



The Esperance
Hospital

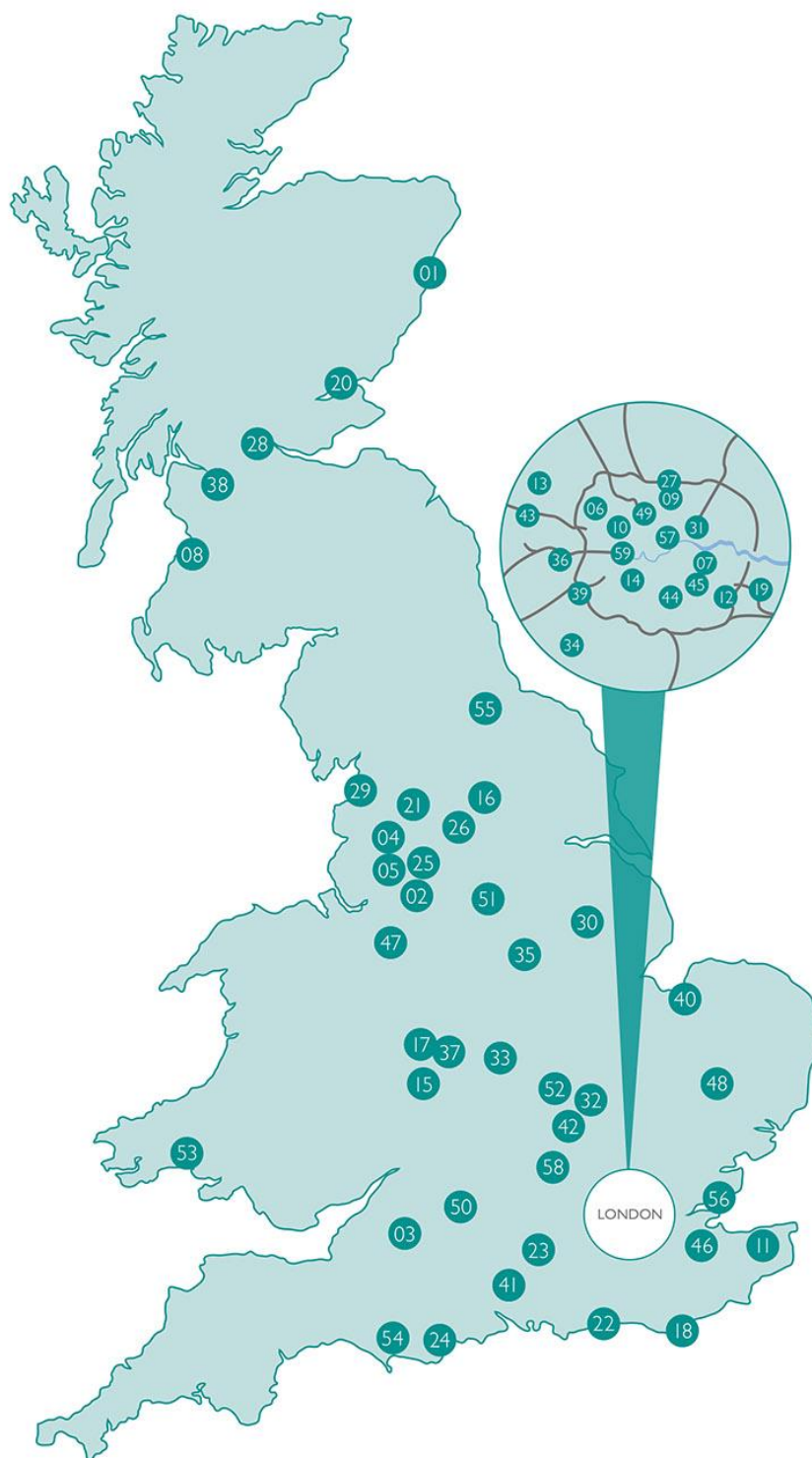
QUALITY ACCOUNTS 2018

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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.

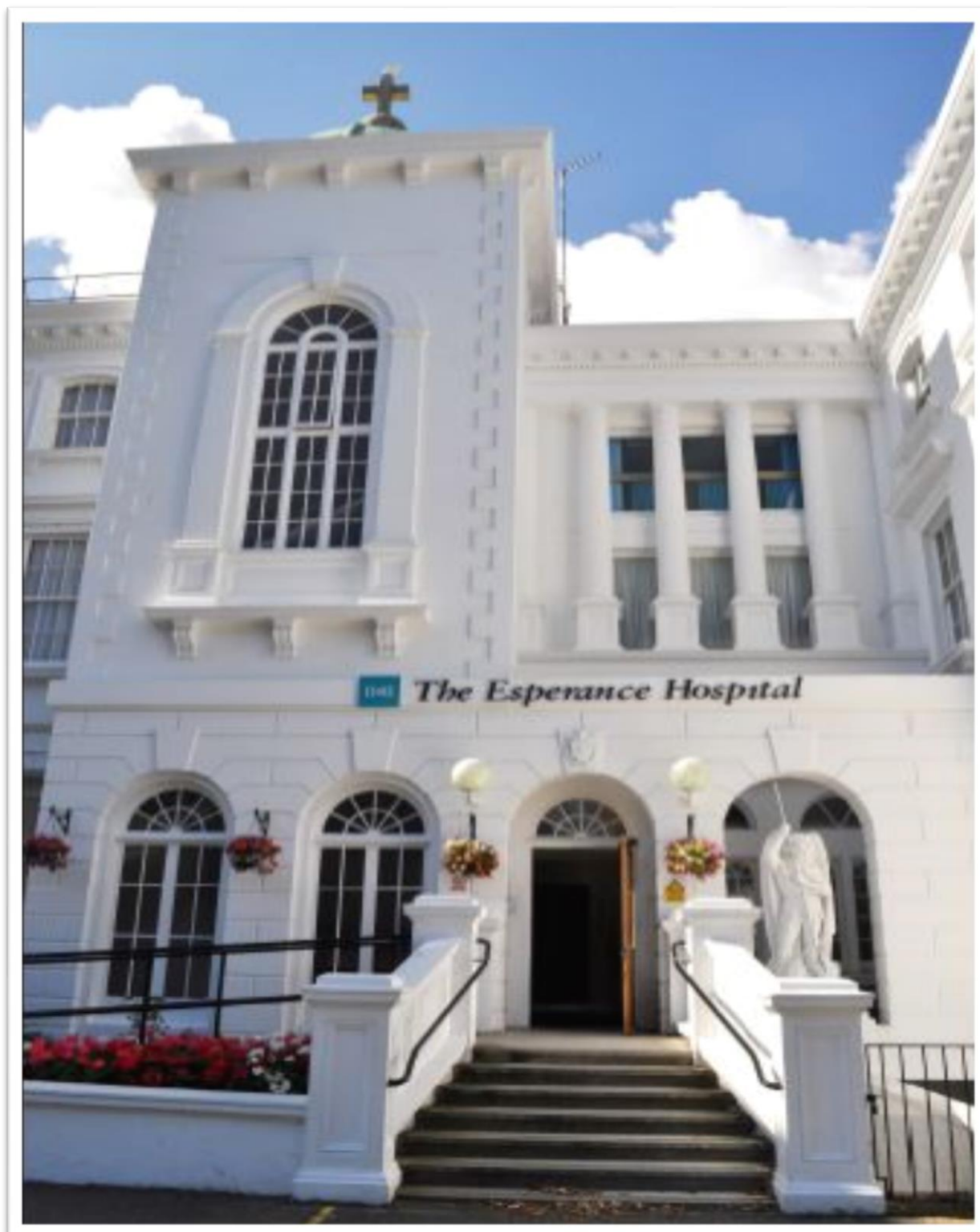
The data and graphs provide us with an indication of performance, but they only start to tell the story of our committed and dedicated staff. Their experience and expertise has led to positive outcomes and, in many cases, life-changing procedures for so many of our patients.

