

Quality assurance

Quality assurance and outcomes

Across all our services, whether delivered through our hospitals, fitness and wellbeing centres, healthcare clinics, or our free-to-access programmes to support communities, we bring a relentless focus on quality to everything we do.

At Nuffield Health, this quality is built on the three pillars of our Quality Assurance Framework.

Quality Assurance Framework

Safety
Meeting the highest possible standards by avoiding harm, upholding professional standards and acting responsibly



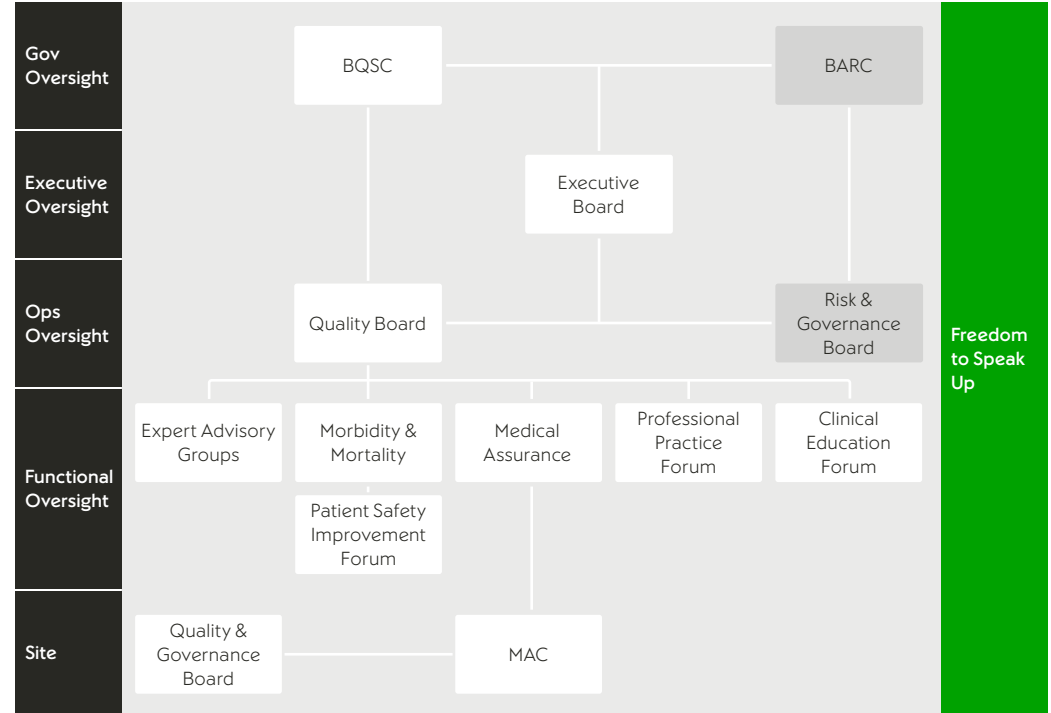
Effectiveness
Being a trusted partner to our patients, members and customers by giving them a positive and reassuring experience



Experience
Providing evidence-based health and wellbeing expertise and services that lead to excellent outcomes



Quality Governance Structure



Assuring quality

We continually monitor quality at every Nuffield Health site, using a robust set of standards developed by our teams. We bring an evidence- and data-led approach to defining the quality levels that each site achieves, and for identifying trends, innovative successes and, if applicable, areas of continual improvement.

Importantly, we devolve operational responsibility to our sites. They are best placed to maximise local opportunities or to address any need for remedial actions, whilst remaining accountable against our nationwide standards.

Quality assurance continued

Radar: Safety reporting and analysis

2023 marked a significant innovation to elevate safety at Nuffield Health. We rolled out a new Quality Management System called Radar, and with it a single, uniform safety reporting tool that extends right across our business.

Radar is the home to report, record and analyse any issue that has a bearing on safety. This includes adverse events, risk, complaints and patient safety alerts.

Moreover, it is a way to access the Freedom to Speak Up channel, where colleagues can report concerns that might compromise any aspect of safety for patients, members or staff.

Since its launch, Radar's ease of use and intuitive interface have generated a better quality, and quantity, of data being captured across the Charity. In turn, this has led to better identification of potential issues.

