



# Quality assurance and outcomes

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

To underpin our Quality aspiration, we believe our people must be the most highly skilled professionals; our processes, procedures and practices must be evidence based and meet, or exceed, healthcare sector standards; and our equipment must be leading edge.

Our Quality Assurance Framework, launched in 2018, continues to support our planning, delivery, monitoring and continuous improvement, ensuring that we deliver the highest levels of care and service to our patients, members and customers. Quality and safety are always prioritised over financial performance and everything we do is evaluated against the following criteria:

- ◆ **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, members and customers by giving them a positive and reassuring experience

HOW WE EVALUATE SAFETY AND CARE

## Overview

External organisations 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 Improvement Wales (HIW).

In 2019, we continued to receive industry recognition in several significant areas:

- 94% of our hospitals rated 'good' or 'outstanding' by national regulators, demonstrating our sector leading quality and safety of care
- 97% of knee replacement and 99% of hip replacement patients saw an improvement six months following surgery, both of which are on or above the industry averages of 95% and 99% respectively\*
- We featured in the NHS's Top 10 UK hospitals, with all hospitals achieving, or exceeding, improvements to patient quality of life following knee and hip replacement surgery
- For the third year running, we won both HealthInvestor and LaingBuisson Private Hospital Group of the Year awards.

These results are testament to the steadfast focus we've placed on clinical outcomes.

\* Based on Private Healthcare Information Network (PHIN) publication November 2019



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of our hospitals have been rated 'good' or 'outstanding' by national regulators





In 2019, our primary care sites (medical centres, and registered fitness and wellbeing clubs) were rated by CQC for the first time. All achieved ‘good’ as their overall rating, further underlining our commitment to quality in everything we do.

We’re one of the first independent hospital groups to proactively pilot the Getting it Right First Time (GIRFT) programme. Initially set up in 2017 as a partnership between the NHS Royal National Orthopaedic Hospital Trust and NHS Improvement, the aim is to help NHS foundation trusts improve care quality by examining and standardising clinical practices.

During 2019, the GIRFT team, led by Professor Tim Briggs, visited the 29 hospitals within GIRFT’s jurisdiction (excluding Scotland and Wales) to give their expert opinion on the standard of clinical care provided by Nuffield Health. The results validated some of the excellent clinical practice we know exists within our hospitals and the insights provided will help inform our further improvement.

Quality of care

Over the last two years, we have invested in our people, hospitals, medical centres, and fitness and wellbeing clubs to ensure the Quality of care we provide to our patients, customers and members is of the highest standard.



“My experience in care hopefully means I can assist the debate. I like to think I’m making a difference for the benefit of all patients”

Glenis Mitchell  
Forum member



“Nothing beats honest feedback”

“We see the wallpaper every day,” says Matron Sarah Turner-Brown, explaining the benefits of the Patient Forum that has been running at our Wolverhampton Hospital since 2018.

A strong advocate of ‘the patient’s voice’, Sarah believes listening to the views and ideas of those who’ve experienced care is the best way to make improvements.

“The hospital team is so close to things that, often, we don’t notice the obvious,” she says. “Forum members provide us with a fresh pair of eyes, whether it’s to do with signage, menus, pre-admission or, as happened recently, the renovation of the oncology suite. And, early in 2020, an expanded forum will help shape the endoscopy pathway.”

Forum member Glenis Mitchell had a hip operation at the hospital three years ago, referred through the NHS. She says she couldn’t fault the care she received. So, initially, when invited to join the forum, she didn’t think she would have much to offer. But, as a former NHS nurse, who works part-time for Marie Curie, Glenis now feels that she’s able to give a balanced view. “Some people are looking for perfection,” she says. “My experience in care hopefully means I can assist the debate. I like to think I’m making a difference for the benefit of all patients.”

Sarah Turner-Brown certainly thinks Glenis and the other volunteers are making a huge difference. “Nothing beats honest feedback,” she says. “The forum plays a key role in helping the hospital continually improve things for the people who trust us with their healthcare.”

96%  
customer satisfaction across our hospitals

219,000  
hospital procedures in 2019

3 years  
Nuffield Health has won both the HealthInvestor and LaingBuisson Private Hospital Group of the Year awards

2019 HIGHLIGHTS

Cancer care

Our personalised approach to cancer treatment means a patient’s individual needs are at the heart of everything we do. During 2019, following the recruitment of a Quality Lead for Cancer Services, a review was carried out at our 11 cancer treatment hospitals to ensure all were operating to the same high standards in quality.

A number of areas were identified for enhancement, including the installation at all sites of iQemo, an electronic chemotherapy prescribing system, which provides automatic dose calculations, allergy and sensitivity alerting, and drug-to-drug interaction support. In addition, the appointment of a Quality Lead for Oncology Pharmacy, and the creation of dedicated

dispensary areas, allow close collaboration between specialists.

The creation of a Cancer Development Group (CDG) brings together our most senior cancer nurses and pharmacists, and a Chemotherapy Lead Group (CLG) addresses issues, risks and incidents. The CDG and CLG provide a robust governance structure for cancer care across Nuffield Health.

