

Quality Account



2017 – 2018

Annual Quality Account 2017 - 2018

Contents

	Page No.
Our Values	3
Highlights of 2017/2018	4
Statement from the Hospital Director	5
HMT Medical Director Statement	6
The Healthcare Management Trust	7
History of St Hugh's Hospital	8
Services we Provide	9
Review of Services	10
Priorities Achieved for 2016 - 2017	11
- Patient Safety	12
- Patient Experience	13
- Clinical Effectiveness	14
- Responsive	15
- Well Led	16
External Regulation	17
Priorities for 2018 - 2019	18
Participation in Clinical Audits	19
- National Clinical Audits	19
- Local Clinical Audits	20
Quality Dashboard	21
How to Provide Feedback on the Quality Account	23

Key Facts



Our Values

“Our aim is to improve the health, wellbeing and independence of the people in our care.”

Our principles

Internal redesign

Doing everything we can to design our services to provide the best quality care and best value for money.

Charitable Impact

To ensure our charitable surplus creates a positive impact in the areas of dementia care and health promotion.

People development

Enabling the continued growth and development of our employees, the most valuable resource.

Our goals



Our values

Person and Patient Centred

Everything we do is driven by what our patients and service users need.

Valuing Achievement

Success is celebrated. Making you feel valued and proud to work for St Hugh's Hospital.

Driving Innovation

Using an evidence based and research approach to provide better care. Finding solutions quickly without causing unnecessary delay.

Delivering Value

Providing value for money. Freeing you from unnecessary red tape, allowing you to focus on the things that matter. Making sure that time and money are spent wisely.

Forging Relationships

Providing the best by breaking down barriers and working in partnership with other organisations.

Releasing Ambition

Insisting on the highest standards; OK is not good enough. We constantly challenge what we do, and set ourselves ambitious, yet realistic goals. Problems are never ignored and people are given freedom to do what they need to do.

Highlights of 2017/2018

- Achieved accreditation for our Theatre from AfPP (The Association for Perioperative Practice) to determine our commitment to high standards of perioperative care.
- Invested over £400,000 in state of the art equipment for our Endoscopy Department was approved.
- We have continued our commitment to health and wellbeing for staff and patients.
- Achieved the 2017/2018 CQUIN framework that demonstrates our pledge to improvements in the quality of services within our hospital.
- An investment in new communications technologies has reduced patient cancellations, automated reminder letters linked to our PAS and distributed to patients with an SMS message being sent seven and three days ahead of treatment respectively.
- We have created a new admitting and discharge lounge for appropriate specialities to reduce patient waiting times and increase capacity.
- Additional training has been provided for Support Workers to undertake additional competencies to make the patient pathway in pre-assessment more efficient.

Statement from the Hospital Director



I am delighted to present our Annual Quality Account, demonstrating our commitment to continuous improvement across St Hugh's Hospital.

As a non-profit organisation and part of a Registered Charity we do not have any shareholders and all our surplus is used to further develop our environment, staff, physical resources and other charitable causes around dementia and health promotion.

Our mission is to improve the health, wellbeing and independence of people in our care. Quality and safety lie at the heart of everything we do. This report takes a look at the clinical performance of our hospital from 1 April 2017 to 31 March 2018. I would like to take this opportunity to once again thank my colleagues who continuously develop our systems to maintain our provision of healthcare in the highest standard.

We continue to work closely with our regulators and have welcomed further external audit and inspection from both the CQC, CCG's and third parties to ensure our standards are developed appropriately within an increasingly challenging environment. Our recruitment plan has continued to develop by further strengthening our clinical leadership and who are in turn operating a whole system ethos with other local providers and commissioners.

It is very important to us to work collaboratively as part of a health community, at all levels of our organisation we have become increasingly integrated across the wider system. We have recently joined the NEL Integrated Care Partnership and are about to become part of the Planned Care Board, which is in turn creating tactical opportunities to share knowledge, skills and capacity for the benefit of the local population. We have some very exciting strategic opportunities being explored with the NHS, CCG's and local providers to plan our most impactful contribution to North East Lincolnshire over the next 5 – 10 years.

Finally, it remains to say, that the information contained within this Quality Account is accurate to the best of my knowledge.

Ashley Brown
Hospital Director

Statement from the Medical Director



HMT aims to ensure that patient care is delivered to the highest standards. This includes continually measuring how clinical care is delivered.

In addition to clinical governance, we have used the implementation of the new General Data Protection Regulation (GDPR) as an opportunity to review how we manage the personal data of the people we care for. Information governance is an important element

in providing quality care and we have made significant investment to ensure that our staff are aware of how to manage personal data appropriately.

We continue to work closely with our consultants and staff to achieve the highest standards of care. The Datix Incident Management System has become embedded within the organisation, ensuring opportunities to learn are always identified, acted upon and shared. At HMT we endorse an open culture of working, our whole team has embraced Datix as a key tool to improve quality. This then allows hospital management to review practice, implement change where appropriate, and to report back to staff on lessons learned.

HMT St Hugh's Hospital continues to work closely with our local NHS commissioners and is always looking at ways in which our services might be developed to assist the local community. As well as the various surgical treatments we can offer, management at the hospital are also currently exploring the potential expansion of diagnostic services. We are also looking at ways to make the patient journey even smoother and to reduce, where appropriate, the need for overnight stay in the hospital after surgery.

On behalf of the HMT Executive Management Team, I would like to thank all staff at St Hugh's for all their hard work over the last 12 months. The quality of this hard work is perhaps best reflected in the overwhelmingly positive feedback we receive from the people who use our services.

Lorcan Sheppard
HMT Medical Director

The Healthcare Management Trust

Our aim has always been to develop and promote the services offered by associated charitable hospitals and care homes so that they can be a viable alternative to the commercial companies both now and into the future.

The Healthcare Management Trust was founded in 1985 as a registered charity to provide consultancy services to healthcare providers founded by religious groups.

