



Ross Hall  
Hospital

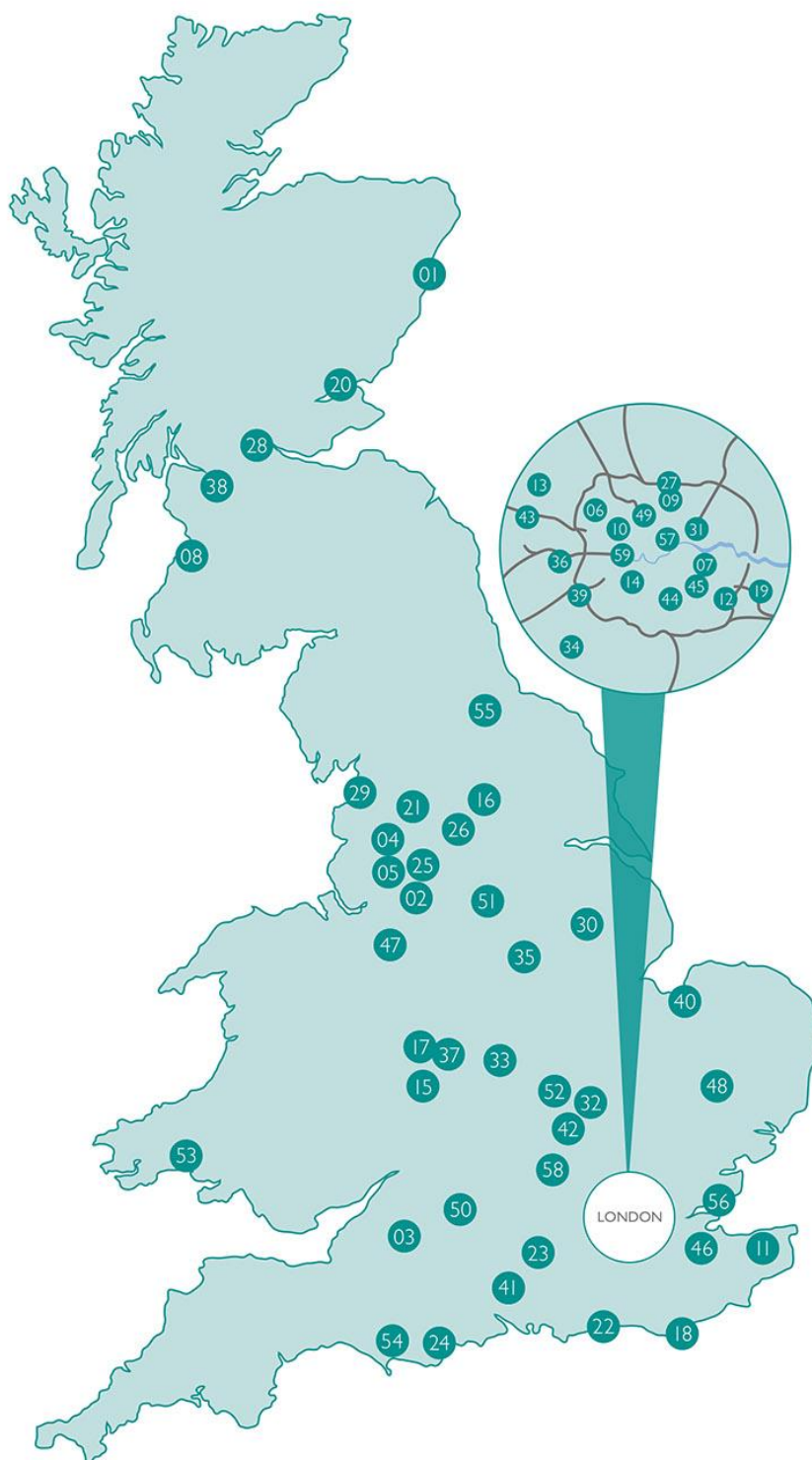
# QUALITY ACCOUNTS 2018

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## Our network of hospitals

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." The signature is written in a cursive, slightly slanted style.

