



Quality Account April 2017 to March 2018

OXFORD FERTILITY

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Welcome to Oxford Fertility

For over 30 years Oxford Fertility have been helping couples to become parents through science, skill and experience in assisted conception.

The Human Fertilisation & Embryology Authority (HFEA) are the regulatory body for Oxford Fertility. The HFEA now also cover the regulatory requirements previously under the Care Quality Commission (CQC) therefore Oxford Fertility are no longer registered with the CQC.

Located close to Oxford city we offer 16 services to both NHS funded and self-funded patients. We provide approximately 2500 cycles of treatment each year.

Facilities

Patient Reception Areas
Consulting Rooms
IVF Laboratory
Ultrasound Scanning Rooms
Theatre & Recovery Area
Embryo Transfer Rooms
Production Rooms
Free on-site parking
Satellite monitoring for ease and convenience

Oxford Fertility is part of The Fertility Partnership, a group of national and international clinics specialising in assisted reproductive technology (ART). The Fertility Partnership is the largest provider of IVF in the UK and has some of the highest success rates in Europe. Oxford Fertility is the largest clinic within The Fertility Partnership.

The values of The Fertility Partnership are...

Care
Expertise
Trust
Passion
Innovation

Statement on Quality

This, our second Quality Account, aims to provide an objective indication on what has been achieved over the last year and to identify where we want to make improvements during 2018-19. Our commitment to quality is evidenced by our high quality performance and aspiration to continually improve both the outcomes and the experience for our patients.

We have a focus on listening to and acting on both positive and negative feedback from our patients in order that we improve or share best practice across the teams within Oxford Fertility. We encourage openness and honesty from all our staff which helps us ensure that we learn from those times when things might go wrong to reduce the risk of avoidable issues.

The delivery of a high quality service has always been at the heart of Oxford Fertility and we want everyone to have confidence that we will provide the best care for all our patients.

The aim of Oxford Fertility is to provide safe, effective and personalised care to every patient. To do this quality improvement is a key priority for Oxford Fertility through an established Quality Management System certified to ISO: 9001 standards ensuring continuous monitoring and review of procedures and processes against expected outcomes.

Our association with the University of Oxford enables us to be involved in research and development in the field of assisted reproductive technologies (ART). We continually review best practice and hold regular planned review of achievement to quality goals.

Our self-funded and NHS-funded patients receive the same standards of care. NHS funded patients must satisfy the eligibility criteria set out by their CCG.

Accountability Statement

This Quality Account covers the reported year 1st April 2017 to 31st March 2018. NHS / Healthcare providers are required to produce an annual Quality Account

Oxford Fertility Quality Policy

It is our goal to maintain our status as a global leader in ART and related services. To be a strong, dependable service provider and pursue excellence in all aspects of our clinic.

Patients

In our pursuit of excellence we are committed to giving you personalised, evidence based approach leading to the highest standards of care. We will respect your need for confidentiality, privacy and individuality whilst maintaining a balance between the needs of the clients and the welfare of any potential child. We will listen to your comments about our service and respond by constantly striving to improve it.

Colleagues, referring hospital consultants, General Practitioners & Clinical Commissioning Groups

We will work in partnership with you to offer your patients a good service. We will provide continuous feedback on their progress (with the consent of your patients). We understand that it is important to listen to your needs and comments, in order to improve the service we give to you.

Staff

We will undertake to provide the best possible working environment to enable you to deliver the highest standards of care to our patients. We are committed to supporting you in continual professional development and continuing education. It is important to us to value you, to listen to you and give consideration to your needs.

Suppliers

We will keep to the terms of our agreement with you in return for efficient delivery of cost effective and quality services that will complement our efforts to give high quality care at all times to our clients.

Society

We will practice in a responsible, professional and ethical manner to promote the confidence of the wider society. We aim to maintain and increase our pregnancy rates in a responsible manner and conduct ourselves in a manner befitting a reproductive health global leader.

Regulators (HFEA & ISO)

We will comply with all your statutory requirements and values and continually strive to improve our Quality Management System in order to be seen by you as a Centre of Excellence.