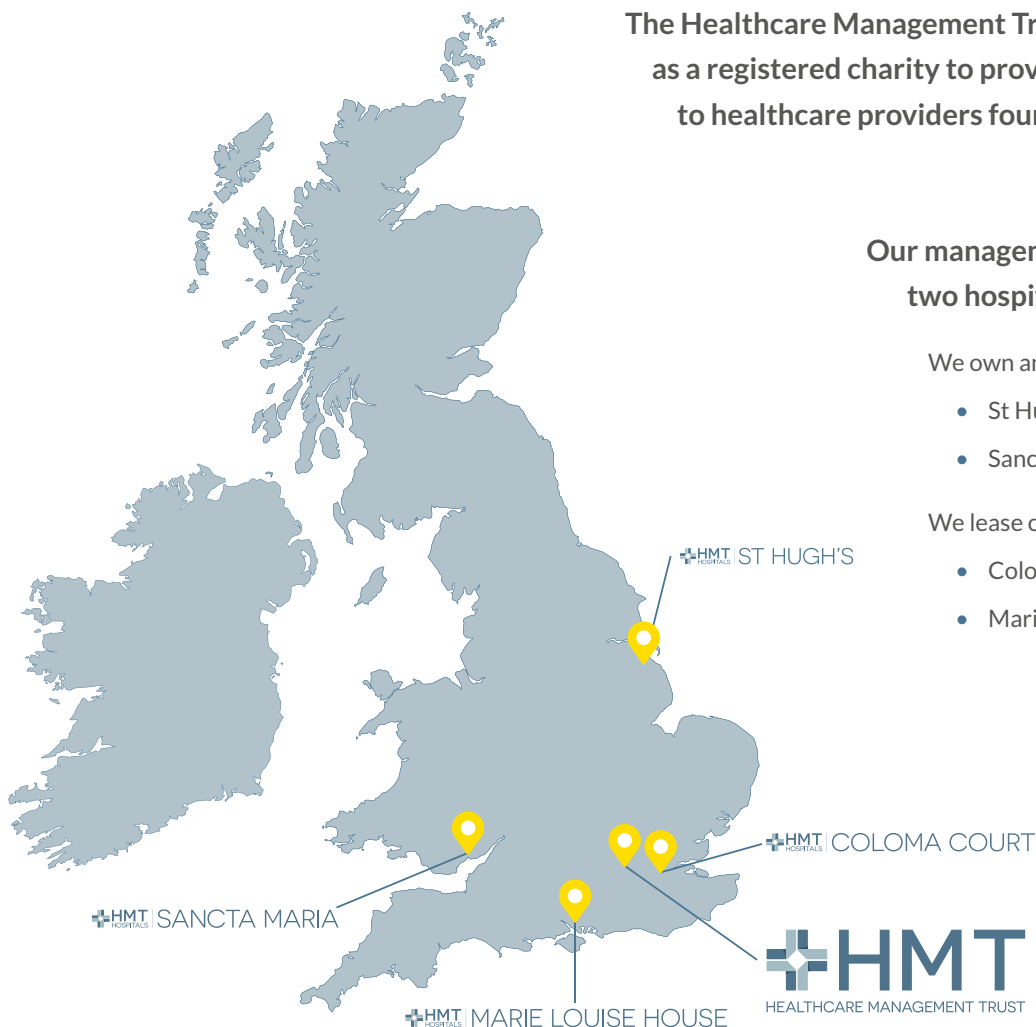
Our management portfolio comprises two hospitals and two care homes:

We own and operate two hospitals:

- St Hugh's in Grimsby
- Sancta Maria in Swansea

We lease operate two care homes:

- Coloma Court in West Wickham
- Marie Louise House in Romsey



In addition, we offer an extensive range of sensitively delivered consultancy services, which are designed to support Trustees, Leadership Teams and Senior Management. Lately, we have become more involved in health related research, scholarship funding and other areas of related grant making. We have identified Dementia diagnosis, treatment and care as an area that the Trust will become and has been increasingly active in, including the sponsorship of Admiral Nurses in Swansea the first of its kind in Wales.

We have developed a relationship with Friendship at Home which is a Grimsby based charity providing dementia support. In 2017 we committed funding for two full-time Dementia Care Workers allowing increased sustainable support within the local community.

History of St Hugh's Hospital

The original St Hugh's Hospital building in Prince's Road, Cleethorpes, was opened by the Bishop of Nottingham on 27 November 1938.



There were 30 beds including three children's cots. It had been founded by the nuns who were Sisters of the Order of St Joseph of Peace which was itself founded in Nottingham in 1888. A small house adjacent to the Hospital served as a temporary residence for the Sisters until a larger building was purchased and converted into a spacious convent.

In July 1961 a 17 bed maternity wing was added to the existing Hospital and was opened by The Roman Catholic Bishop of Nottingham, the Rt. Rev. Edward Ellis.

After many years of tending patients at St Hugh's the Sisters of St Joseph of Peace had to withdraw gradually from the running of the Hospital because of the declining number of Sisters, and by 1985 had virtually ceased to take part in the day to day running of the Hospital. That year they transferred ownership to The Healthcare Management Trust who undertook to maintain the founding ethos.

A decision was taken to replace the ageing hospital, following a period of steady growth. A site in Peaks Lane was secured and building commenced in March 1993. Twelve months later the current St Hugh's Hospital site was opened to the public.

Services we provide at St Hugh's Hospital

St Hugh's Hospital is an independent healthcare provider with strong ethical values and beliefs.

Whether you are an insured, self-paying or NHS patient, we offer you the peace of mind that comes from a friendly, comfortable, clean and safe environment along with a level of service that is conducive to a speedy recovery.

We continue to develop and improve our services by investing in our environment and people. Our hospital staff are committed to providing effective and responsive care to all patients.

St Hugh's Hospital is the chosen provider of health screening and injury treatment for a number of international athletes and Olympians.

St Hugh's has an NHS contract under the Any Qualified Provider status and is recognised as having the standard and level of care provided by the NHS through the Clinical Commissioning Groups.

In addition, the hospital prides itself on its infection rates, which are minimal, with no MRSA or C. difficile, recorded. As an elective surgical unit with a comprehensive pre-operative screening service and individual en suite room facilities the patient outcomes following surgery are excellent.

As a private independent hospital the NHS experience is unique and many patients find the relaxed atmosphere conducive to a speedy recovery.

The flexibility of offering choice to patients is welcomed particularly with outpatient appointments, weekend MRI diagnostics and surgery dates agreed with consultant and patient. We carry out many surgical procedures, including orthopaedic, general surgery, urology, ophthalmology, gynaecology and cosmetic surgery.