**Dr Karen Prins**



## Hospital Information

BMI Ross Hall Hospital in Glasgow is part of BMI Healthcare, Britain's leading provider of independent healthcare with a nationwide network of hospitals & clinics performing more complex surgery than any other private healthcare provider in the country.

Our commitment is to quality and value, providing facilities for advanced surgical procedures together with friendly, professional care. BMI Ross Hall Hospital, aim is to provide the highest standards in all aspects of patient care. This includes ensuring unequalled attention to hygiene and involving patients in the process to minimise any risks of infection.

The hospital has 101 ensuite rooms each with bathroom and television. It has four operating theatres, one minor procedures theatre, a high dependency unit/ five bed intensive care unit, a day chemotherapy unit and a 5 bay endoscopy unit.

The hospital has recently commissioned a state of the art, two theatre ophthalmology unit ; Eye Care Scotland; which offers all aspects of corrective eye surgery.

The hospital offers an extensive range of treatments, including cardiothoracic, colorectal, cosmetic, gastroenterology, orthopaedic surgery, plastic surgery and general surgery.

Ross Hall Hospital sees both inpatients and outpatients and offers a paediatric service as required.

These facilities combined with the latest in technology and on-site support services; enable our consultants to undertake a wide range of procedures from routine investigations to complex surgery. This specialist expertise is supported by caring and professional medical staff, with dedicated nursing teams and Resident Medical Officers on duty 24 hours a day, providing care within a friendly and comfortable environment.

The building is situated within a residential area of Glasgow, with parking available on site, close to public transport and local amenities. The hospital cares for PMI and Self Pay Patients with a small number of NHS Spot contracts on request from the local NHS Board.

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

BMI Ross Hall Hospital is registered as a location for the following regulated services:-

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

HIS use the following grading system -

- 6 Excellent
- 5 Very Good
- 4 Good
- 3 Adequate
- 2 Weak
- 1 Unsatisfactory

Healthcare Improvement Scotland carried out an unannounced inspection on 11<sup>th</sup> and 12<sup>th</sup> April 2017 and assessed the service against all five quality themes related to the Healthcare Improvement Scotland (requirements as to independent healthcare services) regulations and the National Care Standards.

Based on the findings of this inspection, BMI Ross Hall Hospital was awarded the following grades, with no requirements and only 6 recommendations to the service provided:

**Quality Theme 0 – Quality of information: 4 - Good**  
**Quality Theme 1 – Quality of care and support: 4 - Good**  
**Quality Theme 2 – Quality of environment: 5 – Very good**  
**Quality Theme 3 – Quality of staffing: 5 - Very good**  
**Quality Theme 4 – Quality of management and leadership: 5 - Very good**

BMI Ross Hall 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 Ross Hall Hospital

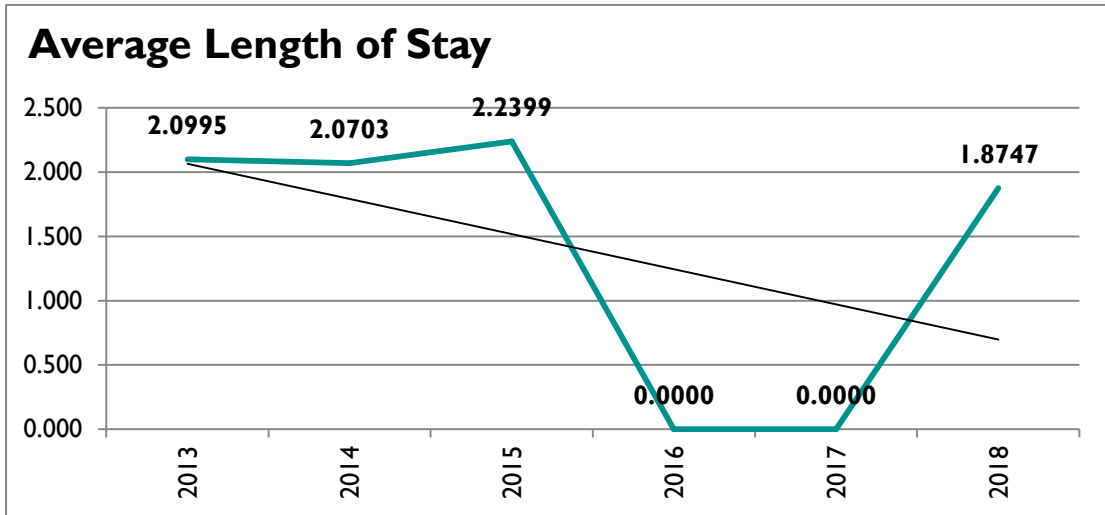
The focus on Infection Prevention and Control continues under the leadership of the Group Director of Infection Prevention and Control and Group Head of Infection Prevention and Control, in liaison with the Infection Prevention and Control Lead.

