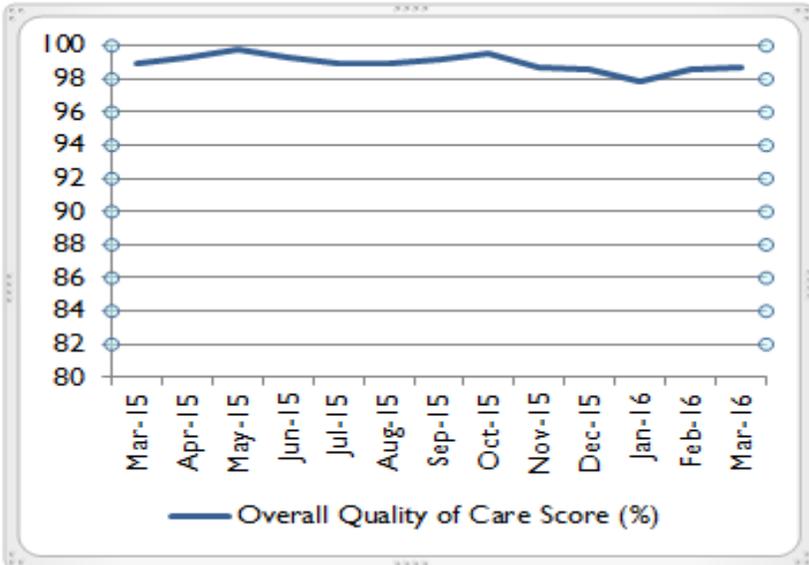
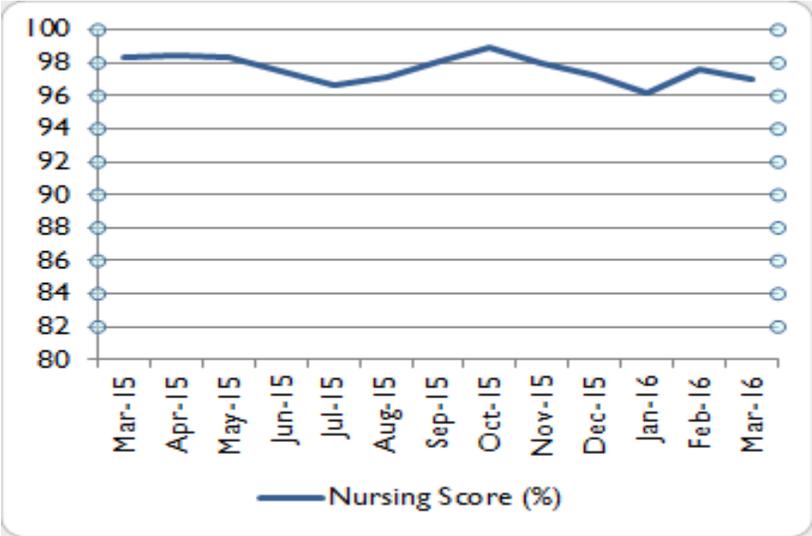


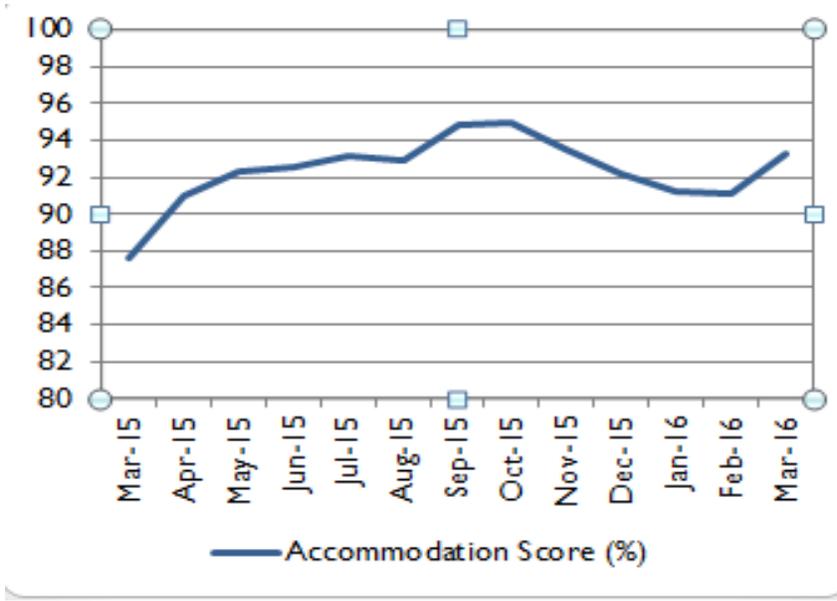
These cases were all unexpected but known complications of surgery. All patients had been appropriately pre assessed and consented. All incidences are closely reviewed to look for any areas of potential improvement.