Accommodation Details

FREE Parking with 120 spaces	
Single Rooms	24
Double Rooms	2
Laminar Flow Operating Theatre	2
Consulting Rooms	8

Clinical Departments

- Endoscopy Suite
- Physiotherapy
- Radiology
 - MRI/CT (Mobile)
 - Ultrasound/C ARM
 - X-Ray

Accessing Our Services by:

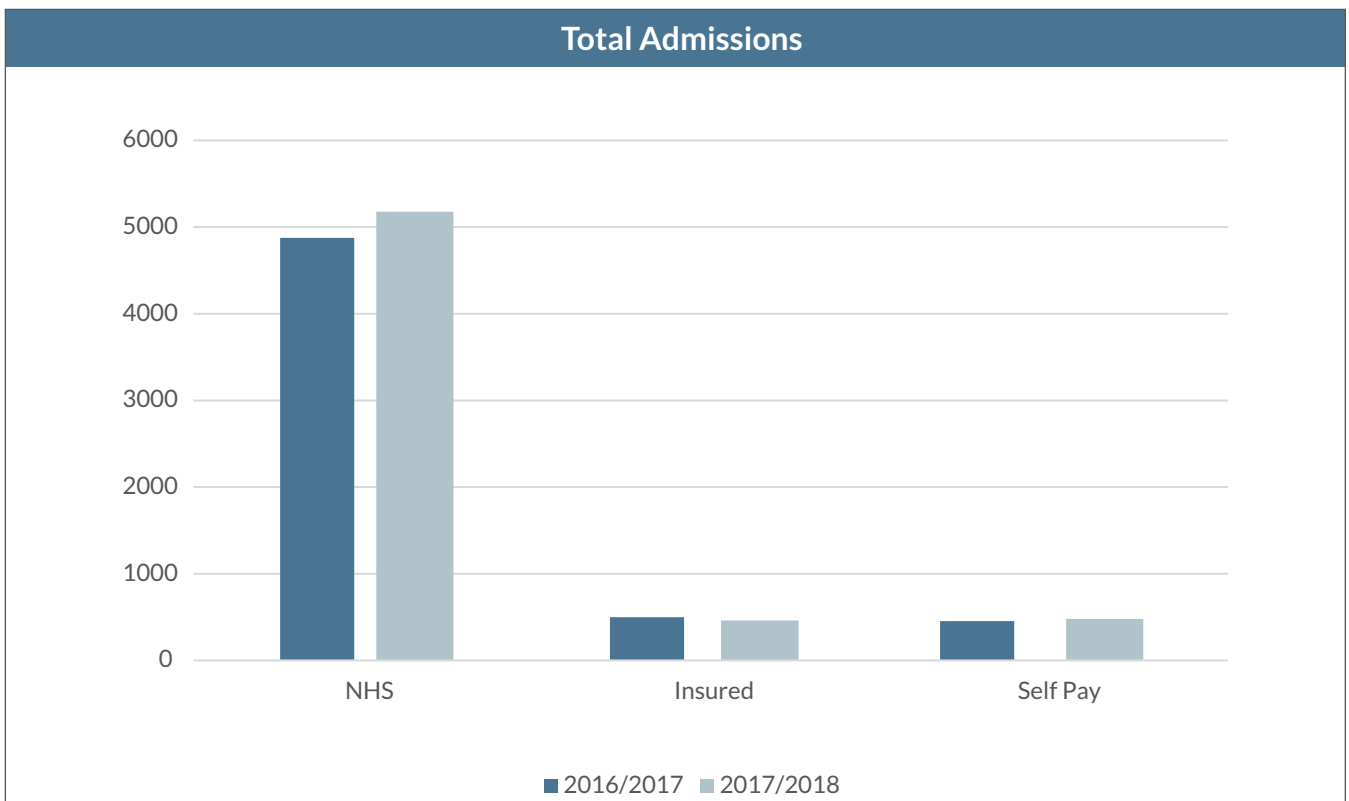
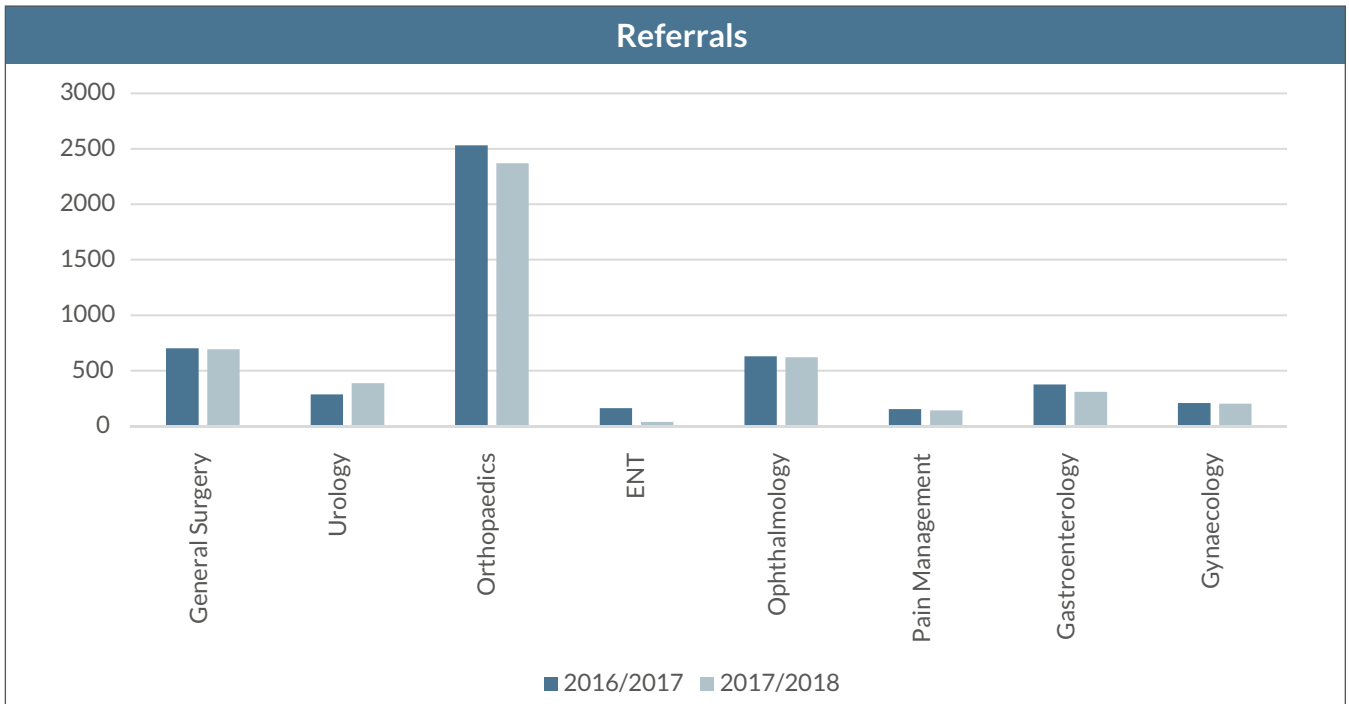
- Choose & Book (NHS e-Referral)
- Self-Pay Packages
- We accept all major insurers