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                      |

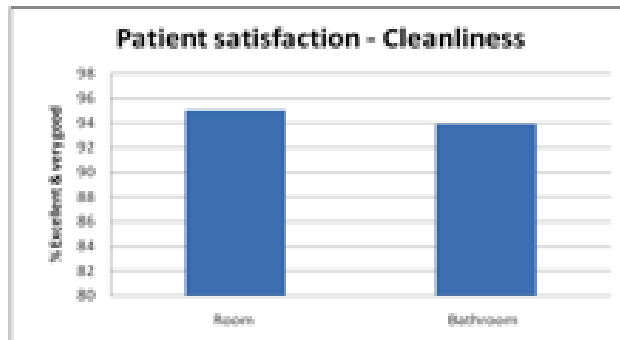
- SSI data is also submitted to Public Health England for Orthopaedic surgical procedures. Our rates of infection are;
- The average length of stay for patients following hip or knee replacement surgery at BMI Ross Hospital from 1<sup>st</sup> April 2017 to 31<sup>st</sup> March 2018 is as follows –

| Measure | Rate (per 100 procedures) |
|---------|---------------------------|
| Hips    | 3.5                       |
| Knees   | 3.8                       |



- High Impact Intervention Care bundles have been implemented in clinical areas for Hand Hygiene, PVC, CAUTI, and clinical areas record their compliance and audit details on a monthly basis.
- BMI Learn offers mandatory training with blended modules that include a face to face practical session for hand hygiene, aseptic non touch technique and other infection prevention activities. The site Infection Prevention and Control Link in conjunction with the Practice Education Facilitator and Regional Trainer offer focused training sessions for newly recruited staff to ensure appropriate foundations are established within the induction period.

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.

The 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. The revised Health and Social care Standards, My support, my life issued by Scottish Government support and outline this requirement. 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 Ross Hall Hospital had an unannounced HIS inspection in April 2017.

## 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.

As evidence of our commitment to continuous quality improvement and patient safety and satisfaction, clinical and non-clinical incidents and patient and service user complaints are investigated and discussed via the relevant forums within the hospital and demonstrate -

- Lessons Learnt as a result of incidents involving Duty of Candour.
- How the hospital has complied with Duty of Candour for each incident
- Incidents where Duty of Candour applies