## 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.





Our nursing and quality of care scores are consistently high in the top 90%. Our accomodation score is improving alongside the planned refurbishment programme.

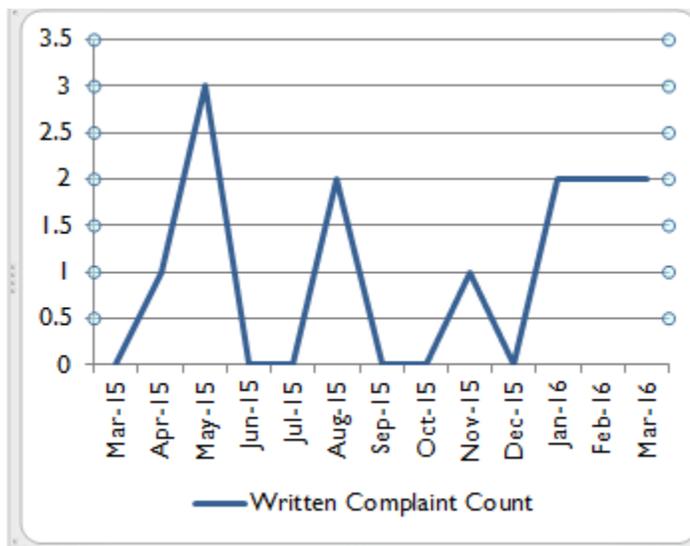
**Complaints**

In addition to providing all patients with an opportunity to complete a Satisfaction Survey BMI The Somerfield 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 main theme of complaints is around unexpected pathology charges. We have improved notifications in the Consulting Suite to try and improve this communication.

## CQUINS

Our CQUIN for last year looked at Medicine Management and ensuring that any errors were reported and actioned. The Somerfield had a 100% success rate for this target.

## National Clinical Audits

The National Joint Registry (NJR) for England, Wales, Northern Ireland and the Isle of Man collects information on joint replacement surgery and monitors the performance of joint replacement implants. It was set up in 2002 by the Department of Health and Welsh Government, Northern Ireland joined in 2013 and the Isle of Man in July 2015.

Totals for this hospital	2015	Year to date: 2016
Total completed ops	180	67
Hip procedures	75	27
Knee procedures	104	39
Ankle procedures	0	0
Elbow procedures	0	0
Shoulder procedures	1	1
NJR consent rate	100%	100%

## Research

No NHS patients were recruited to take part in research.

## Priorities for Service Development and Improvement

Our main priorities for the coming year will be

- To continue to work towards a JAG accredited endoscopy unit.
- To improve our service for ambulatory patients to ensure their journey is as safe and efficient as possible.
- To develop our service for medically ill patients so that we can offer a safe service for a wider range of patients.
- To improve our Minor Operations service in the Consulting Suite by developing the area to a higher clinical standard and therefore increasing the level of service we can provide.

## Quality Indicators

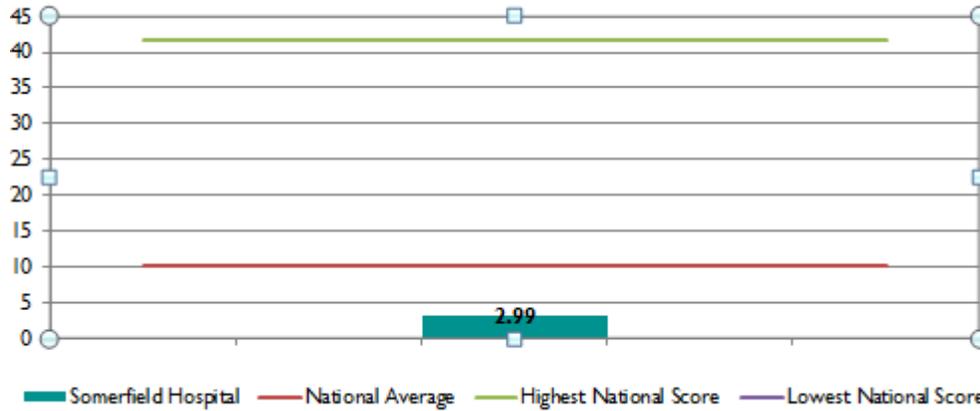
The below information provides an overview of the various Quality Indicators which form part of the annual Quality Accounts. Where relevant, information has been provided to explain any potential differences between the collection methods of BMI Healthcare and the NHS.