Review of Services

During 2017/2018 St Hugh's Hospital provided NHS Services for General Surgery, Urology, Orthopaedics etc.

The following charts are comparisons between 2016/2017 with 2017/2018:



Priorities Achieved for 2016/2017

This Quality Account is St Hugh's Annual Report to the public and other stakeholders about the quality of the services we provide.

We demonstrate a strong culture that strives to exceed the expectations of all stakeholders.

Our managers, staff and clinicians are all committed to providing evidence based quality care to those people we treat in our community. It also provides assurances to all stakeholders that we regularly review our services and identify all improvements made to our patient centred care.

Priorities Achieved for 2017/2018

Provides us with the opportunity to convey a transparent accurate assessment of the quality of care our patients received during 2017/18.

This Quality Account contains our key performance indicators, patient satisfaction results, patient safety outcomes and audit results for 2017/18.

We have identified the priorities that continue to drive the five domains of quality and encompass the five key lines of enquiry driven by the Care Quality Commission.

- Safe
- Caring
- Effective
- Responsive
- Well led

Safe

Incident Reporting

Datix, our incident reporting management system, has become fully embedded within our hospital. This has enhanced our open culture where staff raise concerns and lessons learned are shared across the organisation. This system feeds into our monthly Quality Dashboard and appropriate meetings where required.

Risk Management

Datix is also used for our hospital risk management with all management having received additional training to identify, report and review trends. We share risks across the Healthcare Management Trust, Clinical Commissioning Groups, Clinical Advisors and the local Trust.

Infection Prevention and Control (IPC)

St Hugh's Hospital remains committed to ensuring that patient safety is at the forefront of everything we do and promotes infection prevention and control as good clinical practice.

A frequent audit programme provides assurance that standards are maintained and any opportunities for improvement are identified.

We also continue to maintain an MRSA free environment by adhering to the screening policy for all of our elective surgical patients.

Safeguarding

We have named a Safeguarding Lead, and continue to implement good safeguarding practice working closely with our Local Safeguarding Team. All staff undertake annual safeguarding training.



Patient Feedback

Patient feedback is an essential part of our continuous improvement. We have developed specific feedback forms for Outpatients, Inpatients and Endoscopy, providing targeted feedback.

Examples of St Hugh's Hospital acting upon patient feedback include:

- The investment in new technologies to enhance patient communication to reduce DNA's and cancellations.
- We have adopted a phased patient admission programme, reducing the waiting time prior to treatment.

Patient Information

We continually review our EIDO patient information library to ensure our patients are always fully informed of their treatment. Our website has been redeveloped to improve access to all online information. Patient use of social media has been identified and has become an essential component with our communication strategies.



Patient-Led Assessment of the Care Environment (PLACE)

In August 2017 we completed another Patient-Led Assessment of the Care Environment (PLACE), supported by our Infection Prevention & Control Nurse, Clinical Services Manager, Support Services Manager and three patients. During this assessment they completed not only an internal assessment but an external one also. Overall we passed, an action plan was completed further enhancing the patient environment and services.

Healthwatch

We have continued to strengthen our relationship with Healthwatch who now visit the hospital on a regular basis speaking to patients and staff. Healthwatch feedback links directly into our hospital action plans to ensure agreed improvements are completed in a timely manner.

Equality and Diversity

St Hugh's Hospital are part of the Local Equality & Diversity Group. Our local policies are regularly reviewed and developed in line with national standards, best practice and our hospital's culture and values.

Effective

Quality Dashboard

The Hospital Quality Dashboard is now in its second year and proves itself as an invaluable tool to track our quality and identify trends. All staff, Heads of Departments, the Senior Management Team, and HMT Executive Team and the Board of Trustees view and understand its purpose in demonstrating and monitoring our compliance across audits, complaints, incidents and key performance indicators. The document is shared monthly with local Clinical Commissioning Groups and is used as part of our quality assurance with regulators.

During 2017/2018 we have worked closely with our sister hospital in Swansea to not only mirror the Quality Dashboard but to use the same standards to help benchmark standards, compare trends and share lessons learned.

Clinical Governance

Our clinical governance structure remains robust with our Quality & Improvement Manager continuing to feed into the HMT Quality Group, led by the HMT Medical Director. This then links with our own site Governance meetings so the information flow is maintained and open. The Clinical Advisors role continues to be a value to our Senior Leadership Team and provide clinical insight and advice to.

Clinical Audit

Our clinical audit programme is fully embedded into all clinical departments. Heads of Department have devolved audit responsibility across their teams to improve engagement throughout the organisation.

Engagement Across the Local Healthcare System

The Senior Leadership Team continues to meet monthly with the local Clinical Commissioning Groups. We have created additional capacity within the hospital and a proactive approach has been taken to ensuring St Hugh's adds the most value to the local NHS system, and we now sit as part of the North East Lincolnshire Integrated Care Partnership to support the strategic planning of care across the district.

Welcomed Peer Reviews and Inspections

We have continued to invite the Lead Nurse for Quality from North East Lincolnshire Clinical Commissioning Group to complete unannounced inspections within Theatre, Outpatients and the Ward, to provide assurance on compliance within the hygiene code, incidents, medication, equipment, and clinical practice and outpatient practices. Subsequently, a feedback report was received and an action plan has been formulated.