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



An introduction to BMI Healthcare

BMI Healthcare is the UK's largest private hospital group. Its primary focus is treating private patients and it enjoys strong relationships with all major healthcare insurers. In addition, BMI Healthcare is a dynamic partner of the NHS and is the largest single independent sector provider of surgical services under the NHS choice programme.

Background to the Esperance Hospital

The Esperance hospital was the first private hospital in Eastbourne. Initially a private residence it stands within the original walled area and although the building has been structurally changed it contains some of the original features that would have been enjoyed by the occupants.

Fernbank 1 Hartington Place came into the ownership of the Reverend Canon and Mrs Edmond who lived in the residence with their 2 sons. They lived there until 1917 when the house was put on the market. It was bought by the nursing branch of the Holy Family of Bordeaux Sisters.

The Sisters took possession of Fernbank on the 29th of June 1917. The property was purchased for £5000, £3000 being left on a mortgage at 5%. By June 29 1920 the property was owned entirely by the sisters having cleared the outstanding mortgage. Paying guests arrived on July 11 1917.

In October 1923 a large building 'Loretto' was built for £4180 at the end of the garden within the grounds this is where the nuns lived and we know it as Esperance House which later became home to our private consulting rooms and MRI and CT suite.

The Esperance was then bought by BMI Healthcare in 1998 and has continued to serve the community over the last 30 years.

Statistics for the Esperance Hospital

The hospital has 33 en-suite bedrooms 2 enhanced recovery beds and two ambulatory care rooms. There are 2 theatres, 1 fertility theatre and a separate endoscopy suite.

There are 9 Consulting rooms in a separate building which also houses our MRI/CT unit.

56% of our patients are NHS this also includes a local fertility contract.

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 The Esperance Hospital is registered as a location for the following regulated services:-

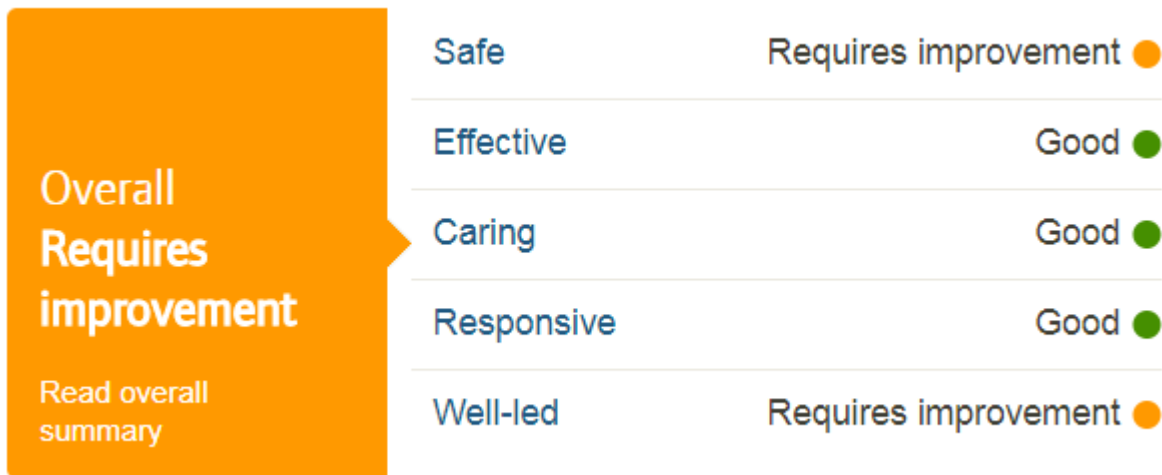
- Treatment of disease, disorder and injury
- Surgical procedures
- Diagnostic and screening

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

The CQC carried out their last inspection on 7th July 2017.

At the full inspection in June 2016, the hospital was rated for Safety as ‘requires improvement’ for surgery, although the safe rating- good was given to outpatients and medicine. During the follow up inspection carried out on the 7th July 2017 the CQC was assured that the hospital had met all the required improvements, and were no longer in breach of two regulations of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. In addition, the hospital had made additional improvements.

The service could not be re-rated due to the time elapsed since the comprehensive inspection, therefore the rating for safe remains ‘requires improvement’. However, during the follow-up inspection we were able to demonstrate that infection control practices had improved and the management of medicines met national guidance. There had been improvements in systems for managing and minimising risks to patients, including fire safety risks. Mandatory training and appraisal rates for staff were good, a new management team were in place and staff were able to report confidence in their leaders.



The Esperance 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 Infection Prevention and Control Lead Nurse in The Esperance Hospital.

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 No. of Procedures)
Hips	0.00806
Knees	0.00000

BMI Healthcare has an antimicrobial prescribing policy this is supported by the Pharmacists and the Infection Control Doctor/Consultant Microbiologists locally.

There is an antibiotic prescribing audit that is completed quarterly and this reported to the IPC Committee. BMI and The Esperance Hospital take Antimicrobial Stewardship very seriously. As part of our Annual CQuins, antimicrobial audits were conducted quarterly to ensure compliance with the Microguide (local trust Antimicrobial prescribing guide). Our audits have had results of 63-77% with the greatest non compliances being the reason for commencing antibiotics being documented in notes. We have worked hard with the consultants to encourage and remind them to record this in the notes. Also, our drug charts are being amended to include a documentation box to record the reason for starting. Infection Control works very closely with Pharmacy to ensure good knowledge and compliance with the Antimicrobial policy that we follow from our local hospital trust.

Hospitals have access to information about antimicrobial therapy explaining any precautions required both in the hospital and in the community post discharge. Information is also available for visitors. The prescribers also receive training on the use of antimicrobial resistance and stewardship.

BMI The Esperance Hospital participates in the European Antibiotic Awareness Day/World Antibiotic Awareness Week annually to raise awareness amongst staff and service users of the issues around antimicrobial usage and resistance. This year we had a stand at the front of the hospital with information both for staff, patients and consultants. Visual aids were used as were written information leaflets. Hand hygiene was discussed and hand gel and hand hygiene information cards were given to patients. We discussed the use of the Microguide with both Nursing and Medical staff as an aid to ensure compliance with the trust/ BMI antimicrobial policy.

There are systems in place at The Esperance Hospital for timely laboratory results to be reported to staff to ensure prompt treatment of the patient and appropriate infection prevention and control precautions to be initiated. All patients that are found to be MRSA positive, speak with the IPC Lead and are given both verbal and written information. Additionally, the hospital engages in both active and passive surveillance of HAI and reports to Public Health England (PHE) on all detected MRSA, MSSA and *E. coli* bloodstream infections and *C. difficile* infections. BMI The Esperance Hospital also participates in surveillance of surgical site infections and submits data on hip and knee replacement surgery to the PHE Surgical Site Infection Surveillance Service as a part of a national surveillance programme.

