

Winfield Hospital

Quality Account 2017/18



People caring for people



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Welcome to Ramsay Health Care UK

Winfield Hospital is part of the Ramsay Health Care Group

The Ramsay Health Care Group, was established in 1964 and has grown to become a global hospital group operating over 100 hospitals and day surgery facilities across Australia, the United Kingdom, Indonesia and France. Within the UK, Ramsay Health Care is one of the leading providers of independent hospital services in England, with a network of 31 acute hospitals.

We are also the largest private provider of surgical and diagnostics services to the NHS in the UK. Through a variety of national and local contracts we deliver 1,000s of NHS patient episodes of care each month working seamlessly with other healthcare providers in the locality including GPs, Clinical Commissioning Groups

Statement from Dr. Andrew Jones, Chief Executive Officer, Ramsay Health Care UK

“The delivery of high quality patient care and outcomes remains the highest priority to Ramsay Health Care. Our clinical staff and consultants are critical in ensuring we achieve this across the whole organisation and we remain committed to delivering superior quality care throughout our hospitals, for every patient, every day. As a clinician I have always believed that our values and transparency are the most important elements to the delivery of safe, high quality, efficient and timely care.

Ramsay Health Care’s slogan “People Caring for People” was developed over 25 years ago and has become synonymous with Ramsay Health Care and the way it operates its business. We recognise that we operate in an industry where “care” is not just a value statement, but a critical part of the way we must go about our daily operations in order to meet the expectations of our customers – our patients and our staff.

Everyone across our organisation is responsible for the delivery of clinical excellence and our organisational culture ensures that the patient remains at the centre of everything we do. At Ramsay we recognise that our people, staff and doctors, are the key to our success and our teamwork is a critical part of meeting the expectations of our patients.

Whilst we have an excellent record in delivering quality patient care and managing risks, the company continues to focus on global and UK improvements that will keep it at the forefront of health care delivery, such as our global work on speaking up for safety, research collaborations and outcome measurements.

I am very proud of Ramsay Health Care's reputation in the delivery of safe and quality care. It gives us pleasure to share our results with you."

Dr. Andrew Jones

Chief Executive Officer

Ramsay Health Care UK

Introduction to our Quality Account

This Quality Account is Winfield Hospital's annual report to the public and other stakeholders about the quality of the services we provide. It presents our achievements in terms of clinical excellence, effectiveness, safety and patient experience and demonstrates that our managers, clinicians and staff are all committed to providing continuous, evidence based, quality care to those people we treat. It will also show that we regularly scrutinise every service we provide with a view to improving it and ensuring that our patient's treatment outcomes are the best they can be. It will give a balanced view of what we are good at and what we need to improve on.

Our first Quality Account in 2010 was developed by our Corporate Office and summarised and reviewed quality activities across every hospital and treatment centre within the Ramsay Health Care UK. It was recognised that this didn't provide enough in depth information for the public and commissioners about the quality of services within each individual hospital and how this relates to the local community it serves. Therefore, each site within the Ramsay Group now develops its own Quality Account, which includes some Group wide initiatives, but also describes the many excellent local achievements and quality plans that we would like to share.

Part 1

1.1 Statement on quality from the General Manager

Kathie Rimmer, General Manager

Winfield Hospital

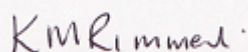
Winfield hospital has been delivering high quality clinical services to local residents for 26 years and as General Manager I take great pride in the service we offer our patients.

This quality account has been produced to provide information about how we monitor and evaluate the quality of the services we deliver. It has been prepared in collaboration with every profession engaged in service provision within the hospital. Every individual member of staff is crucial to the success of our hospital and we value the contribution that they make in delivering great customer care.

Our vision for our hospital includes a commitment to deliver health services needed by the local population within the scope of safe clinical practice. It also encompasses a commitment to deliver a patient experience that will leave every patient feeling that everything that should have been done was done to the standard they would expect.

The following pages set out our quality assurance policies and underline our commitment to delivering the highest possible standard of service in every circumstance.

Winfield Hospital has a very strong track record as a safe and responsible provider of healthcare and we are proud to share our results.

A handwritten signature in dark ink, reading "K M Rimmer", is displayed within a light grey rectangular box.

1.2 Hospital Accountability Statement

To the best of my knowledge, as requested by the regulations governing the publication of this document, the information in this report is accurate.

Kathie Rimmer

General Manager

Winfield Hospital

Ramsay Health Care UK

This report has been reviewed and approved by:

Dr Marion Andrews-Evans, Executive Nurse and Quality Lead
NHS Gloucestershire Clinical Commissioning Group

Mr Umraz Khan, consultant plastics surgeon – Medical Advisory Committee Chair
Dr Richard Vanner, consultant anaesthetist - Clinical Governance Committee
Chair

Mr Tom Roe, consultant colorectal surgeon – Clinical Governance Committee
Chair

Mark Bounds - Regional Director - South

The 9 patient representatives who make up the patient focus group

“It is so good to see high quality service in every aspect”

Welcome to Winfield hospital

Winfield Hospital is an independent hospital located on the outskirts of the city of Gloucester. It is situated off the Northern Ring Road with excellent road and rail links.

Consideration for our patients is at the heart of everything that we do. We are constantly seeking new ways of working and bringing in fresh clinical practices that will improve outcomes for our patients.

Our approach to service delivery, which currently includes working in partnership with the NHS, is courteous and professional and we take great pride in our ability to innovate and look at new ways of working.

Winfield Hospital has three theatres all with ultra clean air technology and a dedicated endoscopy suite. The ward has 39 inpatient beds, 33 of which are single rooms and 3 doubles, all with ensuite facilities.

Diagnostic facilities include an imaging department with on-site x-ray, ultrasound, and dental x-ray equipment. MRI and CT scanning services are supplied by Ramsay UK Diagnostic mobile units

We have a substantial physiotherapy department which has a fully equipped gymnasium and treatment rooms. Services include Hydrotherapy, Hand Therapy, Continence /Women's Health, Sports Injuries, Musculoskeletal assessment and treatment and Post-Operative Rehabilitation. Pilates, Back School, Acupuncture, Phototherapy (UVB for skin conditions), and neurological rehab(strokes/MS/Parkinson's). Our physio department also run a clinic at Richmond Village residential in Painswick for both residents and non-residents.

