

Quality Report 2011

A COMPANY LIMITED BY GUARANTEE WITHOUT A SHARE CAPITAL

REGISTERED IN ENGLAND NUMBER 576970

A REGISTERED CHARITY NUMBER 205533

A REGISTERED CHARITY IN SCOTLAND NUMBER SC041793

Registered Office:

40-44 COOMBE ROAD
NEW MALDEN
SURREY
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NUFFIELD HEALTH

Principal and Registered Address

40-44 Coombe Road
New Malden
Surrey KT3 4QF

Company number
Charity number in England and Wales
Charity number in Scotland

576970
205533
SC041793

Headline Statistics for 2011

Year	2011	2010
Number Of Hospitals	31	31
Number of Beds	1,411	1,364
Number of Consumer Wellbeing Centres	53	53
Number of Medical Centres	8	8
Number of Corporate Wellbeing Centres	193	189
Number of Patients treated in Hospitals	265,156	262,872
Number of Hip and other Orthopaedic Procedures	46,800	45,500
Number of General Surgical Procedures	30,900	30,500
Number of Ophthalmic Procedures	14,500	13,700
Number of Outpatient Visits	317,350	301,250
Number of Members of Corporate Centres	100,000	96,590
Number of Consumer Fitness Members	134,000	138,314
Number of Physiotherapy Sessions	460,000	303,600
Number of MRI and CT Scans	58,500	54,563
Number of Radiological Examinations	153,665	152,343
Number of Health MOTs	82,000	58,000

Highlights for 2011

Maintenance and Improvement on Standards

- ✔ Year on year improvement in infection prevention and control standards.
- ✔ NHS Litigation level 3 accreditation - the highest risk management standard in UK healthcare.
- ✔ Extension of ISO 27001 information security certificate to include all Nuffield Hospitals, Group Call Centres, Medical Centres and Wellbeing Clinics within Fitness & Wellbeing Centres.
- ✔ Maintenance of our full decontamination accreditation to International Organisation for Standardisation (ISO) 9001 and ISO 13495 standards.
- ✔ Full pathology accreditation with Medicines and Healthcare products Regulatory Agency (MHRA) and Clinical Pathology Accreditation (CPA) standards.
- ✔ Full two-way barcode automation of blood transfusion system.

Recognition through Awards

- ✔ Winner of the 2011 Flame Award for Corporate Wellbeing.
- ✔ Winner of 2011 Health Investor Hospital Group of the Year.
- ✔ Finalist for 2011 Laing and Buisson Medicines Management and Use of Technology Awards.
- ✔ Finalist for 2011 Laing and Buisson Best Use of Technology in Risk Management.

Development of Facilities and Services

- ✔ Full registration of all English Nuffield Health clinical facilities with the Care Quality Commission, Scottish facilities with Healthcare improvement Scotland, and Welsh facilities with Healthcare Inspectorate Wales.
- ✔ Opening Fitness & Wellbeing centres in Reading, St Albans, Stoke Poges, Surbiton and Paddington.
- ✔ Completing refurbishments of the Nuffield Health Leicester and Guildford hospitals with on-going work at Tunbridge Wells and Wessex hospitals.
- ✔ Commencing new hospital build in Bristol and starting new work in Brentwood hospital for 2012.
- ✔ Launch of new NuffieldHealth.com website with enhanced patient information.

Learning Points (LP) for 2011

- 🛡️ Reopening of the compliance action with Environmental Health Officers in Cannock following serious untoward pool plant room chemical incident in February 2008.
LP - Review of the storage of all plant room chemicals and upgrading of the storage facilities in those areas requiring it.
- 🛡️ Theft of controlled drugs from Operating Theatres in Hayward's Heath Hospital.
LP - The Whistle-blowing policy and system in place within Nuffield Health hospitals is effective. Root cause analysis of incidents required additional training.
- 🛡️ Referral of three consultants to the General Medical Council for professional misconduct.
LP - The Clinical Governance review systems in place within Nuffield Health hospitals are effective.
- 🛡️ Formaldehyde preservation fluid leaks at our Wolverhampton (requiring Fire Brigade assistance) and Chichester hospitals.
LP - The storage of these chemicals within our theatre facilities required review and upgrading. This was completed in 2011.
- 🛡️ Flood in Bournemouth hospital theatre and basement from torrential rain.
LP - This incident gave the staff the opportunity to learn from the management of a major incident.
- 🛡️ Serious untoward incident with injury to staff member in Ipswich following a fall on a wet floor resulting in Health and Safety Executive Improvement Notice.
LP - Nuffield Health could not demonstrate the embedding of health and safety risk assessments in the area of slips trips and falls. Nuffield Health has since recruited a Health and Safety specialist to concentrate on this particular area in hospitals; risk assessments are performed across the portfolio and risk assessments demonstrated compliance.
- 🛡️ Professional registration lapse for member of nursing staff at the Nuffield Health Leeds Hospital.
LP - The policy has been changed and checking procedures changed.

Introduction to Nuffield Health

Our fifth Annual Quality Report, setting out our credentials for Integrated Governance in 2011, demonstrates our commitment to high quality care and openness about the challenges we face.

Our Annual Quality Report is published with our Annual Accounts, emphasising the importance of joined up healthcare. Our aim is to offer healthcare that links health and wellbeing at home, in the workplace and hospital when needed.

The Quality Report is designed to provide a transparent look into our organisation to give confidence in our facilities and capabilities to our partners and customers. As an organisation we depend on our staff for their skills and service to customers. They can only do their jobs effectively if we listen to them and learn from their experience and ideas.

The aftermath of the financial crisis has undermined public trust and emphasised the importance of values and integrity. Our not for profit model is unique enabling us to remain independent, offering choice and enabling us to always put the needs of our customers first.

The pace of change in healthcare continues to accelerate with our ageing population, increasing burden of chronic conditions, higher expectations and an ever increasing array of new treatments. We are entering an era where healthcare will be delivered in a mixed economy with public, private and not for profit provision. This will serve the consumer well with greater choice, innovation and personalisation of care. We have seen steady growth in the demand for complex hospital care alongside preventative treatments and wellbeing. These are clear signs that people are thinking more about their health and wellbeing in making a choice where they go to get trusted advice.

David Mobbs
Group Chief Executive
Nuffield Health

Hospitals Clinical Quality Account Full Year to December 2011

Average of 31 Nuffield Hospitals

		2011	2010	Lower Limit	Upper Limit
Incidents	Incidents % of Activity	1.84%	1.95%	> 4.00%	< 2.50%
	Serious Untoward Incidents (open at year end)	2.7	3.3	> 10	< 5
	Incidents of Major Severity (open at year end)	1.2	1.3	> 5	< 2
	Low/Minor Incidents % of Total Incidents	90.0%	90.8%	< 70.0%	> 80.0%
Complaints	Stage 1 Complaints % of Activity	0.90%	0.88%	> 2.00%	< 1.00%
	Number of Open Complaints at Year End	3	3	> 10	< 5
	Average Number of Days to Close Complaints	25	28	> 60	< 30
Patient Satisfaction*	% Recommend Hospital to Family and Friends	76.5%	72.8%	< 60.0%	> 70.0%
	% High Rating of Overall Care	78.9%	75.1%	< 60.0%	> 70.0%
	% High Rating of Trust in Nurses	87.6%	85.0%	< 60.0%	> 70.0%
	% High Rating of Cleanliness	68.3%	66.1%	< 60.0%	> 70.0%
	Satisfaction Survey Returns as a % of Activity	23.4%	23.6%	< 10.0%	> 20.0%
Audit	Health and Safety	92.6%	93.4%	< 80.00%	> 90.00%
	Medicines Management**	88.1%	93.5%	< 80.00%	> 90.00%
	Blood Transfusion	90.7%	85.0%	< 70.00%	> 80.00%
	Radiology Protection	92.3%	90.0%	< 80.00%	> 90.00%
	Infection Prevention	98.1%	95.0%	< 80.00%	> 90.00%
Training	Mandatory % of Average Contracted Staff	86.0%	92.8%	< 80.00%	> 90.00%
	Safeguarding Children % of Avg Contracted Staff	86.4%	85.2%	< 80.00%	> 90.00%
	Vulnerable Adults % of Average Contracted Staff	82.2%	82.1%	< 80.00%	> 90.00%
	Blood Transfusion % of Avg Contr'd Medical Staff	76.0%	59.3%	< 80.00%	> 90.00%
Patient Reported Outcome Measures (PROMs)***	MAT Knee Surgery EQ-5D Improvement %	85.4%	81.4%	77.90%	77.60%
	MAT Hip Surgery EQ-5D Improvement %	90.3%	92.1%	86.70%	87.20%
	MAT Varicose Vein EQ-5D Improvement %	70.0%	60.0%	51.60%	52.40%
	MAT Groin Hernia EQ-5D Improvement %	61.1%	63.9%	50.50%	49.30%

*Patient Satisfaction scores demonstrate 'Excellent' scores **only**, as combined scores for 'Excellent' and 'Very Good' are over 90% and therefore not deemed useful learning.