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. To achieve this BMI Healthcare has implemented an IPC e-learning programme through Skills for Health and this is complemented by face to face training provided by the IPC Lead and IPC Link Practitioners. This includes Hand Hygiene, Aseptic Non Touch Technique (ANTT) and the application of care bundles in

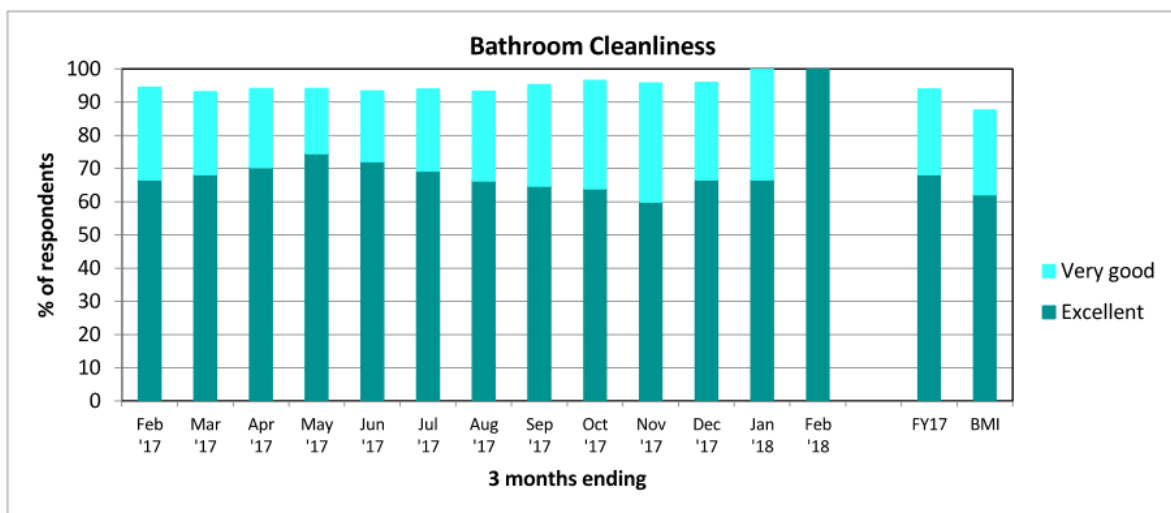
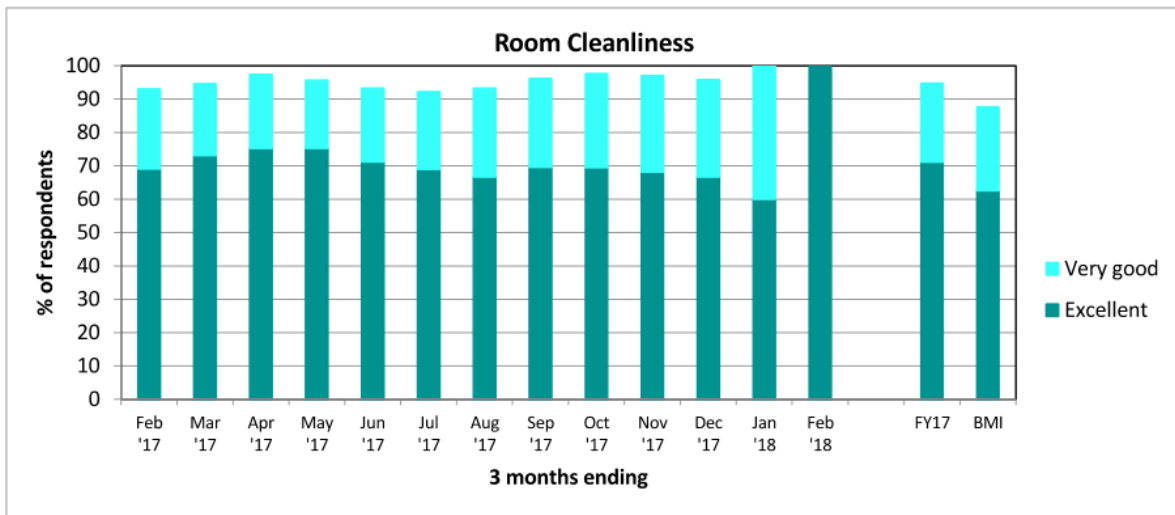
practice which are based on the DH High Impact Interventions. Our Care bundle audits are completed on a monthly basis and the results show that we are compliant with the High impact Interventions. This is also seen through our low infection rates.

All new clinical and support staff receive the principles of infection prevention and control training including hand hygiene as part of the induction process.

Resident Medical Officers are required to undergo infection prevention and control induction and this is done by the Ward Manager or the IPC Lead Nurse

On a regular basis Wound Care sessions were put on for all Clinical staff involved with Dressings. Also, Consultants were asked to do a variety of teaching sessions ranging from Foot surgery to shoulder surgery. The IPC lead works closely with all Clinical staff offering advice on wound care management and dressing choices

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



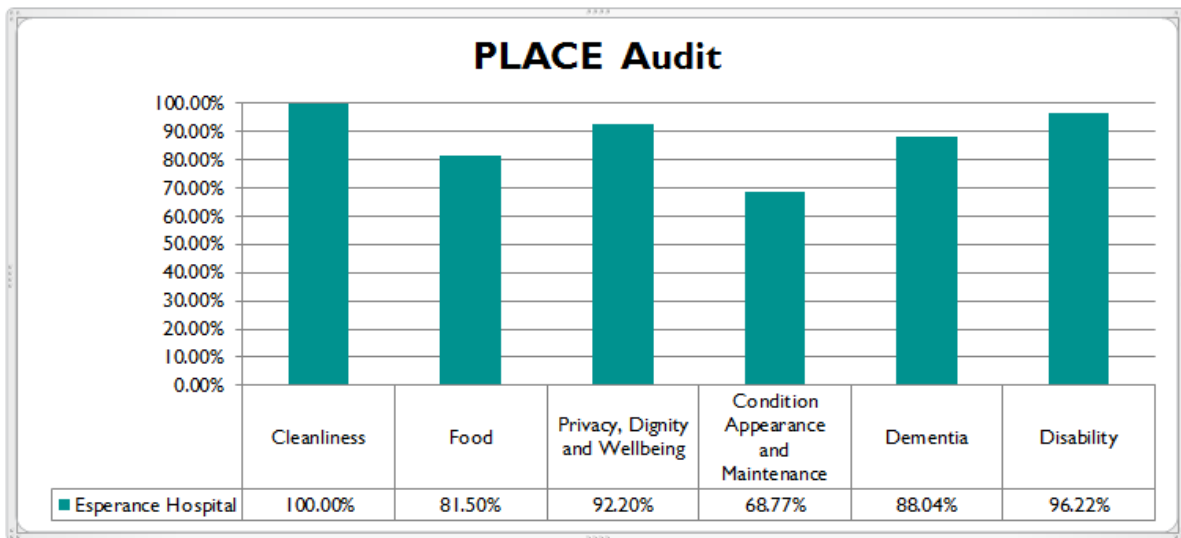
Patient Led Assessment of the Care Environment (PLACE)

At BMI Healthcare, we believe a patient should be cared for with compassion and dignity in a clean, safe environment. Where standards fall short, they should be able to draw it to the attention of managers and hold the service to account. PLACE assessments will provide motivation for improvement by providing a clear message, directly from patients, about how the environment or services might be enhanced.

Since 2013, PLACE has been used for assessing the quality of the patient environment, replacing the old Patient Environment Action Team (PEAT) inspections.