Radar also facilitates our compliance with the Patient Safety Incident Response Framework (PSIRF) and is compliant with NHS England's Learn from Patient Safety Events (LFPSE) framework.



2023: advancing quality

We never cease looking to drive up our quality performance across our services, pathways and training. This always means looking for honest feedback, and listening and learning from our beneficiaries and our own people.

We also actively share and compare the wealth of experiences and data we gather from our sites and, externally, keep up to speed with new developments, technologies and ideas.

During 2023, we rolled out our new Quality Management System, Radar. This provides a single and uniform system for tracking adverse events, issues and risks. Crucially, it makes a significant contribution to the quality of our care, and to Nuffield Health becoming a data- and evidence-based organisation when it comes to driving up quality.

We brought people together to swap experiences and have valuable peer-to-peer conversations among colleagues in similar roles across different geographies, encouraging a much more multi-disciplinary approach to conversations.

We held Lunch and Learn events where colleagues get together over food, while many more join remotely. We share knowledge and experiences, while building networks, breaking down silos, and celebrating success together.

Quality assurance continued

Patient safety reporting: Embracing wholesale change



Alison McCourt, Clinical Services Director, on how Nuffield Health is embracing a landmark reform in patient safety.

There is no greater priority than patient safety at Nuffield Health, and we constantly strive to achieve ever-better performances for all our beneficiaries.

In this reporting year, the NHS's new Patient Safety Incident Response Framework (PSIRF) came into force. It brought a new methodology for handling patient safety incidents (PSIs), and is mandatory for all providers, such as Nuffield Health, who deliver NHS contracted services.



We have embraced PSIRF not just as a requirement, but as a significant opportunity to evolve the whole culture of safety and learning across the Charity. It extends across both primary and secondary care, and to both NHS and private patients alike.

PSIRF shifts the focus from mandated investigations and timetabled submissions, to preventing similar incidents happening again. It promotes a system where the focus of any approach is on learning and improvement.

As in medicine itself, prevention is always preferable as the Charity strives to learn from incidents, minimise the chance of repetition, and enable patients who are registered with us.

At its heart is a 'Just Culture', where:

- all of our people feel comfortable and encouraged to highlight how things can be improved, without retribution or blame;
- they feel they have the skills, and are equipped, to have difficult conversations about PSIs with patients and their families, and with each other, and encourage everyone to be involved in incident responses and developing safety;
- are emotionally supported and feel that we recognise the significant impact an incident can have on any healthcare professional; and
- patients and their families can bring their own perspective by playing a central role in our Quality Governance Team, through recruiting Patient Safety Partners as a key component of the new framework. This entirely reflects Nuffield Health's values and will raise the patient voice across the organisation.

Quality assurance continued

Insights, loud and clear

Freedom to Speak Up (FTSU) is of pivotal importance to Nuffield Health. It is also a core element of the NHS Patient Safety Incident Reporting Framework (PSIRF). Nuffield Health is therefore creating an environment where everyone feels free to speak up.



David Henderson, Health System Director, The Holly Hospital

“Our staff know better than I do how we can make the journey easier and safer for our patients, and improve the way we work. It’s therefore crucial that our people feel they can speak – and that we listen. Our leadership need to know about any concerns, blockages or worries, and with no atmosphere of blame or finger-pointing.

By having this constructive and open culture, we receive vital insights, and where we need to, we act. We have made some big decisions on the back of FTSU which have led to huge improvements in motivation and engagement. It has also helped to improve and develop some key manager and people performances.”

Rachel Burrett, FTSU Guardian and Lead

“My key objective is to raise the profile of speaking up and act as a champion for a Freedom to Speak Up culture. Colleagues can raise anything they want to through me, and I also help with training on ‘speak up’ for staff, and ‘listen up’ training for managers and leaders.

Speaking up works if you have good leaders who want to listen and follow up on concerns. And as Guardians, we need to make sure colleagues who do speak up are heard. It’s important to focus on the concerns and themes that surface.

It’s about being constructive, improving patient safety and improving the wellbeing of us all.”



Quality assurance continued

Doubling down on quality assurance

During 2022-2023, many of our primary care sites underwent a Quality Assurance Review (QAR) not once, but twice.

The initial phase was a self-assessment programme, where all 164 primary care sites judged their own performances. 80% of locations reported a self-rated verdict of 'Good' or 'Outstanding'.