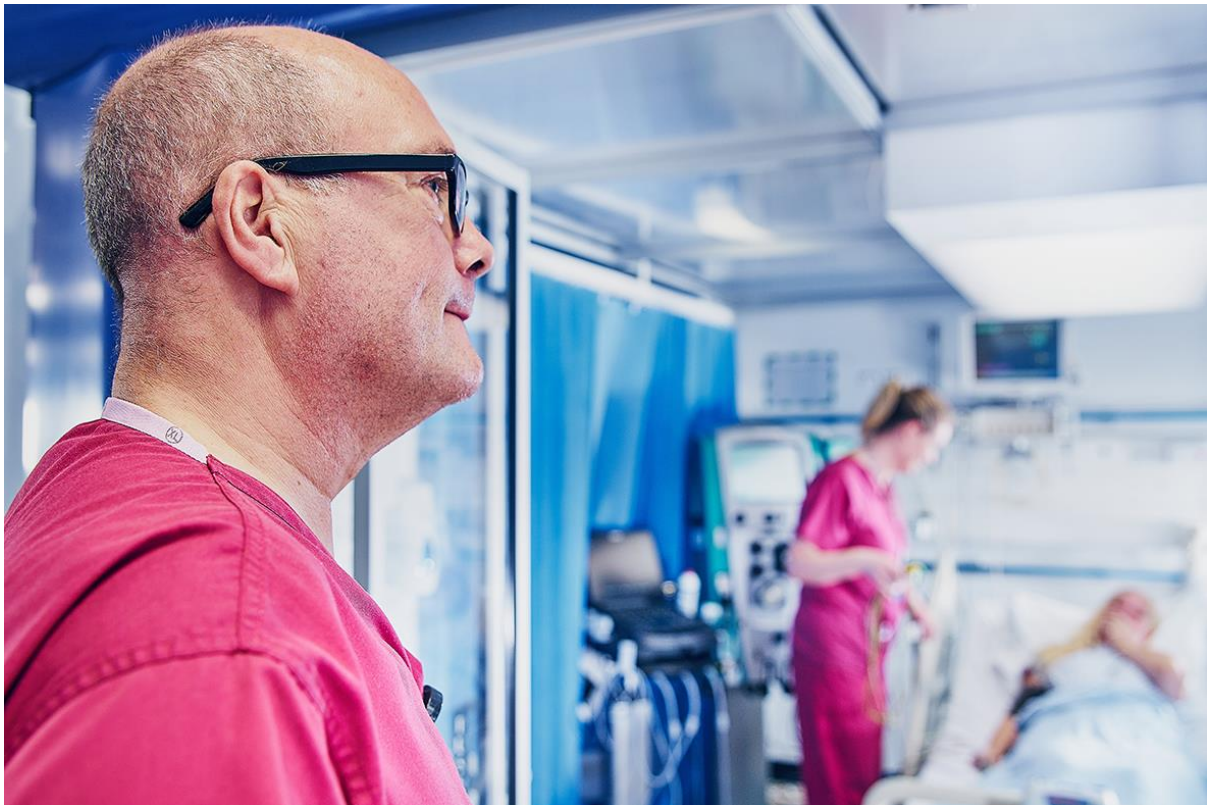
| Duty of Candour Incidents |
|---------------------------|
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## Venous Thrombo-embolism (VTE)

BMI Healthcare, holds VTE Exemplar Centre status by the Department of Health across its whole network of hospitals including, Ross Hall 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.

