



Thornbury
Hospital

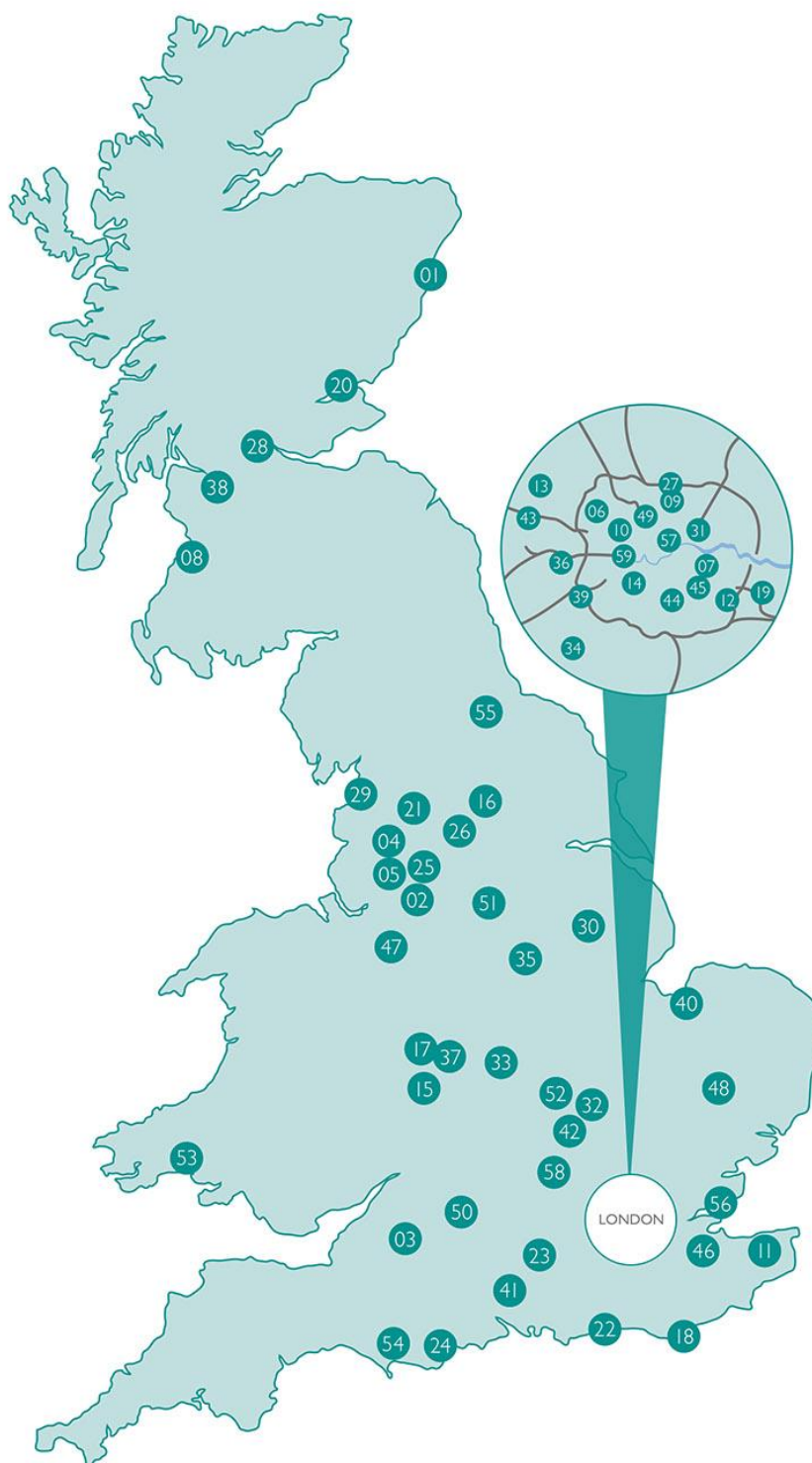
QUALITY ACCOUNTS 2018

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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 Thornbury is a 64 bedded hospital with four operating theatres. It is one of BMI's largest hospitals and sees approximately 50,000 patients each year. It provides a range of inpatient/outpatient and day care services including Orthopaedic, Spinal, General Medicine, Urology, ENT and General Surgery for routine and complex cases.

Diagnostic and specialist equipment on site includes MRI scanner, ultrasound, a CT scanner, digital mammography and x-ray facilities. The hospital also provides specialist services that include Cancer Care, Critical Care (level 2) Children and Young People Services and Endoscopy.

The hospital employs circa 200 health care professionals who provide care for NHS, insured and patients who choose to pay for their own care.

The hospital sits in beautiful grounds in the heart of Sheffield close to local amenities making it easy for patients travelling. The hospital offers free parking to all our patients and relatives including disability bays for easy access.

The hospital offers single room accommodation to all patients having inpatient and day-case procedures with en-suite facilities, flat screen remote control TV and free Wi-Fi.

For our short stay patients we have an Ambulatory Care service including shared and single sex accommodation for procedures that do not require an inpatient bed.

Over the last year we have invested considerably in our estate including upgrades to our medical gas systems, street lighting and building management system. We have installed a new roof to part of the

hospital and refurbished a number of areas. Clinical investment has included a new Endoscopy washer, new theatre equipment including orthopaedic drills, spinal surgery equipment and a laryngoscope. New flooring and installation of sinks in clinical areas throughout the hospital is scheduled for completion by June 2018. Plans for a new endoscopy and ambulatory facilities are in place as a priority for future development.

The amount of NHS work we carry out at the BMI Thornbury Hospital has increased steadily over the last few years. Our current rate of NHS work amounts to approx. 70%.

We accept NHS patients from the e-referral system and are also involved in waiting time initiatives, helping to reduce waiting times in the NHS by taking blocks of patients on spot contracts.

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

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

CQC RATINGS GRID

These regulatory bodies carry out inspections of our hospitals periodically to ensure a maintained compliance with regulatory standards. Following inspection in November 2015 BMI Thornbury hospital was rated by the CQC as requires improvement (RI) overall. There were two areas where the improvement was defined:

	SAFE	Effective	Caring	Responsive	Well-led	Overall
Medical Care	Good	Good	Good	Good	Good	Good
Surgery	Good	Good	Good	Good	Good	Good
Critical Care	RI	RI	RI	Good	RI	RI
Children and YP	RI	RI	Good	Good	Good	RI
Outpatients and Diagnostic Imaging	Good	Good	Good	Good	Good	Good
Overall	RI	RI	Good	Good	Good	RI

BMI Thornbury 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 an MDT (multi-disciplinary team) and the Medical Advisory Committee. (MAC).

