



Albyn Hospital

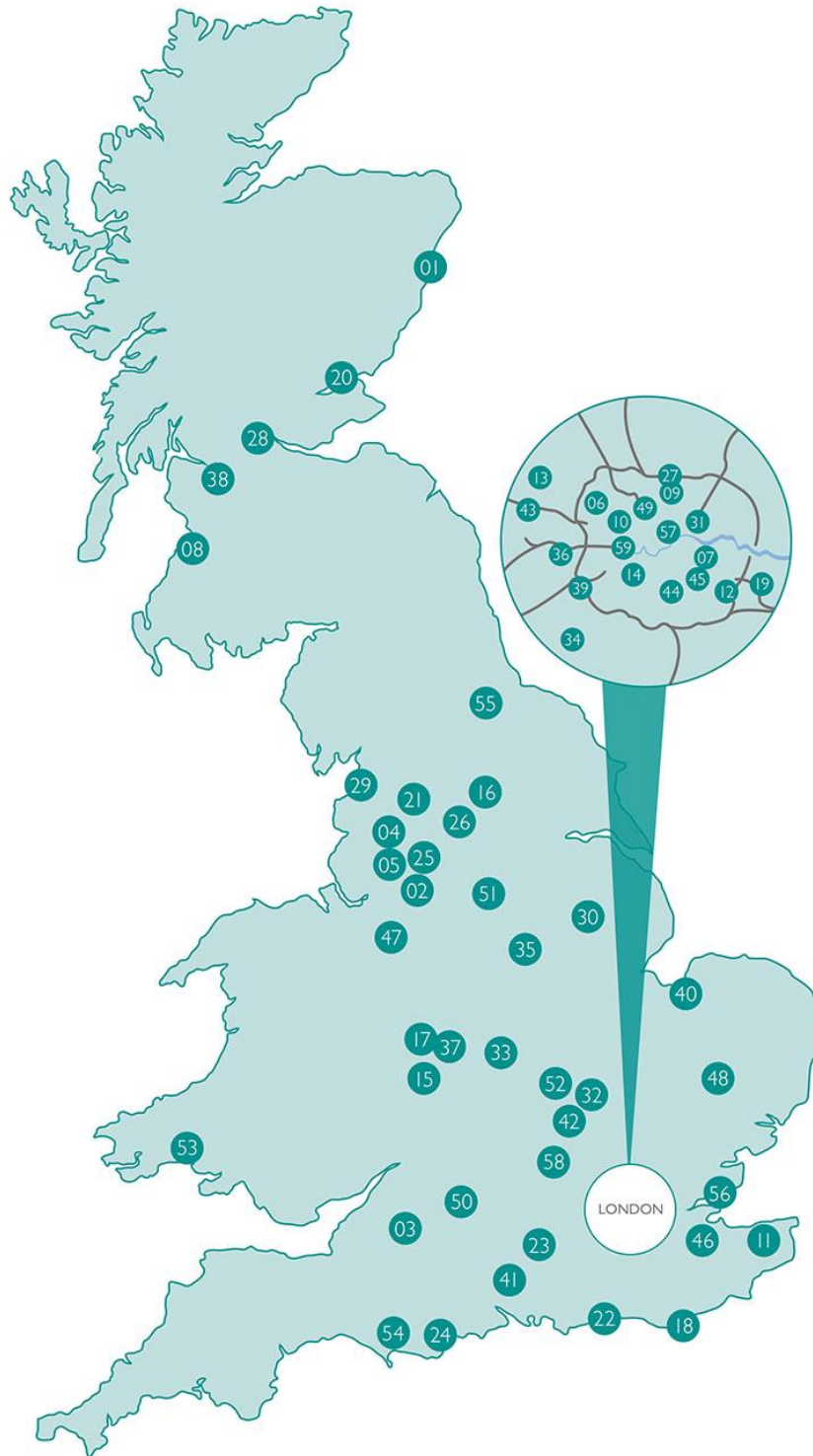
QUALITY ACCOUNTS 2018

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Our network of hospital

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



Group Chief Executive's Statement



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

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

Together, we have been working to both celebrate and share good practice and also to focus on areas where we needed to improve.

All our hospitals are working through individual action plans designed to improve patient care, and our hospital and corporate teams are increasingly aligned and supporting each other around this common purpose. As a consequence, I have confidence that we will continue to improve our regulatory rankings.

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

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

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

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

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

From a corporate and governance point of view, we have rationalised and refocused our committees at both a business and a hospital level, giving each clear areas of responsibility and providing a line of

sight between head office and hospital. We continue to adopt an integrated audit approach, so that we can maintain a holistic overview of how hospitals and teams are performing against agreed standards and procedures.

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

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

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

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

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

Dr Karen Prins

Hospital Information



Located in the west end of Aberdeen, Albyn Hospital is the only independent hospital serving Grampian and the North of Scotland. It was established as an independent hospital in 1955 by The Order of St Johns and changed its name from St Johns to Albyn Hospital in 1995 following a management buyout. The hospital became part of BMI in 2002.

The hospital is comprised of three traditional–built town houses and purpose–built single storey accommodation. All patient bedrooms have en-suite facilities.

Albyn Hospital provides a wide range of consultant specialist’s practise, supported by an experienced team of professionals. Duty doctors resident in the hospital to provide 24hour medical cover, which provides care within a friendly and comfortable environment. Consultants undertake a wide range of procedures from routine investigations to complex surgery.