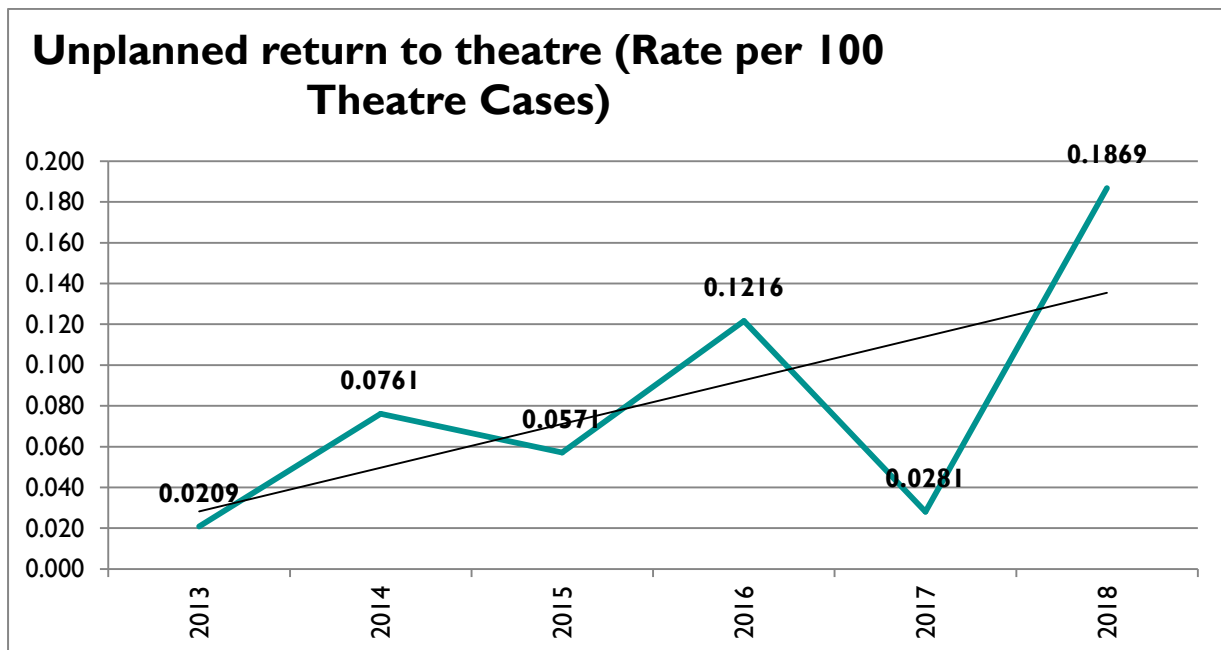
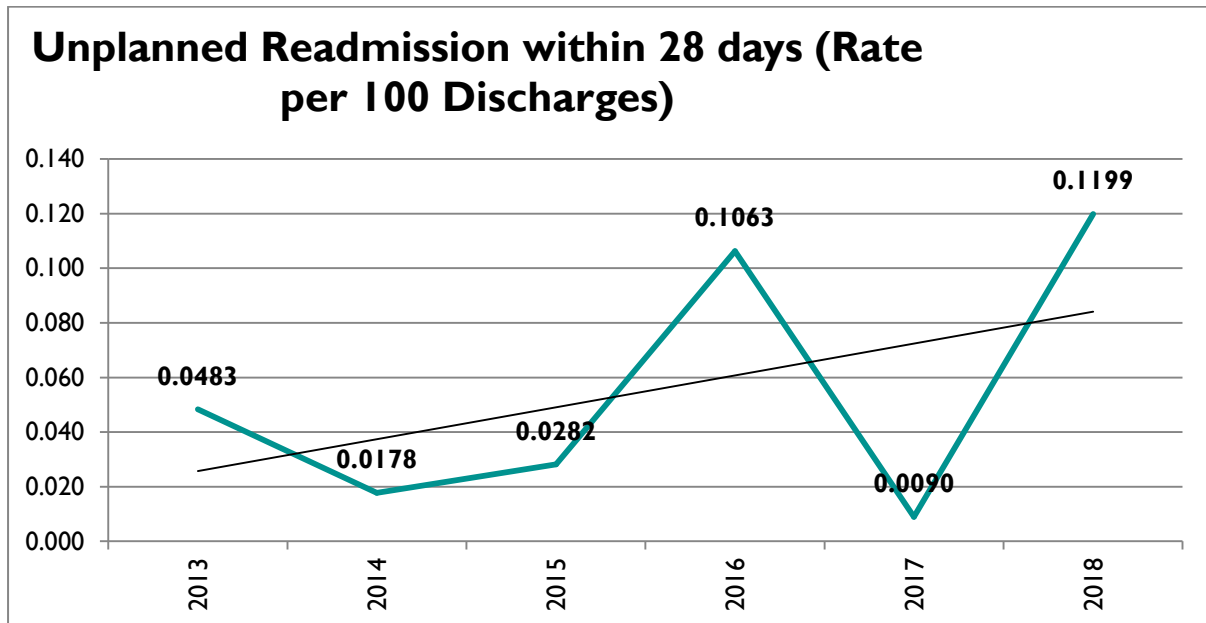
We see this as an important initiative to further assure patient safety and care. We audit our compliance with our requirement to VTE risk assessment every patient who is admitted to our facility and the results of our audit on this has shown

Ross Hall 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. .



## 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.



## 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, Risk Man, 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.