Our Quality Lead for Cancer Services was instrumental in setting up the Independent Sector Cancer Network (ISCN), providing a dynamic forum for the sector to discuss issues and share best practice. A ‘Standards for cancer care in the independent sector’ paper, written by the ISCN, covers diagnosis to end of life care.





Gender affirmation

For more than 20 years, our Nuffield Health hospital in Brighton has proudly been at the forefront of gender affirmation surgery, demonstrating our commitment to inclusivity and care for everyone across our diverse population.

Brighton has a long-standing relationship with the NHS and recently won a further five-year contract for both male to female, and female to male, gender affirmation care. Before surgery can take place, patients, both self-referrals and NHS, follow the two-year NHS pathway protocol, to ensure they're emotionally, physically and psychologically prepared for the journey ahead.

Using a multidisciplinary approach involving the patient, the team has introduced a surgical pathway that has significantly reduced the amount of time patients spend in hospital. The innovative programme focuses on awareness, and providing patients with comprehensive information in the run-up to surgery on what to expect and how to manage recovery at home.

The premise is that the more information patients have, the better the outcome when they go home. Feedback has been positive and patients are comforted to know that clinical and emotional support is always available from our team, when and if they need it.

Although attitudes towards the transgender community have changed in recent years, there's still progress to be made. Recognising this, the Brighton team proactively coaches its people, including housekeeping, catering and the different nursing groups, on the importance of acceptance and understanding the unique mental health and anxiety issues that gender affirmation patients experience.

We are proud to support the transgender community and champion the care of patients requiring gender affirmation surgery. We're therefore delighted that our hospitals in Newcastle, Leicester and Portsmouth have joined Brighton in this specialist field, focusing on female to male chest reconstructions, all winning NHS five-year tenders.

Patient deterioration

During the course of 2019, attention focused on enhancing the ability of our hospital teams to promptly recognise the early signs of patient deterioration and provide rapid acute response. Following a comprehensive review, conducted in collaboration with our resuscitation partner, A to E Training & Solutions, a new emergency trolley was deployed across all hospitals with standardised content, equipment (defibrillators), and consumables such as masks and airways.

Associated policies were developed to inform best practice, and training and simulations were aligned accordingly. The programme was completed by the end of the year.

This area of quality improvement focused initially on the management of our adult patients. The same principles are now being applied to our services for children and young people. These will flow through to our primary care and wellbeing services during 2020.

In 2020, as well as making sure patients are as fit for surgery as they can be, we'll be giving guidance on nutrition, exercise and lifestyle decisions to optimise clinical recovery and deliver long-term health benefits.

Safety culture

Since 2016, we've focused on improving our safety culture and encouraging our people to report concerns, near misses and incidents – however minor. This activity was made easier following upgrades to our Datix reporting system. We're pleased, therefore, that safety reporting overall has improved year-on-year.

Our hospitals are subject to the same level of scrutiny and review as NHS facilities. We choose to report all serious incidents to our regulators, even though we're only required to report those incidents affecting NHS patients.

We contribute to relevant national clinical audits, such as the National Joint Registry (NJR) and patient reported outcome measures (PROMS).

Assessing people for surgery

In 2019, we concentrated on embedding our streamlined preoperative assessment (POA) process across the hospital network. Introduced in 2018, the process aims to standardise POA procedures and ensure best practice guidelines are followed, as outlined by the Royal College of Anaesthetists.

POA is underpinned by the clinical expertise and specialist education of our nurses. Accordingly, we doubled the number of attendees for the 2019 Preoperative Association's training course from 10 to 20.

Never Events are defined by NHS England as 'serious incidents that are wholly preventable because guidance or safety recommendations that provide strong systemic protective barriers are available at a national level and should have been implemented by all healthcare providers'. At Nuffield Health, they are investigated by a senior clinical leader and reviewed by our Quality Committee. Four Never Events were reported in 2019, a 33% decrease from six in 2018. Findings are cascaded to all sites and improvement implementation is monitored. This robust process has helped decrease and maintain low incident counts.



**Above:**  
We are proud to hold ISO standard certification in all key areas relevant to the Charity, demonstrating we go above and beyond best practice minimum requirements

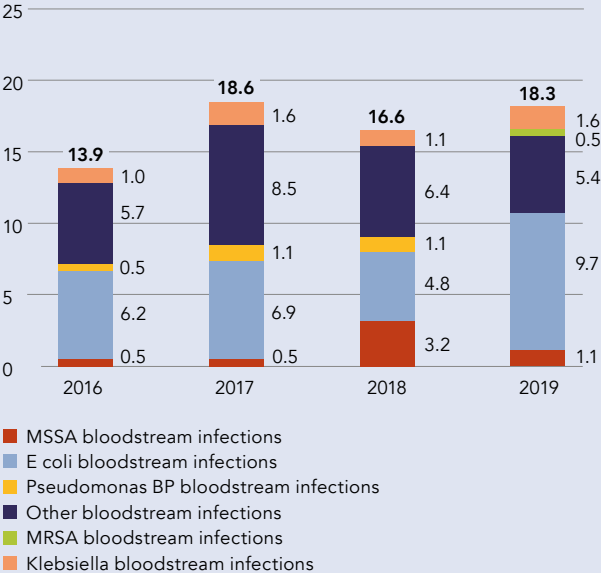


Working together to share knowledge and support each other is a critical success factor in delivering a consistent level of quality across our services