At a Corporate Level, BMI Healthcare 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

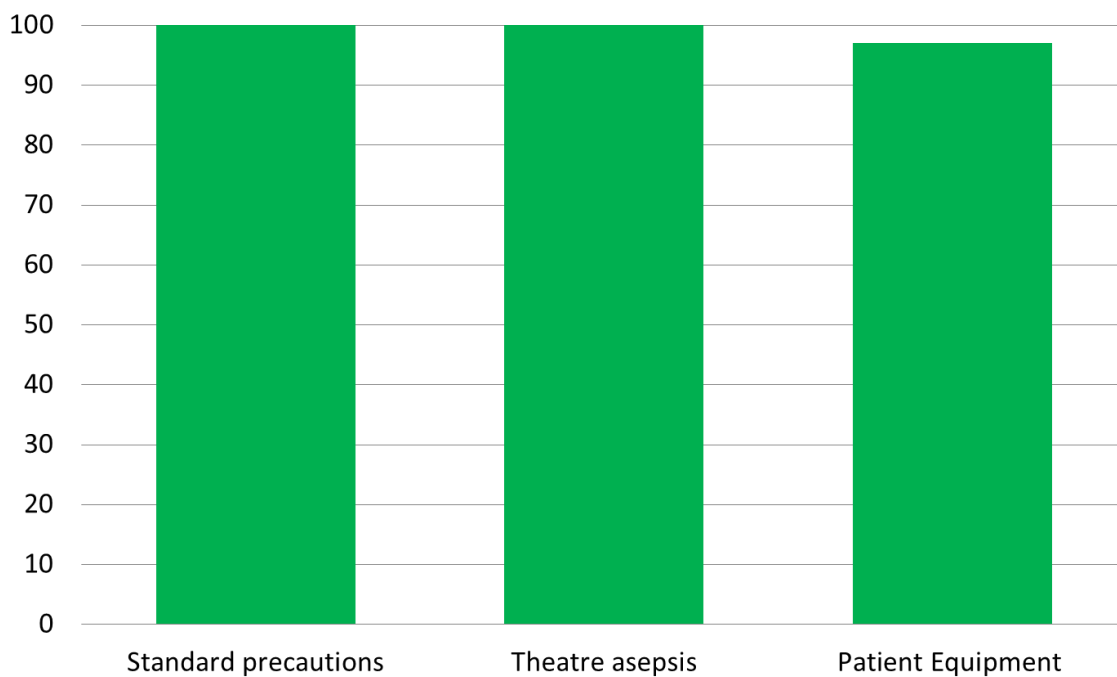
The focus on Infection Prevention and Control continues under the leadership of the Group Director of Infection Prevention and Control and Group Head of Infection Prevention and Control, in liaison with BMI Thornbury hospital Infection Prevention and Control Lead.

Between April 2017 to March 2018, the hospital had:

- MRSA bacteraemia cases 0.0000/100,000 bed days
- MSSA bacteraemia cases 0.0000 /100,000 bed days
- E.coli bacteraemia cases 0.0000/ 100,000 bed days
- Number of cases 0.0000 of hospital apportioned Clostridium difficile in the last 12 months.
- SSI data is also submitted to Public Health England for Orthopaedic surgical procedures. Our rates of infection are;
- Hips 0.00880
- Knees 0.00000

BMI Thornbury Hospital has continued to follow a corporately driven master audit tool in relation to Infection Control Audits, with the introduction of a Self-Assessment style departmental auditing system in February 2018. Both these audit platforms allowed the IPC lead to review compliance against cleaning of Patient Equipment, Theatre Asepsis, Standard Precautions, Care Bundles and Hand Hygiene.

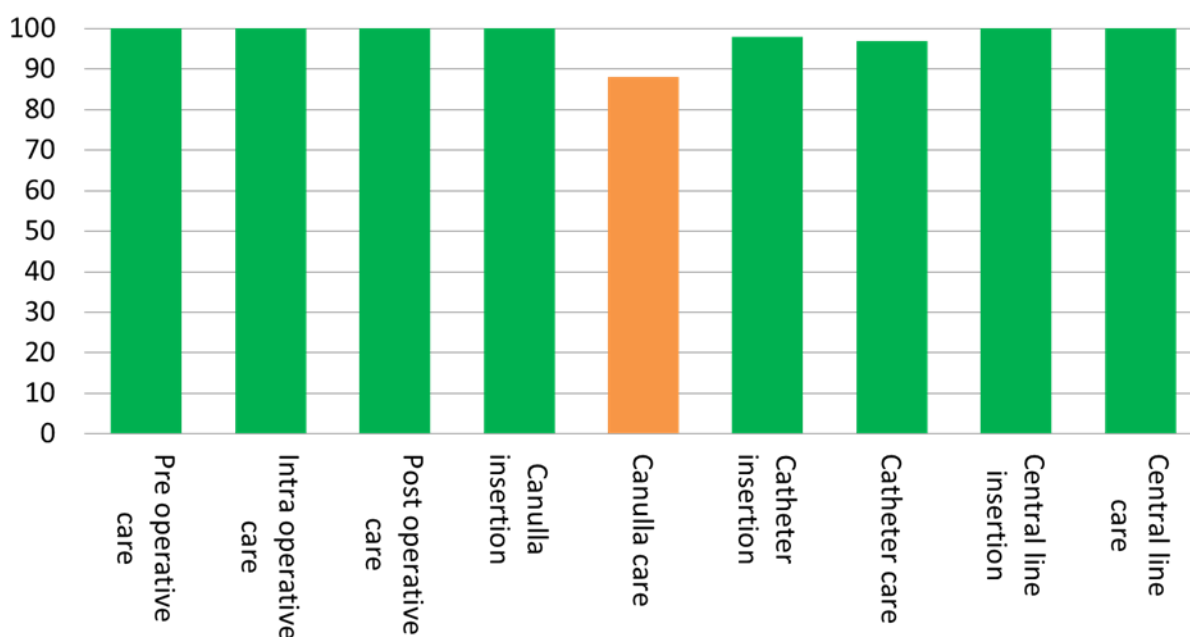
Infection Control, Departmental Self-Assessment Audits 2017 – 2018



The master audit tool also includes practice based audits, focusing on insertion and care of peripheral vascular devices, central venous catheters, and urinary catheters, and these will continue to be audited with the new self-assessment system. These are audited on a monthly basis by each relevant department, with overall compliance figures calculated across the whole hospital.