The assessments involve patients and staff who assess the hospital and how the environment supports patient’s privacy and dignity, food, cleanliness and general building maintenance. It focuses entirely on the care environment and does not cover clinical care provision or how well staff are doing their job.

The results will show how hospitals are performing nationally and locally.



These PLACE results are overall very good. The score for privacy, dignity and well-being is partly due to not having gender specific toilet facilities in public areas; however each patient bedroom has dedicated en-suite facilities to ensure patient privacy and dignity. Appointments for Patients requiring Ophthalmology and Facet Joint injections are gender specific to ensure patients occupying ambulatory areas are given privacy and dignity.

To address and improve the score for Dementia provision training has been provided and a dedicated staff member has been allocated for each department across the hospital. Plans are in

place to introduce a dedicated patient room with additional signage and mood lighting that can be allocated to dementia patients.

To address and improve the score for Disability we have in place a patient care passport for people with disabilities and hold an MDT to plan these patients care. An individual care pathway is formulated for each patient. We have improved communication tools to aid the patient throughout their stay. The Ward Manager and Pre-assessment lead plan any patients that have additional needs prior to the patient's admission. Further Digital Listener, Phone Loops and Telephone Amplifiers are now in place. Patient information is available in several languages and in larger print.

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.

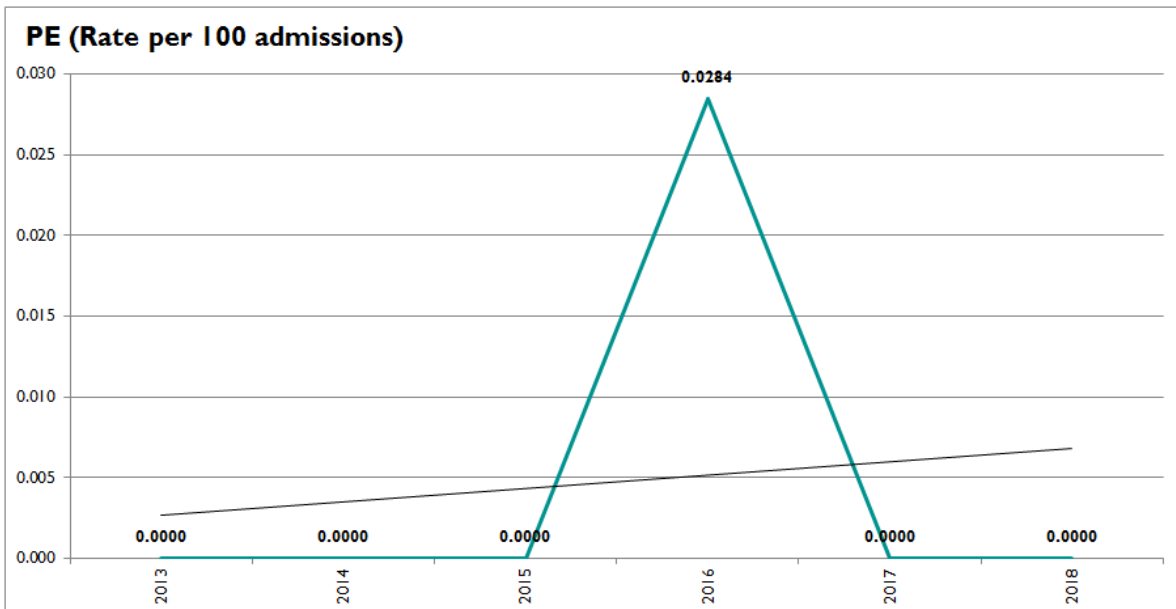
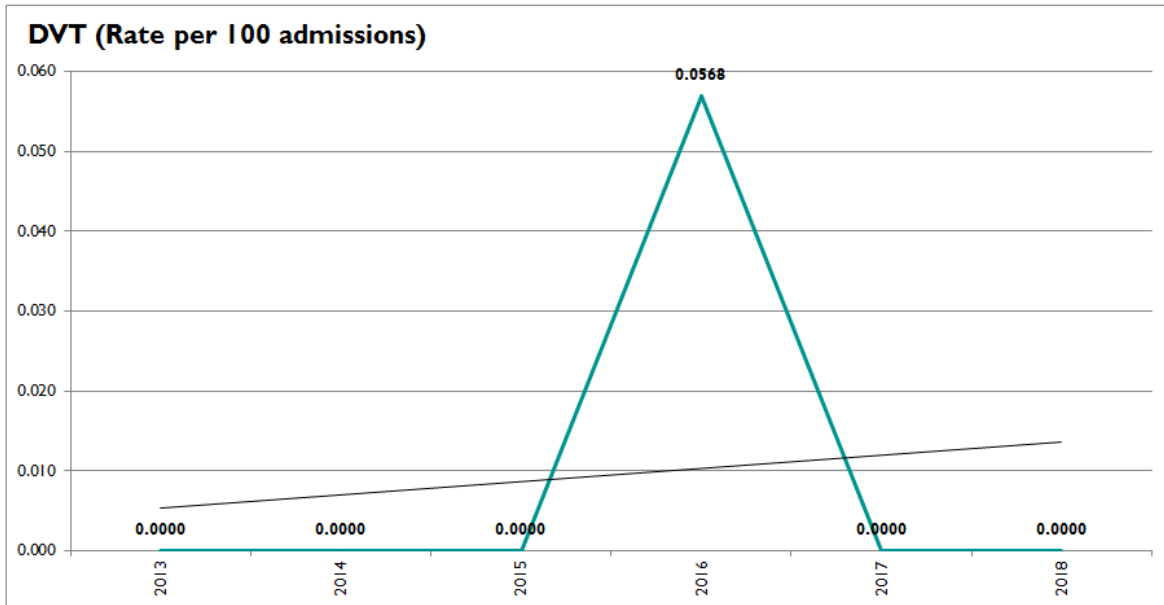
To achieve this, BMI Healthcare has a clear policy - BMI Being Open and Duty of Candour policy.

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

Venous Thrombo-embolism (VTE)

BMI Healthcare, holds VTE Exemplar Centre status by the Department of Health across its whole network of hospitals including, The Esperance 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 99.5% compliance.



The Esperance 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.



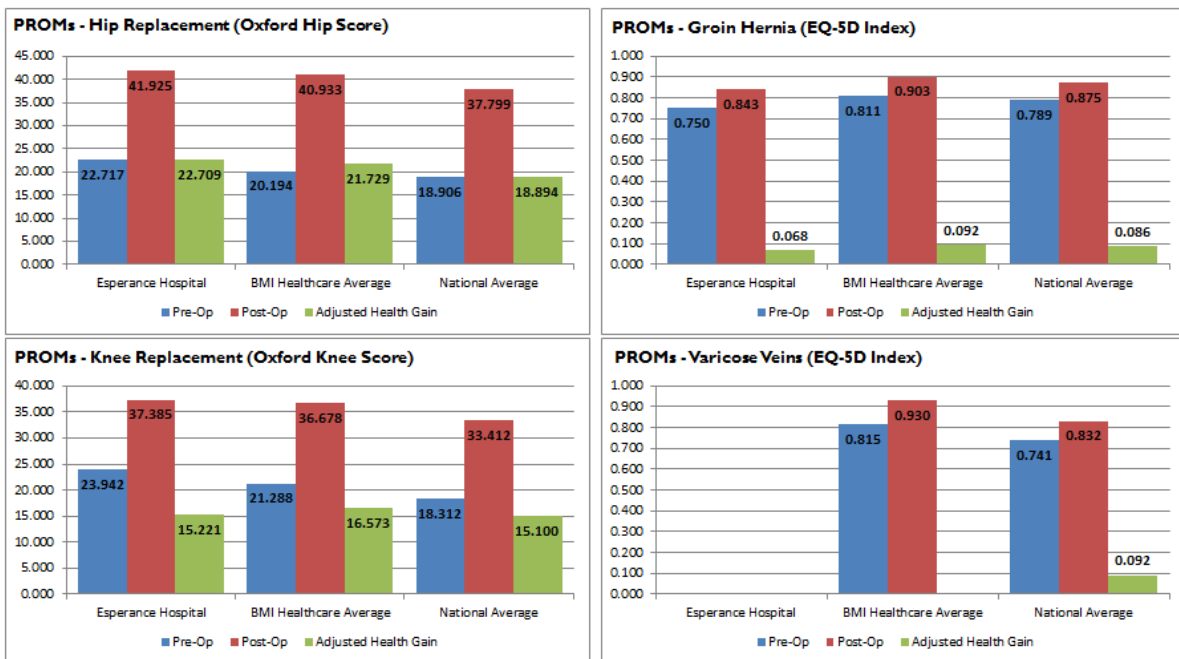
Patient Reported Outcome Measures (PROMS)