Carol Kefford, Clinical Director

Bloodstream infections

Number of infections per 100,000 bed days



We were proud to be finalists in the HSJ Patient Safety Changing Culture award. This recognised our ‘Be Bold, Be Brave, Speak Out’ scheme, which embeds the World Health Organisation (WHO) safety checklist, considered the gold standard in operating theatre safety. The scheme encourages openness and a spirit of advocacy amongst our teams, irrespective of role and grade. It contributed to a reduction of Never Events, and has received positive feedback.

Avoidable infections

2019 saw an increase in the overall number of infections over the previous year (see chart), from 16.6 to 18.3. One case of MRSA was recorded, which was disappointing as we’d been free of this infection for seven years. The patient was a known carrier of the infection and, once identified, was isolated appropriately. Following investigation, there was no evidence of cross-infection to other patients, demonstrating effective infection prevention practices were in place.

Nine cases of Clostridium difficile were identified, seven of which were seen in outpatient departments, with no prior history of care or intervention within our hospitals. The remaining two were attributable to healthcare interventions within a Nuffield Health hospital, linked to the use of preoperative antimicrobials – a known risk of usage.

Encouragingly, a significant reduction in MSSA infections was recorded, from 3.2 in 2018 to 1.1. And, for the first time in five years, no cases of Pseudomonas BP were recorded. We continue to focus on driving robust infection prevention and maintaining our high standards.

Governance

Our Quality and Assurance function oversees systems across the Charity to support our purpose. The team is independent of day-to-day operations and responsible for overseeing and embedding all quality, governance and compliance matters.

In 2019, a standardised reporting framework was introduced to our hospitals, providing template agendas and terms of reference. This facilitates a consistent approach towards governance, and the management of risk across all our sites, with clear lines of escalation.

Quality always tops the agenda for our monthly Board of Trustees and Executive Board meetings. A report, presented by our Clinical Director, is shared with all sites and, in line with our commitment to transparency, we voluntarily send a copy to our regulators.

In addition, a number of other boards and meetings are held across the Charity, including:

- Our dedicated Board Quality and Safety Committee (BQSC) monitors and reviews clinical governance. As well as regulatory oversight, it considers clinical risk and health and safety matters. The BQSC meets quarterly, at different hospital locations around the country
- Regular meetings, and clinical engagement events, are held for clinical specialists, including matrons, theatre managers and pharmacists
- Expert advisory groups (EAGs) meet to scrutinise clinical key performance indicators in areas such as infection prevention and primary care services
- A Medical Society in each hospital brings together consultants and local leadership teams to discuss central business developments and topics of interest.



The Paterson Inquiry

We’re committed to supporting the recommendations of the Paterson Inquiry, which followed the conviction of former surgeon Ian Paterson for malpractice. Proactive action was taken before and since the inquiry to review and, where appropriate, implement the lessons learned. We’ll continue to work with, and support, the Independent Healthcare Provider Network (IHPN) as it ensures the delivery of first class, safe and efficient healthcare across our industry.

GDPR

During 2019, General Data Protection Regulation (GDPR) principles were embedded throughout the Charity, overseen by our Information Risk Expert Advisory Group. New governance procedures ensure a solid process for the management of data, and compliance with regulations and guidelines. Datix and Information Commissioner’s Office (ICO) incidents have reduced year-on-year, and risk areas identified and provided with additional resources.

Our focus in 2020 will be on greater compliance in data retention and storage; implementation of ‘privacy by design’ across the Charity; and greater alignment between our internal teams to allow end-to-end supplier assurance.



Improvement plan for 2020

Enhance our safety culture

- ◆ Sustain and monitor excellent standards of practice in operating theatres
- ◆ Implement and enhance the iQemo system at all sites
- ◆ Sustain and monitor standardisation of hospital emergency equipment. Further develop training and simulation activities.

Be recognised for our commitment to professional development

- ◆ Develop and deploy the Nightingale Programme for nurses
- ◆ Deliver the Theatre Manager Development Programme to a second cohort.

Develop specialist services in line with best practice

- ◆ Deliver our clinical enhancement plan within cancer services and demonstrate evidence-based best practice
- ◆ Translate improvements made in adult care records, vital signs monitoring, early warning systems and sepsis triggers to children and young people.

Enhance our governance

- ◆ Refresh our clinical policies, ensuring that our policy library is up to date and fully aligned with current UK regulation and evidence-based practice
- ◆ Implement an audit schedule across all hospitals that meets regulatory and clinical standard requirements, thereby providing heightened assurance.