To the best of my knowledge the information contained within this report is accurate and a true account of the quality of our services.

A handwritten signature in blue ink, appearing to read 'T Child', is positioned above the printed name.

Professor Tim Child
Medical Director
Oxford Fertility

Review of Quality Priorities 2017/18

This section reviews our progress with the key quality priorities we identified in last years Quality Account.

Reduction in Multiple Birth Rate

Why we chose this priority	For reasons of safety for the mother and baby it remains a priority to further reduce the multiple birth rate to meet the HFEA target of 10% of all pregnancies. Our eSET policy has been effective and remained unchanged at the end of 2016. With the change of grading of blastocysts during 2016 we will continue to monitor our rates and the effectiveness of our eSET policy to ensure they further reduce as this can only be achieved by a reduction in the number of 'two embryo transfers' that are carried out.
Quality domains	Clinical effectiveness, patient safety
Work it builds on	Ongoing programme to meet HFEA guidelines
Our key partners	<ul style="list-style-type: none"> ▪ Our staff ▪ Our patients ▪ HFEA

What we said we would do	What we achieved
<p>Ensure compliance with our eSET policy by good communication with our patients regarding the risks of multiple births to both mother and baby and compliance to the criteria for single embryo transfer</p> <p>Further reduction on 2016 (11.8%)</p>	13.6%

Progress

A review of effectiveness of our Multiple Birth Minimisation Strategy (MBMS) took place in March 2017.

The current eSET (elective single embryo transfer) policy resulted in 11.8% multiple pregnancy rate for IVF patients for the year 2016. Compliance with the eSET policy through 2017 has continued to be good at 94.6% (528/558). However, multiple pregnancy rates have increased over 2017 to 13.6% due to the higher clinical pregnancy rate, which impacts the multiple live birth rate.

Further review of the increase was carried out and the decision made that the multiple birth strategy would not need to be changed, but this decision is subject to further analysis of the rates by age band.

What we intend to do now

Additional analysis will be carried out and we will continue to be monitor closely. Reduction will remain a priority for 2018.

The Patient Journey

Why we chose this priority	Implementing our Patient Management System has impacted other areas of our operational systems and processes. After a period of working with the changes we now have the opportunity to review the full patient journey and information flow again to ensure any unexpected outcomes or unintended gaps have been created by the changes to our procedures. This is also an opportunity to review what information we give to patients, when it is available to them and close any gaps in communication.
Quality domains	Patient experience
Work it builds on	2016/17 priority – Patient Management System implementation 2016/17 priority – Improve Patient Information
Our key partners	<ul style="list-style-type: none"> ▪ Our staff ▪ Our patients

What we said we would do	What we achieved
Create process maps for the electronic information flow and identify any gaps in our SOPs and/or patient information <ul style="list-style-type: none"> • New or revised patient information • Updated SOPs • Improved patient feedback re: communication issues • More effective use of resources 	On an amended scope of work (see below): <ul style="list-style-type: none"> • Patient workflows • Revised SOPs • Creation of a new role to administer the complex genetic biopsy workflows and manage the patient experience

Amendment to Scope

The scope of this priority changed in 2017 with the increased functionality of our patient management system following system development work planned for the Oxford Fertility Patient Portal. As the implementation of the Patient Portal would affect the majority of patient workflow and provide new communication opportunities, aspects of the planned work would now be scheduled and completed under this project.

Progress

Due to a change of genetic testing laboratory providing services to Oxford we did identify an opportunity to take the administration and patient management in-house at Oxford as we recognised via our patient feedback that this could be improved.

We continued with the planned work to review and revise procedures for managing patients undergoing biopsy and genetic testing of embryos created in a fresh IVF cycle or, alternatively, frozen embryos from previous cycles requiring to be thawed, tested and re-frozen prior to biopsy.

We sought additional input from the new genetic laboratory staff and key referrers to create process maps, perform gap analysis and revise our patient information for these services. From this work we also identified the need for a new role to administer the processes and provide a dedicated point of contact for patients requiring biopsy for single gene defects or chromosomal abnormalities. The role is now in place and informal feedback has shown this has significantly improved the patient experience.