BMI Albyn Hospital has 27 beds; three operating theatres, 2 bedded HDU provision. The Outpatient suite consists of 12 consulting rooms and a treatment room.

The Diagnostic Imaging department includes 64 slice CT, 1.5T MRI scanner, ultrasound, general, dental and interventional radiology, mammography and mobile and theatre imaging.

Other Clinical Support services on site include Oncology, Laboratory, Pharmacy, Physiotherapy Audiology, Cardiology and Ophthalmology.

The Hospital provides Health Services including Counselling, a Private GP Service, Travel Health, Dietetics, Clinical Psychology and Reflexology.

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

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

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

Healthcare Improvement Scotland carried out an unannounced inspection on 13th & 14th February 2018. Based on the findings of this inspection, the hospital has been awarded the following grades:

Quality Theme 0 – Quality of information: (aggregated score) 5 - Very good

Quality Statement 0.3 – consent to care and treatment: 4 - Good

Quality Statement 0.4 – confidentiality: 6 - Excellent

Quality Theme 1 – Quality of care and support: (aggregated score) 4 - Good

Quality Statement 1.1 – participation 5 - Very good

Quality Statement 1.5 – care records: 4 – Good

Quality Theme 2 – Quality of environment: (aggregated score) 5 - Very good

Quality Statement 2.3 – equipment: 6 - Excellent

Quality Statement 2.4 – infection prevention and control: 5 - Very good

Quality Theme 3 – Quality of staffing: (aggregated score) 6 - Excellent

Quality Statement 3.3 – workforce 6 - Excellent

Quality Statement 3.4 – ethos of respect: 6 – Excellent

Quality Theme 4 – Quality of management and leadership: (aggregated score) 5 - Very good

Quality Statement 4.3 – leadership values: 6 - Excellent

Quality Statement 4.4 – quality assurance: 5 - Very good

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

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

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

appropriate actions to prevent recurrences in order to improve quality and safety for patients, visitors and staff.

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

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

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

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

Safety



Infection Prevention and Control

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

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

Between April 2017 to March 2018, the hospital had:

Hospital Attributable Infection	Rate (per 100,000 Bed Days)
MRSA	0.0000
MSSA	0.0000
E.Coli	0.0000
C.difficile	0.0000

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

Measure	Rate (per 100 procedures)
Hips	0.00000
Knees	0.00000

BMI Albyn Hospital has a regular audit across Infection Prevention and Control which covers each department in the hospital. Where appropriate action plans are completed with follow up to ensure all actions are implemented.

The audits are as follows -

- Departmental hand hygiene audit
- Annual departmental environmental audit Theatres and Endoscopy
- High impact care bundles
- Patient mattress audits in ward, theatre and imaging departments
- Standards of housekeeping audits carried out on a monthly basis
- Standard precautions audit - annually

High Impact Intervention Care bundles audit undertaken:

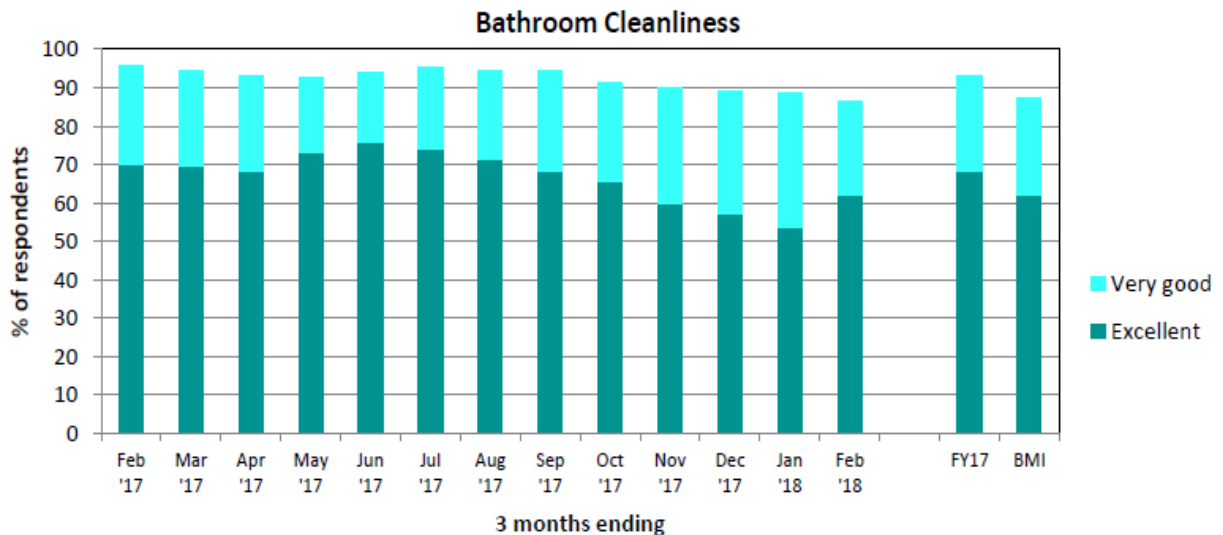
- Bundle for Preventing Surgical Site Infections
- Bundle for Preventing Infection when Inserting PVC