**Medicines Management Audit standards have been increased this year and are therefore a harder target.

***EQ-5D is a recognised national measurement tool, enabling comparison with the NHS and other sectors.

Figure 1

Wellbeing Clinical Quality Account Full Year to December 2011

Average of All Locations - All Clinical Products & Services

		2011	Lower limit	Upper Limit
Clinical Measures	Stress ECG Adverse Event (minor)	154	200	180
	Stress ECG Adverse Event (major)	46	80	50
	Nuffield Owned Physiotherapy Sites - Report Rejection Rate	5%	10%	5%
	3rd Party Physiotherapy Sites - Report Rejection Rate	>10%	10%	5%
	Mammography - No. of Technical Recalls	>10%	10%	5%
Incidents	Number within a Fitness facility	12	15	6
	Number within Physiotherapy	7		
	Number within Health Assessments	5		
	Total number of Serious Untoward Incidents in all Departments	3		
	Total number of RIDDOR Reportable Incidents in all Departments	1		
Complaints	Health Assessment Complaints %	1.20%	4%	2%
	Physiotherapy Complaints %	>4%		
	Fitness Complaints %	>4%		
	Mammography (M&S) Complaints %	>4%		
Customer Satisfaction*	Health Assessments - 'How would you rate Nuffield Health' - Excellent	>50%	40%	50%
	Physiotherapy - 'How would you rate Nuffield Health' - Excellent	>50%		
	Fitness - 'How would you rate Nuffield Health' - Excellent	>50%		
	Health Assessments - 'Would you recommend Nuffield to Friends & Family' - Definitely	>50%		
	Physiotherapy - 'Would you recommend Nuffield to Friends & Family' - Definitely	>50%		
	Fitness - 'Would you recommend Nuffield to Friends & Family' - Definitely	>50%		
	Health Assessments - 'How do you rate the cleanliness of the Centre' - Excellent	>50%		
	Physiotherapy - 'How do you rate the cleanliness of the Centre' - Excellent	>50%		
	Fitness - 'How do you rate the cleanliness of the Centre' - Excellent	>50%		
Efficiency	Health Assessments Cancellations	NA	90%	95%
	Health Assessments Rebookings	NA		
	Health Assessments DNAs	NA		
	Health Assessment Performance compared to Service Level Agreements	>95%		
	Physiotherapy - % of Poor Outcomes	NA		
	No. of Normal Mammography Results Outside Identified Parameters	NA		
	No. of Abnormal Mammography Results Outside Identified Parameters	NA		
Audits	No. of Abnormal Results not dealt with appropriately	4	15	6
	Physiologist - Average Quality Score	>5.5%	4.0	5.5
	Physiologist - Average Safety Score	>1%	1.0	0.75
	Physiotherapy - No. of Cases where notes are written late	NA		
Staffing	Clinicians - Staff Turnover %	>30%	30%	20%
	Physiologists - Staff Turnover %	>30%		
	Physiotherapists - Staff Turnover %	>30%		
	Outstanding Clinicians Appraisals	NA	>10	0
	Outstanding Physiologists Appraisals	NA		
	Outstanding Physiotherapists Appraisals	NA		
	Average Continuous Professional Development Scores - Clinicians	NA	>10	<8
	Average Continuous Professional Development Scores - Physiologists	NA	>4	<2
	Average Continuous Professional Development Scores - Physiotherapists	NA		

NB. It should be noted that there is no comparison for 2010 as this Quality Account is new for 2011.

NB. It should be noted that some measures are not available for full year and are shown as > greater than or < less than.

NB. It should be noted that some measures have been identified to start in 2012, these are shown as not available (NA).

*Customer Satisfaction is measured against the 'Excellent' rating only

Figure 2

Feedback from the Board of Governors

The Board of Nuffield Health has always maintained independent oversight for the services we deliver. The Board Integrated Governance Committee comprises non-executive directors who represent our membership and the customers we serve working in partnership with the clinical executive. The Quality Account is of course a requirement in The Health Act 2009 and supporting regulations for NHS patients but something we started many years before as part of our pioneering approach to champion high standards of care.

The intent for our Quality Account is multi-focal: to maintain the profile of quality care within the organisation by engaging clinicians, staff and patients; to reflect on our achievements; to provide feedback and to focus on new priorities and finally, to assess and inform improvement in our services.

The Committee meets four times a year and monitors clinical processes and risk by:

- ✔ Ensuring that the overarching governance policy framework is in place
- ✔ Monitoring service delivery and promoting improvement through internal and external audit
- ✔ Tracking benchmarked clinical information.

The Board has reviewed the quality of services across the organisation in 2011 with improvements in all areas of customer satisfaction and maintenance of high standards. We were of course delighted to be accredited against the highest healthcare risk standard in the UK (NHSLA level 3), a clear way for us to demonstrate independent appraisal of the 50 areas that really matter in aspects of patient safety. We are also respectful of the challenges in running a diverse organisation and we must always learn lessons from where problems arise.

The organisation's priorities for quality improvement for the coming governance year are to;

- ✔ Publish activity and outcomes data for patients undergoing treatment on our website
- ✔ To retrospectively audit the use of medical devices in the organisation (including breast implants and metal on metal hip replacements) contacting patients in need of follow up review
- ✔ To seek OHSAS 18001 health and safety accreditation to provide external assurance to the changes we have made following recent incidents.

We will be reviewing our approach again in 2012. We know that our values and integrity are totally dependent on the skills and commitment of our staff.

Jane Wesson

Governor and Chair of the Board Integrated Governance Committee

1 Governance

Nuffield Health places a very strong emphasis on governance. In 2010 it decided to seek to increase the level of accreditation it had reached with the National Health Service Litigation Authority (NHSLA) Risk Management Standards. The standards are designed to address organisational, clinical, non-clinical and health and safety risks; and to provide a structured framework within which to focus effective risk management activities in order to deliver quality improvements in organisational governance, patient care and the safety of patients, staff, contractors, volunteers and visitors.

It was already the first independent healthcare sector provider accredited at NHSLA Level 1 and then level 2 in 2008. At the end of 2011 Nuffield Health became the first independent sector healthcare provider to achieve Level 3 accreditation with NHSLA Risk Management Standards, and the first multi-site national provider. At the time it joined only 23 NHS Trusts who had achieved that level.

All 31 Nuffield Health hospitals were required to achieve the same high level, and 8 were assessed during the process.

Overview of risk areas for acute, community and Independent sector organisations from NHSLA Risk Management Standards 2011:

Risk Areas				
Governance	Competent and Capable Workforce	Safe Environment	Clinical Care	Learning From Experience
Risk Management Strategy	Corporate Induction	Secure Environment	Patient Information and Consent	Clinical Audit
Policy on Procedural Documents	Local Induction of Permanent Staff	Slips, Trips & Falls (staff and others)	Health Record Keeping Standards	Incident Reporting
Risk Management Committee(s)	Local Induction of Temporary Staff	Slips, Trips & Falls (patients)	Screening Procedures (pilot in 2011)	Concerns / Complaints
Risk Awareness Training For Senior Managers	Supervision of Medical Staff in Training (not applicable to Nuffield Health)	Moving and Handling	Diagnostic Testing (pilot in 2011)	Claims
Risk Management Process	Risk Management Training	Innoculation Incidents	Medicines Management	Investigations
Risk Register	Training Needs Analysis	Maintenance of Medical Devices and equipment	Transfusion	Analysis
Responding to External Recommendations Specific to the Organisation	Medical Devices Training	Harassment and Bullying	Resuscitation	Improvement
Health Records Management	Hand Hygiene Training	Violence and Aggression	Venous Thromboembolism	Best Practice (National Institute of Clinical Excellence)
Professional Clinical Registration	Moving and Handling Training	Supporting Staff Involved in an Incident, Complaint or Claim	Transfer of Patients	Best Practice (National Confidential Enquiries into Peri-Operative Deaths)
Employment Checks	Consent Training	Stress	Discharge of Patients	Being Open

Figure 3

1.1 Quality Measurement

Nuffield Health monitors quality and governance regularly. Below is an extract from the Hospitals Division Quality Account for 2011.

	Registered with the CQC under the Health and Social Care Act 2008 (England)	Number of Beds Notified to CQC	Reportable MRSA Infection % In and Day Case Activity	Incidents as % of activity	Stage 1 complaints as % Activity	% High Rating of Overall Care	% High Rating of Trust in Doctors and Nurses	% Contracted Staff Completing Mandatory Training	% Contracted Staff Completing Blood Transfusion Training	Radiology Audit Score
Total Nuffield Health Hospitals	Yes	1411	2	1.84	0.90	98	100	86.0	76	92
Bournemouth	Yes	57	0	1.73	0.85	97	99	91.0	97	90.7
Brentwood	Yes	48	0	2.40	0.51	97	100	89.6	85	100
Brighton	Yes	56	0	0.88	1.27	97	100	78.6	58	88.5
Bristol	Yes	29	0	2.78	0.41	100	100	97.6	98	97.6
Cambridge	Yes	50	0	2.40	0.49	98	100	88.0	77	87.1
Cheltenham	Yes	38	0	1.83	3.06	98	100	93.6	97	97.1
Chichester	Yes	40	0	1.91	1.54	99	100	81.8	78	93.3
Derby	Yes	49	0	3.06	0.92	99	100	93.1	67	87.2
Exeter	Yes	45	0	3.20	0.73	98	100	91.8	95	95.8
Glasgow	Scotland	33	0	1.61	1.81	99	100	88.4	86	90.8
Grosvenor (Chester)	Yes	36	0	1.11	1.17	98	100	77.4	58	100
Guildford	Yes	54	1	1.22	1.10	92	98	73.7	72	90.7
Haywards Heath	Yes	42	0	1.92	1.21	98	100	90.9	57	85.8
Hereford (Wye Valley)	Yes	23	0	1.64	0.35	97	99	89.7	81	94.4
Ipswich	Yes	60	0	2.15	0.44	98	100	87.9	75	92.1
Leeds	Yes	88	0	1.30	0.62	99	100	81.4	68	95.1
Leicester	Yes	46	0	1.70	1.02	98	99	85.4	75	94.1
Newcastle-upon-Tyne	Yes	40	0	3.07	0.69	98	100	86.9	58	93.7
North Staffordshire	Yes	40	1	1.26	0.83	97	100	81.1	62	90.7
Oxford (The Manor)	Yes	71	0	0.90	0.74	95	99	74.9	65	86.5
Plymouth	Yes	41	0	1.54	0.67	97	99	84.6	74	90.8
Shrewsbury	Yes	34	0	1.52	1.01	100	100	89.0	95	92.2
Taunton	Yes	41	0	1.94	0.55	98	99	81.6	74	91.4
Tees	Yes	31	0	2.53	0.29	99	100	83.1	78	94.2
Tunbridge Wells	Yes	58	0	2.38	0.57	96	99	75.4	72	83.3
Vale	Wales	26	0	Not available as hospital acquired in 2011						
Warwick	Yes	42	0	1.95	0.88	97	99	75.2	67	97.9
Wessex	Yes	55	0	1.22	1.74	96	99	85.8	86	94.2
Woking	Yes	47	0	1.62	0.62	98	100	77.0	63	92.5
Wolverhampton	Yes	49	0	2.72	1.03	98	100	84.8	74	86.4
York	Yes	42	0	1.58	0.57	98	100	93.1	92	94.3

Figure 4

1.2 External Regulation under the Health and Social Care Act 2008.

Nuffield Health is registered to provide seven regulated activities under Schedule 1 of the Health and Social Care Act 2008:

- 🏥 Treatment of disease, disorder or injury (Regulated Activity 5)
- 🏥 Surgical Procedures (Regulated Activity 7)
- 🏥 Diagnostic and Screening Procedures (Regulated Activity 7)
- 🏥 Supply of blood and blood derived products (Regulated Activity 7)
- 🏥 Maternity and Midwifery services (Regulated Activity 11)
- 🏥 Termination of pregnancy (Regulated Activity 12)
- 🏥 Family planning services (Regulated Activity 15).