The Hospital also has a well-equipped outpatient department with 11 consulting rooms and two treatment rooms.

We have an onsite pharmacy which supplies medicines to all departments and patients registered with the Winfield Hospital.

Delivering a full range of specialist surgical and medical services that include Cardiology, Dermatology, Endoscopy, ENT, General Surgery, Gynaecology, Plastic Surgery, Ophthalmology, Orthopaedics and Urology, we provide fast, convenient, effective and high quality treatment for all adults.

Our pathology services are provided by Gloucestershire Hospitals NHS Foundation Trust with whom we have a close working relationship, both for these plus other specialised clinical services that we are unable to provide in house.

At the Winfield Hospital we work closely with our local Clinical Commissioning Group (CCG) to provide a range of surgical services. We also have an excellent relationship with Tetbury Hospital and support their in-patient choice activity. We employ a GP liaison officer who has direct involvement with all the local GPs and who actively promotes Winfield as a Hospital of choice.

We also provide a direct access booking service for gastroscopies, allowing GPs to book directly on to endoscopy lists.

We are committed to delivering services within the community where possible and actively seek opportunities to provide outreach clinics in rural areas.

During 2017 we participated in the NHS initiative of improving staff health and wellbeing, focusing on musculoskeletal issues and stress, healthy food options and flu vaccinations. This focus will continue for 2018/2019.

In 2017 we treated a total of 5150 patients. Of these 2,071 were private patients (40.2%) and 3,079 were NHS patients (59.79%)

Winfield Hospital has 157 consultants plus 9 medical practitioners with practicing privileges and employs 219 staff, both clinical and non-clinical.

The nursing staff to patient ratio on the ward ranges between 1:5 to 1:8 with an additional HCA if the ratio is above 1:5. This is calculated taking into account patient dependency but not in isolation. There is an experienced Residential Medical Officer (RMO) on site 24 hours a day. The staffing levels are reassessed daily taking into account patient dependency to ensure safe staffing for patient care at all times.

Winfield hospital holds patient information evenings on different medical/ surgical subjects and most recently this has included Plastic Surgery and Orthopaedics.

Our conference room is also regularly used by local GP practices for various education seminars and meetings. Winfield Hospital is proud to continue to support the Gloucestershire General Practitioner Education Trust (GGPET), allowing them to utilise the facilities at Winfield Hospital for their educational meetings as well as also co-hosting education events, the most recent of which was a colorectal education day. We also hold bi monthly practice manager meetings to support practice managers in our referral area.

Winfield feels it is important to support the local community and have continued to raise money throughout each year for a nominated charity as voted for by staff. This year we have continued to support Youth@Heart who are a local charity working solely on the generosity of the public and willing volunteers, working to fundraise for a Cardiac Youth Worker to be based at Bristol Heart Institute to cover Gloucestershire and South Gloucestershire for young adults with Congenital Heart Disease aged between 16-24 years old, gained the majority

vote and so all funds raised will be donated to them at the end of the year. We have also supported Crohn's and Colitis during their awareness week through information lectures for staff and various fundraising activities.

2017 was Winfield Hospitals 25th Anniversary. This occasion was marked with a celebration at Cheltenham Racecourse which was well attended by staff and consultants.

Part 2

2.1 Quality priorities for 2017/2018

Plan for 2017/18

On an annual cycle, Winfield Hospital develops an operational plan to set objectives for the year ahead.

We have a clear commitment to our private patients as well as working in partnership with the NHS ensuring that those services commissioned to us, result in safe, quality treatment for all NHS patients whilst they are in our care. We constantly strive to improve clinical safety and standards by a systematic process of governance including audit and feedback from all those experiencing our services.

To meet these aims, we have various initiatives on going at any one time. The priorities are determined by the hospitals Senior Management Team taking into account patient feedback, audit results, national guidance, and the recommendations from various hospital committees which represent all professional and management levels.

Most importantly, we believe our priorities must drive patient safety, clinical effectiveness and improve the experience of all people visiting our hospital.

Priorities for improvement

2.1.1 A review of clinical priorities 2017/18 (looking back)

Our clinical priorities must drive patient safety, clinical effectiveness and improve the experience of all people visiting our hospital.

Patient Experience

We focused on monitoring and evaluating patient experience through the Friends and Family Test and the Patient Satisfaction survey and improving response rates. This was carried forward as a priority from last year.

We aimed to achieve this by ensuring patients are aware they will be asked these questions and increasing their awareness of the ways in which we can utilise their feedback to make improvements to the service we provide. Our response rates have improved slightly but we would like to achieve higher percentages to enable us to utilise more reliable results.

We also aimed to improve on the patient experience we provide through increased patient involvement. The Patient Focus Group was launched with the purpose of enabling mutual engagement with a range of patients, hospital users and members of the public, resulting in a sharing of information, views and perspectives aiming to improve patient care, inform service improvement, design and development within the hospital.

One of our priorities of 2016/2017 was to expand this group to include a greater number of diverse service users. We now have 9 members of the Patient Focus Group and meetings have been held every quarter. The meetings continue to be of great value to Winfield and we are very appreciative of our patient representatives.

Clinical Effectiveness

We have committed our hospital to a variation of one of the national CQUINs (Commissioning for Quality and Innovation) for our quality initiative with Gloucestershire CCG in 2017/2018 and 2018/2019.

This initiative is improving staff health and wellbeing and over the 2 year period we will be focusing on reducing staff sickness levels specifically where sickness is through stress and musculoskeletal problems. We will also be focusing on providing healthy food options for staff and patients and increasing the uptake of the flu vaccination.

Progress will be monitored through quarterly reports to the CCG. We have achieved all targets set by the CQC for 2017/2018 and as this is a 2 year CQUIN it will be carried forward as a priority for 2018/2019.