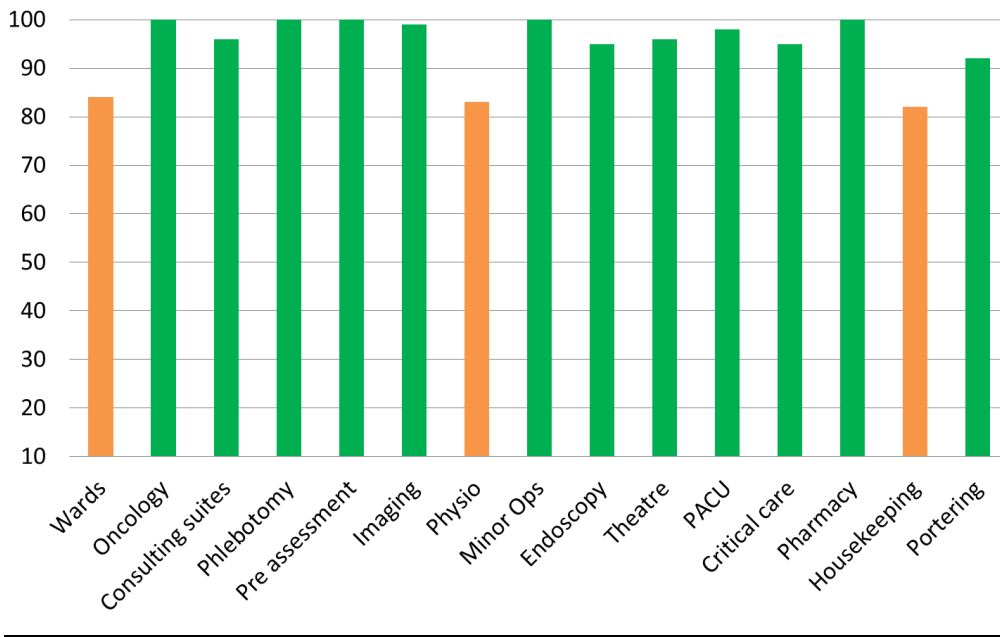
Action plans for any aspect with a score below 90% are completed by each department, with ongoing review and support from the IPC lead

Care Bundle audit results April 2017 – March 2018

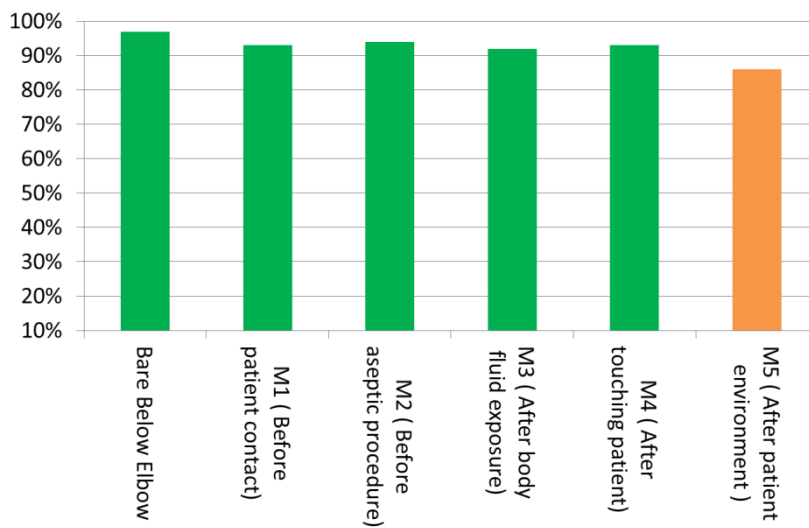


The Hand Hygiene audits are analysed, allowing us to extract compliance data against specific departments, staff types and against the WHO’s 5 moments of hand hygiene. This analysis has allowed the hospitals IPC lead, DOCS and other departmental HOD’s to focus on education, support and training on specific areas, with great improvement in compliance seen across the year, following the introduction of hand hygiene champions in all departments.

Hand Hygiene audit results April 2017 – March 2018



WHO’s 5 Moments of Hand Hygiene audit April 2017 – March 2018



Compliance against all IPC related audits is monitored and tracked through our Bi monthly Infection Prevention and Control Committee, with action plans written and owned at department level

The Infection Prevention and Control lead has also introduced a monthly newsletter, focusing on various aspects of IPC, including Hand Hygiene, Antibiotic Stewardship, and Safe Sharp Management and Sepsis awareness.

All staff with patient contact, (clinical staff and housekeeping and portering staff), attend face to face infection control training, where standard precautions, Universal principles and Hand Hygiene is discussed. Aseptic Non Touch Technique training and competency sign off is also included in the training of clinical staff.

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

Our Hotel Services Manager has been working alongside the Housekeeping team and Infection Control lead, in developing departmental specific environment audits, focussing on the cleanliness maintenance and waste management aspects of environmental cleanliness. By March 2018, these audits were in place for wards, consulting suites and theatre environment, with additional departmental audits being written and implemented on a monthly basis.

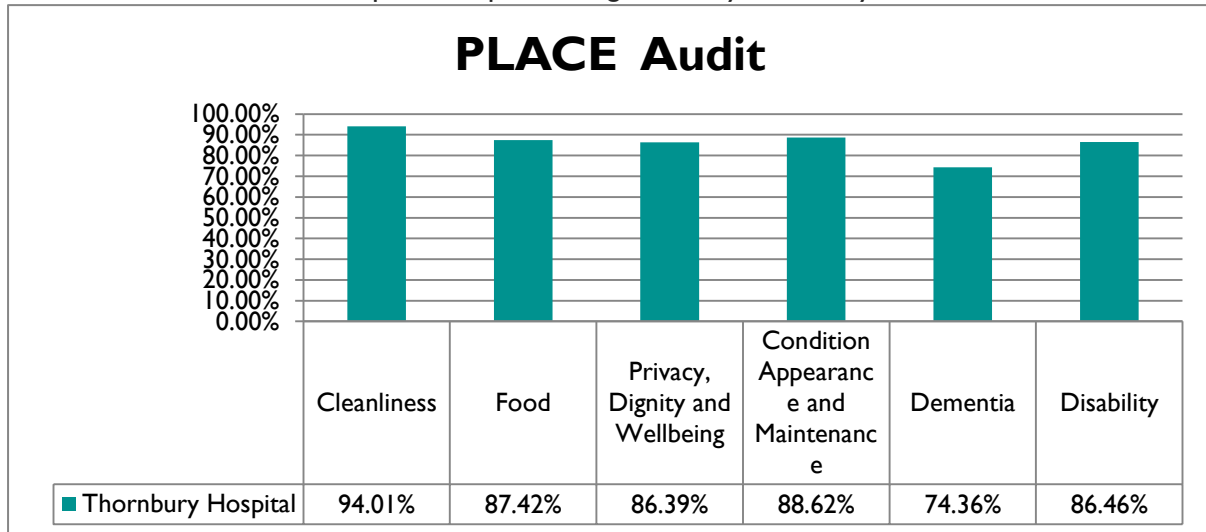
Patient Led Assessment of the Care Environment (PLACE)

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 staffs are doing their job.