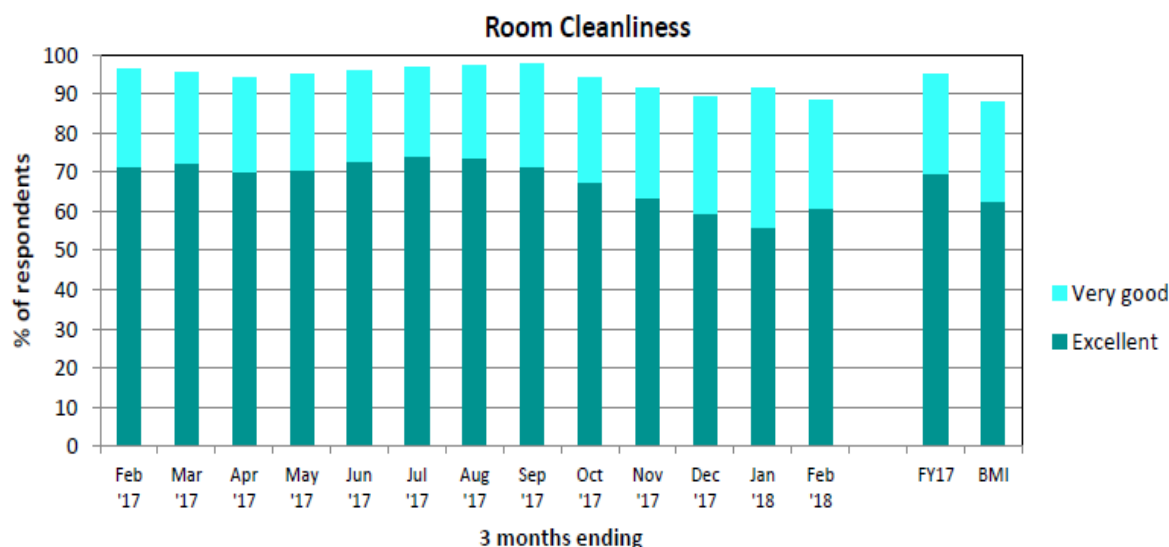
Care bundle audits are completed on a monthly basis and compliance can be shown in our very low infection rates.

All staff, including bank staff, who are employed by BMI Healthcare, are required to participate in induction and mandatory annual Infection Prevention and Control training updates. BMI Healthcare has implemented an IPC learning programme complemented by face to face training provided by IPC lead. This includes hand hygiene and Aseptic non touch technique. Ongoing focus on hand hygiene, aseptic non touch technique and environmental fabric as part of a rolling programme.

IPC lead works closely with all clinical staff. A recent project to raise awareness on hand hygiene was evident through display boards in clinical areas.

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





Patient Led Assessment of the Care Environment (PLACE)

PLACE Audit is not recognised in Scotland and is known as Participation Strategy.

Healthcare Improvement Scotland (HIS) has requested evidence during unannounced inspections. Work is being done for a future roll out across the Scottish sites to meet the requirements of our Regulator.

This Participation Strategy has been developed to encourage participation in new and existing services by our service users, be they patients and their relatives/carers, consultants or staff. This strategy will build on existing good practice and seek to spread that across all of our service. Individual participation is about making person-centred care a reality in our services. Our ambition is to empower patients and carers to be actively involved and, where appropriate, in control of decisions about their health, care and treatment.

Participation is widely recognised within context of reports and reviews from Robert Francis, Bruce Keogh and Don Berwick, who all concluded that health care establishments must listen to and have patients as equal partners in care and in the design and delivery of services.

This strategy therefore makes a firm and genuine commitment to participation and signposts what we need to do next to make participation a reality. The driving force will be co-production, with those we serve, our staff and our partners.

Excellence in participation will enable us to redress the balance of power and influence between HealthCare and the people it serves. When people are involved in their care, services are safer, outcomes are better and resources are used more effectively. More specifically, we segment participation, into individual participation and insight and feedback.

“Evidence shows that patient safety improves when patients are more involved in their care and have more control” Professor Don Berwick.

Individual participation is about making person-centred care a reality in all of our services. Our ambition is to empower patients and carers to be actively involved and, where appropriate, in control of decisions about their health, care and treatment.

Components of person-centred care include: self-management, shared decision-making, enhancing experience of care, improving information and understanding, and personal care planning. Making individual participation a reality will empower our service users and carers, giving them knowledge and confidence to better manage their wellbeing, make decisions about their care and treatment and ultimately achieve better outcomes.

BMI Albyn Hospital had an unannounced HIS inspection in February 2018. The report has now been published.