This was followed by formal QAR visits from Nuffield Health teams unconnected with those sites. 30% of the Charity's sites were randomly selected from top, middle and bottom scoring segments of initial assessments. This second QAR included reviewing documentation, patient records, governance and clinical practice, and discussions with local teams.

Following review, each site received a personalised report identifying strengths and areas for improvement, along with an action plan to follow.

All sites scoring less than 'Good' were required to submit evidence highlighting improved compliance to the required standards. Following the completion of the programme, every site has provided sufficient evidence to move their rating into at least a 'Good', with several going the extra mile to increase their score up to 'Outstanding'.

Embedding quality

In 2023, Nuffield Health introduced a new Surgical Service Expert Advisory Group to fully encompass the whole surgical pathway, rather than just operating theatres.

We have established clinical networks for pre-operative assessments, endoscopy, operating theatres, outpatients, Hospital Sterile Services Units (HSSUs) and ward managers. These networks are designed to enable sharing of corporate learning and to gather information from the site leads on any issues and risks with our surgical services.

We have updated 12 key policies, documentation and learning material for 2024, aligning with the new National Safety Standards for Invasive Procedures (NatSSIP2).

This has been complemented by numerous forums on surgical safety to share standards and learning and, by appointing new surgical safety champions at all 36 of our sites, to embed our surgical safety policy and processes.

Mr Arthur Stephen
Chief Medical Officer and
Consultant Orthopaedic Surgeon

My wish as Chief Medical Officer is to embed the three pillars of safety, effectiveness and experience across our entire workforce and not just the thousands of doctors who are registered with us.

A surgical procedure is not just a 'window' in theatre but a procedure that started with a referral, became a consultation, led to a pre-operative workup and then an operation. Moreover, the pathway doesn't finish there: it is followed by rehabilitation and follow-up. Many people are involved in this, too many to mention individually. This illustrates the important role everybody plays and the need to share our collective responsibility for delivering high quality care.

We are all part of our connected health strategy, and we need to think about how our individual interaction with the beneficiary impacts on their journey, wherever that is.

But consider further, in the pursuit of ever-improving care, when things don't go according to plan how can we support our people. Rather than focusing on one person (as it is rarely the fault of one individual) look to improve the pathway.



Quality assurance continued

Accreditation and achievements



Quality standards: a year of achievement

External verification of our quality and standards affirms confidence in our expertise and care among the NHS; GPs and other specialists who refer us; regulators; insurers; and of course our beneficiaries.

It is also a motivator to look for constant improvement, and a great source of pride to the successful teams involved and the Charity as a whole.

In 2023, these validations included:

- **UKAS accreditation:** Since 2016, Nuffield Health's pathology departments have independently held separate UKAS accreditations and complied with the Medical Laboratories for Quality and Competence standards (ISO 15189:2012).

- In 2023, all our pathology departments were accredited as a single entity. This entailed a five-month programme of multiple visits to all the disciplines and specialities within the laboratory network.

The successful outcome means that every laboratory now holds the UKAS accreditation for four years.

- As the first independent sector pathology network to be awarded accreditation as a single entity, we can be assured about the quality and consistency across all Nuffield Health hospitals.



Accredited to ISO 15189:2012



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Accredited to ISO 15189:2012



- **ISO9001:** the accreditation for our physiotherapy and health assessment services lines.

This standard recognises that one of the main ways we can deliver efficient services is to ensure we have standardisation and continuity of our services across our network. The accreditation process involved:

- eight site audits across hospitals, fitness and wellbeing centres and corporate sites
- three days of auditing for central services covering 12 different teams
- 10 education and preparation days for sites and teams
- An internal auditing day for both service lines.



- **Joint Advisory Group (JAG) accreditation:** In 2023, two more of our sites achieved the highly sought-after JAG accreditation for high quality gastrointestinal endoscopy services, with our Wessex and Tunbridge Wells hospitals achieving this for the first time. In addition, our Derby, Cheltenham and Warwickshire hospitals gained five-year accreditations, meaning that in total 14 of our endoscopy services now have this accreditation. This was led by a multi-professional group of clinicians and managers, with input from patients, developing our standards and implementing quality improvement plans across these standards.



- **National Joint Registry:**

The National Joint Registry (NJR) monitors the performance of hip, knee, elbow and shoulder joint replacement procedures to improve clinical outcomes.