Patient Safety

We will continue to provide a safe environment for patients of Winfield Hospital. This will be a high priority for us with the introduction of the National safety standards for invasive procedures (NatSSIPs) document from NHS England.

This document outlines 5 generic standards and 8 sequential standards which have been adapted by Ramsay Healthcare to produce local SOPs. One of these SOP's involves the introduction of a List Safety Officer for any list of interventional procedures taking place in theatre, outpatients and radiology. The list safety officer is responsible for ensuring all safety checks are carried out and are empowered to stop the list if any discrepancies or issues arise as a result of the WHO safety checks.

This has been implemented in theatre, radiology and outpatients and will be closely monitored through monthly audits.

This is now operational in theatre, radiology and outpatients and audits have shown it has integrated in standard practice.

2.1.2 Clinical Priorities for 2018/19 (looking forward)

Patient Experience

We will continue to ensure our customers receive an excellent level of care and a positive experience when visiting Winfield hospital.

This will be monitored through the Friends and Family Test and the Patient Satisfaction survey.

We will carry forward this priority from last year and will continue to focus on improving the response rate of both the Friends and Family Test and the Patient Satisfaction survey.

This will be achieved through increased awareness of the importance of the survey results by Winfield staff and promotion of the surveys to patients.

The Winfield Patient Focus Group has expanded during 2017/2018 and has proved a valuable resource in improving the overall patient experience. Obtaining and utilising this information for the benefit of the hospital and all service users will remain a focus for 2018/2019.

Clinical Effectiveness

We will continue focus on the CQUIN for improving staff health and wellbeing having achieved 100% for 2017/2018. This is a 2 year CQUIN with increased targets for 2018/2019 relating to reducing staff sickness, providing healthy food options and the uptake of the flu vaccination.

To improve our clinical effectiveness we will also focus on the clinical audit programme aiming to gather information on important clinical processes, evaluate existing controls and form action plans. This will be achieved by a raised awareness of the audit programme with results and action plans discussed at regular clinical meetings and actions assigned to relevant department heads.

Patient Safety

Ramsay Healthcare are introducing a new safety programme called Speaking up for Safety. We are very keen to promote this new initiative and include it in our core values. This will be the primary safety related focus for Winfield Hospital for 2018/2019.

The concept is that staff can use the Safety C.O.D.E. to help prevent unintended patient harm. It is a system that will help us:

1. Achieve culture change by increasing the ease and motivation for all staff to feel safe to 'speak up for safety'
2. Develop insights and skills to respectfully raise issues with colleagues when concerned about a patient's safety

It will provide a framework for staff to safely challenge clinical behaviour using the C.O.D.E. process.

2.2 Mandatory Statements

The following section contains the mandatory statements common to all Quality Accounts as required by the regulations set out by the Department of Health.

2.2.1 Review of Services

During 2017/18 the Winfield hospital provided and/or subcontracted 20,381 NHS services.

The Winfield hospital has reviewed all the data available to them on the quality of care in 100% of these NHS services.

The income generated by the NHS services reviewed in 1 April 2017 to 31st March 18 represents 100 per cent of the total income generated from the provision of NHS services by the Winfield hospital for 1 April 2017 to 31st March 18

Ramsay uses a balanced scorecard approach to give an overview of audit results across the critical areas of patient care. The indicators on the Ramsay scorecard are reviewed each year. The scorecard is reviewed each quarter by the hospitals senior managers together with Regional and Corporate Senior Managers and Directors. The balanced scorecard approach has been an extremely successful tool in helping us benchmark against other hospitals and identifying key areas for improvement.

In the period for 2017/18, the indicators on the scorecard which affect patient safety and quality were:

HUMAN RESOURCES	
Staff Costs as % Net Revenue	21.95%
HCA Hours as % of Total Nursing	23.88%
Agency Costs as % of Total Clinical Staff Costs	11.92%
Ward Hours PPD	5.07
% Staff Turnover rolling 12 month	16.5%
% Sickness rolling 12 months	5.02%
% Lost time (includes annual leave, study leave and sick leave)	20.52%
Appraisal %	45%
Number of Significant Staff Injuries	0
PATIENT	
Formal Complaints per 1000 HPDs	4.85
Patient Satisfaction Score	96.3%
Significant Clinical Events per 1000 Admissions	1.07
Readmission per 1000 Admissions	3.2
QUALITY	
Workplace Health and Safety Score	89%
Environmental audit	91%
Mandatory training compliance (face to face)	72%
Infection control audits:	
Hand hygiene	100%
Surgical Site Infection	92%
Urinary Cather Care	81%
Cannula	50%

2.2.2 Participation in clinical audit

During 1 April 2017 to 31st March 2018 Winfield Hospital participated in 100% of relevant national clinical audits and was not eligible to participate in any national confidential enquiries.

The national clinical audits that Winfield Hospital participated in, and for which data collection was completed during 1 April 2017 to 31st March 2018, are listed below alongside the number of cases submitted to each audit or enquiry as a

percentage of the number of registered cases required by the terms of that audit or enquiry.

Name of audit / Clinical Outcome Review Programme	% cases submitted
National Joint Registry (NJR)	100%

The reports of both national clinical audits from 1 April 2017 to 31st March 2018 were reviewed by the Clinical Governance Committee and Winfield hospital intends to continue with our excellent submissions to NJR to improve the quality of healthcare provided.

Winfield Hospital is also actively supports data entry via the Breast Implant Registry.

Local Audits

The reports of 73 clinical audits from 1 April 2017 to 31st March 2018 were reviewed by the Clinical Governance Committee and Winfield hospital intends to take the following actions to improve the quality of healthcare provided. The clinical audit schedule can be found in Appendix 2.

The clinical audits for this year have been more detailed and relevant to the Hospital. The majority of the audits have included detailed action plans for areas requiring improvement. The accuracy and completeness of medical records remains a focus and we have made progress towards a single patient record. The electronic patient record introduced by Ramsay Healthcare has been delayed due to issues at pilot sites and is hopefully due to be launched in 2018. A new system for tracking private prescription was also introduced in 2017 consultant compliance has been variable and will continue to be audited and monitored. We are now monitoring the temperature of patients own medication stored in their rooms. The effectiveness of this implementation will be closely audited.