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 The Esperance Hospital.

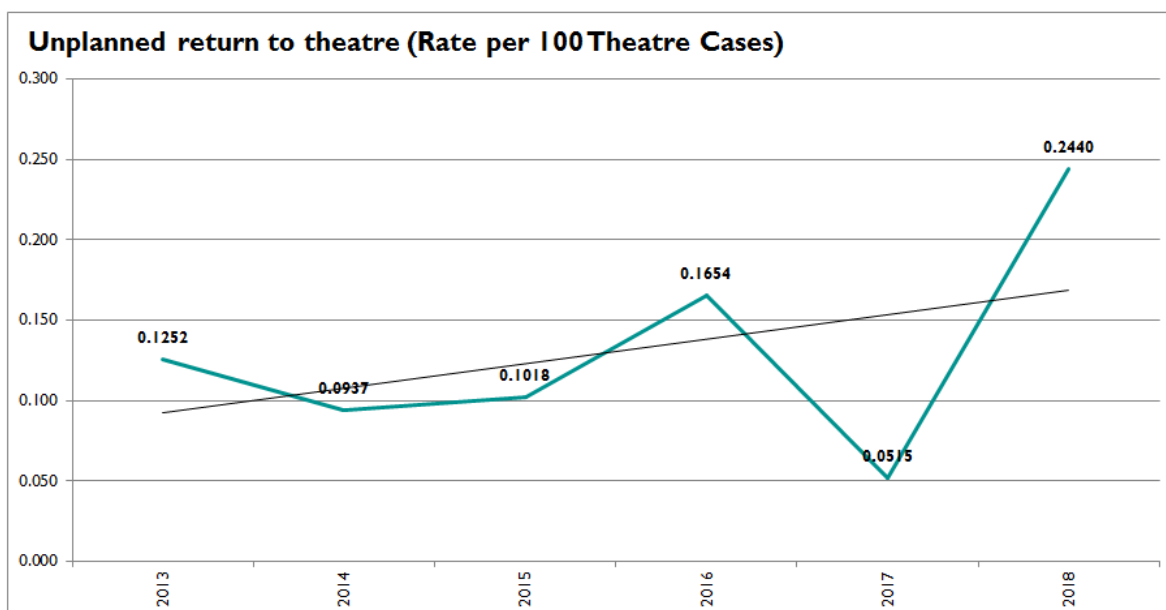
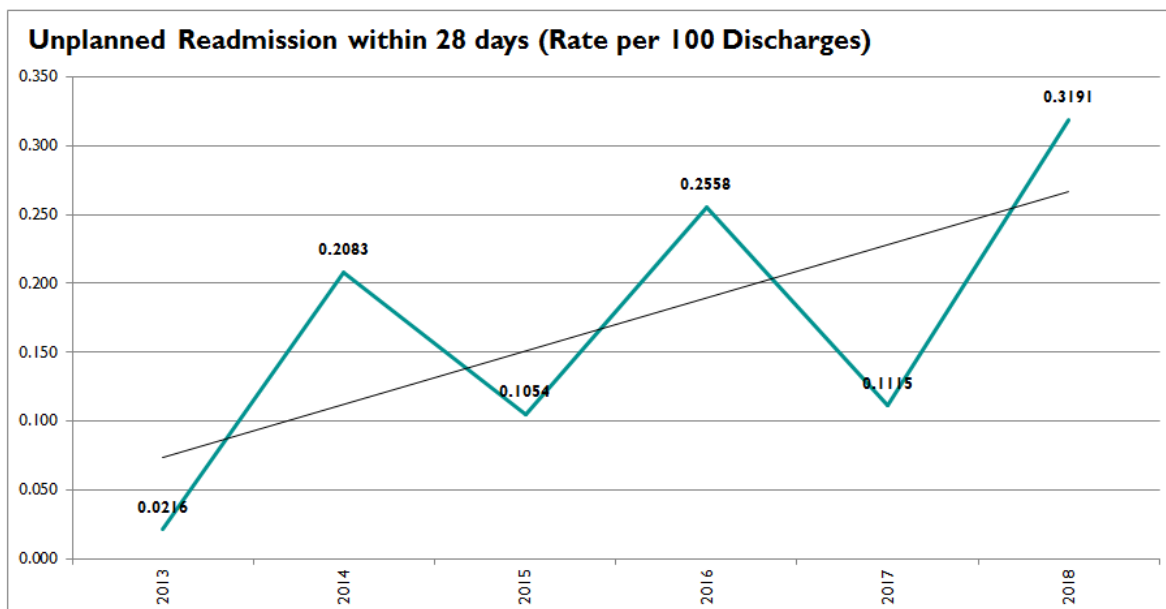
BMI The Esperance Hospital provides questionnaires to all patients for hip and knee replacements. BMI The Esperance intends to review this process and improve the number of returns.

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.