Business Continuity Planning

Why we chose this priority	<p>Moving to a no-patient notes environment also creates a new risk to Oxford Fertility whereby if the system is not available may mean clinical information about patients in treatment may not be accessible and/or business templates for recording patient information may not be accessible.</p> <p>In the event that this risk is materialised then it is important to remain operational for the immediate short term and to understand:</p> <ol style="list-style-type: none"> 1. Which clinical information / operational documentation are business critical in order to maintain patient safety 2. How long this state can be maintained. <p>This builds on other quality improvement work undertaken in 2016/17 and our 2017/18 priority of The Patient Journey</p>
Quality domains	Clinical effectiveness, patient safety, patient experience
Work it builds on	<ul style="list-style-type: none"> • 2016/17 priority – Patient Management System implementation • 2017/18 priority – The Patient Journey
Our key partners	<ul style="list-style-type: none"> ▪ Our staff ▪ The Fertility Partnership – IT ▪ The Fertility Partnership – QM

What we said we would do	What we achieved
<p>Review with all departments their operational information requirements at each stage / milestone in the patient journey to ensure there is a suitable clinical or business template available or acceptable system down time agreed with TFP IT.</p> <p>Identify risks and update business risk logs; create a contingency plans to enable continued operations in a safe environment.</p>	<ul style="list-style-type: none"> • Business Continuity Plan • Updated Risk log

Progress

The Fertility Partnership has a documented Business Continuity Plan; however, this mainly covers scenarios where the clinic is unable to operate at all and includes provision for the transfer of care to a nominated alternative Fertility Partnership clinic, as it is imperative that our patients continue their treatment with minimum inconvenience or distress.

A session with all department heads at Oxford was undertaken to determine the risk, impact and local plan should the clinic lose the key Patient Management System. All clinic activities during a usual working day were reviewed and the plan created for activities that could stop/be suspended; continue to operate in part/whole; reallocation of staff; recovery procedures and alternative document requirements agreed.

Priorities for Quality Improvement 2018/19

Priorities for improvement are agreed by the Oxford Fertility Leadership Team during the Quality Management Review meeting.

Reduction in Multiple Birth Rate

Why we chose this priority	<p>For reasons of safety for the mother and baby it remains a priority to further reduce the multiple birth rate to meet the HFEA target of 10% of all pregnancies.</p> <p>The effectiveness of our eSET (elective single embryo transfer) policy was reviewed in March 2017 and it was decided that no changes were necessary at this time.</p> <p>A decrease can only be achieved by a reduction in the number of 'two embryo transfers' that are carried out. As compliance to our eSET policy was good at 94.6% then we will continue to monitor our rates.</p>
Quality domains	Clinical effectiveness, patient safety
Work it builds on	Ongoing programme to meet HFEA guidelines
Our key partners	<ul style="list-style-type: none"> ▪ Our staff ▪ Our patients ▪ HFEA
How we will do it	<ul style="list-style-type: none"> ▪ Ensure compliance with our eSET policy by good communication with our patients regarding the risks of multiple births to both mother and baby and compliance to the criteria for single embryo transfer

How we will measure / evaluate our progress and success	What we aim to achieve
Continue to monitor the compliance to the criteria and record the live birth outcomes.	Reduction on 2017 (13.6%)

Oxford Fertility Patient Portal

Why we chose this priority	Implementing our Patient Management System has provided us with further opportunities to improve our communication and information provision to our patients. It will also provide increased data security.
Quality domains	Patient experience
Work it builds on	2016/17 priority – Patient Management System implementation
Our key partners	<ul style="list-style-type: none"> ▪ Our staff ▪ Our patients ▪ The Fertility Partnership – IT
How we will do it	Phased implementation of functionality following registration of all patients and partners with an individual portal account