2.2.3 Participation in Research

There were no patients recruited during 2017/18 to participate in research approved by a research ethics committee.

2.2.4 Goals agreed with our Commissioners using the CQUIN (Commissioning for Quality and Innovation) Framework

A proportion of Winfield Hospital's income in from 1 April 2017 to 31st March 2018 was conditional on achieving quality improvement and innovation goals agreed Winfield Hospital and any person or body they entered into a contract, agreement or arrangement with for the provision of NHS services, through the Commissioning for Quality and Innovation payment framework.

Our CQUIN for 2017/218 and 2018/2019 is the first of the national CQUINs - Improving staff health and wellbeing. This includes general health and wellbeing, healthy eating and flu vaccinations. We achieved 100% for 2017/2018.

2.2.5 Statements from the Care Quality Commission (CQC)

Winfield Hospital is required to register with the Care Quality Commission and its current registration status on 31st March is registered without conditions/registered with conditions.

Winfield Hospital has not participated in any special reviews or investigations by the CQC during the reporting period.

2.2.6 Data Quality

Statement on relevance of Data Quality and your actions to improve your Data Quality

Winfield Hospital will be taking the following actions to improve data quality.

Medical records audits continue to be carried out on a monthly basis including action plans with actions allocated to relevant committees. Actions relating to medical/ anaesthetic records are escalated to the medical advisory committee.

Statistical data is used on a regular basis to measure performance, inform clinical decisions and improvement strategies.

We use quality control measures to improve the quality of our data.

NHS Number and General Medical Practice Code Validity

The Ramsay Group submitted records during 2015/16 to the Secondary Users Service for inclusion in the Hospital Episode Statistics which are included in the latest published data. The percentage of records in the published data included:

The patient's valid NHS number:

- 99.98% for admitted patient care;
- 99.96% for outpatient care; and
- Accident and emergency care N/A (as not undertaken at Ramsay hospitals).

The General Medical Practice Code:

- 100% for admitted patient care;
- 99.99% for outpatient care; and
- Accident and emergency care N/A (as not undertaken at Ramsay hospitals).

Information Governance Toolkit attainment levels

Ramsay Group Information Governance Assessment Report score overall for 2017/18 was 83% and was graded 'green' (satisfactory).

Assessment	Stage	Overall Score	Self-assessed Grade ?	Reviewed Grade ?	Reason for Change of Grade ?
Version 14.1 (2017-2018)	Published	83%	Satisfactory	n/a	n/a

This information is publicly available on the DH Information Governance Toolkit website at:

<https://www.igt.hscic.gov.uk>

Clinical coding error rate

Winfield Hospital was not subject to the Payment by Results clinical coding audit during 2017/18 by the Audit Commission.

Part 3: Review of quality performance 2017/2018

Statements of quality delivery

Clinical Manager & Matron, Michael Harris

Review of quality performance 1st April 2017 - 31st March 2018

Introduction

“This publication marks the eighth successive year since the first edition of Ramsay Quality Accounts. Through each year, month on month, we analyse our performance on many levels, we reflect on the valuable feedback we receive from our patients about the outcomes of their treatment and also reflect on professional opinion received from our doctors, our clinical staff, regulators and commissioners. We listen where concerns or suggestions have been raised and, in this account, we have set out our track record as well as our plan for more improvements in the coming year. This is a discipline we vigorously support, always driving this cycle of continuous improvement in our hospitals and addressing public concern about standards in healthcare, be these about our commitments to providing compassionate patient care, assurance about patient privacy and dignity, hospital safety and good outcomes of treatment. We believe in being open and honest where outcomes and experience fail to meet patient expectation so we take action, learn, improve and implement the change and deliver great care and optimum experience for our patients.”

*Vivienne Heckford
Director of Clinical Services
Ramsay Health Care UK*

Ramsay Clinical Governance Framework 2018

The aim of clinical governance is to ensure that Ramsay develop ways of working which assure that the quality of patient care is central to the business of the organisation.

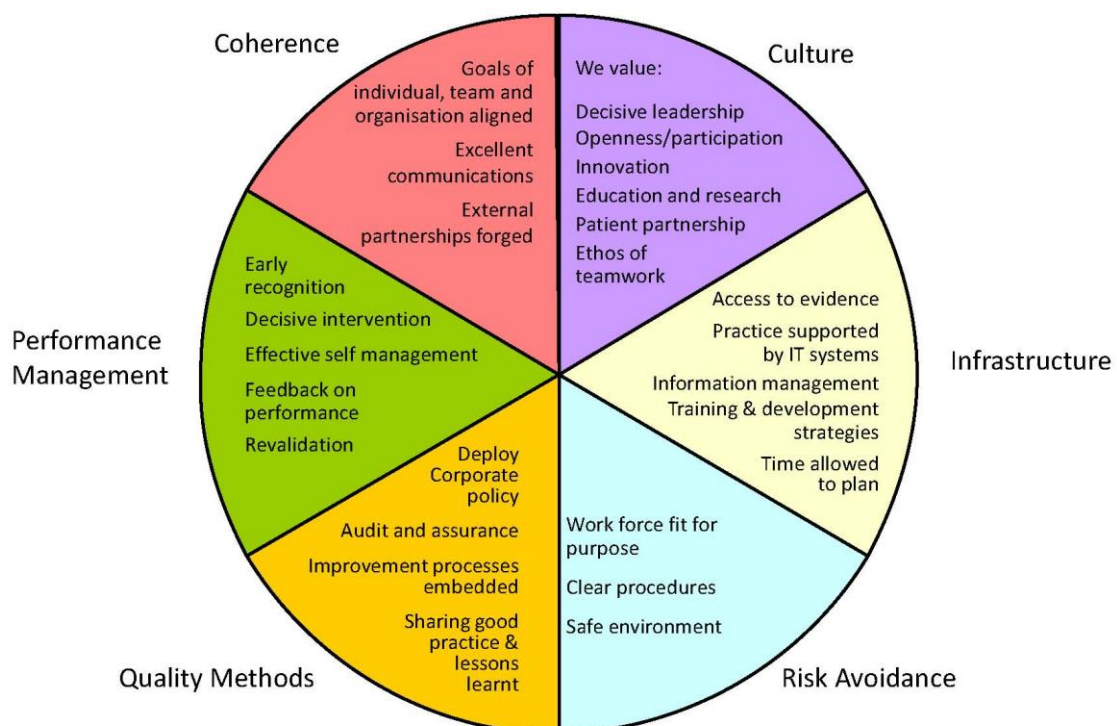
The emphasis is on providing an environment and culture to support continuous clinical quality improvement so that patients receive safe and effective care, clinicians are enabled to provide that care and the organisation can satisfy itself that we are doing the right things in the right way.