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



The PLACE audit carried out in May 2017 showed an overall compliance of 87%.

There are a lot of positive aspects but the main issue continues to be the general decoration within the hospital building – this is currently being addressed through a refurbishment programme.

BMI Thornbury now has a dedicated lead that is the chair of the Dementia Advisory Group that is looking at the environment as part of its action plan.

The next PLACE audit is due to take place on 21/05/2018.

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 has 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 Thornbury hospital had three incidents involving Duty of Candour – we ensure as a Hospital this is reported by the relevant staff on our Riskman reporting system and further investigated by the Quality and Risk Manager.

The Q+R Manager ensures that the Consultant has documented the conversation between himself and the patient/relatives and whether any further action is required using the BMI Duty of Candour documentation that is filed in the patient’s notes.

Creative problem Solving is used as a means of communication, lessons learnt and action planning following such as event.

All incidents involving Duty of Candour are discussed at Clinical Governance where further action may be taken.

Venous Thrombo-embolism (VTE)

BMI Healthcare holds VTE Exemplar Centre status by the Department of Health across its whole network of hospitals including BMI Thornbury Hospital.

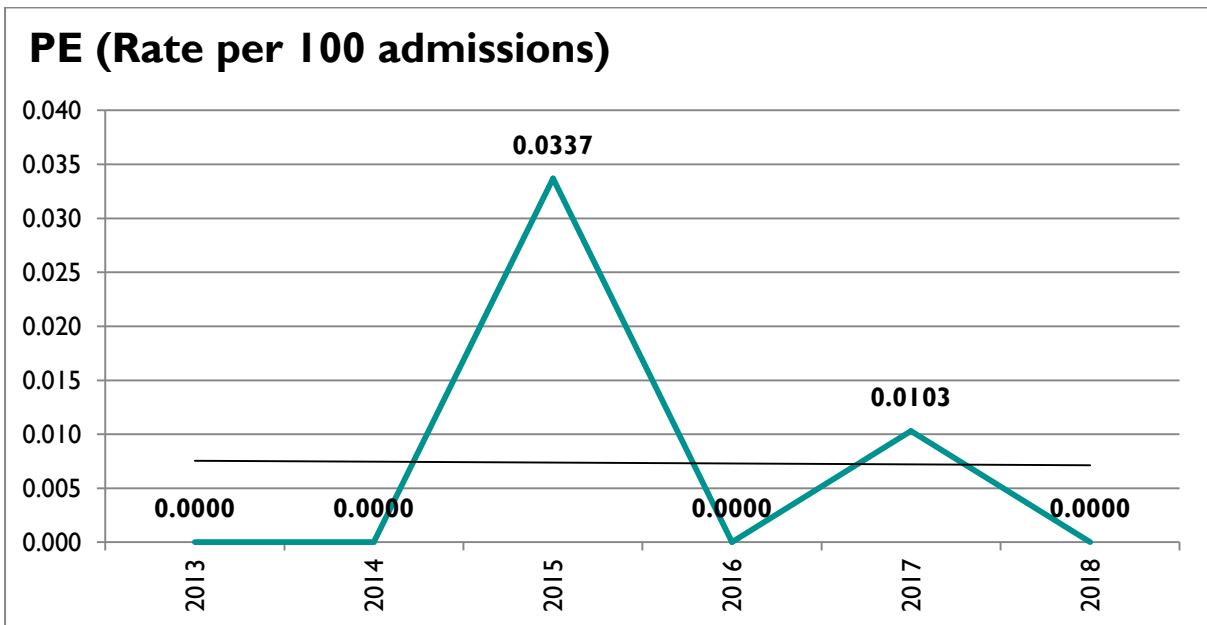
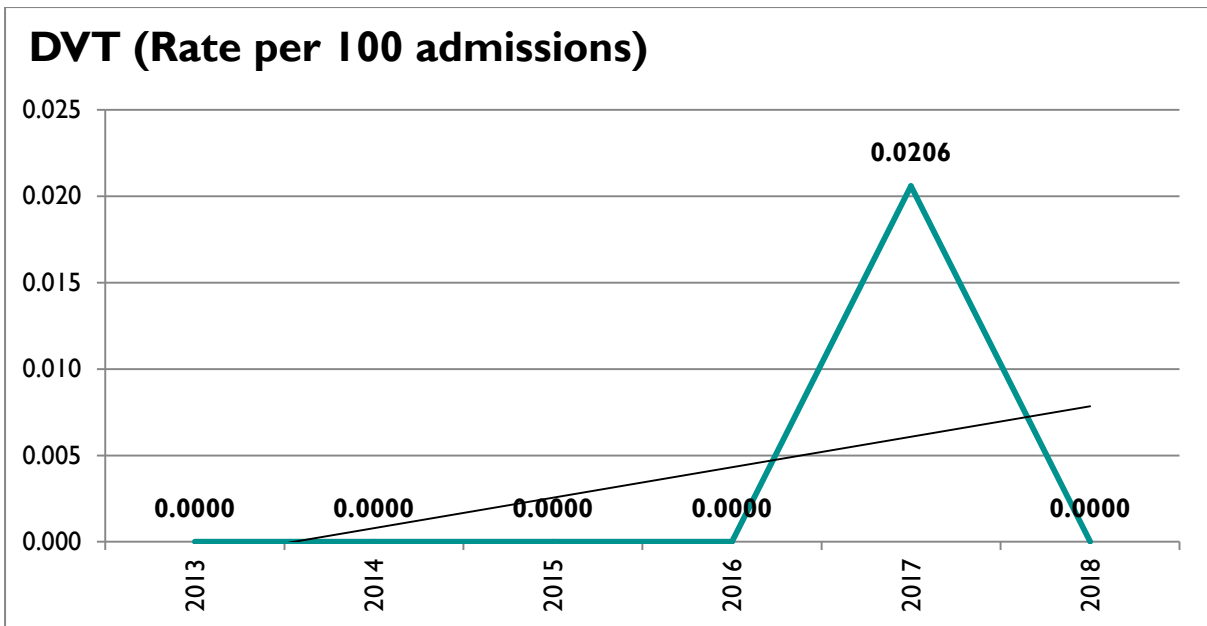
BMI Healthcare was awarded the Best VTE Education Initiative Award category by Lifeblood in February 2013 and was the Runners up in the Best VTE Patient Information category.