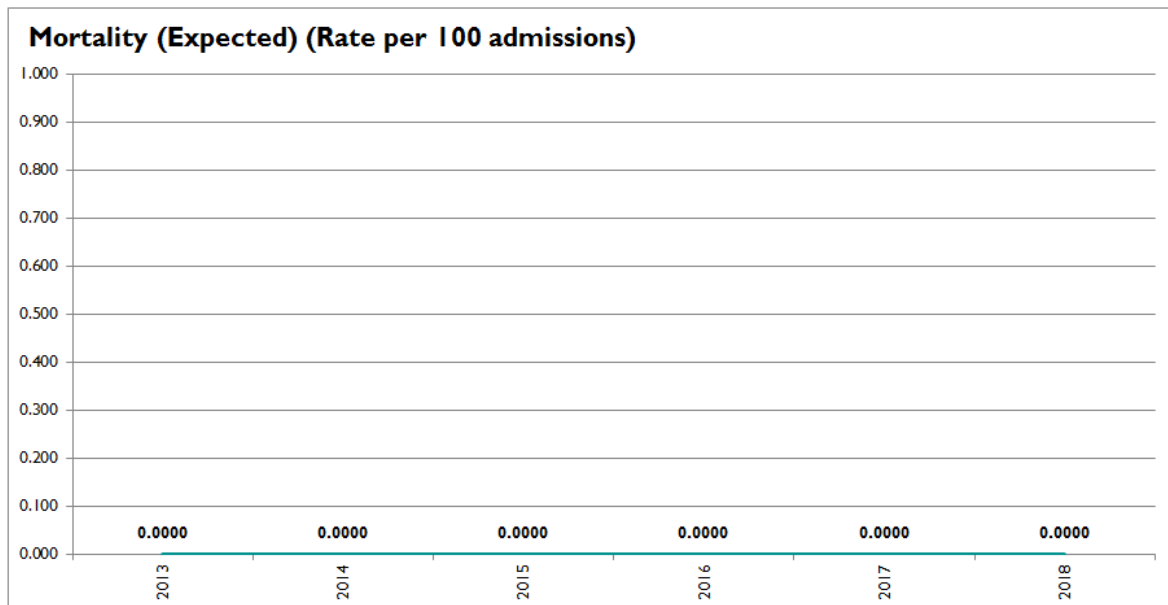
Learnings from Deaths

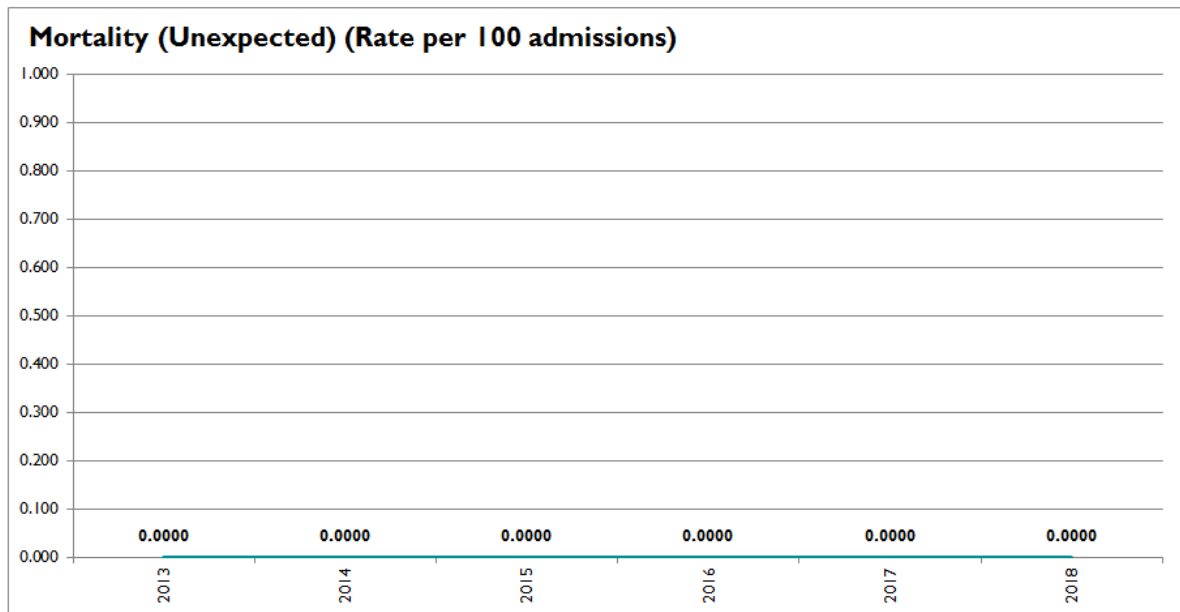
Preservation of life and avoidance of unnecessary death is an essential objective for healthcare providers; BMI Healthcare recognises this and is committed to ensuring that its hospitals and the organisation as a whole learn from the death of any patient whilst under our care. Sharing these lessons learnt 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 finding are then shared to all hospitals through the National monthly Clinical Governance Bulletin, to ensure lessons are learnt across the company.