Duty of Candour

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

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

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

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

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

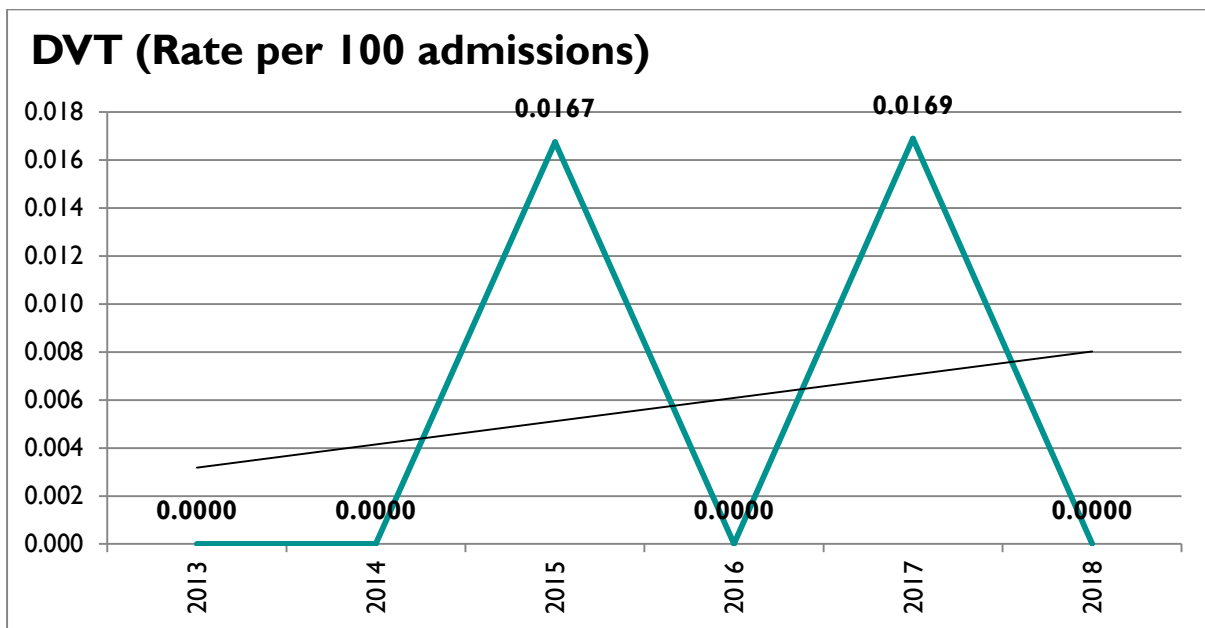
We are undertaking a targeted training programme for identified members of staff to ensure understanding and implementation in relation to the Duty of Candour.

BMI Albyn Hospital have had no incidents where the Duty of Candour process has been actioned. There is a firm belief within our hospital of an open and honest relationship with our patients which can be clearly evidenced in documented care pathways.

Venous Thrombo-embolism (VTE)

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

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



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

Data is due to excellent process of recording assessment, Good staff training to embed the importance of VTE assessment to ensure the safe care of our patients.

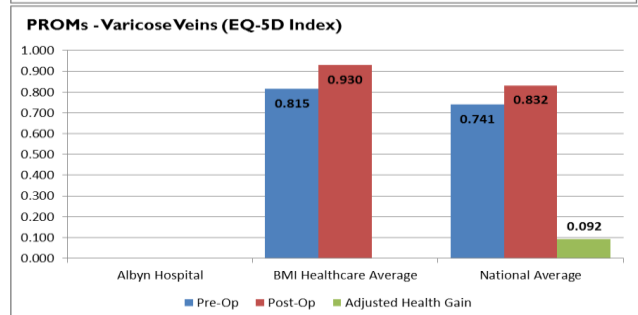
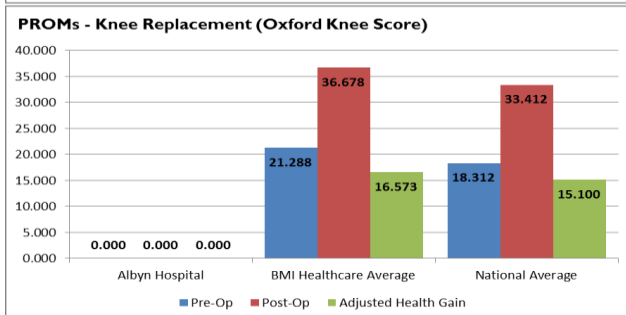
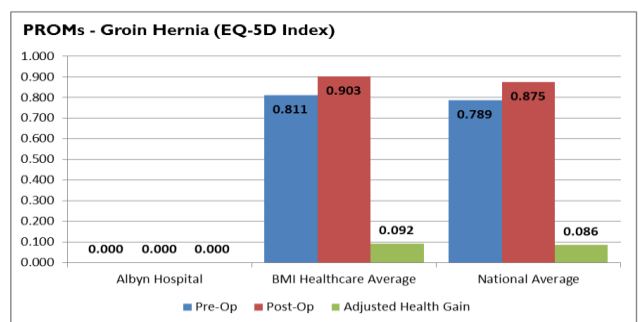
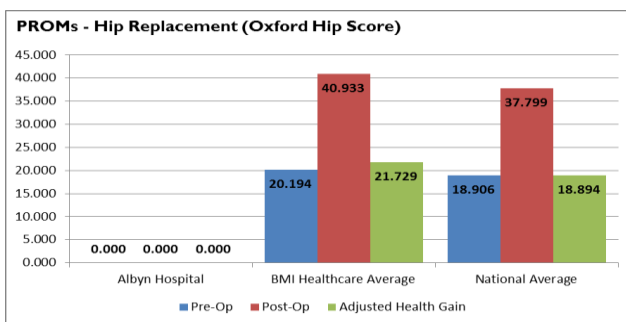


Patient Reported Outcome Measures (PROMS)