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

VTE Percentage	
VTE	98.58%

Thornbury 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.

If an incident of VTE has been identified a pre-VTE Root Cause Analysis is conducted by the Q+R Manager and submitted to the Group Thrombus Board for further discussion and a final decision on whether it was preventable or not and the need for a full Root Cause Analysis conducted.





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.

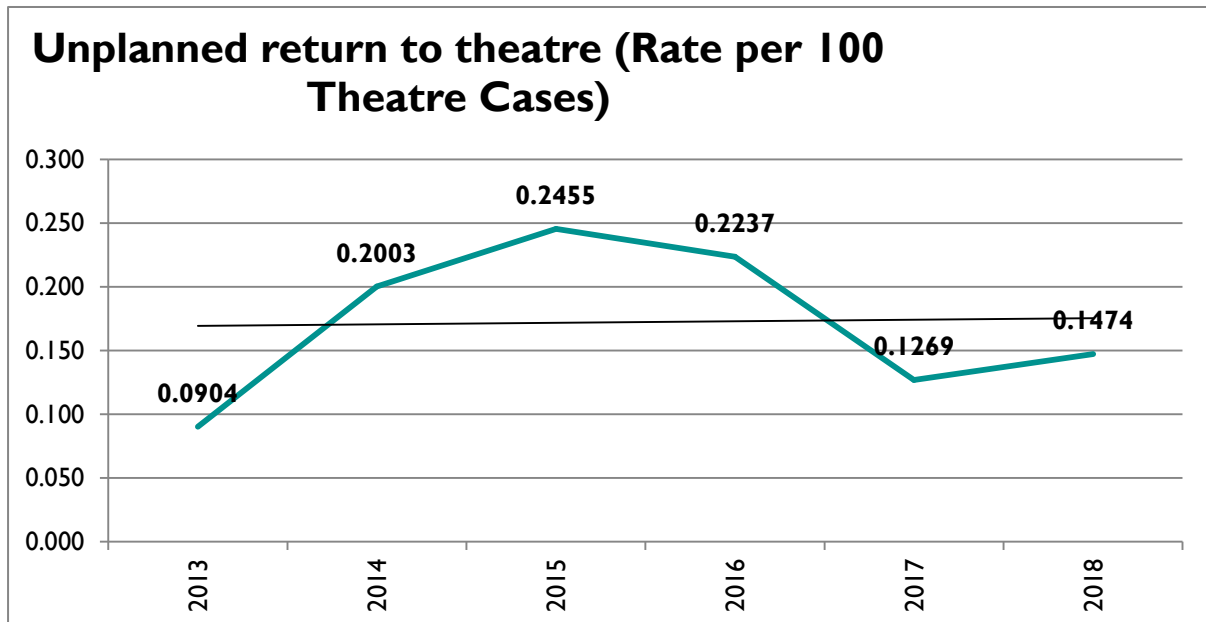
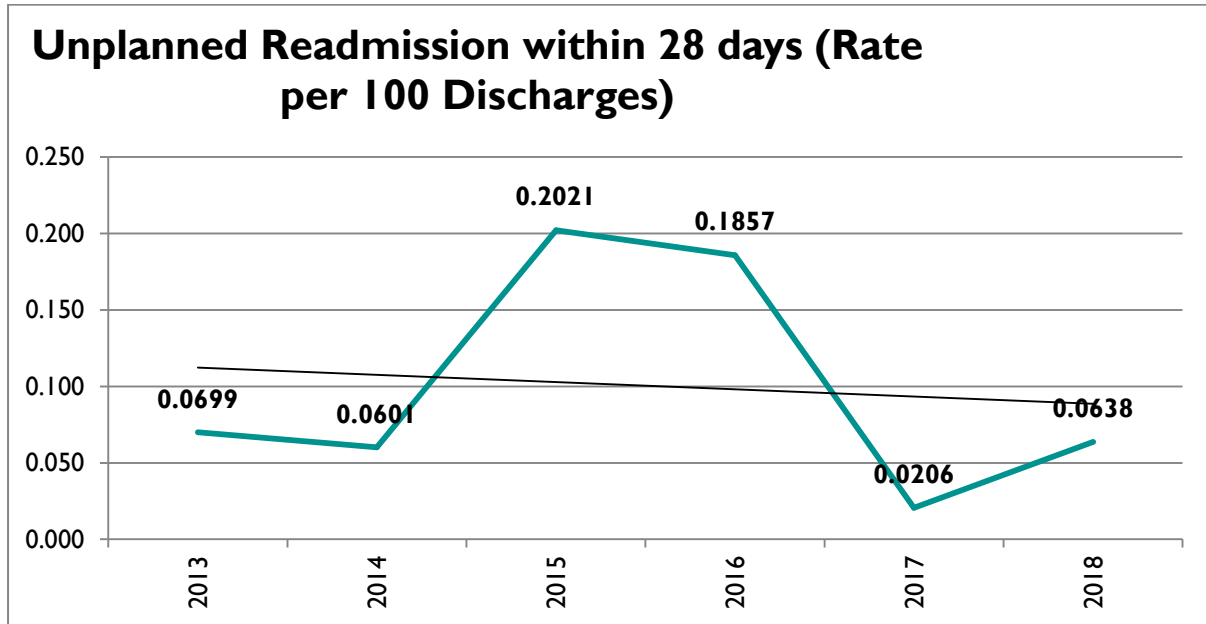
For the current reporting period, the tables below demonstrate that the health gain between Questionnaire 1 (Pre-Operative) and Questionnaire 2 (Post-Operative) for patients undergoing hip replacement and knee replacement at Thornbury Hospital are comparative with the national average health gain demonstrating effectiveness of care and treatment provided at BMI Thornbury hospital.

Latest PROMs data available from HSCIC (Period: April 2017 – March 2018)



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.



BMI Thornbury Hospital has a very low rate of unplanned returns to theatre as demonstrated in the chart above. The average for 2017 was 0.06 per 100 theatre cases as readmitted within 28 days and unplanned return to theatre was 0.14 per 100 theatre cases.