Patient Experience

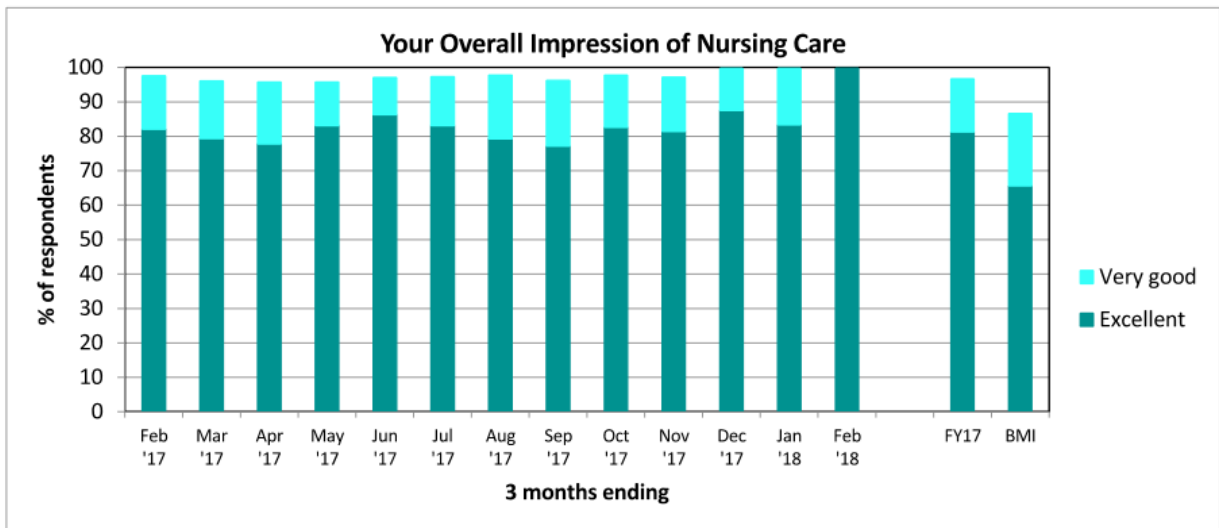
Patient Satisfaction

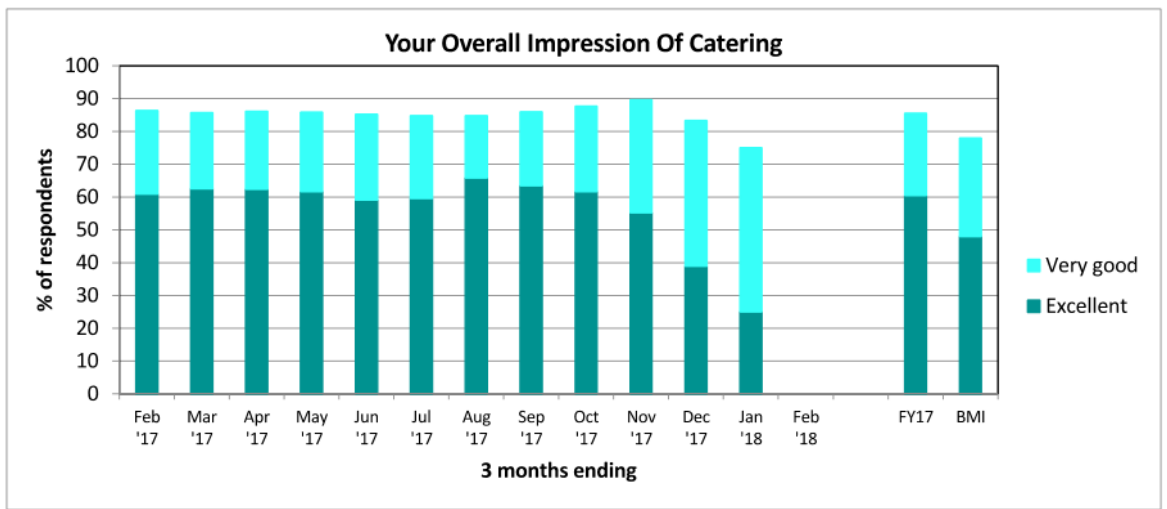
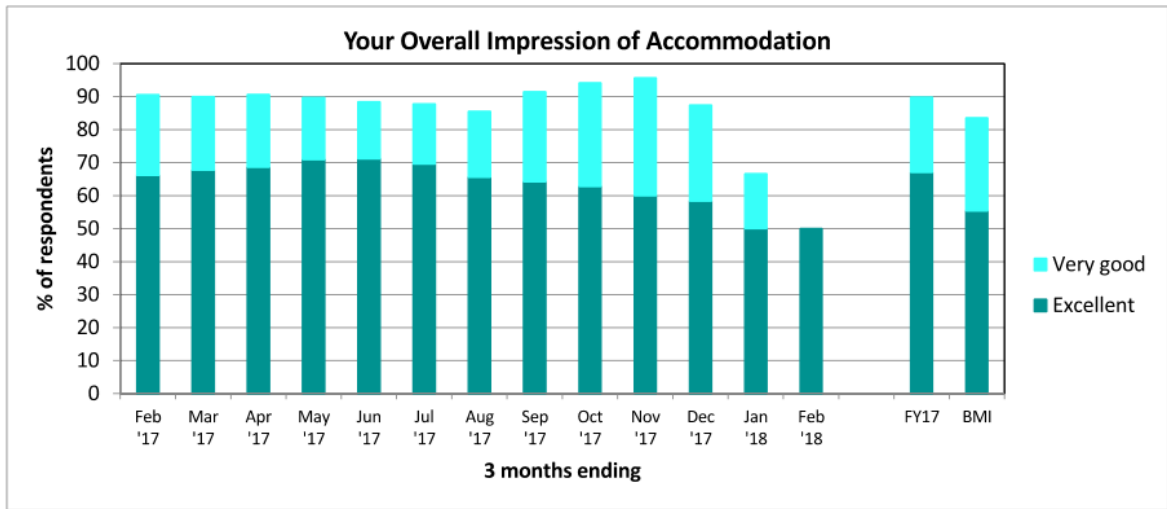
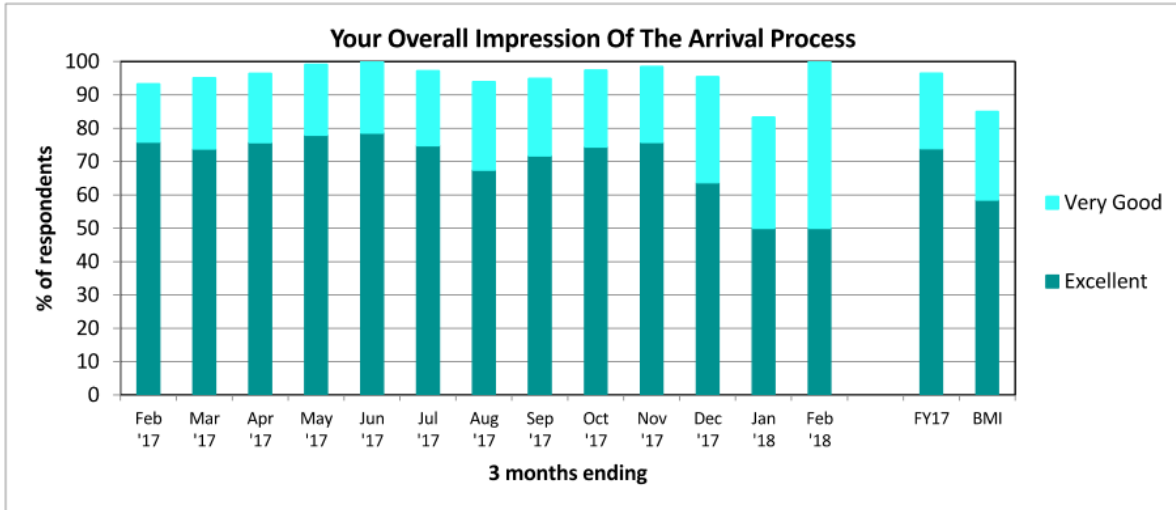


BMI Healthcare is committed to providing the highest levels of quality of care to all of our patients. We continually monitor how we are performing by asking patients to complete a patient satisfaction questionnaire. Patient satisfaction surveys are administered by an independent third party.

BMI The Esperance has re-introduced our pain committee and provided staff with further training to improve patients pain control.

BMI The Esperance Hospital intends to review the hospitals catering services and improve the quality of food provision to aid a healthy recovery, and provide further refurbishment to provide an updated, modernised environment for our patients.





Complaints

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

Stage 1: Hospital resolution

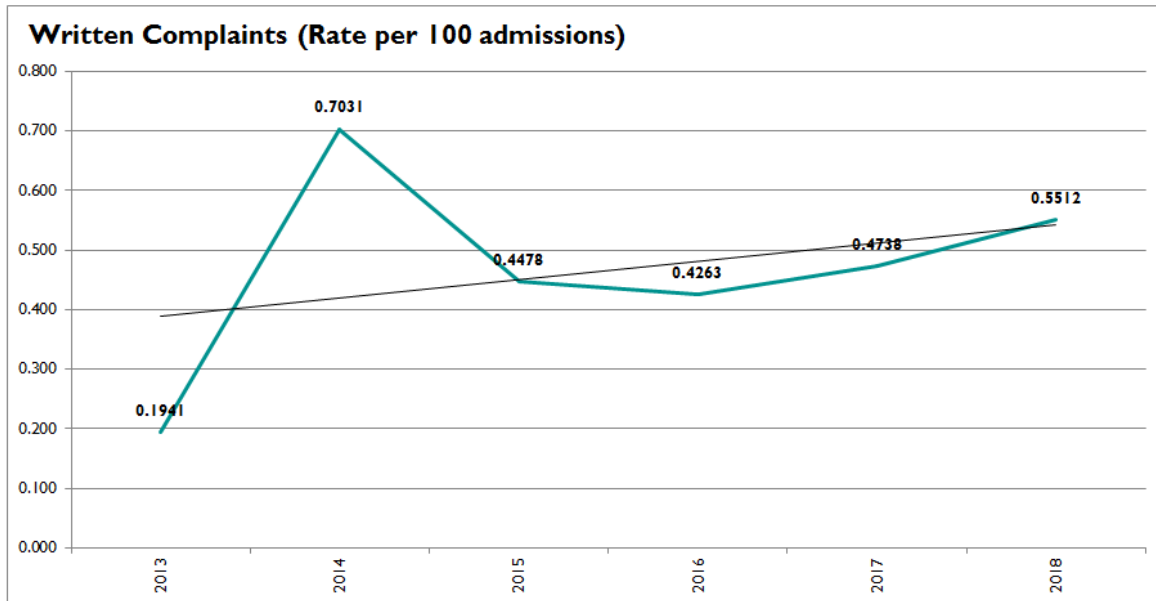
Stage 2: Corporate resolution

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

The Esperance 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 our complaints procedure policy. BMI The Esperance Hospital considers that complaints are resolved at stage one due to our positive engagement with our patients, and those patients are satisfied with the resolution.

The Esperance Hospital intends to continue to provide a high level of service by on-going review and monitoring our complaints management processes.