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

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

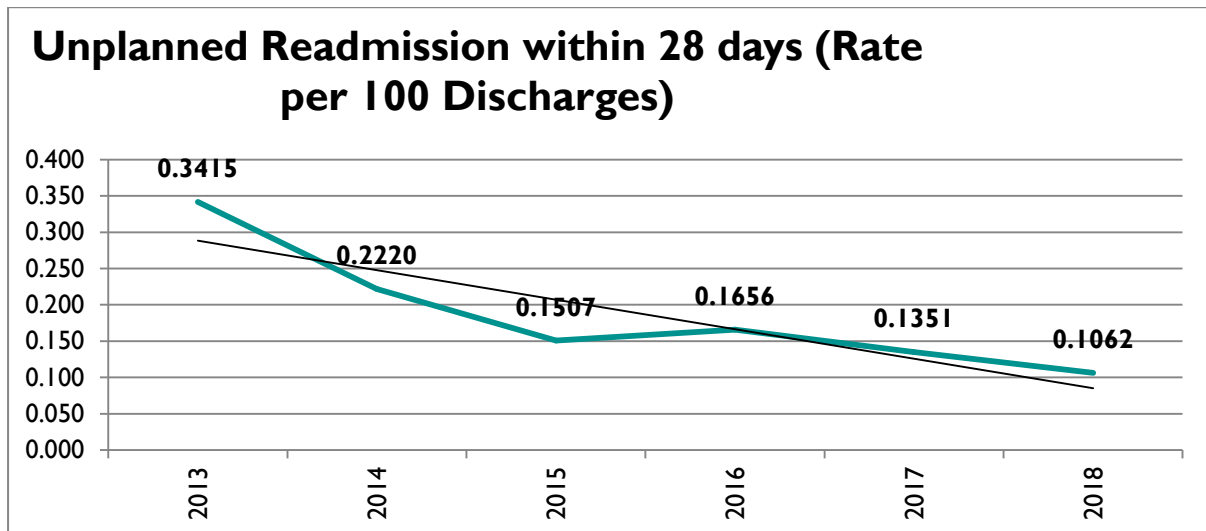
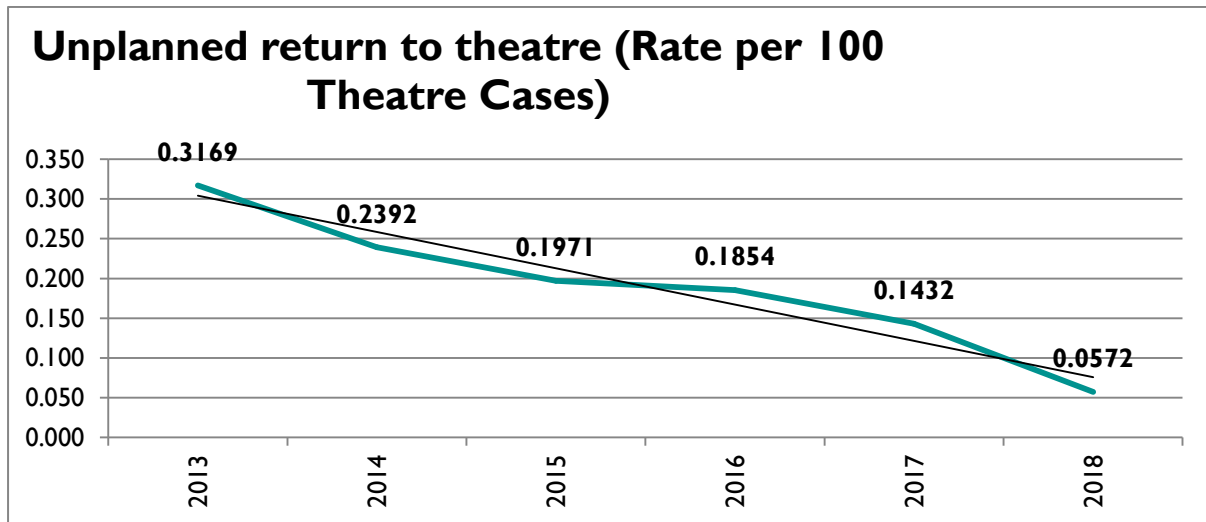
Latest PROMS data available from HSCIC (Period: April 2016 – March 2017)



Unplanned Readmissions & Unplanned Returns to Theatre

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

Albyn Hospital are currently below the national average for re-admission rates due to the effective surgical pre-assessment service. Potential health concerns are highlighted and addressed pre-operatively reducing the possibility of re-admission. Albyn continues to monitor the admissions through our incident reporting process and incidents are discussed at Clinical Governance and MAC meetings.