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

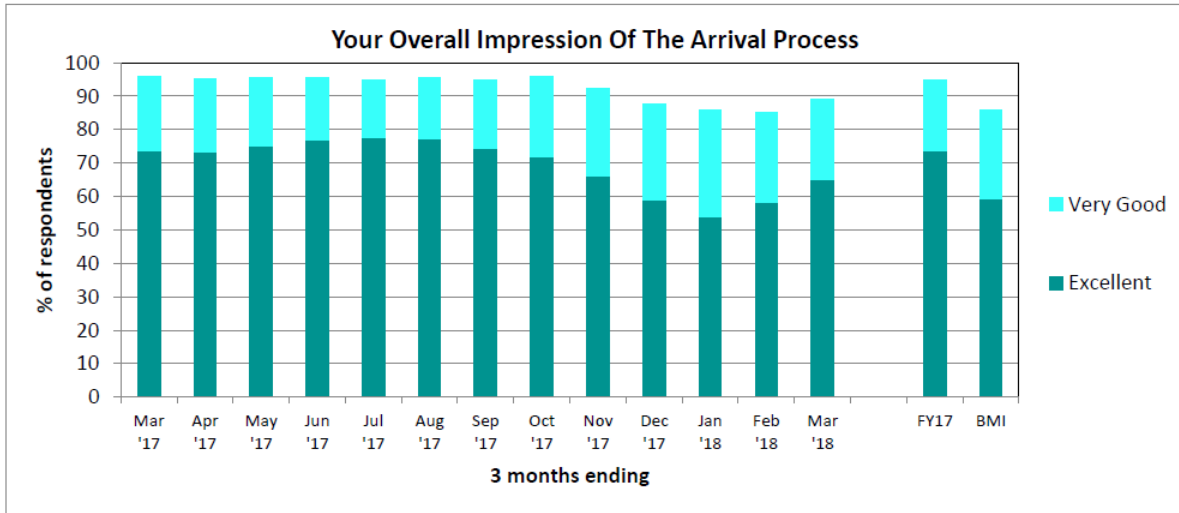


BMI Healthcare is committed to providing the highest levels of quality of care to all of our patients. Performance is monitored by asking patients to complete a patient satisfaction questionnaire, which are available in hard copy or online and are administered by an independent third party.

BMI Thornbury Hospital collates the feedback from patients on a monthly basis. Reports are shared with all staff and are discussed monthly at the Patient Satisfaction Committee. The hospital is committed to continually improving by implementing action plans for all departments and services that are rated by patients. Friends and Family recommendation scores remain high.

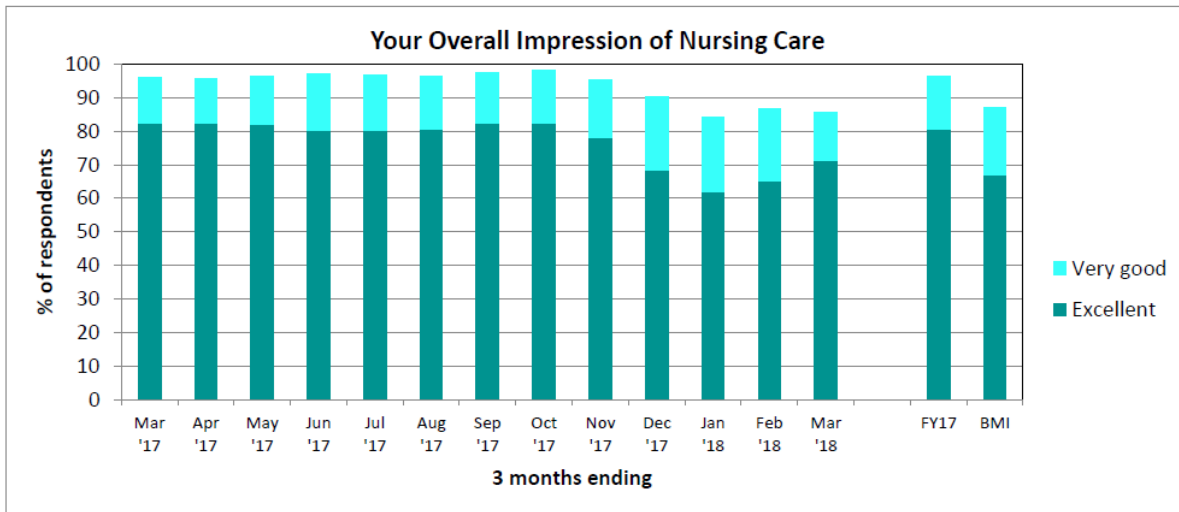
Examples of patient satisfaction scores are highlighted in the columns of the following charts.

The admission process



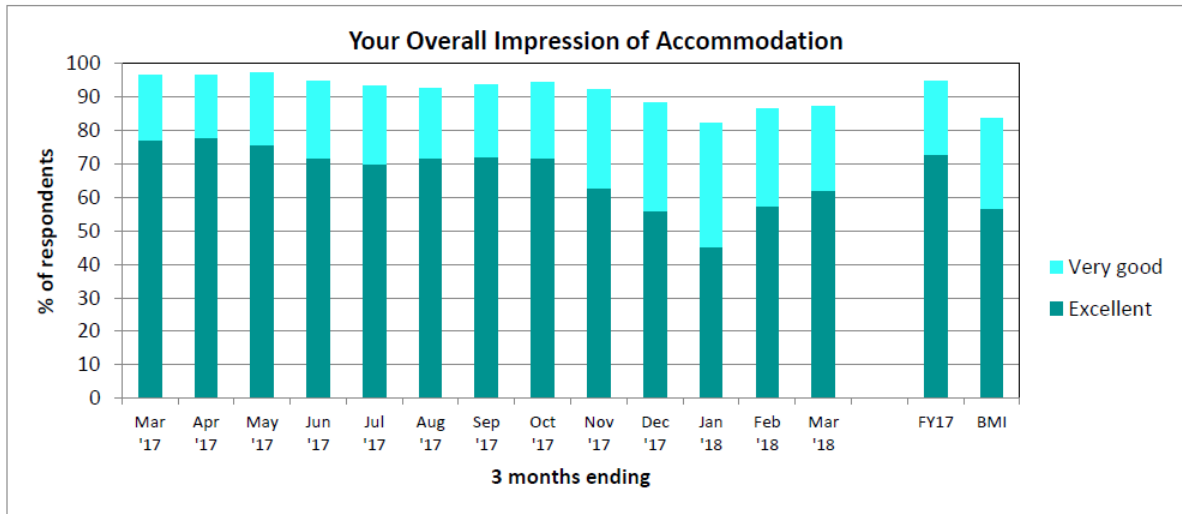
Consolidation of the monthly scores, shows that in Financial Year 17, Thornbury Hospital is above the BMI average for patients viewing their overall impression of the arrival process as either very good or excellent

The overall impression of Nursing



Thornbury Hospitals Patient Satisfaction Committee reviews the percentage of respondents scoring very good or excellent in any category including the overall impression of nursing care. They also further review specific comments and answers to additional questions and as a result two sub committees have been formed from the Patient Satisfaction Committee, one focusing on pain management and one focusing on the discharge process.