It is important that Clinical Governance is integrated into other governance systems in the organisation and should not be seen as a “stand-alone” activity. All management systems, clinical, financial, estates etc, are inter-dependent with actions in one area impacting on others.

Several models have been devised to include all the elements of Clinical Governance to provide a framework for ensuring that it is embedded, implemented and can be monitored in an organisation. In developing this framework for Ramsay Health Care UK we have gone back to the original Scally and Donaldson paper (1998) as we believe that it is a model that allows coverage and inclusion of all the necessary strategies, policies, systems and processes for effective Clinical Governance. The domains of this model are:

- Infrastructure
- Culture
- Quality methods
- Poor performance
- Risk avoidance
- Coherence

Ramsay Health Care Clinical Governance Framework



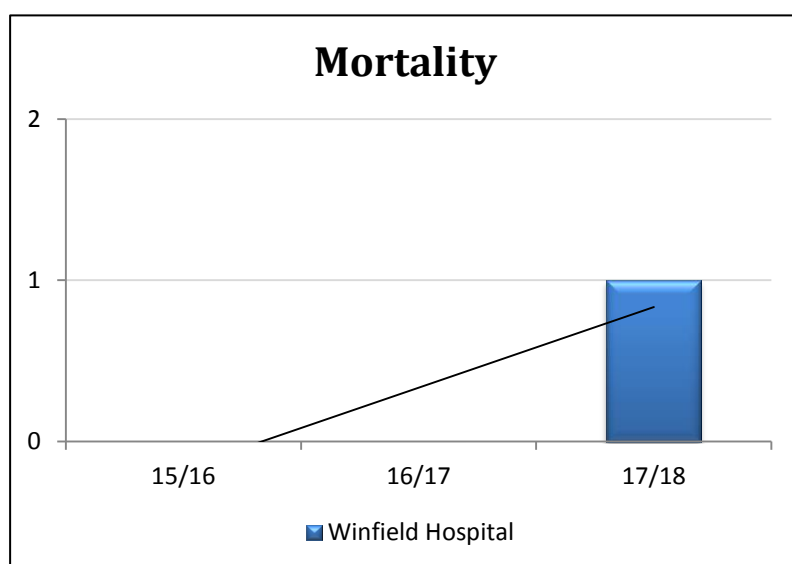
National Guidance

Ramsay also complies with the recommendations contained in technology appraisals issued by the National Institute for Health and Clinical Excellence (NICE) and Safety Alerts as issued by the NHS Commissioning Board Special Health Authority.

Ramsay has systems in place for scrutinising all national clinical guidance and selecting those that are applicable to our business and thereafter monitoring their implementation.

3.1 The Core Quality Account indicators

Mortality



Period	Best		Worst		Average		Period	Winfield	
Jul 16 - Jun 17	RKE	0.7261	RLQ	1.23	Average	1	2016/17	NVC22	0
Oct 15 - Sep 16	RKE	0.727	RLQ	1.25	Average	1	2017/18	NVC22	0.0001702

Winfield hospital considers that this data is as described for the following reasons.

There has been one post discharge death during this reporting period.

Winfield hospital intends to take the following actions to improve this rate and so the quality of its services,

A full root cause analysis was completed and the learning is outlined in 3.3.2 Learning from Deaths. These actions have been fully implemented and integrated in standard practices.

PROMS - Hernia

Period	Best		Worst		Average		Period	Winfield	
Apr15 - Mar16	NT438	0.157	RVW	0.021	Eng	0.088	Apr15 - Mar16	NVC22	0.111
Apr16 - Mar 17	RD3	0.135	RXL	0.006	Eng	0.086	Apr16 - Mar 17	NVC22	0.123

Winfield hospital considers that this data is as described for the following reasons.

Our patients reported good outcomes for the period April 2016 – March 2017.

Winfield hospital intends to take the following actions to improve this rate and so the quality of its services,

By continuing to submit all patient data to PROMS.

PROMS - Veins

Period	Best		Worst		Average		Period	Winfield	
Apr15 - Mar16	RTH	3.060	RTE	-18.020	Eng	-8.597	Apr15 - Mar16	NVC22	
Apr16 - Mar 17	RBN	2.117	RCF	-18.076	Eng	-8.248	Apr16 - Mar 17	NVC22	no data

Winfield hospital considers that this data is as described for the following reasons.

Our patient numbers are too small to participate.

Winfield hospital intends to take the following actions to improve this rate and so the quality of its services,

It is unlikely that we will increase our submission rates as it is unlikely that the patient numbers will significantly increase during the next financial year.

PROMS – Hip

Period	Best		Worst		Average		Period	Winfield	
Apr15 - Mar16	RYJ	24.973	RBK	16.892	Eng	21.617	Apr15 - Mar16	NVC22	20.644
Apr16 - Mar 17	NTPH1	25.068	RAP	16.427	Eng	21.799	Apr16 - Mar 17	NVC22	20.560

Winfield hospital considers that this data is as described for the following reasons.

Our patients report good outcomes following hip surgery and the completion of questionnaires is encouraged. We have a robust system in place to ensure completed questionnaires are completed. Our adjusted health gain is lower than the national average because our patients report a better preoperative condition.