How we will measure / evaluate our progress and success	What we aim to achieve
<ul style="list-style-type: none"> • All patients/partners in treatment will have an active portal account • Patients are able to complete and submit forms to us electronically at the start of treatment • Patients are able to view treatment schedules via the portal • Patients are able to receive results / letters direct to their account to download or print at home 	<ul style="list-style-type: none"> • Reduction in telephone calls / external email / posted documents to and from patients • Improved communication • Improved data security

Improvement of Natural Frozen Embryo Transfer Outcomes

Why we chose this priority	Oxford Fertility continually monitor outcomes from treatment i.e. pregnancy rates. It was noted in regular monitoring of outcomes that the cancellation rate of natural frozen embryo transfer cycles (without control of the cycle with medication) was high.
Quality domains	Clinical effectiveness
Work it builds on	<ul style="list-style-type: none"> Ongoing priority to monitor and improve outcomes from treatment
Our key partners	<ul style="list-style-type: none"> Our staff Our patients
How we will do it	<p>Following review of current evidence by clinical staff; research papers & current randomised clinical trials we will revise our protocols to:</p> <ul style="list-style-type: none"> Increase urine LH testing to twice daily Continue monitoring scanning until a dominant follicle minimum 15mm is present Revise scheduling of transfer day

How we will measure / evaluate our progress and success	What we aim to achieve
<ul style="list-style-type: none"> Monthly review of KPIs Bi-annual review of outcomes at QMR 	<ul style="list-style-type: none"> Reduction in cancellation rates for NC-FET Improvement to pregnancy rate from NC-FET

Statements of Assurance

Board Assurance

Provision of NHS Service

During 2017-18 Oxford Fertility provided 16 services to the NHS.

Oxford Fertility has reviewed the data available to them on the quality of care in all 16 of these services.

The income generated by the NHS services reviewed in 2017-18 represents approximately 50% of the total income generated from the provision of services by Oxford Fertility for 2017-18.

Services provided

IVF

IVF with ICSI

Frozen Embryo Replacement Cycle

IUI

Egg Recipient Cycle

Egg Recipient Cycle with ICSI

Donor Insemination

Donor Sperm IVF

Surgical Sperm Retrieval

Sperm Freeze

Sperm Storage

Embryo Storage

Embryo Freeze

GP Semen Analysis

PGD

Fertility Preservation – oncology

Local Audit

Oxford Fertility have a planned programme of local internal audits in line with the requirements of our regulator, the HFEA and as part of our ISO 9001 certification. Audits may take place more frequently than planned due to issues raised or dependent on past compliance i.e. a risk-based approach.

Local Audit 2017-18		
Patient Experience		Outcome
Satellite Services (for 2 locations)	Observational and interview during on-site visit to ensure locally delivered services comply with Oxford Fertility procedures	Compliant
Patient Consent to treatment	Confirms clinic consent forms in place prior to OCR April 2017 - 78% compliant at cut off / 100% compliant @ OCR – under daily surveillance during 2017	78%
Patient Questionnaire Analysis (including Friends & Family Test)	Analysis of questionnaire responses for service user satisfaction 2017 average across all services	98.5%
Patient Safety		
Surgical Safety Checklist Completion	Review of operative checklist to ensure completion in full. Amendments made to checklist	100% Section 1 80% Section 2 74% Section 3
Infection Control	To ensure SOP meets regulatory requirements / policy and current practice is reflective of the standards in order to minimize risk of exposure to and transmission of potential pathogenic microorganisms.	Compliant
Medicines Management	To assess medicines management practices are compliant with legal requirements and professional best practice via document review of relevant SOPs, observation of practice with interview of process owners, random sampling of associated documents / patient records.	Compliant
Controlled Drugs	To assess controlled drug management and practices are compliant with legal requirements and professional best practice via document review of relevant SOPs, observation of practice with interviews of staff involved in process, full check on associated documents and controlled drug records for 2017	Compliant
Information Governance		
Patient Consent to Disclosure	Ensure CD forms in are held for all patients	100%
Clinical Outcomes		
Multiple Birth Rate	Annual review against HFEA target	Reviewed 2017
Laboratory KPIs	Data reviewed monthly and any deviations reported	Reviewed monthly
Operator Audit	OCR/ ET / ICSI rates reviewed to ensure compliance to clinic average figures	Compliant
Other		
Submission of Data to HFEA	To ensure compliance to HFEA guidelines for data submission. Patient registration forms are submitted before FSH drugs are started; Treatment outcome forms are submitted within 7 days of treatment; any error reports are addressed within one month.	Compliant