## Complaints

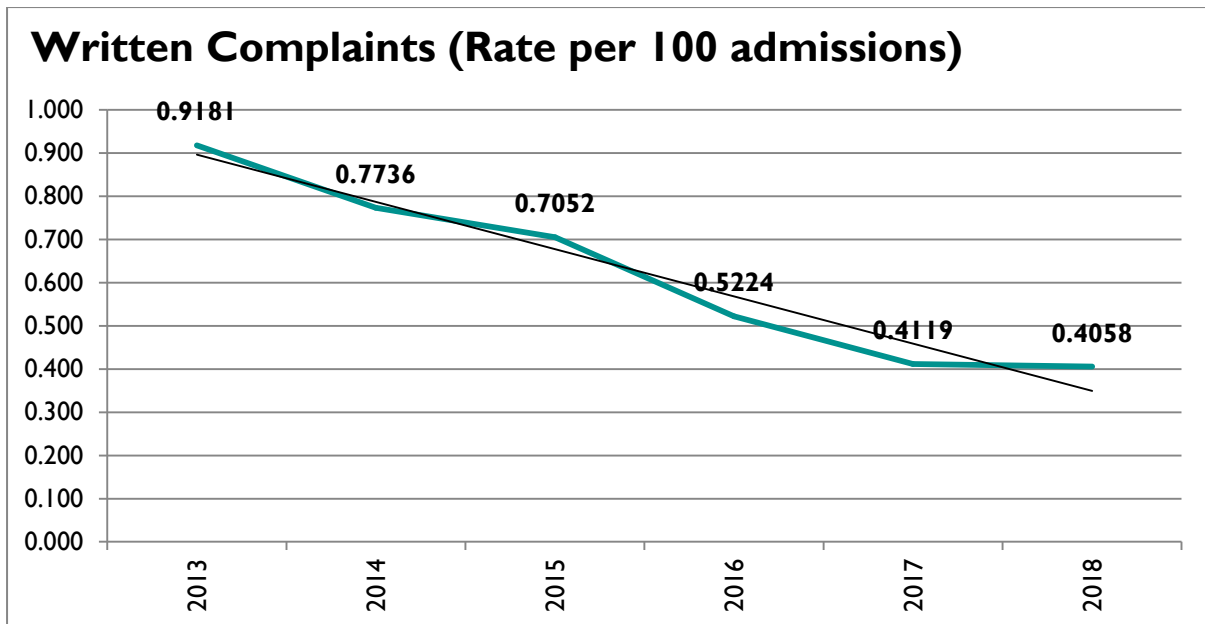
In addition to providing all patients with an opportunity to complete a Satisfaction Survey BMI Ross Hall Hospital actively encourages feedback both informally and formally. Patients are supported through a robust complaints procedure, operated over three stages:

Stage 1: Hospital resolution

Stage 2: Corporate resolution

Stage 3: Patients can refer their complaint to Independent Adjudication if they are not satisfied with the outcome at the other 2 stages.





Ross Hall hospital has seen a downward trajectory in the number of written complaints received in the previous 12 months. The appointment of a Quality and Risk Manager and a Patient Liaison Officer has seen a revised process for management of patient feedback with greater emphasis on communication with early intervention and timely local resolution. Providing the opportunity for face to face discussion and meeting with relevant senior staff has proven to be very effective and supportive of a patient focused, individualised approach to managing and resolving individuals issues

The main themes of complaints continue to revolve around Accounts and Billing issues, consultant communication and quality of catering service. Actions taken to address these issues have been identified throughout this report however an improved responsiveness to billing enquiries and queries with focus on access to and management of the Query portal has seen benefits across the site.

Improved consultant communication is addressed via direct and patient specific communications with the consultant by the Executive Director.

Service provision in relation to catering has been addressed by improved by direct engagement with Compass and an agreement to a quality improvement plan moving forward.

Actions and responsiveness to patient feedback has been demonstrated via 'You said, we did' and via Lessons Learned activities.

## CQUINS

CQUINS are not measured at BMI Ross Hall 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 Children Nurses are trained to level 4 safeguarding (if applicable)

In this reporting period, Ross Hall hospital has not required to report any Safeguarding incidents corporately or Adult Support and Protection or Child Support and Protection Incidents.