Winfield hospital intends to take the following actions to improve this rate and so the quality of its services,

We will increase our patients understanding of the importance of measuring outcome measures as a quality tool for patient choice.

PROMS – Knee

Period	Best		Worst		Average		Period	Winfield	
Apr15 - Mar16	NTPH1	19.920	RQX	11.960	Eng	16.368	Apr15 - Mar16	NVC22	14.968
Apr16 - Mar 17	NTPH1	19.849	RAN	12.508	Eng	16.547	Apr16 - Mar 17	NVC22	18.275

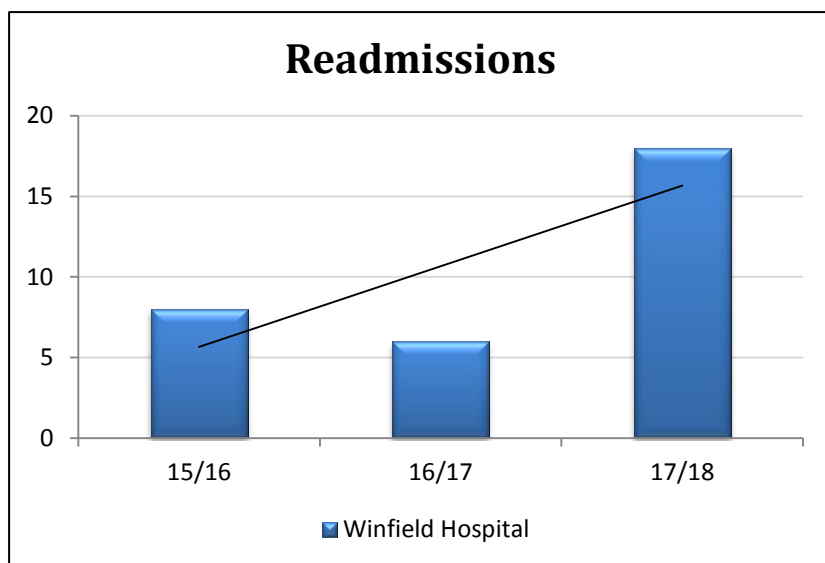
Winfield hospital considers that this data is as described for the following reasons.

Our patients report good outcomes following knee surgery and the completion of questionnaires is encouraged. We have a robust system in place to ensure completed questionnaires are completed. As with hip outcomes our adjusted health gain is lower than the national average because our patients report a better preoperative condition.

Winfield hospital intends to take the following actions to improve this rate and so the quality of its services,

We will increase our patients understanding of the importance of measuring outcome measures as a quality tool for patient choice.

Readmissions



Period	Best		Worst		Average		Period	Winfield	
2010/11	Multiple	0.0	SP5	22.76	Eng	11.43	2016/17	NVC22	0.0030644
2011/12	Multiple	0.0	SNL	41.65	Eng	11.45	2016/17	NVC22	0.000978

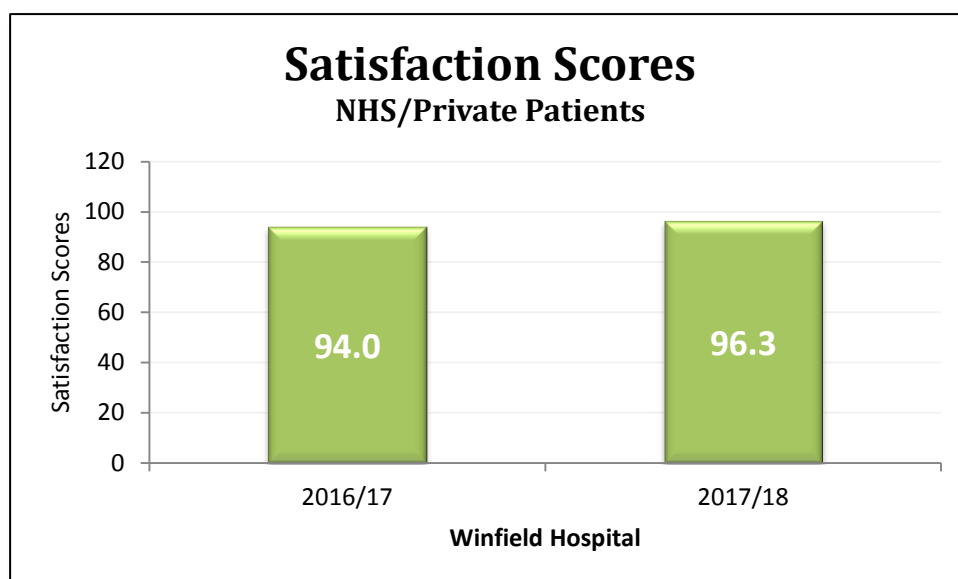
Winfield hospital considers that this data is as described for the following reasons.

Our readmission rate this year has been increased due to an increased infection reporting.

Winfield hospital intends to take the following actions to improve this rate and so the quality of its services,

Readmissions will continue to be monitored through clinical governance and the medical advisory committee.

Responsive to personal needs



Period	Best		Worst		Average		Period	Winfield	
2012/13	RPC	88.2	RJ6	68.0	Eng	76.5	2013/14	NVC22	91.6
2013/14	RPY	87.0	RJ6	67.1	Eng	76.9	2014/15	NVC22	91.6

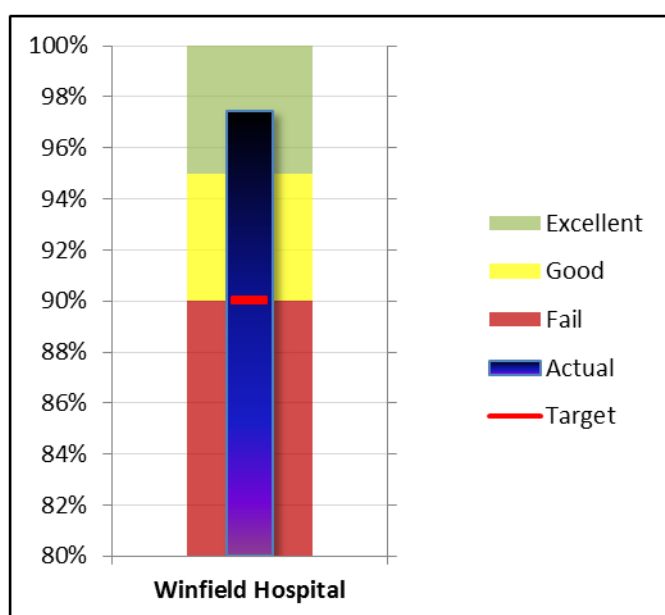
Winfield hospital considers that this data is as described for the following reasons.