External Tanks	To ensure all samples and documentation are correct for tanks brought into the clinic from external sources.	Compliant
Storage of Gametes & Embryos	100% of all samples (alternate years for embryo/sperm) must have the correct consent, stored within the statutory storage period and dewar audit reflect the record.	Compliant
Posthumous Birth Registration	To ensure compliance with HFEA that all married/civil partnership couples attending for embryo transfer have completed a PBR form New form April 17 – audit June 17 all patients since introduction of new form sent form after audit	Compliant

Regulatory (External) Audit	
HFEA Licence Renewal Inspection	April 2017
NHS England Higher Level Responsible Officer Quality Review	June 2017
ISO 9001:2015 interim inspection to new 2015 standard	November 2017
Home Office Controlled Drug Licence Renewal Inspection	December 2017

Safeguarding Adults and Children

Due to the nature of the organisation safeguarding and information governance are two important areas for Oxford Fertility staff so, in addition to any planned internal audits, all new staff complete the required training in the first two-weeks of their induction programme.

All patient facing staff complete Level1 Safeguarding Adults and Children training This training is then completed again every 2 years.

Staff who are Safeguarding Leads undertake Level 3 training.

100% of Oxford Fertility staff who require safeguarding training have a passed the training and hold a current certificate.

Data Quality

Oxford Fertility did not submit records during 2017/18 to the Secondary Users service for inclusion in the Hospital Episode Statistics which are included in the latest published data.

Information Governance

Information governance ensures necessary safeguards for, and appropriate use of, patient and personal information. We ensure that our Information Governance polices inform our standards and support our procedures. Comprehensive information governance training is given to all new staff at induction with annual refresher training. There is also an ongoing awareness programme within the clinic.

The information governance toolkit is the way we demonstrate our compliance with information governance standards. Our Information Governance Assessment Report score overall for 2017-18 (01.04.18) was 66 per cent and graded 'satisfactory'.

Clinical Coding Quality

Oxford Fertility was not subject to the Payment by Results clinical coding audit during 2017-18 by the Audit Commission.

Other Quality Indicators

Infection Prevention and Control (IPC)

A clean and safe environment is important to our patients. We have continued our work in this area by establishing links with the Infection Prevention and Control Lead at the John Radcliffe Hospital, providing IPC training and education to all staff through a mandatory training programme in 2018 and obtaining feedback on the cleanliness of our facilities through patient feedback surveys.

IPC audits demonstrated full compliance to standards.

Complaints

While Oxford Fertility strives to provide consistent excellent care there are occasions when patients have reason to complain. Every complaint is considered a valuable source of feedback and information on how we can improve. All complaints are investigated and any opportunities for learning or improvement are acted upon.

Indicator	2016-2017	2017-2018
<i>Number of Complaints</i>	100	55
<i>% of all patient treatments (all activity)</i>	3.7%	2.2%

Oxford Fertility takes every opportunity to make changes following feedback, concerns and complaints to improve the care or services received by patients. We have been working to reduce the number of complaints by acting on issues and sharing information with our staff.

As soon as a complaint is received by the General Manager, or any clinic staff member, any immediate or remedial action(s) should be taken – prior to the Oxford Fertility

investigation – in the interest of safeguarding, safety and quality. All complaints are shared with the department / individual / Head of Department named in the complaint to ensure full investigation / learning / remedial actions can be put in place as appropriate.

Complaint reports are taken to the weekly Management Team meeting in order that they are constructively discussed and reviewed which encourages the sharing of lessons that are learned and an improved understanding of the impact the experience has had on individual patients.