It runs a certification awards scheme to recognise those who achieve a series of six ambitious targets. One of these is compliance with the NJR's mandatory national audit aimed at assessing data completeness and quality within the registry.

In 2023, Nuffield Health was awarded a Gold Quality Data Provider Award, meaning that all 34 of our hospitals across England and Wales met the 100% NJR target for sharing data to improve clinical outcomes for the benefit of patients.

Quality assurance continued

Leading quality from the frontline



Marc Holl, Head for Primary Care and Deborah Scott, Head of Clinical and Nursing Practice, explain how PL:AN is elevating quality assurance across both primary and secondary care.

Q You launched the PL:AN concept for primary care in 2021. What's the central idea behind it?

MARC: PL:AN stands for 'Professional Leadership and Assurance Network' and at its heart is the belief that the people who actually deliver frontline clinical services can make a vital contribution to leading our professional workforce whilst focusing on improving quality. They know, see and feel what needs to happen and that makes them a fantastic expert resource that we need to use to the full. So there are no ivory towers; our frontline specialists are 'doing' as well as directing our improvement over quality.

DEBORAH: ...and I'd add that because they have a foot in the clinical camp, the decisions they make and the examples they set carry even more weight and credibility to the rest of their teams.

Q So how did PL:AN evolve and where are you now?

MARC: We launched PL:AN with the aim of maximising collaboration in leadership, clinical quality and governance within each of our primary care services. These included mental health services, physiotherapy, GP, physiology and clinical fitness. Throughout 2022, we mobilised the new team, cementing ways of working, and tweaking and refining. 2023 was the first full year of the concept in action for primary care, and we started to see the fruits of the previous 18 months' work.

We measure our quality as a combination of safety, effectiveness and the patient experience. Fast forward to June 2023, and our internal Quality Dashboard showed top ratings across the board for the first time in physiotherapy. Colleague retention was better and both our beneficiary and colleague NPS scores were well above target. As importantly, we've also maintained that performance.

Q So Deborah, how are you taking PL:AN into secondary care?

DEBORAH: Essentially, we are now cloning the best parts of what Marc and the team have used in primary care. So I've got 12 specialisms including areas such as diagnostic imaging, cancer services, surgical services, and children and young people. And through 2023, our team has mirrored Marc's proof of concept for primary care. And we've been forming that team, getting the right individuals in place, and getting national leads, quality leads and subject matter experts for those clinical areas.

In secondary care, there is also a big drive towards having specialists set up exemplar sites. Where PL:AN has drawn on the expertise and clinical leadership at our particular sites, we are working towards making those sites our flagships in the relevant areas. PL:AN works because the people leading clinical improvement are also involved in delivering the service, so this takes that to the natural next level.

Q And does PL:AN also apply to quality in non-clinical fitness?

MARC: We split our fitness services into Clinical Fitness (those exercise and movement-based services focused on improving the function of those with long-term conditions and specific medical conditions through guided rehabilitation) and Non-Clinical Fitness (subscribed members accessing our fitness and wellbeing centres for generic health improvements, i.e. those undertaking spin classes, yoga or swimming for example). Due to the clinical nature of the services we provide within Clinical Fitness, this sits within our primary care PL:AN structure. We recognised we were missing a trick by not having a similar leadership and governance structure for non-clinical fitness, so in April 2023, we decided to create a dedicated quality role for Fitness. This new post follows a similar model – our new leader leads the service from a quality assurance perspective but also maintains a job role at the frontline.

Q Is PL:AN another example of our connected health ambition?

DEBORAH: Very much so. In bringing together primary care and secondary care, we are not only trying to connect our health system for our patients and beneficiaries, we're trying to connect our ways of working together. An example is the training of physiotherapists – using a hub and spoke model where training is held at the hospital for the physios across the partnered fitness and wellbeing centres. There is increasingly a joined up approach to training and quality improvement.

Quality assurance continued

My colleague, the robot



Mr Hasan Qazi is a consultant urology surgeon at Nuffield Health Parkside Hospital and at St George's University Hospitals NHS Foundation Trust.

Below he describes the role of robotic surgery and his experiences with the da Vinci system, which has performed over 12 million procedures worldwide.

"Robotic surgery represents the biggest change I have witnessed in my career as a urologist. It's revolutionising the way we operate.