Complaints Dashboard	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17
Total Complaints	1	4	5	3	1	1	6	4	4	2	5	1	1
Written Complaints	1	3	3	1	0	1	2	3	2	1	4	0	1
Verbal Complaints	0	1	2	2	1	0	4	1	2	1	1	1	0
Access & Timing	0	0	0	1	0	0	1	1	0	0	0	0	0
Clinical Care/Treatment	1	2	1	1	2	1	4	2	3	2	1	1	1
Communication	0	2	2	0	1	0	2	2	1	2	3	0	1
Consultant	0	0	1	0	0	0	1	0	2	0	0	0	0
Diagnosis	0	0	0	0	0	0	1	0	0	0	1	0	0
Discharge & Transfer	0	0	0	0	0	0	1	0	0	0	0	0	0
Medication	0	0	1	0	0	0	0	0	0	0	0	0	1
Patient Rights	0	0	0	0	0	0	1	0	0	0	0	0	0
Professional Conduct	0	0	1	0	1	0	0	0	1	0	0	0	0
Records	0	0	0	0	0	0	0	0	0	0	1	0	0
Treatment	0	0	1	0	0	0	1	0	1	0	1	0	0
Catering	0	0	1	0	0	0	1	0	1	0	0	0	0
Complaint Management	0	1	3	0	0	0	0	0	0	1	1	0	0
Facilities	0	2	1	0	0	0	0	1	1	0	1	0	1
Financial	0	1	0	1	0	0	0	1	0	0	0	0	0
Stage 1	1	4	5	3	1	1	6	4	4	2	5	1	1
Stage 2	0	0	0	0	0	0	0	0	0	0	0	0	0
Stage 3	0	0	0	0	0	0	0	0	0	0	0	0	0



CQUINS

This year our Local CQUINS were Antimicrobial Stewardship and Ambulatory Care. We carried out quarterly audits to show an improvement in our Antimicrobial usage and stewardship. This CQUIN is on-going for 2017/2018. Our Ambulatory Care we had to increase the procedures that were transferred from Day Case procedures to Walk in Walk out procedures. These local targets were achieved but will be an on-going process as more procedures get added to the service.

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 [EA] Children Nurses are trained to level 4 safeguarding (if applicable)

The Esperance Hospital have had no Safeguarding incidents for this reporting period.

National Clinical Audits

BMI The Esperance Hospital Clinical Audit Programme is in place and is aligned to national standards and best practice; we also partake in national audits through the National Confidential Enquiry into Patient Outcome and Death (NCEPOD) as applicable, and the National Sepsis Audit. Other audit processes we contribute to are the National Joint Registry (NJR) and Patient Reported Outcome Measures (PROMs).

Totals for this hospital	2017	Year to date: 2018
Total completed ops	205	32
Hip procedures	105	14
Knee procedures	93	18
Ankle procedures	0	0
Elbow procedures	0	0
Shoulder procedures	7	0
NJR consent rate	96%	97%

Priorities for Service Development and Improvement

Our priorities for service development which we believe will enhance the patients experience at the Esperance are to re-introduce thyroid surgery therefore providing a local choice. We also intend to expand the range of procedures that can be undertaken via the ambulatory care pathway ensuring shorter stays for patients.

As an addition to our suite of theatres we have plans to introduce a minor ops suite so patients do not have to go through main theatre and so speed up the pathways for treatment.

We also intend in the future to re-introduce outpatient services for the 16-a8 year old.

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



Esperance Hospital	Staff Recommendations			
2018	2017	National Average	Highest National Score	Lowest National Score
71.00%	80.39%	73.18%	89.98%	50.44%

The Esperance Hospital has responded to the results of our staff questionnaire BMiSay by completing an action plan from staff feedback, this is now being implemented by Heads of Department and Senior Management, and reviewed on a monthly basis.

The Esperance Hospital intends to continue to review and work with their staff on the BMiSay action plan to improve the engagement of our staff to ensure they remain motivated and feel they are valued as part of the hospital community.

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.	Apr 2011 - Mar 2012
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)

Esperance Hospital	Re-Admissions (Aged 16+)			
2018	2017	National Average	Highest National Score	Lowest National Score
7.831	3.543	10.010	41.650	0.000

BMI The Esperance Hospital considers that we are currently below the national average for readmission rates due to an effective surgical pre-assessment service.

The Esperance Hospital intends to continue to provide an affective pre-assessment service to ensure potential health concerns are highlighted ensuring the safety of our patients and reducing possible re-admission.

The Esperance Hospital continues to monitor re-admissions, through our incident reporting process, and discuss at Clinical Governance.

The Esperance does not currently carry out Paediatric Services.

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

Esperance 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 The Esperance considers this score to be due to our diligence in Infection Prevention and Control practices and surveillance.

The Esperance intends to continually monitor audits and any reported infections and put in action plans if required.

Hospitals responsiveness to the personal needs of its patients

Esperance Hospital	Responsiveness			
2018	2017	National Average	Highest National Score	Lowest National Score
92.60%	92.79%	69.22%	78.00%	60.10%

BMI The Esperance Hospital considers that this data is due to the high standard of care received by our patients. BMI The Esperance welcomes feedback that acknowledges that we are providing a good standard of care and meeting the expectations of our patients, as well as any feedback that gives us the opportunity to address specific areas of dissatisfaction through our quality processes to continually improve our service and exceed our customer's experience.

The Esperance Hospital continues to engage with their patients and invites patients to become part of the hospitals patient forum. We have listened to our patients through forums and have introduced a discharge lounge to enable patients and their relatives to be able to relax in an environment during the discharge process.

The percentage of patients who were admitted to hospital and who were risk assessed for VTE (Venous Thromboembolism)

Esperance Hospital	VTE			
2018	2017	National Average	Highest National Score	Lowest National Score
99.50%	90.00%	95.77%	100.00%	81.60%

BMI The Esperance Hospital considers that this data is due to an excellent process for recording assessment. BMI The Esperance recognises the importance of staff training to embed the importance of the VTE Assessment to ensure the safe care of our patients.

BMI The Esperance has a dedicated VTE Nurse who has had additional VTE Training. The VTE Nurse has arranged study throughout the year for all ward and theatre to attend.

Patient Safety Incidents

Esperance Hospital	Patient Safety Incidents (Count)			
2018	2017	National Average	Highest National Score	Lowest National Score
172	186	3908	14506	31

BMI The Esperance Hospital recognises the importance of patient safety. We adhere to all reporting guidelines and have developed action plans to ensure patient safety incidents are minimised on site.

Since December 2016 BMI has introduced a new computerised system and all staff now have access to enter incidents. BMI The Esperance management of incidents, investigation and lessons learned continues to be monitored and trended at committees. We also continue to provide training to staff and support the Sign up to Safety campaign with the NHS, and hold an annual patient safety awareness day in support of World Quality Day.

Patient Recommendation Results

Esperance Hospital	Patient Recommendations			
2018	2017	National Average	Highest National Score	Lowest National Score
97.29%	98.91%	97.07%	100.00%	75.61%

BMI The Esperance Hospital considers that this data is due to the high standard of care received by our patients. BMI The Esperance welcomes feedback that acknowledges that we are meeting the expectations of our patients, as well as any feedback that gives us the opportunity address specific areas of dissatisfaction through our quality processes to continually improve our service and exceed our customer's experience.

The Esperance Hospital intends to continually listen to patients both past and present to ensure that we improve our service and outcomes for our patients.

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