Responsive

Constant review of local healthcare market and demands

Continued monthly Clinical Commissioning Group meetings help us maintain awareness of the local healthcare environment, and help our team. As a result our staff are better equipped to prevent referral delays for patients.

Patient Feedback

All patient feedback is collated within the Datix system and reviewed to improve the service across St Hugh's. A Comment Card system introduced in 2017 is reviewed regularly by the Hospital Director. Furthermore our complaints handling system has been enhanced to ensure all actions from lessons learned are appropriately implemented.

Patient Choice

E-Referral system is still in place and allows patients to book appointments at a time that is convenient to them. Additional flexibility is offered to private patients.

Community Engagement

St Hugh's Hospital has been working close and developing further relationships with other local healthcare providers. We meet regularly with our neighbours at St Andrew's Hospice and Navigo to identify both tactical and strategic opportunities. This ranges from sharing resources through to developing or enhancing services in partnership.

Staff Engagement

A monthly communication to staff on a subject relating to health & wellbeing is produced and circulated. Staff have participated in a number of local and national charity sponsorship days to help promote and raise funds for these.

Integration with local healthcare organisations to develop services

St Hugh's Hospital has been working close and developing further relationships with other local healthcare providers e.g. St Andrew's Hospice and Navigo to help strengthen services available to the public.

Strengthening relationship with Clinical Commissioning Groups

We continue to use many different ways to involve and include patients, users and staff, which ranges from suggestion boxes, staff satisfaction survey, all social media methods including Facebook and Twitter and patient satisfaction surveys. This provides valuable and regular feedback to the Senior Leadership Team.

Examples of Patient Feedback

Here are two patient comments we have received through our Facebook page:

"Cannot fault this hospital one bit all of the staff were so lovely, nothing was too much trouble very much at ease! I didn't want to come home they all do such an amazing job and I'm very thankful for everything thank you St Hugh's."

"Just had a total knee replacement at this fabulous hospital, from the moment you walk through the door you feel at ease. Everyone was so kind and caring, I was very nervous before my operation but was soon assured everything would be fine. Thanks you to all of you I met over my 4 days stay"

Staff Survey

We also undertook our annual Staff Survey with a participation rate of 65%. This increased by 15% from the previous year. These results have been shared with all staff. Within the report there are some pleasing results and comments given from staff about the Hospital and a subsequent response was provided to all staff.

Below is a selection of results:

- 100% of staff said they would recommend St Hugh's Hospital to a friend or family as an organisation to receive treatment from.
- 76% of staff said they would recommend St Hugh's Hospital to friends or family as an organisation to work for.
- 100% of staff felt that St Hugh's Hospital treats patients/service users with dignity and respect.

Well Led

Improved Communication Strategy

We are continuing improving and developing communication within our Hospital. Our Hospital Director holds quarterly staff forums, these are arranged over various shifts to ensure all staff can attend. A meeting timetable is scheduled for the year and is available to all staff via our shared drive.

Our Senior Leadership team adopt an 'open door policy' and strive to remain visible and accessible across the entire workforce. Our Hospital Director and Clinical Service Manager informally visit each department across the hospital several times per week.

Training and Development Budget Doubled

HMT is dedicated to providing a quality led service and are committed to supporting all our staff through training and development throughout their careers. Our training and development budget was doubled again for 2018 and is set to increase again in 2019.



External Regulation

Care Quality Commission (CQC)

St Hugh's Hospital is required to be registered with the Care Quality Commission (CQC) and its current registration under the Health & Social Care Act 2012 includes the following regulated activities:

- Diagnostic & Screening Procedures
- Surgical Procedures
- Treatment of Disease, Disorder or Injury

St Hugh's Hospital was last inspected August 2017 by the CQC by an unannounced focused inspection on 22 and 23 August 2017 with a follow up unannounced inspection on 13 February 2018. The hospital received an overall rating of requires improvement and have a clear action plan which is currently ahead of schedule.

Following this focused inspection we did improve and achieve "Good" in Outpatients and Diagnostic and the report highlighted the following improvements:

- Staff felt valued, enjoyed coming to work at the hospital and held the senior leadership team in high regard.
- All staff in theatres, ward and endoscopy had completed an appraisal.
- We saw that this team's leadership had developed and changed practice within the hospital in a short period of time, implementing systems and processes to support governance in the hospital.

- The senior management team at the hospital had been restructured and strengthened to include two new posts.
- The pre-assessment of patients had much improved. The hospital produced a guideline for the pre-assessment of patients prior to surgical intervention. This document was based on national evidence based best practice to ensure that all patients were appropriately risk assessed as being suitable for surgery at the hospital. This had resulted in a lower cancellation rate when patients were admitted for an operation.



Priorities for 2018/2019

HMT Strategy for 2017-2021

This clearly sets the strategic goals, regionally and locally for hospitals, these include:

- To improve the care and life quality of individuals with dementia, their families and carers.
- To provide schemes or funding of community projects designed to support individuals with dementia, their families and carers.
- To work with the young, schools and communities to increase the awareness of dementia and loneliness in the elderly.
- To provide a support to local health education strategies to improve the health of communities within our catchment area.

St Hugh's Hospital Priorities

- We will be inviting our local Clinical Commissioning Group to return and conduct further local inspections within our clinical departments.
- We will continue to build on our relationship with Healthwatch.
- As part of our national and local CQUINs for 2018/2019 (identical from 2017/2018) we will be continuing to developing the following areas:
 - Staff Health and Wellbeing
 - Healthy food for staff, visitors and patients
 - Improving the uptake of flu vaccinations for frontline staff
 - Core Clinical Staff Competency Framework
 - Pre-Assessment Process
 - Advice and Guidance (set up services and operate)
- Develop our own Green Agenda by having Green Champions from our staff body, and helping to promote energy efficiency.
- To create St Hugh's "Speak Up" contract for staff.

- Commitment to signing up to "Sign up to Safety" by developing and delivering our 5 pledges around the following areas:
 1. Putting Patient Safety First
 2. Continually Learning
 3. Being Honest
 4. Collaborating
 5. Being Supported
- Implementation and delivery of the National/Local Safety Standards for Invasive Procedures (NatSSIPs/LocSSIPs)
- Continue to collaborate with local Health Care Providers within our area to develop services for patients.
- Review existing Infection, Prevention & Control Framework and develop the role of the Infection Prevention Link Nurses.
- Commitment to registering our Endoscopy Department to the Joint Advisory Group on Gastrointestinal Endoscopy (JAG) Accreditation and start our journey to becoming accredited.