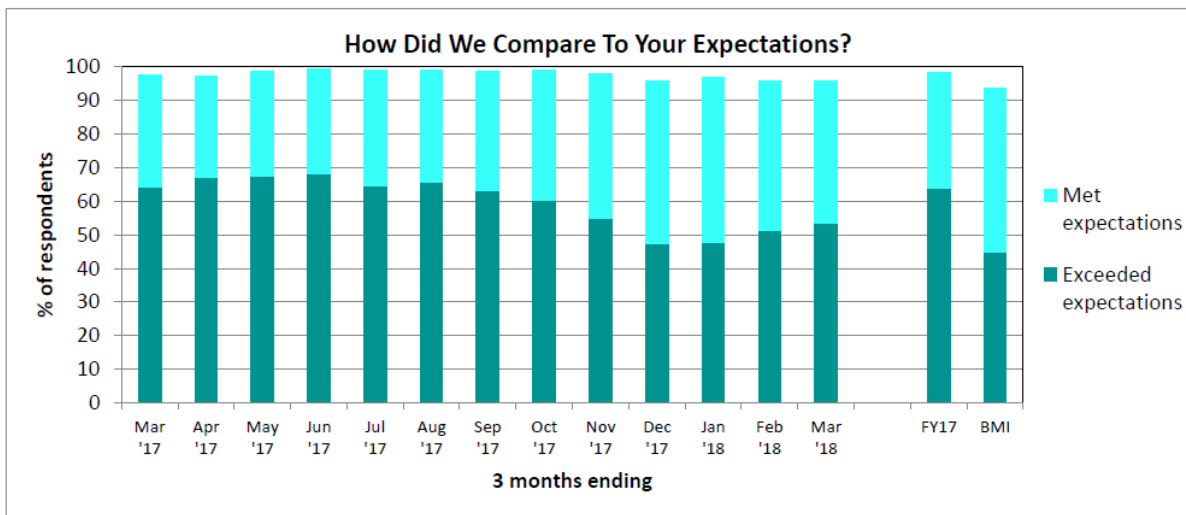
The overall impression of accomodation



Thornbury Hospital is currently undertaking major refurbishment works to remove carpets in our inpatient ward and consulting suite rooms, with the installation of Infection Prevention and Control approved hand wash sinks in these areas also. These works are being closely managed, with patient and consultant communication systems in place but inevitably these works may well affect our satisfaction scores throughout this time.

The committee has also reviewed the number of patients completing the patient satisfaction feedback cards and put in place daily champions to work on the ward to help support patients with the discharge process and the completion of these feedback cards.

The overall impression of hospital stay



All members of staff are able to attend a Hospitality training session (customer care), and different ways that patient’s expectations can be met and exceeded are explored through group work and individual experiences. The patient feedback results show that 99% of patient’s admitted to Thornbury Hospital felt that their overall impression of their hospital stay had either met or exceeded their expectations.

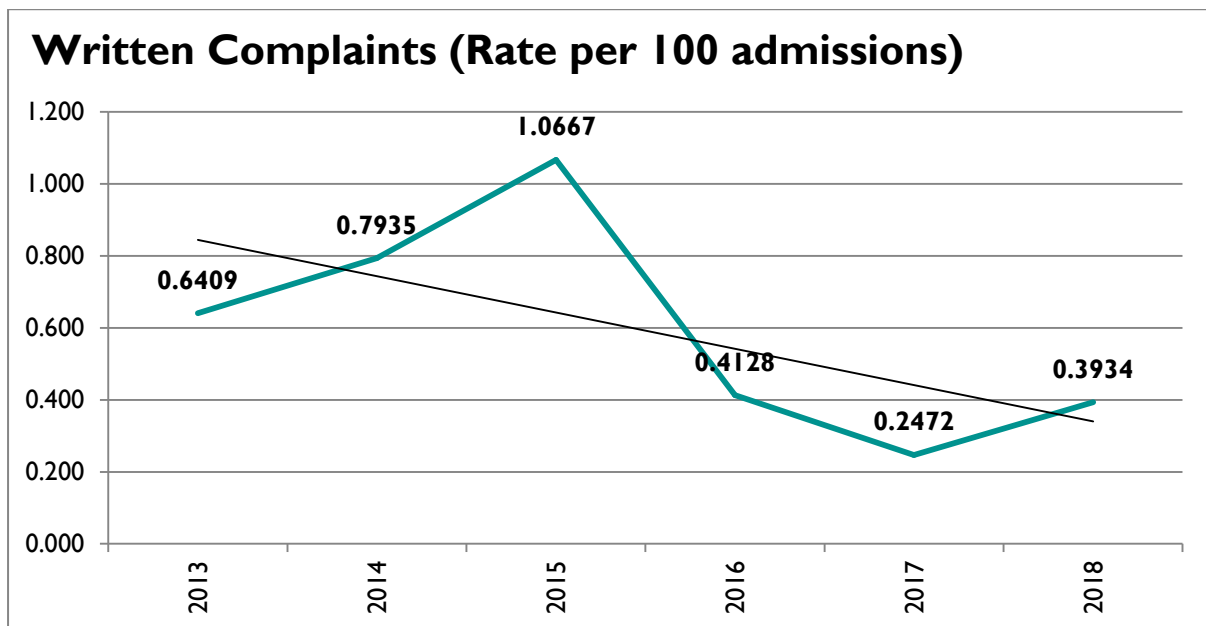
Complaints

In addition to providing all patients with an opportunity to complete a Satisfaction Survey BMI Thornbury 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.



A quarterly complaints triangulation meeting is held to discuss all complaints received.

“Think” customer hospitality training continues to be held with two sessions a month provided for all staff.