Changes and improvements have been made throughout the year in response to issues raised by complaints and these included:

- Changes to the form used to request information from the patient on the outcome from successful treatments to improve the layout and tone as not all pregnancies from treatment will result in a live birth and, if not informed earlier by the patient, this may then be a difficult form to complete
- Increased functionality within the electronic patient management system in creating a prioritised task list to ensure all patients requiring a medical call-back are contacted by the duty doctor to improve internal and external communication
- Secure remote access to the patient management system for the on-call doctor to ensure availability of up to date information and improved record keeping out-of-hours improving patient care and safety.
- Individual nurse follow-up for patients who sadly miscarry to improve support at a difficult time

Oxford Fertility has a culture of openness and, after discussion in relevant meetings, actions and learning are cascaded to all staff at the monthly staff meeting. The sharing of learning helps to improve communication and understanding of why improvements and changes are required and to prevent further complaints.

Incident Reporting

In addition to learning from patient complaints Oxford Fertility also capture information internally from incident reports.

Incident reporting is encouraged within the clinic as these either provide us with opportunities to correct practices or develop new ways of working and establish new best practice.

<i>Indicator</i>	<i>2017-2018</i>
<i>Number of incident reports</i>	79
<i>Number of corrective actions</i>	58

<i>Action Category</i>	<i>2017-2018</i>
<i>Patient information Review</i>	8
<i>Equipment Update</i>	1
<i>Procedure Review</i>	14
<i>Staff training</i>	35

Any deviance from current practice or unexpected outcome of our procedures (clinical or non-clinical) will prompt an incident report. Incidents reported through this system do not adversely affect patient outcomes but generally relate to care and patient experience. These are reviewed by the department lead, or full management team if required, and any actions taken forward. This way or internal review is a valuable source for our continual improvement programme.

Actions from incident reports have varied from updating our patient information, reporting performance of syringes back to a supplier and revision to procedures to update practice.

The largest category is staff training where individual steps may not have been performed in accordance to documented procedure e.g. incorrect billing, poor quality document scanning. Inconsistencies in process can affect communication with patients later on and lead to complaints if not corrected at the earliest opportunity.

There were no patient safety incidents / never events.

What Others Say About Oxford Fertility

HFEA

Oxford Fertility is licenced by the HFEA and has been licenced since 1992.

Last inspection by the HFEA was April 2017 and the current inspection rating is 5/5.

Full details of this inspection are available from the HFEA at <https://www.hfea.gov.uk/choose-a-clinic/clinic-search/results/35/>

The HFEA now inspect surgical procedure carried out in connection with activities licensed by them which means Oxford Fertility are no longer required to be independently registered with the CQC.

ISO

Oxford Fertility achieved an upgraded certification to ISO 9001:2015 in November 2017 for our quality management system. ISO reported zero non-conformities in this certification inspection.

Statement from Swindon CCG and Wiltshire CCG

Statement from Swindon Clinical Commissioning Group and Wiltshire Clinical Commissioning Group on the Oxford Fertility Unit Quality Account for 2017-18.

Swindon Clinical Commissioning Group (CCG) has reviewed the information provided by the Oxford Fertility Unit in the 2017-2018 Quality Account collaboratively with Wiltshire CCG, in line with the co-ordinating commissioner contractual arrangements. In so far as we have been able to check the factual details, our view is that the Quality Account is materially accurate in line with information presented via contractual monitoring and quality visits.

Commissioners welcome Oxford Fertility Unit's commitment to delivery of personalised care by ensuring patients are listened to and patient feedback is acted upon to improve their services. Commissioners commend Oxford Fertility Unit in achieving a high satisfaction rate, with 100% of patients reporting that they would recommend the service to a friend or family member. Commissioners are pleased to see examples of improvements made to enhance patient experience, including the introduction of new processes and a new administration role focused on complex genetic biopsy workflows and support the continued focus on improving patient communication through the introduction of the Patient Management System as a priority for 2018/19.