Participation in Clinical Audits

This part of the Quality Account focuses on the audits undertaken by St Hugh's Hospital during 2017/2018.

National Clinical Audits

During 2017 / 2018, St Hugh's Hospital participated in the following relevant national clinical audits with regards to the National Clinical Audit and Patient Outcomes Programme (NCAPOP) this includes:

- National Joint Registry

Joint Replacement Surgery: the National Joint Registry

The National Joint Register (NJR) records details of patients undergoing major joint replacement surgery and the types of prosthesis (new joint) they are given. We continue to submit data to the NJR and the number of records entered for primary hip and knee replacements and shoulder is shown in the table below:

	2016	2017
Total Completed Operations	560	617
Hip Procedures	240	260
Knee Procedures	317	346
Shoulder Procedures	3	11
NJR Consent	100%	99%

Elective Surgery - National Patient Reported Outcome Measures (PROMs)

This provides an indication of the outcomes of quality of care delivered to NHS patients and has been collected by all providers of NHS-funded care since April 2009.

	Eligible Procedures	Preoperative Questionnaires	Postoperative Questionnaires returned	Response Rate	Adjusted Health Gain	National Average
Groin Hernia	146	143	97	68.3%	0.096	0.160
Hip Replacement	245	187	148	79.1%	0.444	0.437
Knee Replacement	325	238	178	75.7%	0.359	0.324

Private Healthcare Information Network (PHIN)

During 2017/2018 Private Healthcare Information Network (PHIN) started to participate in PROMs for private patients which was launched January 2018. St Hugh's hospital will be participating in this for our patients that attend for the following procedures: joint replacements, groin hernia surgery, carpal tunnel release, Transurethral Resection of the Prostate (TURP) and cataract surgery.

Breast and Cosmetic Implant Registry

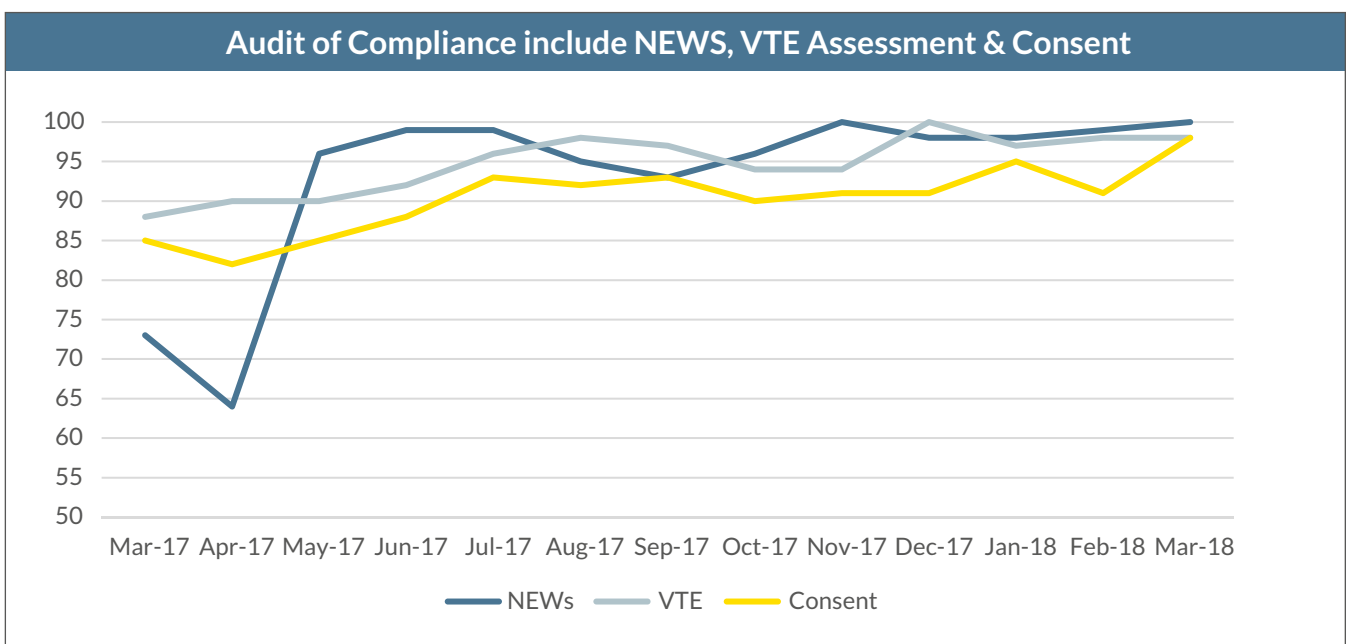
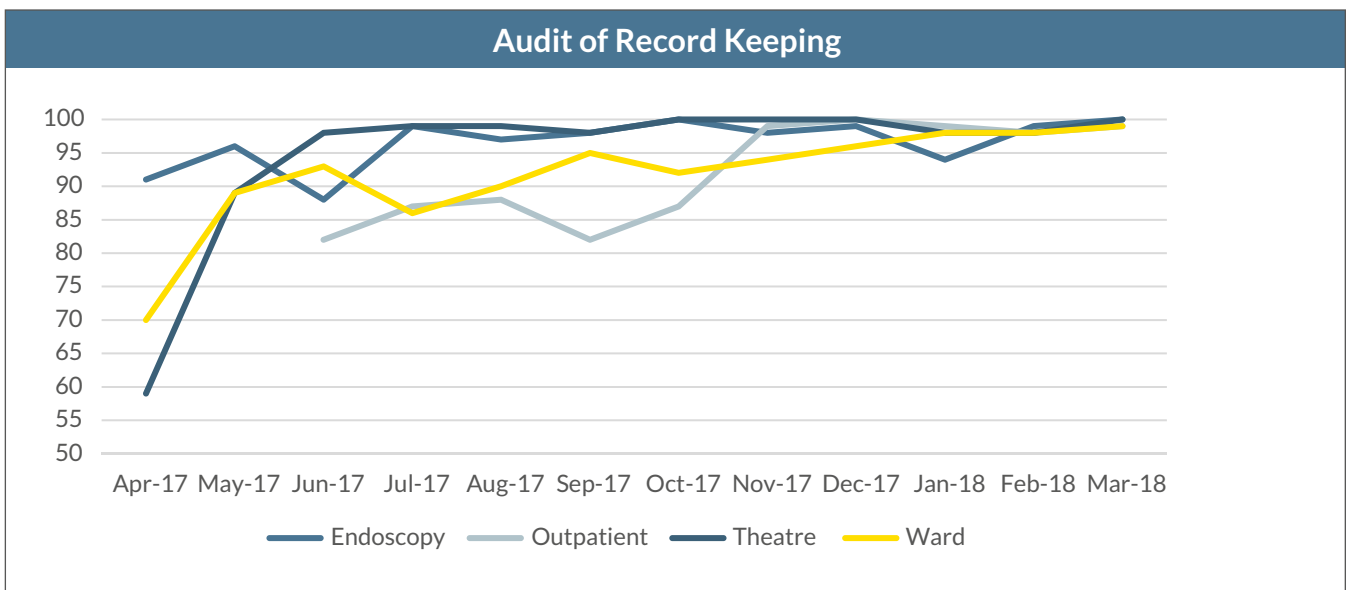
The National Implant Register commenced October 2016, NHS Digital is managing this national audit in response to the "Recommendation 21 of the Keogh Review of the Regulation of Cosmetic Interventions.