All data provided by BMI Healthcare is for the period **April 2015-March 2016** 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 will be the latest information available from the HSCIC website.

Indicator	Source	Information	NHS Date Period
Summary Hospital-Level Mortality Indicator (SHMI)	This indicator measures whether the number of patients who die in hospital is higher or lower than would be expected. This indicator is not something that is collected for the Independent Healthcare Sector.		
Number of paediatric patients re-admitted within 28 days of discharge and number of adult patients (16+) re-admitted within 28 days of discharge.	Sentinel Risk Management System which is used by all BMI Healthcare Hospitals	This figure provided is a rate per 1,000 amended discharges.	<b>2011-2012</b>
Percentage of BMI Healthcare Staff who would recommend the service to Friends & Family	BMI Healthcare Staff Survey		<b>NHS Staff Survey 2015</b>
Number of <i>C.difficile</i> infections reported	Sentinel Risk Management System which is used by all BMI Healthcare Hospitals	This indicator relates to the number of hospital-apportioned infections.	<b>April 2014 – March 2015</b>
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.	<b>June 2014 – January 2015</b>
Number of admissions risk assessed for VTE	CQUIN Data	BMI Healthcare only collects this information currently for NHS patients.	<b>April 2014 – March 2015</b>
Number/Rate of Patient Safety Incidents reported	Sentinel Risk Management System which is used by all BMI Healthcare Hospitals	Based upon Clinical Incidents with a patient involved where the NPSA Guidelines deem a severity applicable.	<b>October 2014 – March 2015</b>
Number/Rate of Patient Safety Incidents reported (Severe or Death)	Sentinel Risk Management System which is used by all BMI Healthcare Hospitals	Based upon Clinical Incidents with a patient involved where the NPSA Guidelines deem a severity applicable.	<b>October 2014 – March 2015</b>

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

**Adult Re-Admissions (Aged 16+) - Rate per 1000 Bed Days**



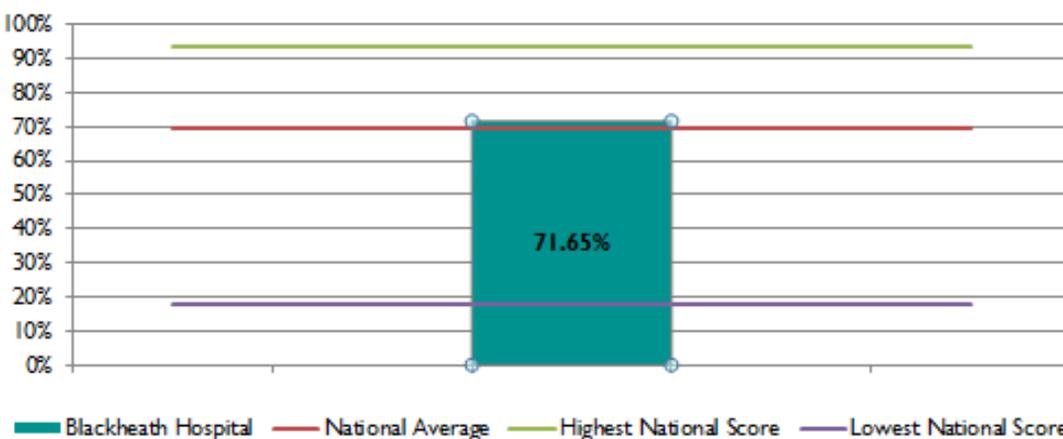
The Somerfield Hospital considers that this data is as described due to our thorough and robust pre admission service and emphasis on safety throughout the entire patient pathway.

The Somerfield Hospital will continue to monitor these cases on an individual basis to and implement any improvements to our service as necessary.

We do not admit paediatric patients.