Commissioners note that Oxford Fertility Unit saw an increase in the multiple birth rate during 2017/18; therefore, not achieving the reduction priority set in the 2016/17 quality account. As a reduction in the multiple birth rate is key to ensuring the safety of both the mother and baby, commissioners will continue to monitor compliance with the Multiple Birth Minimisation Strategy during 2018/19 and welcome Oxford Fertility's continued focus on working towards achieving the HFEA target of 10% multiple birth rate of all pregnancies.

Commissioners are pleased to note that Oxford Fertility Unit have included the number, themes and learning from clinical incidents, as requested in the 2016/17 quality account response, as good incident reporting demonstrates a positive safety and learning culture. Oxford Fertility Unit have reported 0 serious incidents or never events during 2017/18, demonstrating that patients have not experienced significant harm whilst in their care. Commissioners note Oxford Fertility Unit have achieved good compliance with staff safeguarding training, but commissioners will work with Oxford Fertility Unit in year to ensure training levels are aligned to safeguarding children and young people intercollegiate document.

Oxford Fertility Unit has demonstrated participation in local audits which have been monitored via local quality meetings in year. A strong local audit schedule and process is essential to ensuring the clinical effectiveness of a service and Oxford Fertility Unit have demonstrated largely positive compliance scores, including full compliance to infection, prevention and control standards. Commissioners note that further work is required to ensure 100% compliance with the Safer Surgery Checklist. The surgical safety checklist is an important tool utilised to ensure the safety of patients in a surgical setting, so commissioners will ensure to monitor improvements and compliance during 2018/19.

Commissioners look forward to continued collaborative working with Oxford Fertility Unit to achieve the priorities outlined for 2018/19, to support the provision of high quality care to all patients across the health and social care economy.



Gill May, Executive Nurse
NHS Swindon CCG

Patient Satisfaction

We are committed to listening to the views of our patients and making continual improvements based on what they have said. Gathering and reflecting on people’s views is an integral part of our service delivery to our patients.

Feedback is gathered in a variety of way, for example paper surveys, electronic surveys, comment cards, compliments and direct contact with the clinic. Feedback is summarised and the results are shared with all staff at the regular clinic staff meeting.

We ask patients about their experience of our services on an ongoing basis. We are pleased that we maintain a high level of satisfaction across our patients with a good level of responses.

29 patients gave positive verbatim comments during January and February 2018.

February 2018 Oocyte Recovery Feedback – What did people say?

The most recent survey results for February 2018 are displayed in the table below.

‘The speed with which they have seen me has been amazing. We cannot fault anything and we thank you, all your staff for everything. All aspects of the facility were great and all members of staff that have dealt with our case have all been amazing. Thank you’

February 2018 Feedback

98.3%	95.1%	98.3%
<i>Were very satisfied with the attitude, professionalism and punctuality of our staff</i>	<i>Agreed that they were involved in decisions about their treatment or care</i>	<i>Said their privacy and dignity was respected during procedures</i>
100%		<i>would recommend Oxford Fertility to friends and family</i>

‘Everyone was helpful and friendly and understanding. They made the procedure a lot easier. Thank-you. All the staff have been fantastic, exceptional bedside manner, very reassuring. All instructions were clear and all questions were answered and put our minds at ease’

February 2018 Feedback

What we could do better

Patients are also asked what could be improved or to provide further information when scoring lower than satisfactory.

Below are the categories where suggestions for improvement were made from patient survey responses collected in January – February 2018. Themes were identified in communication and timing and these were reviewed by the clinic management.

<i>Suggestion Category</i>	<i>No</i>	<i>Theme</i>
<i>Communication</i>	7	-Leaving messages for Nursing and waiting for a call back -Online booking -Communication during treatment
<i>timing</i>	3	-ultrasound monitoring running late -timing of discussion at Oocyte Recovery
<i>finance</i>	1	
<i>Facilities (satellite)</i>	1	
<i>Not Specific</i>	2	
<i>Total comments</i>	14	