Nuffield Health provides services to all age ranges from birth to adult; including specialist care, screening, diagnostic services, private GP services, physiotherapy and fitness. These are provided in the workplace, in the community and in hospitals.

The hospital facilities registered with the CQC for 1 or more regulated activities are identified in Figure 4.

Our Glasgow hospital is registered with Healthcare Improvement Scotland; and our Vale hospital in Cardiff is registered with Healthcare Inspectorate Wales.

There were a further 2 Fitness & Wellbeing facilities registered with the CQC to provide the regulated activity of Diagnostic and Screening Procedures in 2011 and all Fitness & Wellbeing facilities were additionally registered to provide the regulated activity of Treatment of Disease, Disorder and Injury. These facilities are as follows:

- 🏥 Nuffield Health Wellbeing Birmingham
- 🏥 Nuffield Health Bristol Fitness & Wellbeing Centre
- 🏥 Nuffield Health Cannock Fitness & Wellbeing Centre
- 🏥 Nuffield Health City Fitness & Wellbeing Centre
- 🏥 Nuffield Health Farnham Fitness & Wellbeing Centre
- 🏥 Nuffield Health Canary Wharf Medical Centre
- 🏥 Nuffield Health Fitness & Wellbeing Centre Crawley
- 🏥 Nuffield Health & Wellbeing Centre London City Medical Centre
- 🏥 Nuffield Health Wellbeing Centre London West End
- 🏥 Nuffield Health Wellbeing Centre Manchester
- 🏥 Nuffield Health Wellbeing Centre Nottingham
- 🏥 Nuffield Health Fitness & Wellbeing Centre Paddington
- 🏥 Nuffield Health Reading Fitness & Wellbeing Centre
- 🏥 Nuffield Health Stoke Poges Fitness & Wellbeing Centre
- 🏥 Nuffield Health St Albans Fitness & Wellbeing Centre
- 🏥 Nuffield Health Surbiton Fitness & Wellbeing Centre
- 🏥 Nuffield Health Warwick Fitness & Wellbeing Centre

The CQC regulates Healthcare in line with the Health and Social Care Act 2008 and no Nuffield Health facility was the subject of enforcement action from the CQC in 2011.

1.3 New Procedures and Research Projects.

Nuffield Health has a stringent process in place for approving new procedures and research projects.

1.3.1 New Procedures approved in 2011

Title	Site approved for	Number Undertaken
Tibial Nerve Stimulation for Faecal incontinence	All hospitals	5
Strattice Mesh for Breast reconstruction	Chester Hospital	1
PILLAR palatal implants for snoring	All Hospitals	2
Cardiac MRI scanning on mobile MRI	Wolverhampton Hospital	0
Endobarrier procedure	Leeds Hospital	0
Enhanced recovery for TKR using local anaesthetic to the knee joint using PreSet PCA pump.	All Hospitals	2
I-Lipo laser lipolysis for fat reduction	Plymouth Hospital	9
Lipo-modelling	Glasgow Hospital	1
Painkwell peri-articular catheter for local anaesthesia for Hip and Knee replacement surgery	All Hospitals	5
Collagenase injection for Dupuytren's contracture	All Hospitals	48
Kinespring Knee device	Ipswich	1
Intra-vitreous dexamethasone implant for Retinal Vein Occlusion	All Hospitals	1
TruMatch knee templating system	Guildford	1
Triathlon knee templating system	Exeter and Wessex	16
Visionaire Knee templating system	Brighton, Bristol, Chichester & Derby	34
Signature knee templating system	Tunbridge Wells, York and Cambridge	2

Figure 5

1.3.2 Research Projects approved in 2011

Title	Investigator	Site	Number of Patients Involved	Time period of Study / End Date
Assessment of the Effectiveness of Extracorporeal Shock Wave Therapy (ESWT) for Soft Tissue Injuries (ASSERT)	Professor Nicola Maffulli	Exeter Hospital	108	April 2013
Patient Specific Responses to Total Joint Replacements	Mr Martin Stone and Dr Joanne Tipper	Leeds Hospital	1	Review January 2012 Target numbers 100 - 200
Do Patients want exercise advice when electing for weight loss surgery at Nuffield Health?	Bethany Aitken	Glasgow Hospital	60 (300 questionnaires sent with a 20% response rate)	September 2011

Multi-centre, open label, prospective, consecutive series registry database of BioPoly™-RS Partial Resurfacing Knee Implant	Mr Vladimir Bobic	Chester Hospital	Not yet started	Not yet started
Randomized, Double-blind, Multi-centre Two-Stage Adaptive Phase 3 Study of Intravenous Administration of REOLYSIN® (Reovirus Type 3 Dearing) in Combination with Paclitaxel and Carboplatin versus the Chemotherapy Alone in Patients with Metastatic or Recurrent Squamous Cell Carcinoma of the Head and Neck who have Progressed on or after Prior Platinum-Based Chemotherapy	Dr Katie Wood	Guildford Hospital	0	December 2012

Figure 6

1.4 External Audit Participation

Nuffield Health has an open and transparent approach to governance and participates in external audit as appropriate. Nuffield Health has participated in the following external audits in 2011:

1.4.1 Regulatory Audits - required under law with results available on the auditors websites.

- 🏠 Care Quality Commission (CQC) - regulatory audits
- 🏠 Medicines and Healthcare Regulatory Agency (MHRA)
- 🏠 Human Fertilisation and Embryology Authority (HFEA) regulatory audits
- 🏠 General Pharmaceutical Council
- 🏠 Health and Safety Executive announced and unannounced audits
- 🏠 Ofsted
- 🏠 Environmental Health Office announced and unannounced inspection audits

1.4.2 Quality Standards - participation to demonstrate levels of quality improvement and compliance.

- 🏠 Medicines and Healthcare Regulatory Agency (MHRA) Safer Blood Compliance
- 🏠 Clinical Pathology Accreditation (CPA) audits
- 🏠 National Confidential Enquiry into Peri-Operative Deaths (NCEPOD)
- 🏠 National Joint Registry (NJR)
- 🏠 Patient Environment Action Team (PEAT)
- 🏠 Macmillan Cancer Quality Mark
- 🏠 BUPA MRI screening
- 🏠 World Health Organisation "Save Lives: Clean Your Hands" .

1.5 Information Governance

The Group Information Governance team is responsible for ensuring the necessary safeguards are in place for the management of all information, ensuring its confidentiality, integrity and availability are maintained within the framework of law and best practice.

The assurance framework for managing information governance introduced in 2010 has continued to grow in 2011. A key change was the revision of the 'Information Risk Management Standard Operating Procedure' guidance which incorporated changes to ensure clearer guidance to sites for risk mitigation and acceptance, and guidance on undertaking self assessment and managing areas of non conformance. Standardised tools were introduced to ensure consistency across the group.

Five Areas of Assurance are monitored through the audit process. A total of 23 sites were audited in 2011 and all were able to demonstrate compliance to the five areas.

Audit Focus	Evidence Reviewed
Internal Self Assessment	Annual self audit completed and actions documented with clear owners and target dates.
Risk Management	All actions identified from risk assessments, incidents or at review meetings have owners, actions, acceptance/closure
Incident Management	Incidents are being raised and are managed through to identification of root cause, actions taken and lessons are learned. Incidents are applicable
Staff Training and Awareness	Evidence is in place to show all staff have completed the LMS course for Information Governance and staff awareness is high through awareness campaigns
Management Review	Minutes discuss relevant information security issues. Actions are managed in line with all identified risks in an appropriate time frame.

Figure 7

An additional 19 Fitness & Wellbeing sites were brought into the scope for the ISO27001; 2005 certification (information security management system standard) and were successful in achieving accreditation in addition to Nuffield Health hospitals.

1.6 Customer Satisfaction

Nuffield Health remains focused on learning from customer feedback and complaints, reviewing and improving services. Headline figures for 2011 show:

Hospitals

- ✔ Stage 1 complaints were 0.9% of activity compared to 0.88% in 2010.
- ✔ The average length of time it took to close a complaint was 25 days which is an improvement of 3 days on 2010.
- ✔ There were 12 stage 2 complaints compared to 19 in 2010; and no stage 3 complaints which is the same as 2010.
- ✔ 30,036 satisfaction surveys were returned by patients (23.45% return) compared to 29,798 (23.6% return) in 2010.
- ✔ Overall patient satisfaction was 98% which is the same as 2010.

Health Assessments

- ✔ Nuffield Health received 7046 replies to the Health Assessment survey which is a 16.8% response rate. 85% of clients were happy to recommend the Health Assessment to friends, family and colleagues. Overall satisfaction with the Health Assessment was at 84%. There is no comparator to 2010 as the measurement has changed.
- ✔ Complaints were at 0.55% of activity compared to 0.5% in 2010.

Fitness & Wellbeing

- ✔ 26,541 satisfaction surveys were returned by customers which is a 20% response rate.
- ✔ Overall satisfaction with Nuffield Health gyms was 76%, 75% of members were happy to recommend the gym.
- ✔ Complaints were 0.69% of activity.
- ✔ Complaints for mammography were 0.09% of activity
- ✔ There are no comparative data for 2010 as the measurement scale has changed.

Physiotherapy

- ✔ 2724 satisfaction survey responses were received from Physiotherapy customers which is a 20% response rate of those surveyed.
- ✔ Overall satisfaction for was at 92%, and 91% were happy to recommend Nuffield Health to friends and colleagues.
- ✔ Complaints were 0.23% of activity
- ✔ There are no comparative data for 2010.

2 Improve and Maintain Health

Nuffield Health has pledged to help maintain and improve the health of individuals. It believes that preventative health is the future of healthcare and in the future it will become essential for individuals to take control of their own health - ideally with the support of their employer. There is evidence that both individuals and corporate organisations benefit from this pioneering approach which brings together fitness, prevention and diagnosis to support members and clients with the facilities and information to get healthy and stay healthy.