Learnings from Deaths

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

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

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

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

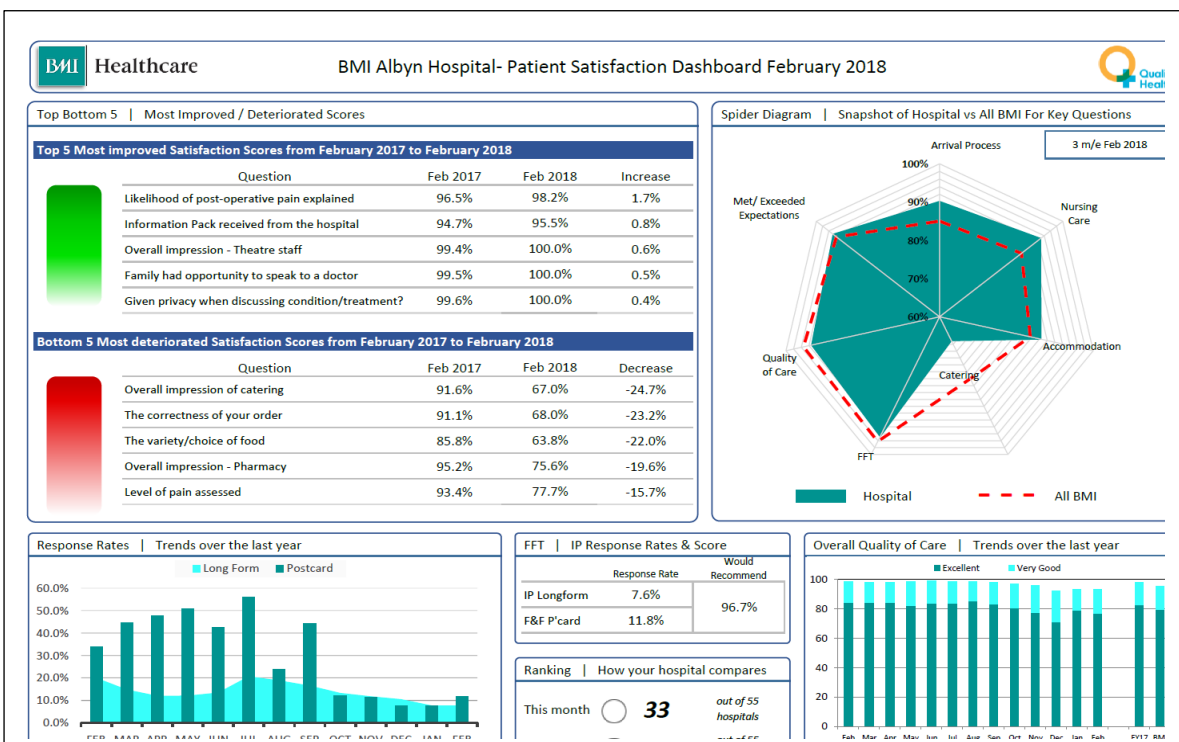
Patient Experience

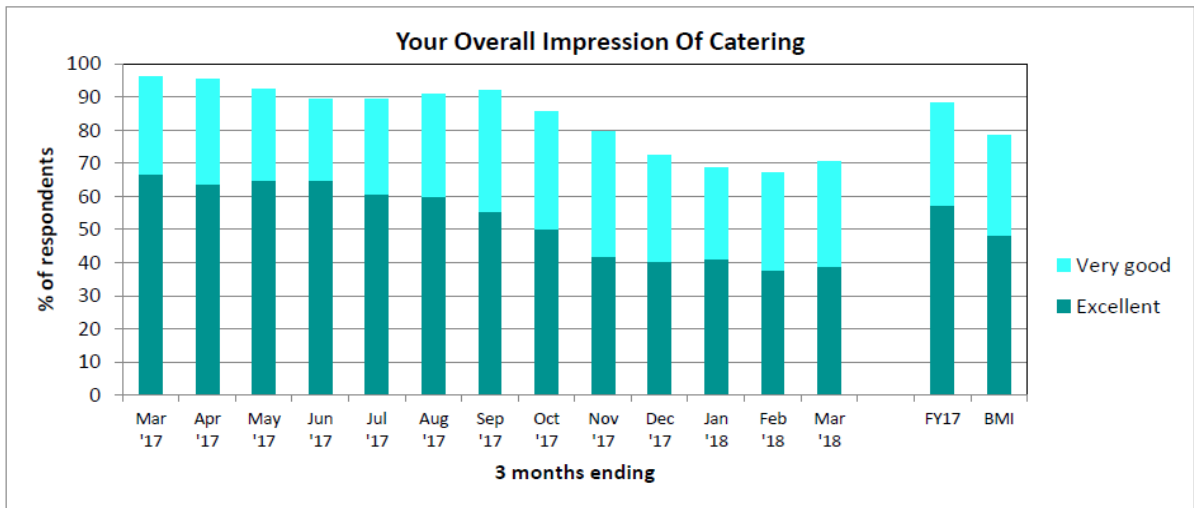
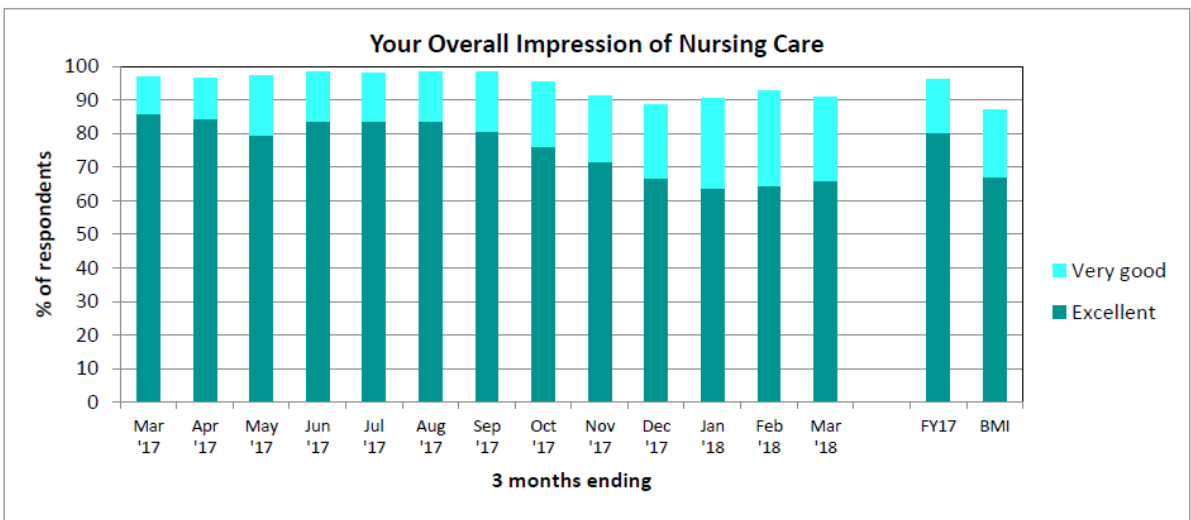
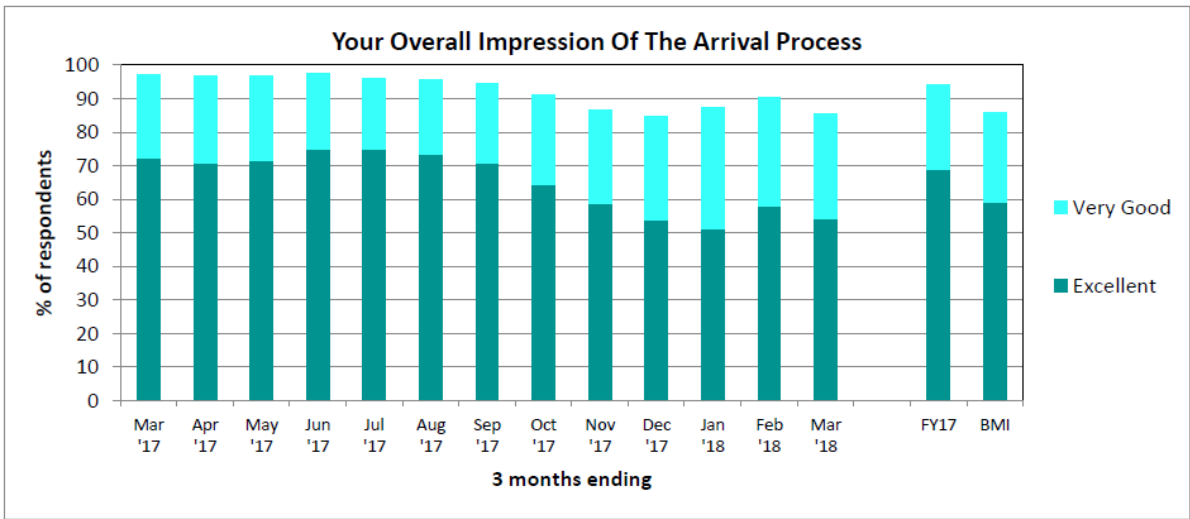
Patient Satisfaction