"I started my career in 2001 and remember a patient having his prostate removed due to cancer. The incision on the abdomen was over six inches long, the operation took five hours, and there was almost a litre of blood loss.

"He stayed in hospital for several days and required a catheter in the bladder for three weeks. When he returned to clinic six weeks later, he had only just about resumed normal activities.

"Today, the same procedure using keyhole robotic surgery takes under two hours, results in less than a quarter of the blood loss, and requires just an overnight stay for most patients.



"The catheter stays in for about a week and when I see patients in clinic after three weeks, they have already resumed a full range of day-to-day activities.

"The outcomes are superior and repeatable thanks to the use of the robot.

Less strain for the surgeon

"From a surgeon's perspective, compared to open or even standard keyhole surgery, it's far less demanding and there's little difference in my energy levels between the first and the last case of the day.

"In my NHS practice at St George's University NHS Hospital, all procedures for prostate or urinary bladder cancer are now done using the da Vinci robot, as is the vast majority of kidney surgery and reconstructive, non-cancer surgery.

"Over the past decade, the number of robotic surgical systems across the UK has grown. They are being used for a range of specialisms including bowel, chest, ENT, gynaecology and paediatric surgery, with an increasing number of surgeons adopting robotic surgery as the standard of care.

The human factor

"For a patient, the human connection with their surgeon is important; it's a bond of trust and faith.

"The awareness that the surgeon, with all their human factors, will be fighting their corner is a hugely important part of the patient journey. Replicating that with a robot may not be easy.

"At Nuffield Health Parkside Hospital in Wimbledon, London, we have invested in the da Vinci Xi robotic surgical system. With an experienced team of surgeons and with several thousand operations under our belt, we are looking forward to improving outcomes for patients and proving my belief that robotic surgery is the future."



Quality assurance continued

Flu vaccinations:
we roll up our sleeves

Dr Davina Deniszczyk launching 'let's knock out flu, with a jab'

Flu is an annual threat, and ahead of the flu season in 2023, Nuffield Health stepped up to enable staff to be vaccinated – both for their own protection and, by extension, the wellbeing of our patients and members.

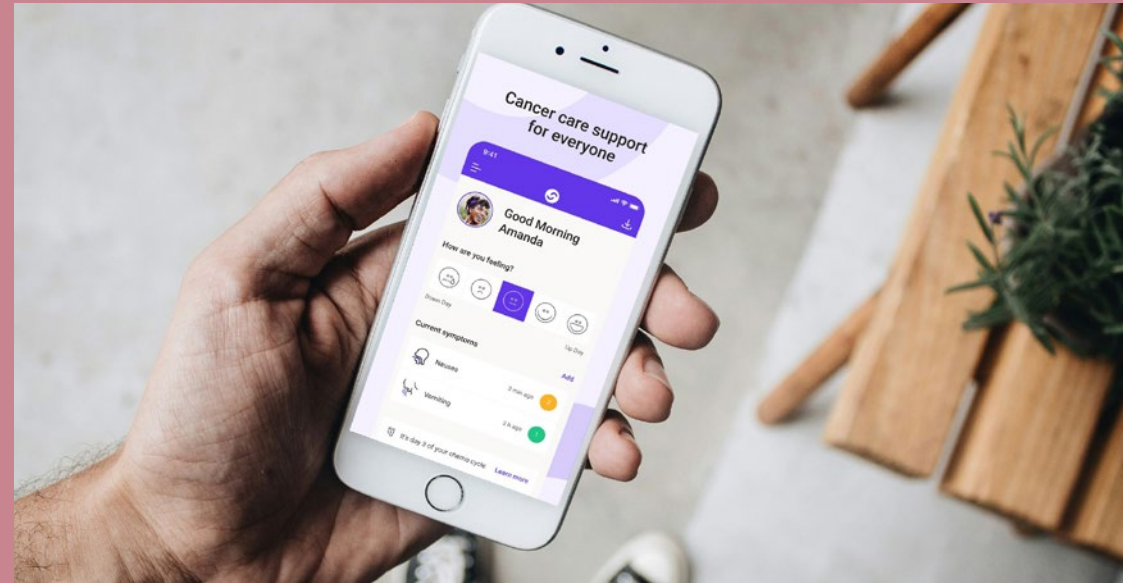
This involved training additional vaccinators, procuring new vaccine refrigeration for many locations, and an extensive communications campaign to make our people aware of this free service. In total, more than 10,500 people came forward. Throughout the programme, live data on the take-up of this service informed how we ordered the vaccines, minimising wastage of shots that could be used elsewhere.