Nuffield Health supports this approach with the services it offers for the individual in their private and corporate lives.

- ✔ Health assessments focus on helping to manage problems with stress and lifestyle and concentrate on being motivational rather than prescriptive.
- ✔ Nutritional support is available using new dietary analysis technology to support the health assessment programme.
- ✔ Physiotherapy is available through over 500 individual physiotherapists.
- ✔ Fitness programmes are available through Fitness Centres in the community and in the workplace.
- ✔ Individual programmes are available which help individuals get fitter, improve their health, and lose weight.

Dr Sarah Dauncey,
Medical Director- Nuffield Health Wellbeing

2.1 Health MOTs

The Health MOT is proving a reliable risk assessment tool for identifying health risks in members who are new joiners to our gyms, prior to starting exercise. More than 65% of new members joining a Fitness & Wellbeing centre are identified as being able to potentially benefit from moderate or modified exercise programmes and 4% are identified as needing medical advice from a general practitioner first. Without the Health MOT as part of the induction programme, over two thirds of new members would be undertaking inappropriate exercise programmes for their particular condition or health status.

The Health MOT quality assurance process covers 4 key areas of assessment delivery:

- ✔ competence (how the measurements are administered by the wellbeing adviser),
- ✔ engagement (the manner in which the wellbeing adviser presents relevant information at each stage of the assessment to the member),
- ✔ prescription (the exercise and lifestyle advice offered as a result of the measurements recorded)
- ✔ safety (the wellbeing adviser's adherence to Nuffield Health's capillary blood testing procedure).

Key observations between 2010 and 2011 results-

- ✔ The average total score of the individual wellbeing advisors has improved to 78.2% in 2011 from 72% in 2010.
- ✔ 23 sites scored above 80% compared to 9 sites reaching this status in 2010
- ✔ Average competency increased by 10% points to 84.8% in 2011 from 74.9% in 2010.
- ✔ Average engagement moved to 74.2% from 72.5% in 2010.
- ✔ Average prescription scores moved to 77.3% from 67.8%.
- ✔ Safety has improved to a compliance of 20.4 out of 21 in 2011 compared to 20.2 out of 21 in 2010.

The Health MOT health score allows progress in health outcomes to be tracked. This can be done at an individual as well as at an organisational level. The development of 'Get Healthy, Get Rewarded' concept allows people to have a sense of achievement through an improvement in their health score. The programme motivates the individual through rewards based on the acquisition of points gained through healthy activity.

2.2 Nutrition

2011 saw the development of Nuffield Health's first clinical nutrition network. A team of Nutritional Therapists now operates from selected Fitness & Wellbeing Centres, on-site corporate gyms and Medical Centres.

All operate in accordance with guidelines set out by the professional governing body and all meet minimum practice standards as set out by the Professional Head of Nutrition.

The addition of Nutrition Experts to the Nuffield Health repertoire of health and fitness professionals supports the business' joined up approach to healthcare and enables Nuffield to offer truly integrated services to clients and members alike.

2.3 Primary Care

Nuffield Health general practitioners run clinics at designated medical centres, corporate health care sites and fitness and wellbeing centres.

- ✔ In 2011 nearly 20,000 patients attended a Nuffield Health GP appointment to discuss health related matters.
- ✔ A total of nearly 6,000 prescriptions were issued in 2011 through the primary care services.
- ✔ This year, primary care services have been enhanced to include women's health, sexual health and travel advice services.

Revalidation for all practising doctors in the UK will be implemented in 2012. This will set the standards for doctors to be issued with a 'License to Practice' through audits and an appraisal system.

- ✔ All of our 41 employed General Practitioners underwent a Nuffield Health Clinical Appraisal in 2011
- ✔ The process is fully compliant with the revalidation standards set by the GMC.
- ✔ There are in-house monthly continuing professional development meetings to give doctors the opportunity to discuss complex clinical cases and ensure their knowledge is current and relevant.
- ✔ Clinical complaints about the service remained at a very low level in 2011 with only two complaints of a clinical nature, neither of which caused significant harm to the patient.

2.4 Fitness & Wellbeing

The Nuffield Health Fitness & Wellbeing Academy launch is scheduled for 2012. 2011 was dedicated to developing a clear training strategy geared towards enhancing the professional skill set and expertise of the Nuffield Health Fitness & Wellbeing Advisers. The purpose of the Academy is to identify, develop, implement, deliver, co-ordinate and assess the training activities for Fitness & Wellbeing advisors within both the Consumer and Corporate Fitness & Wellbeing divisions.

2011 saw the completion of a number of fundamental work streams to direct the development of the training courses that Nuffield Health staff will undertake in the future:

- ✔ A full training needs analysis was completed on the Fitness & Wellbeing Advisors
- ✔ Strategic partnerships were established with industry educators and higher education institutions to accredit the proposed training programme
- ✔ A full Fitness & Wellbeing Advisor role induction - 'Fitness As It Should Be' has been created and piloted.

The aims of Nuffield Health Academy for Fitness & Wellbeing are to:-

- ✔ Uplift the basic level of vocational qualification in the Fitness & Wellbeing team from Level 2 to Level 3
- ✔ Establish a standard level of service delivery
- ✔ Enhance the quality of instruction in advanced training
- ✔ Achieve full professional accreditation for training packages

3 Assess and Contain Health Risks

3.1 Health Screening

Chronic, lifestyle-related diseases such as heart disease, Type II diabetes, cancers, liver disease and obesity have increased in prevalence over the past few decades. In order to identify, monitor and prevent these conditions, Nuffield offer a range of health assessments utilising both diagnosticians (physicians) and lifestyle specialists (Health & Wellbeing physiologists).

- ✔ In 2011, Nuffield Health completed 42,118 Health Assessments within hospitals, medical centres and fitness centres compared to 42,717 in 2010.
- ✔ Individuals were monitored and guided on a range of health risk factors including body mass index, blood pressure, nutrition and cholesterol.
- ✔ 2,200 potentially significant abnormalities were identified compared to 2050 in 2010.
- ✔ An internal data review of 4,192 clients highlighted an increase in healthy behaviours of 5% after attending three health assessments with Nuffield Health. This is a new measure for 2011.

For quality assurance, Nuffield Health conducts monthly feedback on all health assessments. In 2011:

- ✔ Outcomes show 89.9% of those attending a health assessment felt that the doctor appeared professional and experienced.
- ✔ 89.7% of clients felt comfortable about discussing the full details of health issues with the doctor.
- ✔ 87.5% felt that their health issues were fully understood by the assessing doctor.

Monthly audits are undertaken to ensure abnormal results are handled in line with UK recommendations and Nuffield Health clinical policies.

- ✔ Audits show that a total of 32,864 medical investigations were performed in 2011 as part of health assessments and 99.5% of abnormalities were dealt with appropriately (detailed in the table below).

Test	Total Undertaken in 2011	Reported Abnormal		Policy Compliance	
		Number	%	Number	%
Electrocardiograms (ECG)	13167	1258	9.55%	1231	99.8%
Mammograms	4451	166	3.72%	161	99.89%
Prostate Specific Antigens (PSA)	8624	403	4.67%	393	99.89%
Cervical Smears	6420	350	5.45%	347	99.95%
Chest X-ray	202	43	21.3%	0	100%

Figure 8

3.2 Physiotherapy

Robust clinical governance, both of the physiotherapy network as a whole and of individual referrals, resulted in 80% of Nuffield Health patients achieving a good clinical outcome with an average of 4.9 sessions of physiotherapy compared to an industry standard of 8-9 sessions.

- ✔ Over 325,000 physiotherapy treatments were delivered by 465 contracted physiotherapists and 2,500+ third party physiotherapists in 2011 compared to 303,626 in 2010.
- ✔ There were 1946 physiotherapy referrals for under 18's during 2011 compared to 1333 in 2010.

A Paediatric Competency Framework for Physiotherapists was developed in conjunction with the Group Children's Services & Safeguarding Committee. Training was delivered and full compliance to the Framework was achieved. The creation of a new physiotherapy telephone triage service embedded within the headquarters of one of our medical insurer colleagues, allowed Nuffield Health to improve the customer journey of their members by offering immediate advice, on-line exercise and support. The improved level of engagement with both the members and the insurer's call centre teams also resulted in a 54% increase in physiotherapy referrals. The success of this model will lead to similar collaborations during 2012.

3.3 Weight Loss Programme

The prevalence of overweight and obesity within the UK have risen dramatically over the past few decades, with a current estimate of 65% of men and 57% of women being either overweight or obese. In order to address this issue, Nuffield Health launched its 9-month Weight Management Programme to address the broader lifestyle issues associated with poor weight management, including exercise, diet, sleep, stress and motivation. The weight management programme involves eight scheduled touch points with a Health & Wellbeing physiologist, with an emphasis on frequent contact at the start of the programme and reduced contact towards the end of the programme.

- ✔ 591 individuals have signed up to the full programme within one of the 16 Nuffield Health premises offering the programme.
- ✔ 101 dropped out of the programme before the final touch point (equating to a drop out rate of 17%)
- ✔ 123 have currently completed the full programme.

Of those who finished the programme,

- ✔ 63% lost >3% of their initial body weight
- ✔ 49% lost >5% of their initial body weight
- ✔ 24% lost >10% of initial body weight.
- ✔ 82% lost >3cm from their waist,
- ✔ 68% lose >5cm from their waist
- ✔ 39% lose >10cm from their waist.

Below are the average results achieved by individuals completing the full 9-month programme:

Health Marker	Average Change Achieved
Body Weight	6.1% reduction
Waist Size	7.3cm reduction
Body Fat	5.1kg reduction
Total Cholesterol	5.9% reduction
Blood Glucose	1.2% reduction
Systolic Blood Pressure	4.8% reduction
Diastolic Blood Pressure	6.6% reduction
Aerobic Fitness	38% increase
Health-Related Quality of Life	28% increase

Figure 9

3.4 Corporate Wellbeing

As the penetration of Health MOT delivery into Nuffield Health's Corporate Fitness sites increases so does the requirement for the same high level of governance in the rest of Nuffield Health.

- ✔ Currently, 104 members of staff deliver Health MOTs across 31 Corporate Fitness sites representing 31% of total corporate fitness membership.
- ✔ The target is to grow this in 2012 to 196 staff across 67 sites - 51% of membership.