To date we are in the process of submitting 29 patients that have had breast implant surgery here at St Hugh's Hospital, this includes private and NHS patients.

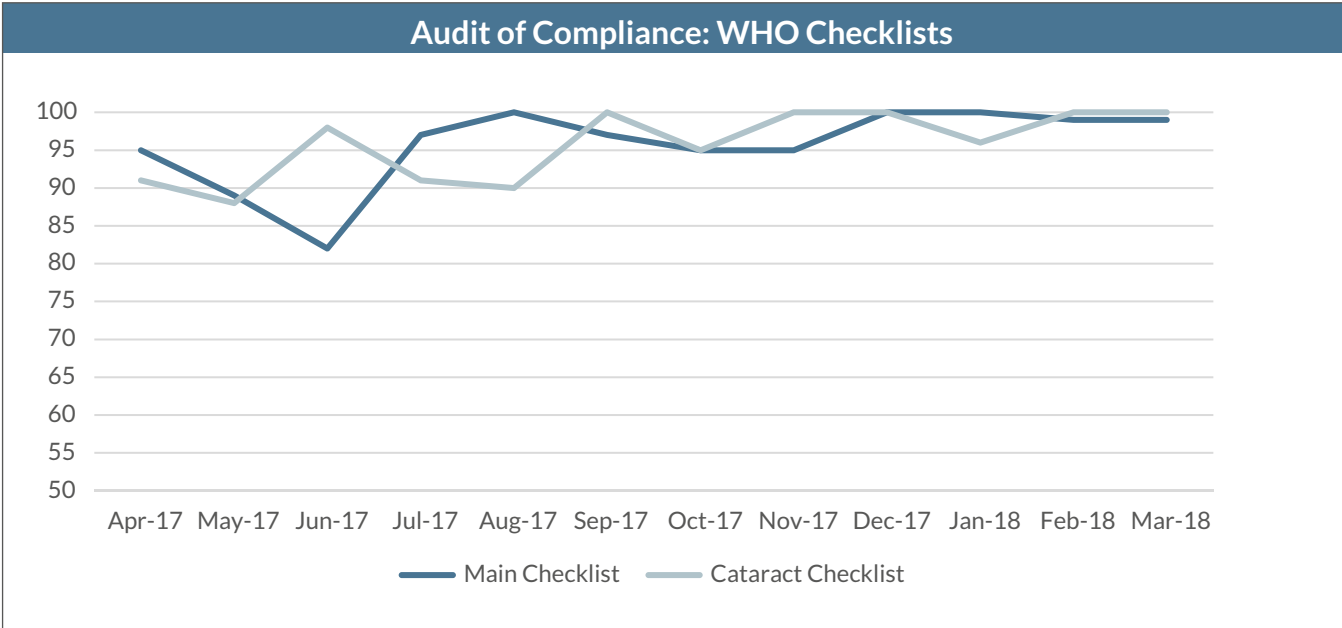
Local Clinical Audits

As part of an ongoing commitment to patient safety, St Hugh’s Hospital has agreed to conduct all clinical audits within each department on a monthly basis.

The Quality and Improvement Manager leads clinical audits, with Heads of Department and staff managing and completing data collection.