## National Clinical Audits

Clinical Audits are undertaken by Ross Hall hospital and are an integral part of our quality assurance and service improvement initiatives. BMI Healthcare are currently negotiating a revised format of data collection that will see a welcome opportunity to bring together all clinical and non-clinical audit undertaken by hospitals into one easily accessible dashboard that will provide real time data and status at a glance with the opportunity to underpin findings by robust integral action plans.

BMI Ross Hall 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

- Development of Children and Young Persons Services
- Development of new Vision Centre with a Hub and Spoke delivery model providing support to additional BMI sites across the North Region; Eye Care Scotland encompasses state of the art ophthalmology services with a full range of diagnostic and treatment options.
- Development of a local refurbishment plan to upgrade existing facilities in line with national specifications for the Healthcare environment with a rolling programme of improvement by installation of new clinical hand wash basins and compliant healthcare flooring.

## 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



| Ross Hall Hospital | Staff Recommendations |                  |                        |                       |
|--------------------|-----------------------|------------------|------------------------|-----------------------|
| 2018               | 2017                  | National Average | Highest National Score | Lowest National Score |
| 81.00%             | 87.96 %               | 73.18%           | 89.98%                 | 50.44%                |

Ross Hall hospital considers that this data is as described for the following reasons:

Staff recommendations as Ross Hall as a place to work has seen a downward trajectory from the previous year score however remains significantly higher than the national BMI average. Recent changes to both corporate and local management structures within BMI have seen a period of consistent change with communication being identified as not being as robust and supportive as is required to support staff during this time.

Ross Hall Hospital has taken the following actions to improve this percentage and so the quality of its services, by:

- Reviewing and responding to the direct feedback provided within BMI Say Staff Survey
- Seeking opportunity to empower staff and facilitate staff inclusivity and decisions making by introduction of a new staff forum, namely MUSE Group (Mutual Understanding and Supporting Excellence)
- Facilitating staff to review specific hospital processes by applying LEAN methodology and affording time to undertake value stream mapping that highlights current state versus preferred state and supports effective specific change management strategies.

## 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 discharge. | BMI Healthcare Risk Management System      | This figure provided is a rate per 1,000 amended discharges.  | <b>Apr 2011 - Mar 2012</b> |
| Number of <i>C.difficile</i> infections reported  | BMI Healthcare Risk Management System      | This indicator relates to the number of hospital-apportioned infections.  | <b>Apr 2014 – Mar 2015</b> |
| Responsiveness to Personal Needs of Patients  | Quality Health Patient Satisfaction Report | The responsiveness score provided is an average of all categories applied to Patient Satisfaction questionnaires answered by BMI Healthcare inpatients. | <b>Feb 2016 – Jan 2017</b> |
| Number of admissions risk assessed for VTE  | CQUIN Data                                 | BMI Healthcare only collects this information currently for NHS patients.   | <b>Jan 2017 – Dec 2017</b> |
| 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.   | <b>Oct 2015 – Sep 2016</b> |
| 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.   | <b>Jul 16 – Jun 17</b>     |

| 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 (Adult)

| Ross Hall Hospital | Re-Admissions (Aged 16+) |                  |                        |                       |
|--------------------|--------------------------|------------------|------------------------|-----------------------|
| 2018               | 2017                     | National Average | Highest National Score | Lowest National Score |
| 1.959              | 0.127                    | 10.010           | 41.650                 | 0.000                 |

Ross Hall Hospital considers that this data is as described for the following reasons:

- Emphasis on data capture via Risk Management system of emergency readmissions for suspected infection or potential surgical complication – this is discussed at daily comms cell meetings and reporting is monitored by the DOCS and QR Manager.

Ross Hall hospital intends to improve the data capture in relation to hospital readmissions related to revision surgery and have implemented revised process of data collection in relation to revision surgery in order to evidence an accurate score in this category and so evidence its commitment to an improved transparent quality service.