Initial health outcomes from the delivery of Health MOTs within Corporate Wellbeing show:

- ✔ Less than 3% of members need medical input prior to exercising, compared with 4% of individuals taking health MOTs in Nuffield Health's public Fitness & Wellbeing centres. This is mainly due to the different member demographic.
- ✔ However, more than 60% of members do require a moderated or modified programme, 5% less than in Nuffield Health's public Fitness & Wellbeing centre Health MOT customers. This demonstrates the benefit of the Health MOT as a risk assessment tool in a corporate environment where individuals are perceived to be fit and healthy.

4 Treating Health Problems

4.1 Patient Reported Outcome Measures (PROMs)

PROMs have been measured and reported by Nuffield Health for 3 years. There are improved PROMs participation rates overall against the four identified procedures, hip and knee replacement, varicose vein surgery and groin hernia repair and shows consistently better results than the NHS (figure 1).

- ✔ The number of complete questionnaires received at the pre operative phase has increased from 1021 for the 12 months to March 2011; to 3408 questionnaires for the 12 months to March 2012.
- ✔ Complete questionnaires received at the post operative phase (6 months post procedure) for both hip and knee replacement and 3 months post procedure for both groin hernia repair and varicose vein surgery is 65%.
- ✔ All the PROMs tools have a general comments section and Nuffield Health received a total number of 171 comments from patients. Patient comments did not indicate any significant trends in either procedure or at specific sites.

Although the total number of questionnaires has increased year on year we still fall below our desired participation rate of 85% across all procedures.

Summary of PROMs responses January - December 2011

Procedure	No. of responses	Response Rate	Post Procedure Health State Change	
			Deterioration/No change	Improvement
Hip replacement	1354	56.5%	10.9%	89.1%
Knee replacement	1302	60.6%	17.6%	82.4%
Varicose vein surgery	233	17.7%	30.9%	69.1%
Groin hernia repair	519	21.9%	32.2%	67.8%

Figure 10

4.2 Occupational Health (OH)

Nuffield Health is committed to looking after the health and wellbeing of its staff. A team of qualified OH nurses provide a range of services to 11,000 employees across the UK.

OH involvement begins before employment, with health screening. Our strict approach to screening personnel, who carry out exposure prone procedures (EPP) for blood borne virus (BBV) infection, protects patients. This year Nuffield Health identified 2 clinicians who were subsequently found not fit for EPP work.

Staff can also be put at risk from BBV infection if they have an inoculation injury. Work has continued in 2011 to promote the use of safety devices to reduce incidence. Of the 127 contamination incidents this year (compared to 122 in 2010), two were high risk with patients found to be Hepatitis C positive, both were managed appropriately and the staff involved did not seroconvert.

Supporting staff is important to Nuffield Health. An employee assistance programme is in place and activity shows a year on year increase in uptake of the services (figure 11). In addition our 'Supporting Staff' policy has been strengthened and the OH team work closely with line managers to support staff.

A key focus for the OH team in 2011 has been on quality and audit. One audit focused on sickness absence management and the quality of OH reports.

- ✔ 96% of managers responding were satisfied with the OH management of cases and reports.
- ✔ Musculoskeletal issues and mental health issues are the most common reasons for referral.
- ✔ The OH team managed 878 new referrals during the course of the year.

Nuffield Health are now preparing for accreditation with SEQOHS, (Safe Effective Quality Occupational Health Services). This is the first accreditation scheme for OH services and was launched in 2011.

Use of Employee Assistance (EA) programme:

Call Types	2010	2011
Online enquiries	219	342
Telephone Counselling	54	89
Information	28	45
Face To Face Counselling	16	26
Management Referral	1	20
Legal	19	15
Financial	6	3
Debt - Telephone	1	2
Management Consultation	2	2
Online Cognitive Behavioural Therapy	1	1
Total	349	545
% of staff using EA service	7.5%	11.8%

Figure 11

5 Risk Management and Safety

5.1 Infection Prevention

Nuffield Health aims to provide care in a “clean, safe environment, where the risk of infection is minimised” (Department of Health 2008). The management of Infection Prevention within each Nuffield Health hospital is led by the Director of Infection Prevention and Control (DIPC) who is the Matron; supported by a team of trained Infection Prevention Link Practitioners (IPLPs) who act as role models for best practice and monitoring practice, to ensure prompt detection of infection risks.

This is achieved, in part, through a rigorous auditing programme. In hospitals:

- Compliance to all Infection Prevention Standards in 2011 improved from 95% to 96% (Figure 12).
- Hand hygiene improved from 94.5% to 97%.
- Cleanliness standards improved from 90% to 93%.

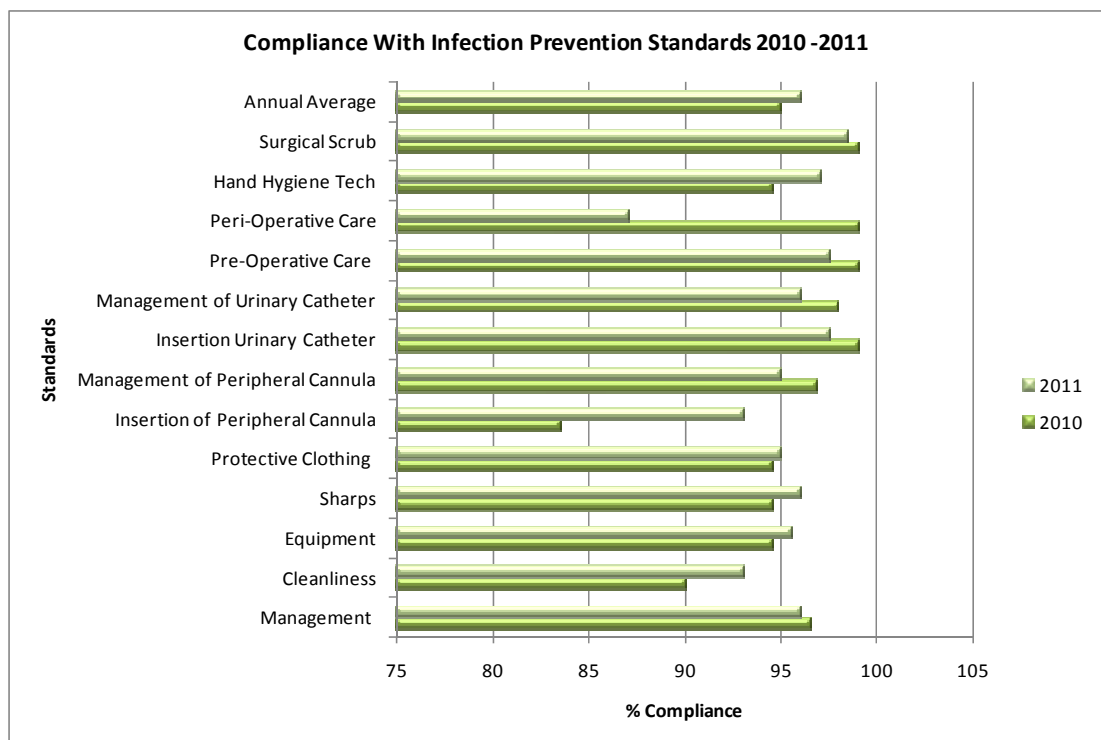


Figure 12

Nuffield Health participated in international and global initiatives including the World Health Organisation (WHO) “Save Lives: Clean Hands” Campaign where an “Advanced” level of hand hygiene was achieved, demonstrating “sustained and improved campaigns which have helped embed a culture of safety within the organisation”. This was the highest level possible.

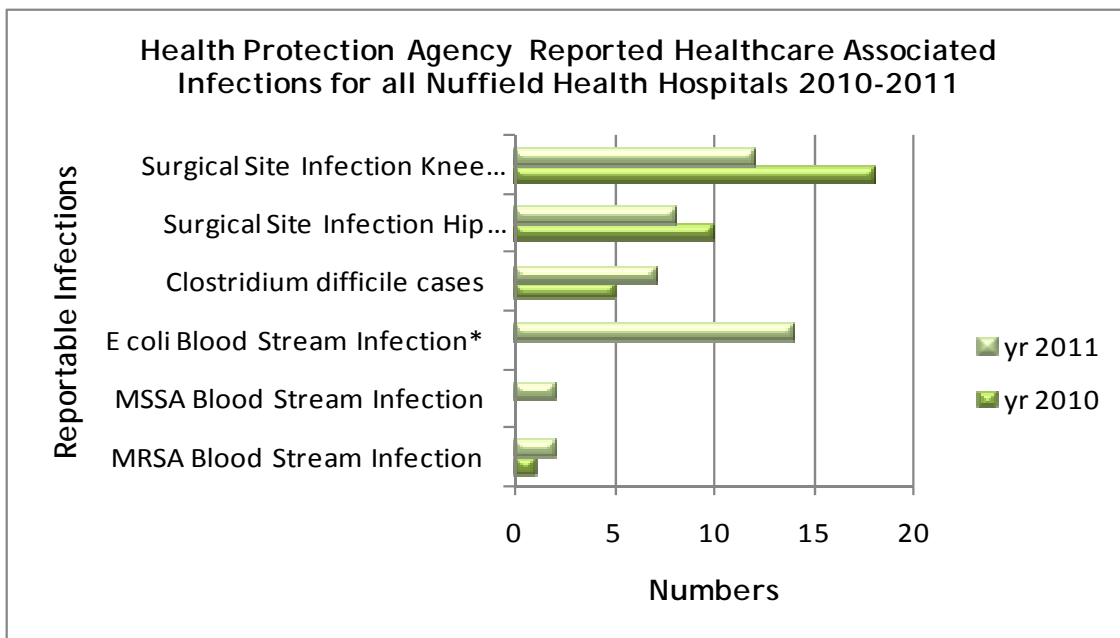
- 21 hospitals participated in external validation of cleanliness standards through the National Patient Environment Action Team (PEAT) programme, demonstrating transparency and openness within the organisation.
- 85% of hospitals were ranked as “excellent” or “good” (compared to 76% in 2010) with the remaining sites ranked as “acceptable”.

Nuffield Health also participated in National Infection Prevention Awareness Week working with staff, patients, visitors and local communities to raise the profile and awareness of hand hygiene and cleanliness in minimising infection risks for everyone.