This localised approach made it almost effortless for colleagues to get their jab. It typically required only a few minutes away from work.

10,500

people were vaccinated
through the campaign

Digital cancer care



Strategic partnerships play an important role in our approach to safeguarding and improving quality, and in 2022, Nuffield Health partnered with specialist cancer care provider Careology. Following a successful pilot at our Derby Hospital in 2022, we announced in November 2023 a roll out of our partnership to 12 Nuffield Health hospitals across the UK.

An exciting development has been the 'virtual ward' trial, harnessing digital technology to improve the patient experience. Patients were provided with the Careology digital cancer platform, via an app. From their homes, they engaged with their clinical nurses about their wellbeing, logging their symptoms in response to medication such as chemotherapy.

One patient described it as "like having your cancer care in your back pocket. I used it to keep track of my appointments, medication and report side effects... the app was supportive, providing instructions if there were any problems."

For the care teams, the app gives early visibility of any issues and allows them to focus on the patients who need them most. The digital platform is a recommended service by Macmillan Cancer Support.

12

Nuffield Health hospitals involved
in the roll out of the partnership

Quality assurance continued

Quality improvement plan for 2024

1

Freedom to Speak Up (FTSU) in primary care

What we plan to do:

- Learn from our successful roll out of FTSU across our secondary care services and hospitals and create a just culture across fitness and wellbeing centres incorporating both our primary care and fitness
- Establish a network of FTSU Guardians across our Clinical and Non-Clinical colleagues across these centres
- Ensure the level of awareness and training across our fitness and wellbeing centres are consistent with that across our hospitals
- Enhance safety cultures by enabling all colleagues to speak up as a business-as-usual approach, with a focus on learning and improving
- Raise awareness of just culture and leadership development to ensure recognition of staff speaking up, appropriate responses to staff speaking up, actions taken and feedback
- Encourage psychologically safe cultures where staff can freely speak up and be protected from detriment

2

Improving patient pathways – orthopaedic

What we plan to do:

- Starting with Orthopaedics, review and design our signature acute pathways to improve quality of care, efficiency and safety for our beneficiaries
- Deliver standardised evidence-based care across our 37 hospitals that enhances patient outcomes but also reduces the variability in clinical practice, leading to more predictable and efficient use of hospital resources
- Shift care provision to the ideal location to deliver a holistic and connected health provision
- Enhance multi-disciplinary collaboration to improve the patient experience but also foster a culture of continuous learning and improvement
- Work with our data and research teams to review our pathways to demonstrate health outcomes to payers, backed by data collection and risk stratification

3

Pre-op assessment-optimisation/ electronic pathway

What we plan to do:

- Ensuring standardisation of the pre-operative assessment process in all Nuffield Health hospitals
- Ensure early screening and risk assessment for patients attending Nuffield Health outpatient departments, commencing screening at the time of decision to treat
- Ensuring pathways of care for optimisation – referral back to primary care or referral to physio for pre-hab
- Early screening and risk assessment will aim to reduce late notice cancellations and cancellations on the day of surgery
- Establish a list of patients ready for surgery at short notice, to fill gaps in the theatre list to help utilise theatre capacity
- Set clinical requirements for electronic pre-op assessment discovery phase

4

Upgrade pathology and radiological systems

What we plan to do:

- Procurement and implementation of a new pathology wide Laboratory Information System (LIMS) – to speed up diagnostic pathways, offering remote viewing and reporting that supports our connected health ambitions
- Implement a new consultant 'Clinician Portal' to improve our diagnostic capabilities and user experience
- Use the new system to improve patient pathways, increase security and safety, increase efficiency, and uptime, enhancing our reputation as a trusted brand for third party referrals, increase opportunity for business growth
- Introduce a system for radiological services which enables remote reporting capability and which includes a robust secondary reporting mechanism and capacity for easier multidisciplinary teams and peer collaboration
- Greater access to system data will enable us to provide enhanced management reporting that can assist in the smooth and safe running of radiological departments