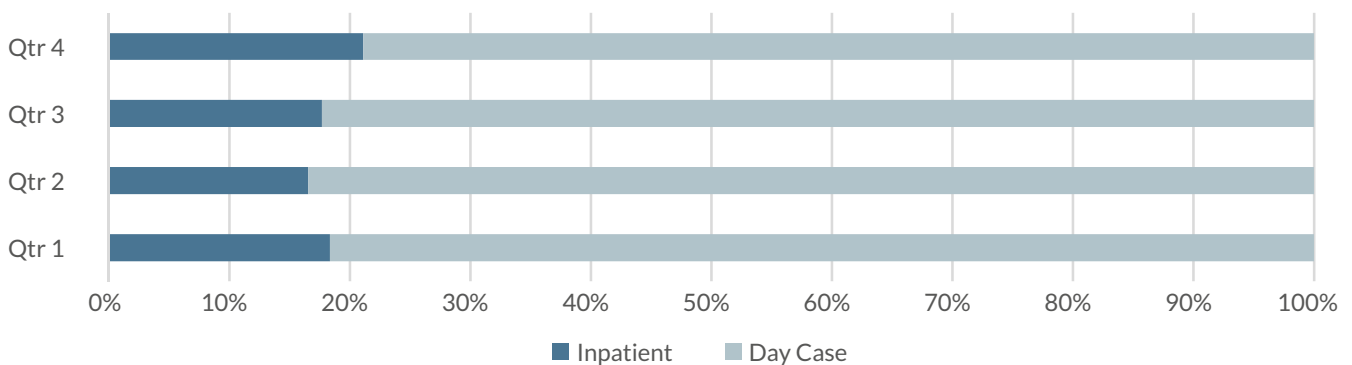


Quality Dashboard



Quality Dashboard

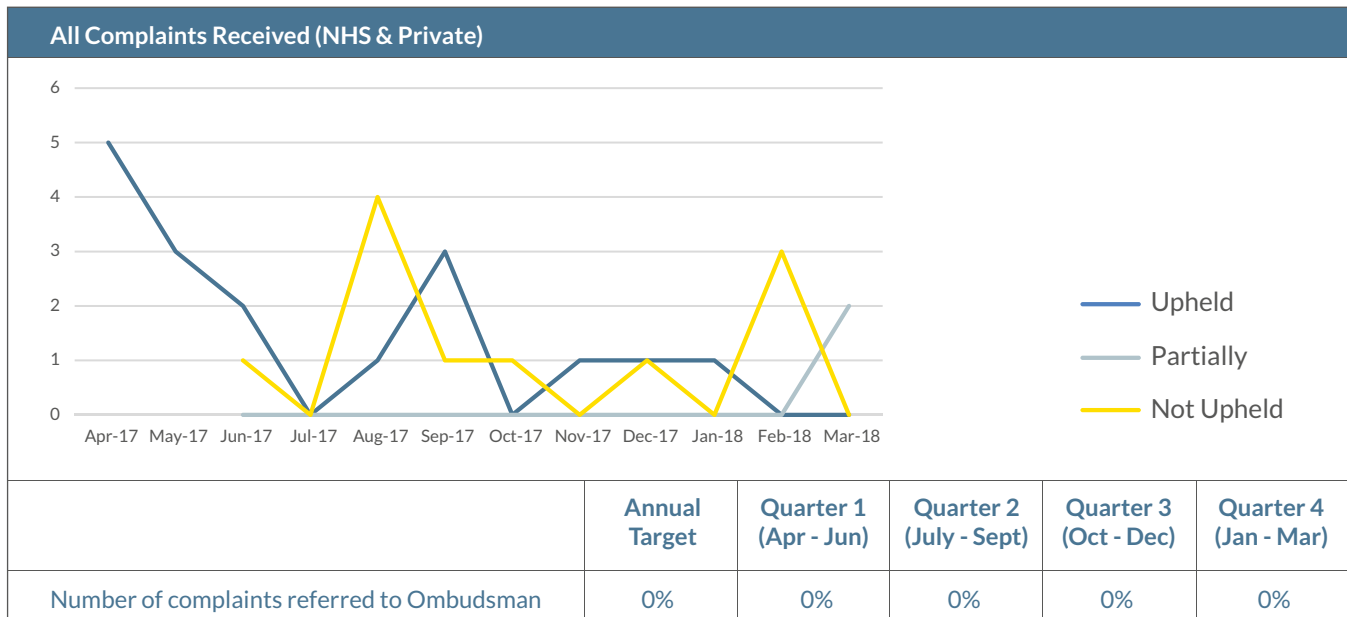
General Hospital Data					
	Annual Target	Quarter 1 (Apr - Jun)	Quarter 2 (July - Sept)	Quarter 3 (Oct - Dec)	Quarter 4 (Jan - Mar)
Inpatient Admissions		281	264	267	313
Day Case		1252	1331	1242	1170
Total (17/18 = 6120)		1533	1595	1509	1483



Outcomes					
Hip Replacements - Average Length of Stay		3.1	2.8	3.0	2.6
Hip Replacements - Number of Procedures		75	56	60	80
Knee Replacements - Average Length of Stay		3.2	2.9	2.9	2.5
Knee Replacements - Number of Procedures (Total = 322)		75	79	83	85

Patient Safety					
Patient Safety Thermometer (Falls)	0%	0% (0)	0% (0)	0% (0)	0% (0)
Patient Safety Thermometer (VTE)	0%	0% (0)	0% (0)	0% (0)	0% (0)
Patient Safety Thermometer (No. of pressure ulcers)	0%	0% (0)	0% (0)	0% (0)	0% (0)
Inpatient Falls (Any slip, trip or fall)	0%	0.3% (5)	0.3% (5)	0.1% (2)	0.06% (1)
Pressure Ulcer Incidents (Grade 2 and above)	0.3%	0% (0)	0% (0)	0%	0% (0)
Urinary Infection following Catheterisation	0%	0% (0)	0% (0)	0% (0)	0% (0)
Number of Serious Incidents	0%	0% (0)	0% (0)	0% (0)	0.6% (1)
Number of Never Events	0%	0% (0)	0% (0)	0.1% (2)	0% (0)
Surgical Site Infection - Hips	<1.3%	0% (1)	0% (0)	0% (0)	0.06% (1)
Surgical Site Infection - Knees	<1.0%	0%	0% (0)	0% (0)	0.06% (1)
MRSA	0%	0% (0)	0% (0)	0% (0)	0% (0)
C-Diff	0%	0% (0)	0% (0)	0% (0)	0% (0)
Unplanned readmission within 30 days of discharge	0.9%	0	1	0	0
Unplanned return to theatre (during same admission episode)	0.6%	0% (0)	0.6% (1)	0% (0)	0% (0)
Unplanned critical care transfers for level 2 & 3	0.3%	1	4	2	1

Quality Dashboard



Patient Experience					
Friends & Family Test (Score)	>90%	89%	99%	99%	99%
Friends & Family Test (Response Rate)	>25%	64%	64%	51%	46%

How to Provide Feedback

St Hugh's Hospital welcomes any feedback in relation to the contents of the Quality Account.

If you have any issues, questions, concerns or recommendations in relation to this report, please contact us by the following methods:

In Writing

Ashley Brown
Hospital Director
St Hugh's Hospital
Peaks Lane
Grimsby
North East Lincolnshire
DN32 9RP

By Telephone

01472 251130

Freephone

0800 250070

Email

info@hmtsthughs.org

Social Media



Facebook

facebook.com/hmtsthughshospital



Twitter

@HMTStHughs



Peaks Lane | Grimsby | North East Lincs | DN32 9RP

T. 01472 251100

info@hmtsthughs.org

hmtsthughs.org

 [@HMTStHughs](https://twitter.com/HMTStHughs)