A robust framework for reporting Healthcare Associated Infections to the Health Protection Agency (HPA) combined with a rigorous process for investigating and learning lessons, ensures prompt detection of infection trends and risks.

Data for infections in 2011 (Figure 13) demonstrates that:

- 🏥 Hip surgical site infections fell from 0.28 in 2010 to 0.13% in 2011.
- 🏥 Knee surgical site infections fell from 0.55% in 2010 to 0.31% in 2011.
- 🏥 There were 2 cases of MRSA and 2 cases of MSSA bloodstream infections in four out of 31 hospitals, with no cases of cross infection identified.
- 🏥 There were 7 cases of Clostridium Difficile reported in 2011 and 6 of these cases were admitted with signs/symptoms of the infection. There were no cases of cross infection reported in any hospital.



*E Coli blood stream infections are reported for the first time in 2011.

Figure 13

The focus for 2012 is to further drive quality improvements through development of detailed action plans to address risks identified through audit and surveillance programmes including cleanliness and hand hygiene standards - the essential standards for infection prevention and control.

5.2 Health and Safety (H&S)

Nuffield Health has continued to develop the Group H&S management system with the aim of gaining the Occupational Health and Safety Management System (OHSAS) standard 18001 accreditation. To support this, over 100 operational managers across the business have been trained in the Nuffield developed, IOSH accredited, Managing Safely course.

Nuffield Health achieved external training accreditation with the Chartered Institute of Environmental Health (CIEH), and is accredited to deliver CIEH PTLTS (Train the Trainer) courses.

In 2011 Nuffield Health established a Primary Authority relationship with Bristol City Council. This arrangement will provide a central local authority for advice as well as potentially reduce the amount of enforcement authority inspections due to the central demonstration of a robust H&S management system.

Hospital Division

Hospitals H&S management audits were previously undertaken on a 3 year programme and all hospitals have been audited within this programme. H&S compliance is good with 25 of the 30 audited hospitals returning a Green RAG status and the remaining 5 Amber status (Vale hospital has yet to be audited as it joined the Group in 2011).

Enforcement Action

Nuffield Health received enforcement action in the form of an Improvement notice from the Health and Safety Executive following an incident at the Nuffield Health Ipswich Hospital in May 2011 in which a member of staff slipped and damaged their knee, resulting in emergency surgery.

The conditions and requirements of the improvement notice, which related to the management of slips trips and falls locally at the Ipswich hospital, were fully satisfied and the notice was complied with.

Consumer Wellbeing Division

Audits undertaken within the Consumer Wellbeing Division demonstrate that H&S compliance is significantly improved with the implementation of the revised management system; and compliance remains at a good level. The audit template and methodology have been updated in 2011 to comply with OHSAS 18001 health and safety management criteria and are now set at a higher level. This is demonstrated in the table below. Whilst the number of sites reaching the standard appears to have fallen, the standards have been set at a higher level to drive further improvement. Fewer sites required audit in 2011.

Standard	2011	2010
	Sites	Sites
Excellent	20	21
Good	27	30
Needs Improvement	3	2
Total	50	53

Figure 14

Improvements

Some areas for improvement were identified across the group as a result of proactive auditing and monitoring, and projects initiated as a result of audit and monitoring include:

- ✔ Upgrade of the chemical dosing systems within the pool plant rooms to eliminate or significantly reduce the possibility of Chlorine gas production- 14 sites have been upgraded in 2011 and the project will continue into 2012.
- ✔ Swimming and Hydrotherapy pool management including the provision of lifeguards and pool supervision.
- ✔ Slips, trips and falls were identified for improvement and an action plan implemented. The Health and Safety executive are satisfied with the implemented plan.

5.3 Medicines Management

In March 2011 the new Group Medicines Management Policy was launched. The implementation was supported by a series of training sessions for all staff groups who would need to implement and monitor the policy including Registered Managers, Matrons and Medicine Management Leads.

In April 2011 a compliance standard was launched to measure how effectively the policy was being embedded throughout the organisation, in particular at departmental level where medicines were stored and handled.



In June 2011 the Medicines Management team was a finalist in the 'Excellence in Risk Management' category of the Laing and Buisson Independent Healthcare Awards. This nomination recognised the risk management processes that were applied during the implementation of a national medication administration record in 2010. In December 2011 Nuffield Health passed the medicine management criterion at level 3 of the NHSLA Risk Management Standards.

Review of the Care Quality Commission's Controlled Drugs (CD) Annual Report for 2010 published in August 2011, resulted in the development and dissemination of a central action plan to all hospital CD Accountable Officers. By the end of 2011 compliance was 92%.

In August 2011 there was a serious incident with CDs in one hospital which resulted in a Consultant having his practising privileges withdrawn. The lessons learnt from that incident were incorporated into the CD audits for the last quarter of 2011. Compliance with the new standard had reached 86% by January 2012.

In 2012 further monitoring will be undertaken to ensure the provision of medicines management '*as it should be*' including Antimicrobial Stewardship and compliance with new standards from the pharmacy regulator.

5.4 Pathology

In 2011 the pathology service has continued to show high levels of compliance with Clinical Pathology Accreditation (CPA). There are 13 hub sites accredited with CPA.

Pathology Unit	CPA Status	MHRA Status (Blood Safety and Quality Regulations)
Nuffield Glasgow	ACCREDITED	Compliant
Nuffield Newcastle	ACCREDITED	Compliant
Nuffield Leeds	ACCREDITED	Compliant
Nuffield Wolverhampton	ACCREDITED	Compliant
Nuffield Warwick	ACCREDITED	Compliant
Nuffield Leicester	CONDITIONAL ACCREDITATION	Compliant
Nuffield Oxford	ACCREDITED	Compliant
Nuffield Woking	ACCREDITED	Compliant
Nuffield Brentwood	CONDITIONAL ACCREDITATION	Compliant
Nuffield Cheltenham	ACCREDITED	Compliant - Inspected 2011
Nuffield Brighton / T Wells	ACCREDITED	Compliant
Nuffield Hampshire	ACCREDITED	Compliant - Inspected 2011
Nuffield Exeter	ACCREDITED	Compliant

Figure 15

5.5 Blood transfusion

Blood transfusion is facilitated by the use of the Blood Audit and Release system (BARS).

During 2011 Nuffield Health hospitals safely transfused a total of:

- 📌 3,234 units of red blood cells compared to 3,735 in 2010.
- 📌 179 units of Fresh Frozen Plasma compared to 212 in 2010.
- 📌 124 units of platelets compared to 144 in 2010.

An exercise was undertaken across the group to test our readiness to comply with the NPSA Rapid Response to a Massive Haemorrhage Alert. At each site emergency scenarios have been enacted to demonstrate that blood would be available as quickly as possible in an emergency.

The Group Transfusion Nurse Specialist Nurse has audited all sites during the year to ensure that patients receive transfusions in a safe manner (not all sites were audited in 2010). Any sites which have an amber score have been supported by the Transfusion Project group and an improvement plan put in place to improve practice.

Blood Transfusion Audit	2011	2010
NH Average	91%	85%
Nuffield Health Bournemouth Hospital	93%	93%
Nuffield Health Brentwood Hospital	95%	na
Nuffield Health Brighton Hospital	88.0%	na
Nuffield Health Bristol Hospital	95%	92%
Nuffield Health Cambridge Hospital	80%	90%
Nuffield Health Cheltenham Hospital	90%	90%
Nuffield Health Chichester Hospital	87%	na
Nuffield Health Derby Hospital	90%	77%
Nuffield Health Exeter Hospital	91%	88%
Nuffield Health Glasgow Hospital	95%	78%
Nuffield Health Guildford Hospital	90%	88%
Nuffield Health Haywards Heath Hospital	90%	90%
Nuffield Health Hereford Hospital	91%	72%
Nuffield Health Ipswich Hospital	83%	na
Nuffield Health Leeds Hospital	91%	75%
Nuffield Health Leicester Hospital	95%	87%
Nuffield Health Newcastle upon Tyne Hospital	92%	91%
Nuffield Health North Staffordshire Hospital	93%	74
Nuffield Health Plymouth Hospital	85%	85%
Nuffield Health Shrewsbury Hospital	91%	97%
Nuffield Health Taunton Hospital	95%	88%
Nuffield Health Tees Hospital	95%	76
Nuffield Health The Grosvenor Hospital Chester	90%	na
Nuffield Health The Manor Hospital Oxford	88%	88%
Nuffield Health Tunbridge Wells Hospital	93%	87%
Nuffield Health Warwickshire Hospital	88%	85%
Nuffield Health Wessex Hospital	95%	95%
Nuffield Health Woking Hospital	90%	74
Nuffield Health Wolverhampton Hospital	95%	95%
Nuffield Health York Hospital	79%	90%

Figure 16

5.6 Radiology and Radiation Protection

Nuffield Health uses the Radiological Protection Centre (RPC) to independently assure that the organisation uses ionising and non ionising radiation safely to protect the wellbeing and safety of patients and staff. RPC carry out annual performance checks of all X-ray equipment.

A summary of the status of radiation protection is presented each year by RPC's Director Dr Ishmail Badr, who stated at the recent annual radiation protection meeting that "The management of radiation protection within the Nuffield Group was again found to be excellent. All hospitals should be congratulated for their good work in maintaining the highest standards of radiation protection".

During 2011 the following diagnostic images were undertaken with Nuffield Health hospitals:

- 14,368 CT scans compared to 14,217 in 2010.
- 45,175 MRI scans compared to 42,245 in 2010.
- 100,205 X rays compared to 98,414 in 2010.

The number of incidents relating to the scans and x-rays in 2011 are as follows:

- 402 incidents = less than 0.01% of all examinations undertaken.
- Of these only 38 were incidents involving radiation which is less than 10% of all radiology incidents.
- 4 incidents were reportable to the Care Quality Commission.

Internal audit scores have improved in 2011 and no site was found to be less than 80% (figure 4)

Mammography peer review was audited in 2011. The National Health Service Breast Screening Programme (NHSPSB) indicates that that 80% should be perfect or good categories. Improvement actions are in place in 2012 for those sites identified as needing improvement.