**Staff Recommendation Results**

**Staff Recommendations**

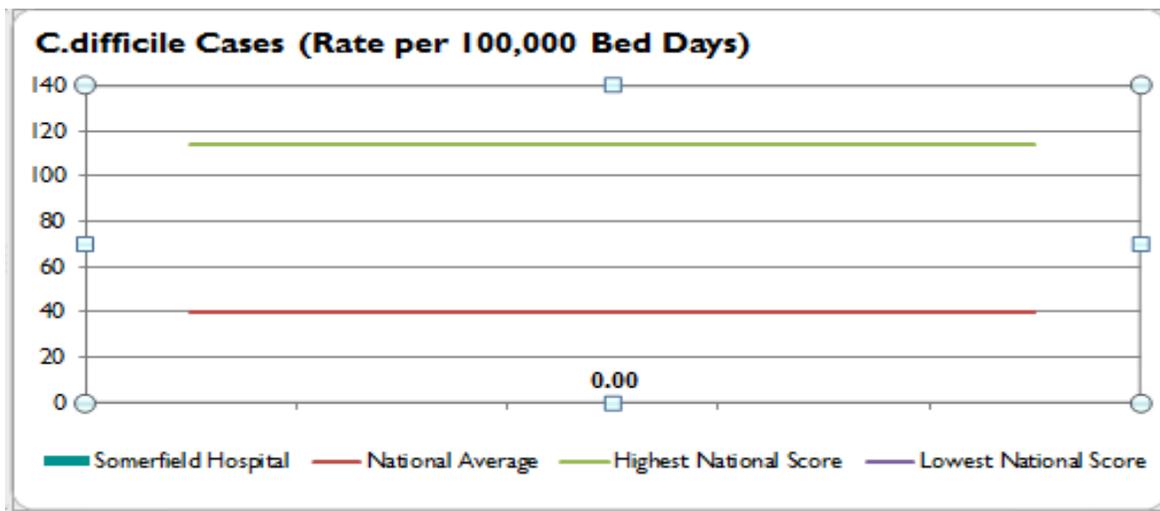


The Somerfield Hospital considers that this data is as described due to our focus on team work and ensuring that staff feel valued and how to address any concerns.

The Somerfield Hospital Management Team looks closely at the data to look for ways that they can be improved. We regularly hold Staff Forums and listen to our staff and address any issues that they raise and ensure that they know about any improvements made. An example of this would be the improved signage throughout the hospital to ensure our patients and visitors can find their way.

We share learning through incident review as a standard agenda item on departmental meetings and robust clinical governance.

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

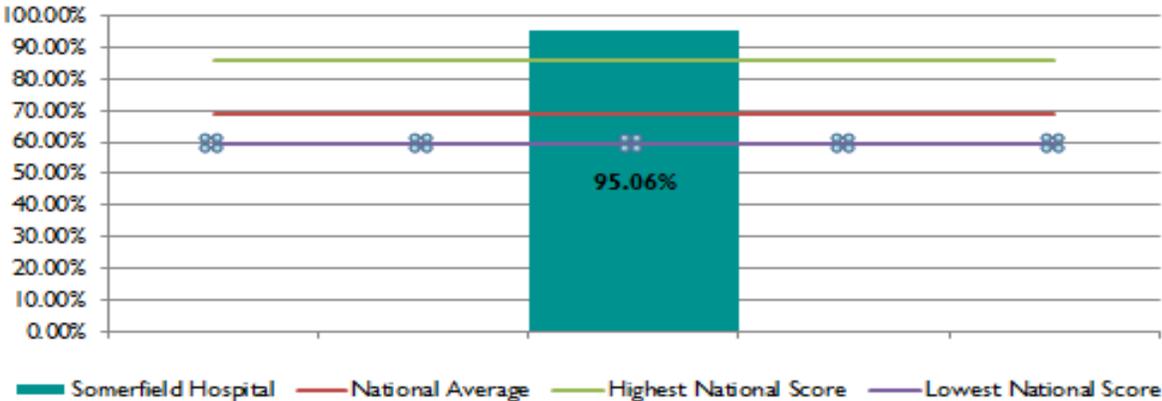


The Somerfield Hospital considers that this data is as described due to our excellent infection prevention and control processes.

The Somerfield Hospital will ensure that we maintain this standard and constantly review our data and processes to ensure that they are robust.

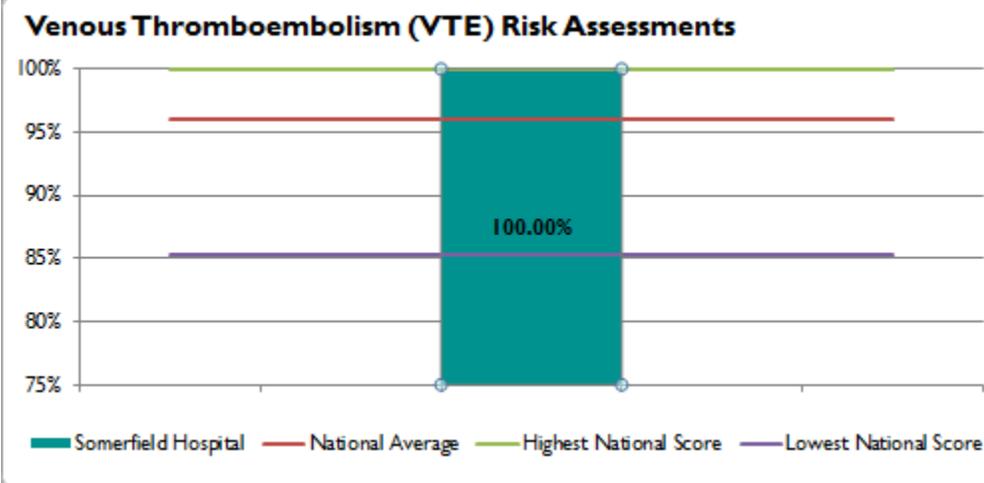
### Hospitals responsiveness to the personal needs of its patients