CQUINS

The agreed CQUINS for 2017 – 2018 with the NHS Commissioners was as follows:

- Patient cancellations on day of surgery – this was highlighted as an issue as BMI Thornbury had a larger than expected number of patients cancelling despite being pre assessed. It has highlighted a need for a multi-disciplinary approach to patient care and this meeting now is held on a weekly basis where all patients with co-morbidities are discussed.
- Antimicrobial Stewardship – this looked into the appropriate use of antibiotics in all specialities both prophylactic and in the treatment of a known infection.

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.

There have been no safeguarding incidents raised in 2017 at BMI Thornbury Hospital.

National Clinical Audits

- National Joint Registry

Totals for this hospital	2017	Year to date: 2018
Total completed ops	791	265
Hip procedures	414	127
Knee procedures	357	134
Ankle procedures	3	0
Elbow procedures	1	0
Shoulder procedures	16	4
NJR consent rate	100%	100%

- ICNARC– Critical Care national audit
- Clinical Self-Assessment – BMI internal clinical audit tool.
- WHO – part of 5 steps to safe surgery – observational and documentation audits both completed on a monthly basis.

Priorities for Service Development and Improvement

In 2017 – 2018 BMI Thornbury Hospital priorities are:

- Attaining JAG Accreditation for Endoscopy Services
- Further developing Children and Young People Services to act as a hub for the wider network of BMI Hospitals in the region and expansion of the range of service provision
- Increasing Medical Admissions for private and self-funding patients with specific, clinical inclusion/exclusion criteria. The increase in expertise within this service will also improve the scope of medical support for all patients undergoing surgical intervention.
- Enhanced Cancer Care for all patients.

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 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 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. Staffs 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



Thornbury Hospital	Staff Recommendations			
2018	2017	National Average	Highest National Score	Lowest National Score
77.00%	93.39%	73.18%	89.98%	50.44%

BMI Healthcare regularly survey their staff satisfaction and during the last survey the percentage of BMI Thornbury Staff who would recommend the service to family and friends as demonstrated in the chart above was 77%. To address the fall in recommendation rate the hospital has fully implemented an action plan to make improvements for all staff. Actions have focussed on improvements in communication, career development and staff feeling valued, directly in response to feedback within the staff survey.

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 Staff Survey which was conducted during 2017.

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

Thornbury Hospital	Re-Admissions (Aged between 0-16)			
2018	2017	National Average	Highest National Score	Lowest National Score
0.000	0	11.45	14.94	0

Thornbury Hospital	Re-Admissions (Aged 16+)			
2018	2017	National Average	Highest National Score	Lowest National Score
1.114	0.342	10.010	41.650	0.000

BMI Thornbury Hospital had no readmissions during 2017 – 2018 for a child under the age of 16 and one readmission for a young person between 16-18; this is less than the national score. These rates are based on a 1000 bed days.

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

Thornbury 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 Thornbury Hospital considers that this data is as described for the following reason as we have excellent adherence to all aspects of infection prevention and control, following policy and procedure.

Hospitals responsiveness to the personal needs of its patients

Thornbury Hospital	Responsiveness			
2018	2017	National Average	Highest National Score	Lowest National Score
95.09%	95.04%	69.22%	78.00%	60.10%

BMI Thornbury Hospital considers that this data is as described due to its focus on continuous improvement and responding to feedback given by its patients. The hospital reviews feedback on a monthly basis and action plans are developed and monitored through its patient satisfaction group.

BMI Thornbury Hospital score is taken as an average of all measures that is collected each month through Quality Health.

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

Thornbury Hospital	VTE			
2018	2017	National Average	Highest National Score	Lowest National Score
98.58%	99.64%	95.77%	100.00%	81.60%

BMI Thornbury Hospital considers that this data is as described for the following reasons – all patients are risk assessed at pre-assessment and/or on admission and notes are audited to ensure compliance. This is no longer a CQUIN for BMI Thornbury Hospital but in line with standard contract reporting this information is supplied by the IMU team monthly and submitted quarterly to Sheffield CCG.

Patient Safety Incidents

Thornbury Hospital	Patient Safety Incidents (Count)			
2018	2017	National Average	Highest National Score	Lowest National Score
566	464	3908	14506	31

The Thornbury Hospital considers that this data is as a result of all incidents and patient safety related incidents being reported.

The national average is taken from NHS Digital whilst BMI figure is taken from Risk Man.

As well as using a different reporting methodology, BMI Healthcare uses a different reporting system to the NHS and therefore some of our results cannot be directly comparable with the NHS data.

These figures detailed above show BMI Thornbury is below the national average for reported patient safety incidents.

Patient Recommendation Results

Thornbury Hospital	Patient Recommendations			
2018	2017	National Average	Highest National Score	Lowest National Score
98.93%	98.85%	97.07%	100.00%	75.61%

BMI Thornbury Hospital is recorded as scoring a patient recommendation of 98.93% and the source of this data is from NHS Digital, within the indicator portal (under the quality accounts area), same data/methodology as previous years.

BMI Thornbury Hospital seeks feedback across a range of questions that cover admission, administrative services the discharge process and overall impressions of nursing, accommodation, catering, physiotherapy, diagnostic imaging pharmacy and theatres.

BMI Thornbury Hospital consistently exceeds the average benchmark across BMI Healthcare.

BMI Thornbury Hospital
310 Fulwood Road
Sheffield
S10 3BR
Address line 2
Telephone:
01142661133



BMI Thornbury Hospital Quality Account 2017/18

Statement from NHS Sheffield Clinical Commissioning Group

For a number of years NHS Sheffield Clinical Commissioning Group (CCG) has had contact with BMI Thornbury Hospital in relation to the provision of NHS elective care, managed under the conditions of the NHS Standard Contract. This has been and continues to be a very positive business relationship where we have been able to constructively discuss any issues that have arisen and practically resolve in a timely manner. The Director of Clinical Services has provided the clinical support to the contract and again has worked in a very positive way to resolve any clinical issues, according to the contract requirements.

NHS Sheffield CCG has had the opportunity to review and comment on the information in this quality account prior to publication. BMI Thornbury Hospital has considered our comments and made amendments where appropriate. The CCG is confident that to the best of its knowledge the information supplied within this account is factually accurate and a true record, reflecting the hospital's performance over the period April 2017 – March 2018.

Submitted by Beverly Ryton on behalf of:

Mandy Philbin
Chief Nurse

And

Rachael Hague
Senior Contracts Manager
NHS Sheffield Clinical Commissioning Group

30th June 2018

Chair: **Dr Tim Moorhead**

Accountable Officer: Maddy Ruff