Standard	Number of Sites
Excellent - >80%	21
Good 76 – 79%	8
Needs Improvement	3

Figure 17

5.7 Hospital Sterile Services Units (HSSU)

The HSSU division, which provides surgical instrument decontamination services, continues to maintain high service levels whilst developing third party revenues. In 2011 HSSU integrated with the hospitals division and is now managed within that division.

HSSU has also expanded its operations to other Healthcare Providers that are in need of decontamination services, providing a high quality service across the healthcare sector.

- HSSU produced over 500,000 packs during 2011 compared to 360,000 in 2010;
- The equivalent of 12 million surgical instruments compared to 11 million in 2010;
- The non-conformance rate was 0.18% which is within the accepted tolerances and was the same as 2010.
- The visibly contaminated instrument rate was less than 0.001% of total instruments which was the same as 2010.
- Standards are maintained at a high level.

5.8 Safeguarding Vulnerable Adults and Children

Health and social care providers and those caring for, or supervising, children have a responsibility to report any incident where there are grounds to suggest that a vulnerable adult or child is at risk of suffering abuse or where there are concerns about a person's circumstances.

Contact with Nuffield Health in 2011

- There were almost 3,000 occasions when children or young people were seen in outpatient clinics, admitted or treated in a Nuffield Health Hospital

- More than 1,100 children were cared for in the 10 nurseries and 22 crèches located in Nuffield Health Fitness & Wellbeing Centres.
- Additionally children make use of the recreational facilities including swimming pools in the Fitness & Wellbeing centres and attend hospitals as visitors or when accompanying members of their family on appointments.

Nuffield Health complies with the regulatory requirements for staff working in, visiting or having access to hospitals, nurseries and crèches to undergo Criminal Record Bureau (CRB) checks and Protecting Vulnerable Groups (PVG) checks (in Scotland). Checks are undertaken on workers prior to commencing employment or providing services with Nuffield Health and at regular 3 yearly intervals during their employment.

All Nuffield Health staff are required to undertake training in safeguarding children, young people and vulnerable adults and understand the processes in place for the reporting and investigation of safeguarding issues. Each Nuffield Health facility has a designated safeguarding lead and safeguarding issues are escalated externally to local safeguarding boards in accordance with legislative requirements and internally to named managers and directors only.

- Fewer than ten suspected safeguarding incidents were reported in 2011,
- Of those only two were concerned with care delivered in Nuffield Health.
- Further action was required in only one case.

Percentage of staff trained in Safeguarding in 2011;

	Children & Young People		Vulnerable Adults	
	2011	2010	2011	2010
Hospitals	89%	75%	86%	78%
Fitness & Wellbeing	78%	31%	72%	2%

NB: It should be noted that Fitness and Wellbeing staff only commenced safeguarding training part-way through 2010.

Figure 18

5.9 Adverse incidents

Nuffield Health complies with the reporting requirements for adverse incidents. However the Nuffield Health categories for serious untoward incidents do not currently reflect the National Patient Safety Agency (NPSA) categories and will be updated to come into line with their published categories in 2012.

All incidents (from minor to more serious) within Nuffield Health for 2010 - 2011 are shown below, by category. The total adverse events (incidents) affecting patients was 3590 (1.35% of patients) in 2011 compared to 3630 (1.38% of patients) in 2010.

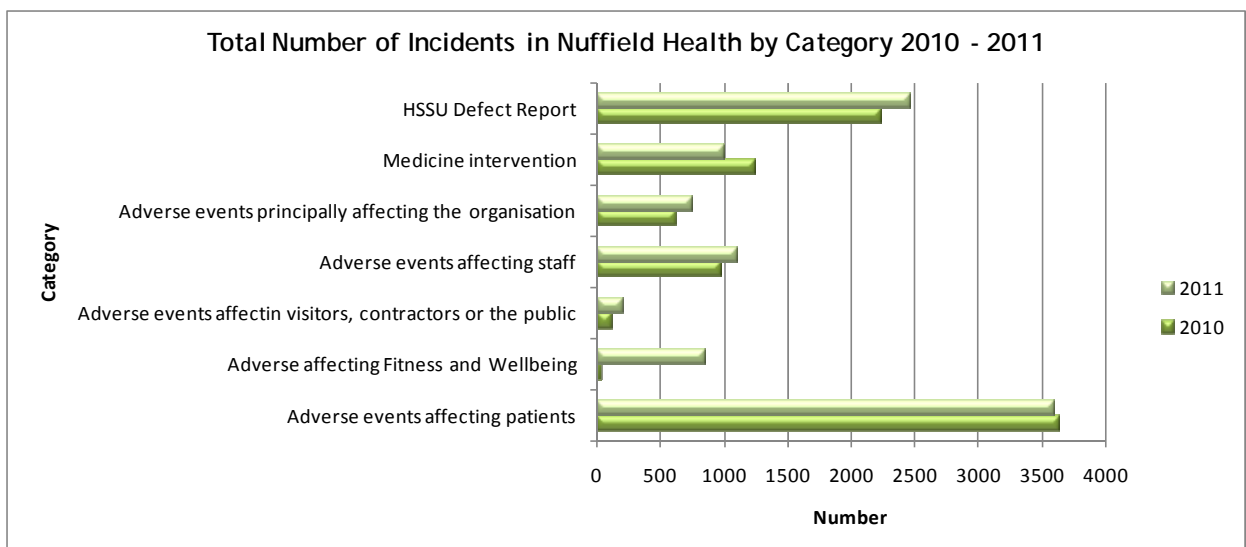


Figure 19

Of those incidents the following were identified as clinical incidents.

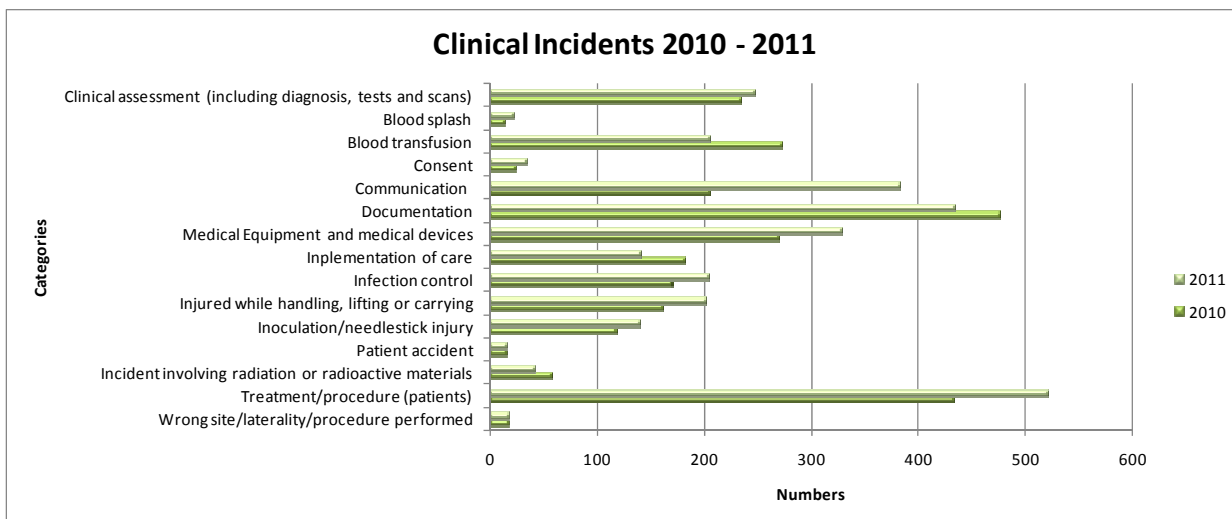


Figure 20

The following figure is an analysis of non-clinical accidents.

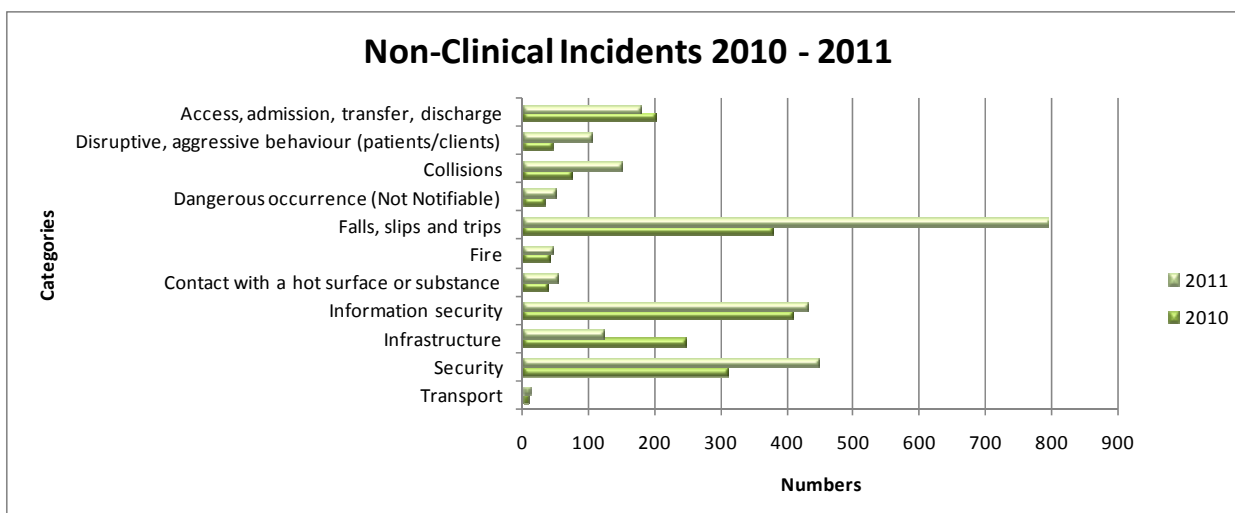


Figure 21

Incidents identified under the Nuffield Health Serious Untoward Incidents (SUI) policy compared for the last 4 years.