**Responsiveness (Patient Satisfaction)**



The Somerfield Hospital considers that this data is as described due to our consistent approach of putting the patient at the heart of everything we do. The Somerfield Hospital intends to continue this ethos to provide the very best care possible.

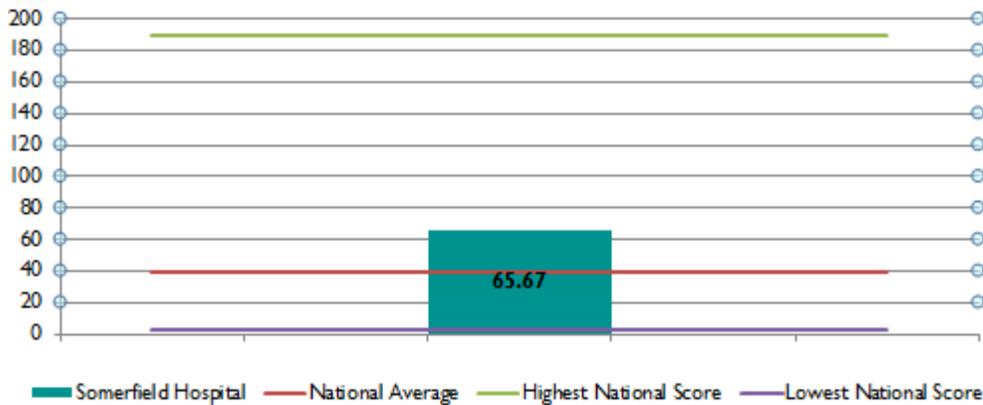
**The percentage of patients who were admitted to hospital and who were risk assessed for VTE (Venous Thromboembolism).**



The Somerfield Hospital considers that this data is as described due to a thorough auditing programme. The Somerfield Hospital will continue to ensure all patients are risk assessed to ensure our patients are safe.

**Patient Safety Incidents**

### Patient Safety Incidents (Rate per 1000 Bed Days)



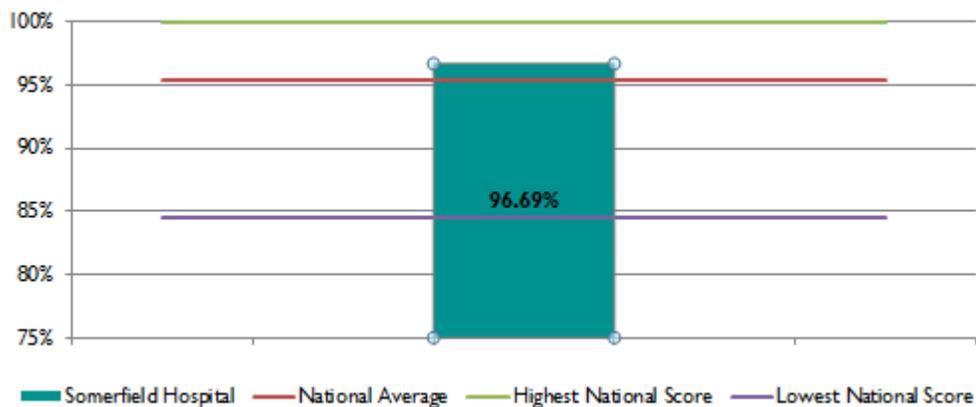
The Somerfield Hospital considers that this data is as described due to a full review of our reporting processes to ensure that all occurrences are reported and investigated. Although higher than the national average we have worked at increasing the amount of reporting that occurs so that we can ensure all learning outcomes are captured.

The Somerfield Hospital intends to continue to look at each incident and any preventative action necessary.

## Further Quality Indicators

### Patient Recommendation Results

#### Patient Recommendations



The Somerfield Hospital considers that this data is as described due to our strive for excellent patient care in all areas of the hospital.

The Somerfield Hospital will always put patients first and always try to make any experience with us as positive as possible.