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

| Ross Hall Hospital | C.difficile (per 100,000 bed days) |                  |                        |                       |
|--------------------|------------------------------------|------------------|------------------------|-----------------------|
| 2018               | 2017                               | National Average | Highest National Score | Lowest National Score |
| 0.000              | 12.686                             | 35.928           | 147.455                | 0.000                 |

Ross Hall Hospital considers that this data is as described for the following reasons:

- The elective nature of our service user group
- High standards of infection Prevention and Control and adherence to policy regulation and best practice standards.

## Hospitals responsiveness to the personal needs of its patients

| Ross Hall Hospital | Responsiveness |                  |                        |                       |
|--------------------|----------------|------------------|------------------------|-----------------------|
| 2018               | 2017           | National Average | Highest National Score | Lowest National Score |
| 94.61%             | 94.83%         | 69.22%           | 78.00%                 | 60.10%                |

Ross Hall Hospital considers that this data is as described for the following reasons:

- Consistent scores in hospital responsiveness to the personal needs of its patient is testament to the staffs continued efforts on ensuring the service is patient focused with emphasis of dignity, respect and compassion and is focused on patient inclusivity and wellbeing and is supportive of individual choice.

- The SMT has a Commitment to Learning lessons from feedback and incidents that demonstrates a commitment to continuous quality improvement within the hospital.

Ross Hall hospital will continue to engender these principles within its care delivery to ensure the consistent scores in this area are maintained.

## Patient Safety Incidents

| Ross Hall Hospital | Patient Safety Incidents (Rate per 1000 Bed Days) |                  |                        |                       |
|--------------------|---|------------------|------------------------|-----------------------|
| 2018               | 2017  | National Average | Highest National Score | Lowest National Score |
| 39.482             | 22.580  | 43.292           | 149.700                | 11.200                |

Ross Hall Hospital considers that this data is as described for the following reasons:

- The SMT have a strong emphasis on Risk Management strategies and the recent introduction of a revised Risk Management reporting system allows for improved reporting and categorisation of incidents across new categories. Although evidencing an upward trajectory the total numbers per 1000 patient bed days remains below the National Average for the group.
- The appointment of a Quality and Risk Manager to coordinate and impact and influence on site reporting of risk management issues and subsequent lessons learned action plans has seen a positive impact on Patient Safety.

Ross Hall Hospital plans to continue to participate in corporate Risk Management strategies and coordinate and facilitate safety awareness days, e.g. VTE Safety, Infection Prevention and Control Hand Hygiene Patient Safety Initiatives. In addition the following actions to improve this score, and so the quality of its services, by additional Risk Man Risk Management system awareness sessions, and continued focus on internal audit and regulatory compliance to evidence quality of service and commitment to patient safety.

## Patient Recommendation Results

| Ross Hall Hospital | Patient Recommendations |                  |                        |                       |
|--------------------|-------------------------|------------------|------------------------|-----------------------|
| 2018               | 2017                    | National Average | Highest National Score | Lowest National Score |
| 95.49%             | 98.75%                  | 97.07%           | 100.00%                | 75.61%                |

BMI Ross Hall Hospital has a score of 95.49% 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.

Ross Hall hospital considers that this data is as described for the following reasons:

- Changes to the methodology of data collection of Patient Satisfaction results to an on line system of data collection.

- Recent PSQ results demonstrate the biggest decline in patient satisfaction has been as a result of the catering provision, the general fabric of the building and check in administration processes.

Ross Hall hospital has taken the following actions to improve this percentage, and so the quality of its services, by :

- Seeking opportunity to demonstrate 'You said...we did' based upon direct patient feedback.
- Facilitating revised check-in processes to be streamlines, effective and efficient whilst maintaining patient confidentiality.
- Ensuring improved catering provision as a result of cohesive, collaborative working with Compass and engaging with the Compass Regional Manager to agree a focused quality improvement plan for catering provision to both staff and patients.
- Developing a strategic refurbishment plan aligned to national standards for a Healthcare Environment and requests for associated capital release to support this initiative
- The introduction of revised ways of seeking patient feedback via Patient Experience Initiatives such as Patient Interviews, Patient Participation Groups, and re-energised focus on post discharge phone calls.



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