This data is no longer collected so figures in chart are for previous financial year. The patient satisfaction graph demonstrates that patient satisfaction scores have continued to grow. These results demonstrate the excellent customer service and patient care we provide.

Winfield hospital intends to take the following actions to improve this rate and so the quality of its services,

We will continue to monitor patient satisfaction on a monthly basis and discuss trends at clinical governance meetings.

VTE assessment



Period	Best		Worst		Average		Period	Winfield	
16/17 Q3	Several	100%	NT490	65.9%	Eng	95.6%	Q3 2016/17	NVC22	97.7%
16/17 Q4	Several	100%	NT414	60.8%	Eng	95.6%	Q4 2016/17	NVC22	93.4%

Winfield hospital considers that this data is as described for the following reasons.

Our VTE assessment rates are above average for quarter 3 but have slightly dipped below average for quarter 4, as a result VTE risk assessment has been made a mandatory part of the patient journey and a focus to improve scores to above average going forward.

Winfield hospital intends to take the following actions to improve this rate and so the quality of its services,

Clinical audits of VTE assessments and compliance rates will continue and with discussions at the relevant clinical meetings. Weekly reports will be run to identify any omissions so they can be addressed immediately.

C difficile infection rate

Period	Best		Worst		Average		Period	Winfield	
2015/16	Several	0	RPY	67.2	Eng	14.92	2016/17	NVC22	0.0
2016/17	Several	0	RPY	82.7	Eng	13.19	2017/18	NVC22	0.0

Winfield hospital considers that this data is as described for the following reasons.

We have comprehensive records of infection prevention and control assessments and regular meetings.

Winfield hospital intends to take the following actions to improve this rate and so the quality of its services,

We will ensure that the principles of good infection control and hand hygiene remain paramount to our patient care. Visitors and patients will also be made aware of these principles and hand gel stations are located throughout the hospital and their use encouraged.

Patient safety incident rate

Period	Best		Worst		Average		Period	Winfield	
Oct 16 - Mar 17	Several	0.01	RNQ	0.53	Eng	0.15	2016/17	NVC22	0.00
April 17 - Sep 17	Several	0	RJW	0.64	Eng	14.85	2017/18	NVC22	0.00

Winfield hospital considers that this data is as described for the following reasons.

Optimal fitness for the planned procedure is ensured through our pre assessment and admission risk assessments. Risks identified are assessment by the nursing staff with consultant involvement.

Winfield hospital intends to take the following actions to improve this rate and so the quality of its services,

Any patient safety incidents will be monitored through risk management and clinical governance and will be subject to a full root cause analysis investigation.

Friends and Family test

Period	Best		Worst		Average		Period	Winfield	
Feb-18	Several	100%	J731/RTFD	63.0%	Eng	96.0%	Feb-18	NVC22	100.0%
Mar-18	Several	100%	R1H13	83.0%	Eng	96.0%	Mar-18	NVC22	98.6%

Winfield hospital considers that this data is as described for the following reasons.

Customer service is a priority for us and patients are actively encouraged to provide feedback through the Friends and Family test.

Winfield hospital intends to take the following actions to improve this rate and so the quality of its services,

We will continue to maintain our high standards of customer service by maintaining staff training in this area and monitor friends and family responses on a monthly basis.

3.2 Patient safety

We are a progressive hospital and focussed on stretching our performance every year and in all performance respects, and certainly in regards to our track record for patient safety.

Risks to patient safety come to light through a number of routes including routine audit, complaints, litigation, adverse incident reporting and raising concerns but more routinely from tracking trends in performance indicators.

Our focus on patient safety has resulted in a marked improvement in a number of key indicators as illustrated in the graphs below.

3.2.1 Infection prevention and control

Winfield hospital has a very low rate of hospital acquired infection and has had 2 reported MRSA Bacteraemia in the past 3 years. Both of these infections were post discharge and were found to be as a result of poor patient compliance.

We comply with mandatory reporting of all Alert organisms including MSSA/MRSA Bacteraemia and Clostridium Difficile infections with a programme to reduce incidents year on year.

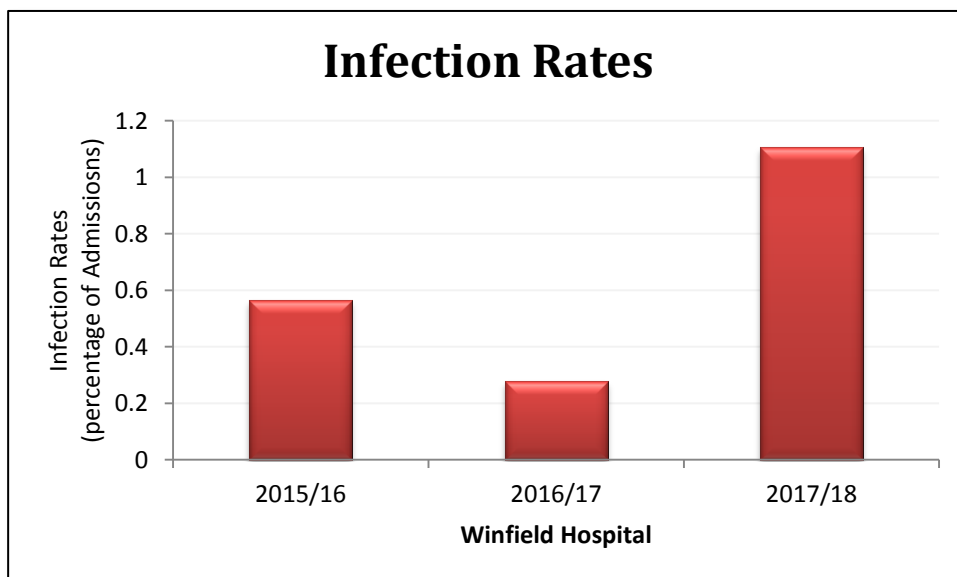
Ramsay participates in mandatory surveillance of surgical site infections for orthopaedic joint surgery and these are also monitored.