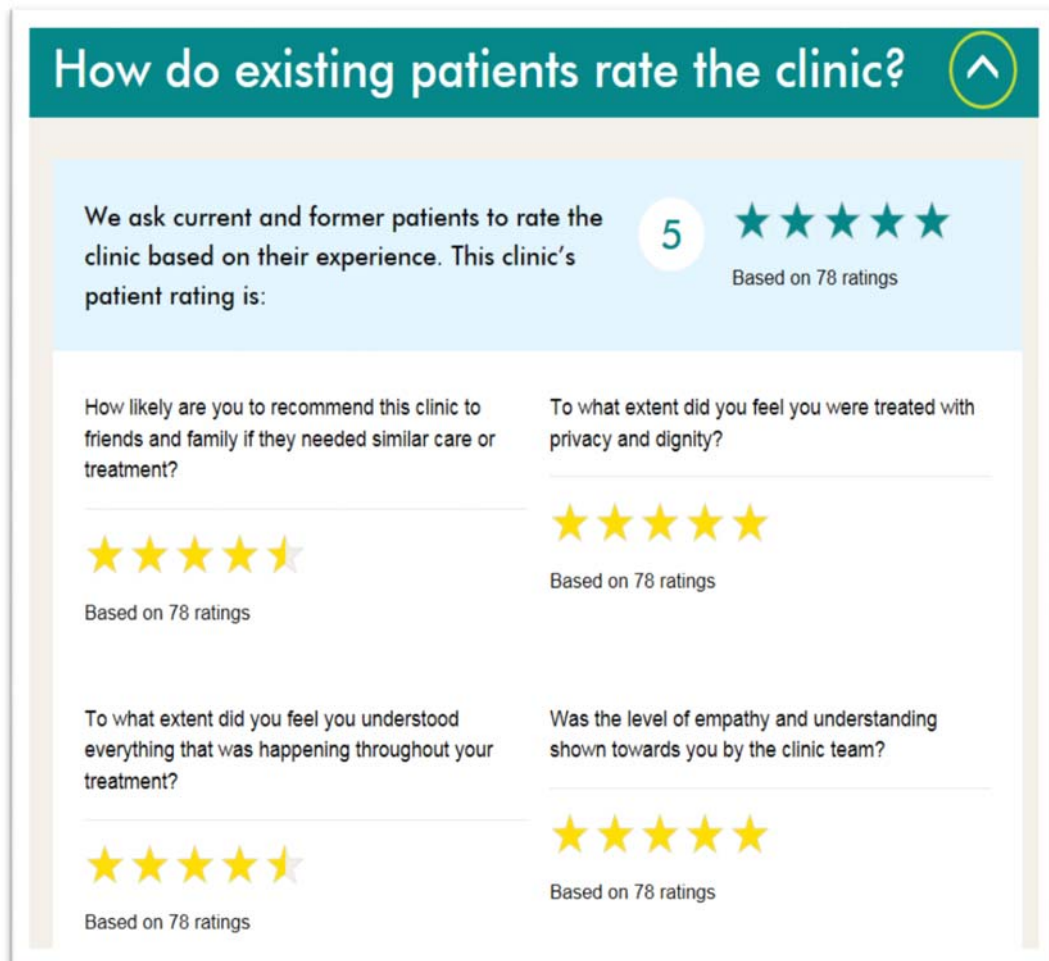
Communication is an area where there is positive and negative feedback from patients. During 2016/17 we recruited a nurse administrator to improve communication on a daily basis whilst the nursing team are in clinic. In 2018/19 we are introducing secure messaging (email, portal and SMS) and developing our patient portal further to provide information in a more timely manner to patients. This will also include an appointment diary to view upcoming appointments.

Clinic timing issues are rare but do occur and although we endeavour to remain on time or to keep patients updated when delays occur. Delays generally occur when a scan shows unexpected results and the patient requires additional care at that time.

HFEA Patient Rating

Patient feedback is also collected by the HFEA who invite current and former patients to rate the clinic based on their experience.

Oxford Fertility have a rating of 5/5



June 2018

Thank you for taking the time to read our Quality Account.

Your comments are always welcome and we would be pleased to hear from you if you have any questions or wish to provide feedback

Email us on:

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www.oxfordfertility.co.uk

Write to us at:

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