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

The Board report remains a standing agenda item at senior management team meetings. Some patients are also invited to a Patient Participation Group to discuss areas for improvement.





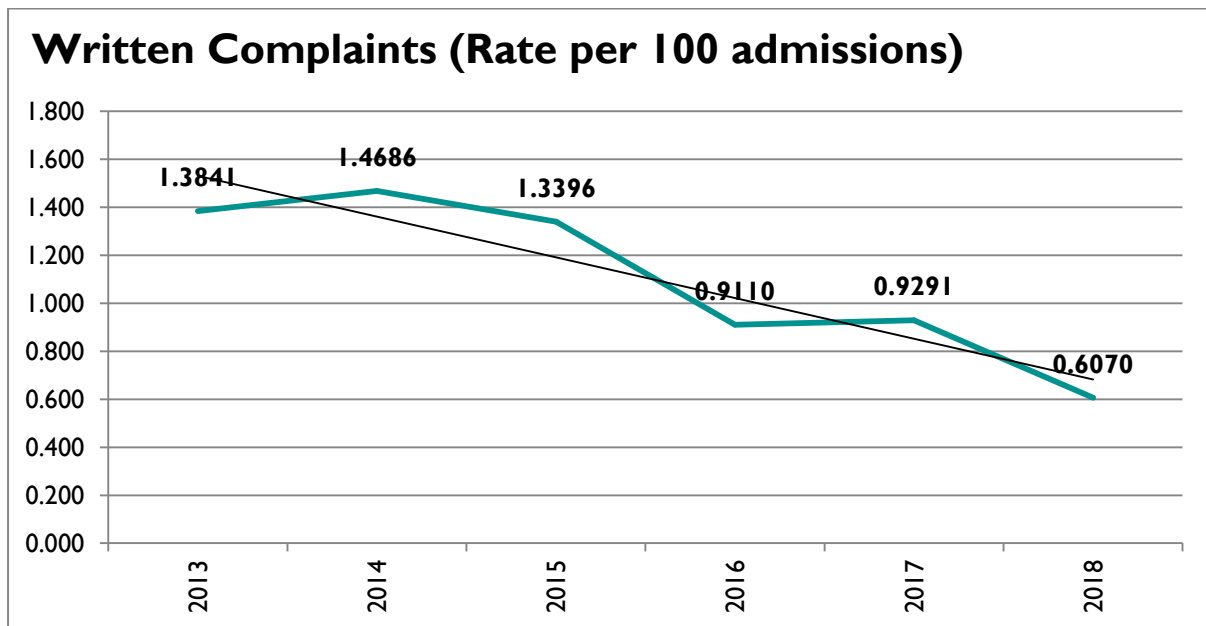
Complaints

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

Stage 1: Hospital resolution

Stage 2: Corporate resolution

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



Albyn Hospital strives to address informal feedback and resolve any issues identified directly with the patient at the time. All formal feedback that is received is responded to in line with the BMI Complaints Policy. The majority of complaints are resolved at Stage 1 due to positive engagement with our patients. Albyn Hospital intends to continue to provide a high level of service by ongoing review and monitoring of complaints management process.

CQUINS

CQUINS are not measured at BMI Albyn Hospital.

Safeguarding

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

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

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

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

Senior registered nurses are trained to level 4 safeguarding (if applicable).

BMI Albyn Hospital have had no safeguarding issues in the last year.