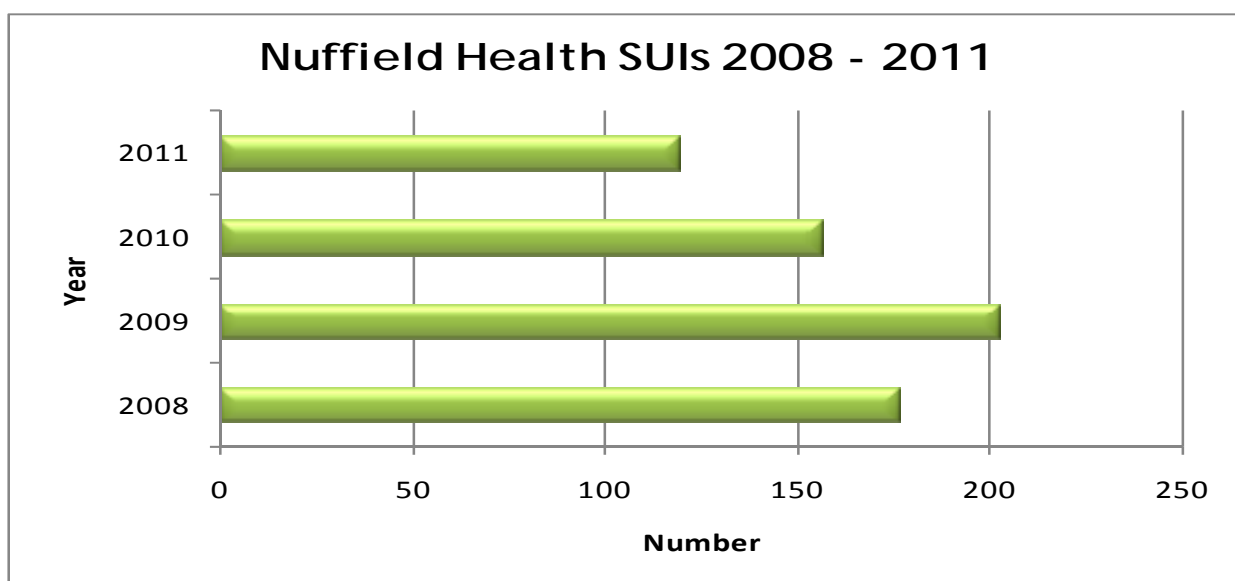


Figure 22

6 Learning and Development

6.1 Organisational Development

2011 focused on building the programmes launched in 2010 and setting the foundations for delivering The Nuffield Health Academy in 2012, which will help employees deliver inspired health-style and healthcare into the business.

- ✔ Approximately 150 managers participated in long term leadership programmes
- ✔ Over 500 managers attended at least one skills workshop to develop leadership capability to deliver the strategy.
- ✔ Hospital Directors participated in a 'Top Dog' programme experiencing exceptional service in varying organisations and service environments to help benchmark requirements to deliver an exceptional service experience for Nuffield Health customers and patients.
- ✔ *'Service as it should be'* aims to improve standards of service within Fitness & Wellbeing (F&W) Centres. This was launched into Premier centres in the second half of 2011 and was aimed at developing on-site coaches and leaders to implement service standards around a centrally developed framework defining brand and service expectations. Fourth quarter member feedback scores identified an overall improvement in all areas measured against the programme. Roll out of this programme will continue into other Consumer and Corporate F&W centres in 2012.
- ✔ Expectations, roles and career pathways were defined for 1,000 gym based employees before the launch of programmes designed to build F&W advisors into industry leading experts.
- ✔ All F&W advisors will soon be developed to at least a Register of Exercise Professionals (REPS) level 3 qualification standards. A partnership with Southampton Solent University will see the development of university accredited training and qualifications in 2012 to help drive up standards of care, service and professionalism.

All programmes will be absorbed within the Nuffield Health Academy, which will be the brand denoting high quality learning and development activity within Nuffield Health. The academy brand signals our intention to continually develop Nuffield Health employees to deliver Service as it Should Be.

6.2 Group Training

Group Learning and Development is responsible for improving patient safety and protecting our brand through higher skills. The following table shows progress bat the end of 2011.

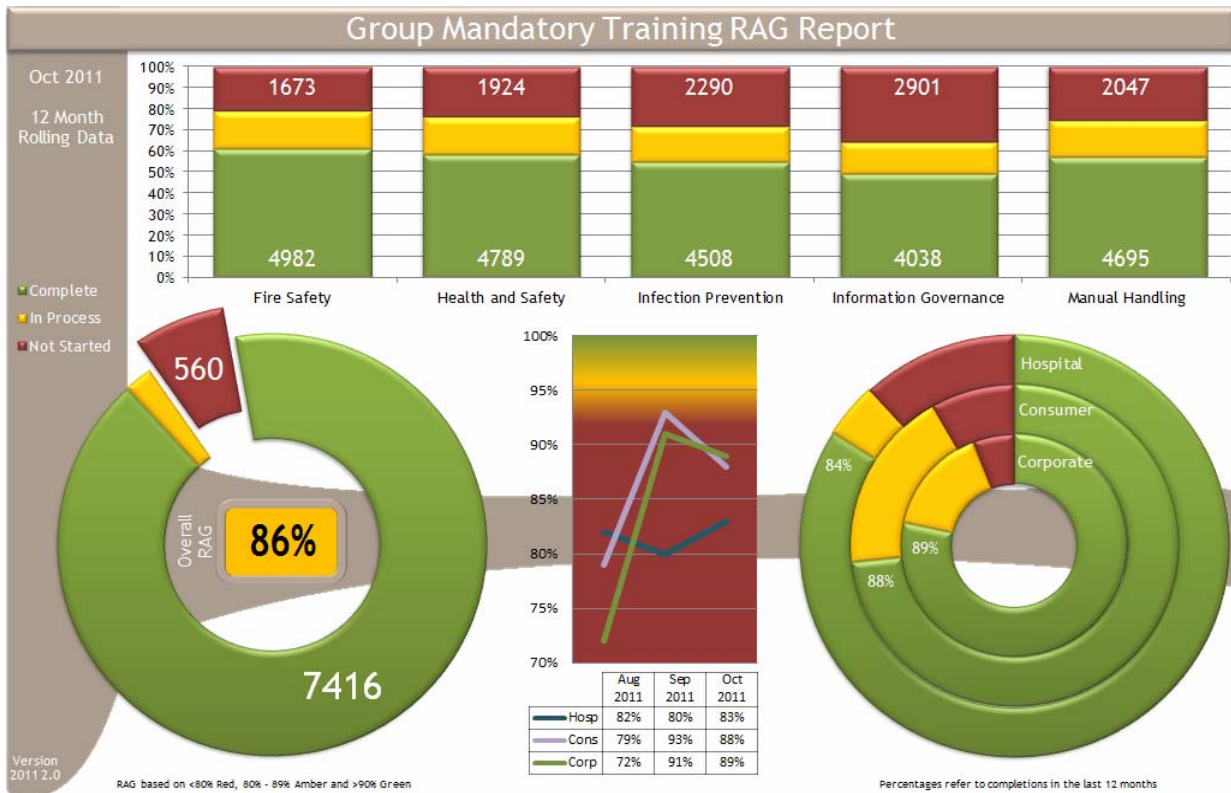


Figure 23

- 🏆 The Nuffield Health Learning Management System (LMS) was short-listed in two prestigious awards in 2011, Best Use of Technology in Risk Management (International Risk Management Awards) and Excellence in Training (Laing and Buisson).
- 🏆 The average completion rate was 84%
- 🏆 Each clinical employee took an average of 17 risk management learning modules.

Future Direction for Nuffield Health

This report highlights the quality credentials we bring to our services whether they are performed in a hospital, a fitness & wellbeing centre or at the workplace. Delivering high quality care is not a choice we choose to make, its part of our DNA. We are committed to delivering comparable quality information and transparency; and this years report is a step, but not the final destination, on that journey.

The changing NHS presents us with challenges and opportunities. The challenge lies in differentiating ourselves as a not for profit offering the best outcomes in all our activities. We must face up to the cost and demographic pressures that are affecting all western healthcare. NHS reform is not an easy partner and the long term impact of commissioning, contracting as a willing provider and private patient reforms are difficult to predict. The opportunity exists in the rise of the third sector and our social mission to improve the wellbeing of the nation.

The pace of change in an ever connected smaller world continues and the power of the health consumer is rising. People are making informed choices, seeking the providers of the best outcomes in care and using their budgets carefully. Prevention is becoming as important as cure particularly in the workplace to maintain the health of employees and for individuals interested in fitness and exercise.

- 🏆 The disruptive power of proven technologies must surely start to overtake outdated delivery models.
- 🏆 The freedom to make decisions in care will demand ever more from healthcare.
- 🏆 Health consumers will have increased access to information through multiple channels to seek and analyse their health needs
- 🏆 Health care will be customised to monitor, diagnose, educate, and intervene regardless of location or time
- 🏆 Preventative healthcare will embed as a result of a convergence between consumer experiences in other markets

In 2007 we published the first independent health sector annual quality report in the UK. Our open & transparent approach in UK healthcare describes what we get right and what we get wrong. Some things haven't changed; quality information is increasingly driving health insurance and consumer purchasing decisions and remains a key currency in care.

Dr Andrew Jones,
Group Medical & IT Director

Appendices

Appendix 1- Membership of the Board Integrated Governance Committee

Ms Jane Wesson (Chairman)	Governor
Mr Guy McCracken	Governor
Ms Joanne Shaw	Governor
Dr Andrew Jones	Group Medical Director
Mrs Vivienne Heckford	Group Clinical Director
Mrs Karen Harrowing	Group Chief Pharmacist
Dr Sarah Dauncey	Medical Director, Fitness & Wellbeing
Mr Graham Cowan	Group Health & Safety Manager
Mr Luke Talbutt	(Secretary) - General Counsel & Company Secretary

Appendix 2 - Independent Expert Advisors to Group Medical Director 2011

Professor Ian Lyburn	Consultant Radiologist & Radiology Advisor
Dr Matthew Dryden	Consultant Microbiologist and Infection Prevention & Control Advisor to the Group Infection Prevention Committee (GIPC)
Professor Mayur Lakhani	General Practitioner and former Chair Royal College of General Practitioners - GP Services Advisor
Duncan McRobbie	MRI Protection Advisor
Dr Ishmail Badr	St George's Radiation Protection (IRMER) and Ultrasound Protection Advisor
Dr Steve McVittie	Consultant in Occupational Health Medicine
Dr Hafiz Qureshi	Consultant Haematologist, Advisor to the Nuffield Health Group Blood Transfusion Committee (GBTC)
Ian Clements	Managing Director, Quadriga Health & Safety Ltd