National Clinical Audits

BMI Albyn Hospital is not eligible to participate in National Joint Registry audit where all joint replacements are submitted to this as NJR is not measured in Scotland.

Priorities for Service Development and Improvement

Service developments we believe will enhance the patient experience at Albyn Hospital.

- Increase major and complex activity
- Develop further ambulatory provision in line with National strategy
- Develop a general medical admission service
- Work with NHS Grampian on Waiting List Initiatives
- Develop Eyecare Scotland initiative
- Develop Oncology Service
- Formalise Pathology SLA with local Trust

Safety Thermometer

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

VTE Risk Assessment & Treatment

Catheter related Urinary Tract Infection

Falls

Pressure Ulcers by Category

Staff Survey & Staff Safety Culture Questionnaire

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

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

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

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

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

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

Staff Recommendation Results



Albyn Hospital	Staff Recommendations			
2018	2017	National Average	Highest National Score	Lowest National Score
90.00%	92.71 %	73.18%	89.98%	50.44%

BMI Albyn Hospital have a structured programme for delivery ED led communication alongside a deliverable staff forum programme. It is the hospital’s belief that by engaging regularly with staff they will remain motivated and feel they are valued as part of the hospital community. This reflects in the high results obtained.

Quality Indicators

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

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

Indicator	Source	Information	NHS Date Period
Number of Paediatric patients re-admitted within 28 days of discharge and number of adult patients (16+) re-admitted within 28 days of	BMI Healthcare Risk Management System	This figure provided is a rate per 1,000 amended discharges.	Apr 2011-Mar 2012

discharge.

Number of <i>C.difficile</i> infections reported	BMI Healthcare Risk Management System	This indicator relates to the number of hospital-apportioned infections.	Apr 2014 – Mar 2015
Responsiveness to Personal Needs of Patients	Quality Health Patient Satisfaction Report	The responsiveness score provided is an average of all categories applied to Patient Satisfaction questionnaires answered by BMI Healthcare inpatients.	Feb 2016 – Jan 2017
Number of admissions risk assessed for VTE	CQUIN Data	BMI Healthcare only collects this information currently for NHS patients.	Jan 2017 – Dec 2017
Number/Rate of Patient Safety Incidents reported	BMI Healthcare Risk Management System	Based upon Clinical Incidents with a patient involved where the NPSA Guidelines deem a severity applicable.	Oct 2015 – Sep 2016
Number/Rate of Patient Safety Incidents reported (Severe or Death)	BMI Healthcare Risk Management System	Based upon Clinical Incidents with a patient involved where the NPSA Guidelines deem a severity applicable.	Jul 16 – Jun 17

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

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

Albyn Hospital	Re-Admissions (Aged 16+)			
2018	2017	National Average	Highest National Score	Lowest National Score
2.702	2.870	10.010	41.650	0.000

Our re-admission rate can be proportioned to our follow up process where any patient who has been discharged from the hospital is given clear guidance on our escalation policy regarding any post-operative complications they may experience. Patients are discharged and given the advice that the hospital will re-assess them within a timely manner of any concerns they may have. Therefore we promptly deal with any clinical concerns and have a low threshold to re-admit patients to ensure patient safety and patient satisfaction at all times. As previously mentioned, re-admission rates are below the national average due to the effective surgical pre-assessment service.

In the past year, there have been no Paediatric re-admissions. Paediatric patients are predominantly cared for within our outpatient service.

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

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

BMI Albyn Hospital have had no reported C.diff cases since the last submitted report. Due to our diligence in Infection Prevention and Control practices and surveillances, Albyn intends to continually monitor, audit and report infections. Action plans will be implemented as required.

Hospitals responsiveness to the personal needs of its patients

Albyn Hospital	Responsiveness			
2018	2017	National Average	Highest National Score	Lowest National Score
91.65%	96.59%	69.22%	78.00%	60.10%

BMI Albyn Hospital have embedded a process where all patients’ questionnaires are screened on site and any patient who has indicated that they require a response to their feedback is given so in a timely manner and where relevant, with an explanation around their comment. If we feel that a patient requires a more detailed response, we have a process in place to ensure they receive feedback. The percentage obtained is due to the high standard of care delivered to our patients. Albyn Hospital welcome feedback both acknowledging satisfaction as well as dissatisfaction of the service as it gives the opportunity to address issues and continually improve our service. Albyn Hospital continues to engage with patients through the Patient Participation Strategy Group. Patients are invited to attend a meeting following surgery to share their hospital experience.

Patient Safety Incidents

Albyn Hospital	Patient Safety Incidents (Count)			
2018	2017	National Average	Highest National Score	Lowest National Score
346	161	3908	14506	31

BMI Albyn Hospital recognises the importance of patient safety and patient satisfaction. We adhere to all reporting guidelines and have developed action plans to ensure patient safety incidents are minimised on site. We have developed action plans to ensure patient safety incidents are minimised on site. Since the implementation of RiskMan computerised system, all staff now have access to enter incident details. Management of incidents, investigations and lessons learned continue to be monitored and discussed at relevant committee meetings.

Patient Recommendation Results

Albyn Hospital	Patient Recommendations			
2018	2017	National Average	Highest National Score	Lowest National Score
97.16%	99.08%	97.07%	100.00%	75.61%

BMI Albyn Hospital has a score of 97.16% of our patients giving recommendation to use our facility and services. The hospital will strive to continually improve services to a level that exceeds our customers' expectations. Albyn Hospital considers that the high result reflects the high standard of care received by our patients.

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