Infection Prevention and Control management is very active within our hospital. An annual strategy is developed by a Corporate level Infection Prevention and Control (IPC) Committee and group policy is revised and re-deployed every two years. Our IPC programmes are designed to bring about improvements in performance and in practice year on year.

A network of specialist nurses and infection control link nurses operate across the Ramsay organisation to support good networking and clinical practice.

Programmes and activities within our hospital include:

- Regular infection control meetings.
- Mandatory training for all staff on hand hygiene and infection control completed annually.
- Excellent links with our local NHS trust.
- Monthly audits of our environment by either clinical or housekeeping measures.
- Monthly infection prevention and control audits.
- Training in aseptic non touch techniques.
- Annual hospital infection control plan.
- Annual infection control report.



Our infection rate has increased for the year 2017/18 due to the appointment of a dedicated infection control lead and more robust reporting processes. Thorough

investigations have been completed where indicated and identified recommendations actioned.

3.2.2 Cleanliness and hospital hygiene

Assessments of safe healthcare environments also include **Patient-Led Assessments of the Care Environment (PLACE)**

PLACE assessments occur annually at Winfield Hospital, providing us with a patient's eye view of the buildings, facilities and food we offer, giving us a clear picture of how the people who use our hospital see it and how it can be improved.

The main purpose of a PLACE assessment is to get the patient view.

	WINFIELD HOSPITAL	NATIONAL AVERAGE
Cleanliness	99.4%	98.4%
Food	96.1%	89.7%
Privacy and Dignity	82.1%	83.7%
Facilities	85.1%	94%
Dementia	80.1%	76.7%
Disability	79.8%	82.6%

3.2.3 Safety in the workplace

Safety hazards in hospitals are diverse ranging from the risk of slip, trip or fall to incidents around sharps and needles. As a result, ensuring our staff have high awareness of safety has been a foundation for our overall risk management programme and this awareness then naturally extends to safeguarding patient safety. Our record in workplace safety as illustrated by Accidents per 1000 Admissions demonstrates the results of safety training and local safety initiatives.

Effective and ongoing communication of key safety messages is important in healthcare. Multiple updates relating to drugs and equipment are received every month and these are sent in a timely way via an electronic system called the Ramsay Central Alert System (CAS). Safety alerts, medicine / device recalls and new and revised policies are cascaded in this way to our General Manager which ensures we keep up to date with all safety issues.

Adverse events both clinical and non-clinical are recorded and monitored through our risk management system RISKMAN. Specific reports generated by this system are reviewed at Health and Safety, Clinical governance, Medical advisory committee and departmental meetings.

All incidents are investigated by Heads of Departments and a comprehensive root cause analysis completed along with an action plan and identification of lessons learnt.

The hospital has a business continuity plan which is reviewed annually. This plan covers all areas of potential hazards which could affect patient, staff and building security.

Staff receive training on risk assessment, manual handling, and fire safety on an annual basis.

Annual health and safety plans are written and shared throughout the hospital.

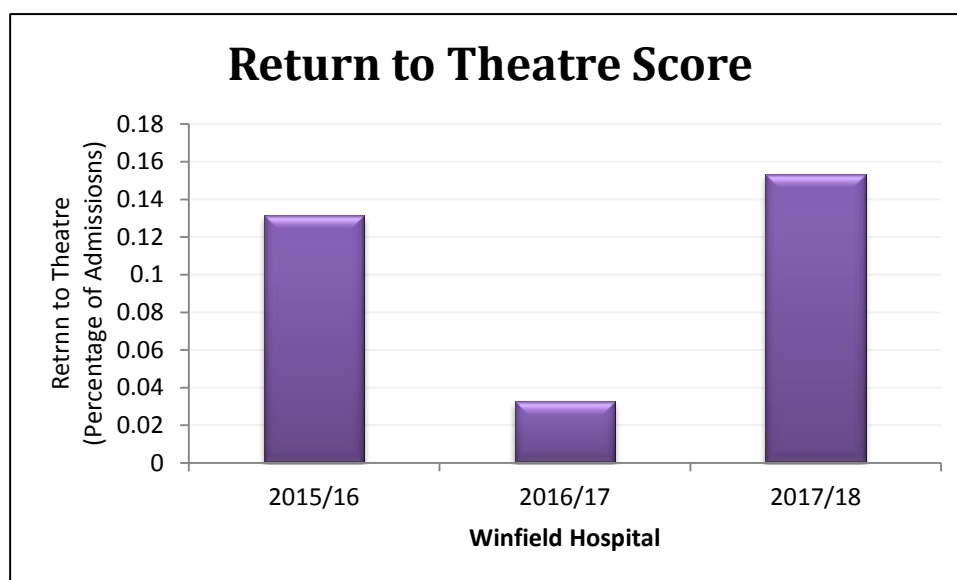
3.3 Clinical effectiveness

Winfield Hospital has a Clinical Governance team and committee that meet regularly through the year to monitor quality and effectiveness of care. Clinical incidents, patient and staff feedback are systematically reviewed to determine any trend that requires further analysis or investigation. More importantly, recommendations for action and improvement are presented to hospital management and medical advisory committees to ensure results are visible and tied into actions required by the organisation as a whole.

3.3.1 Return to theatre

Ramsay is treating significantly higher numbers of patients every year as our services grow. The majority of our patients undergo planned surgical procedures and so monitoring numbers of patients that require a return to theatre for supplementary treatment is an important measure. Every surgical intervention

carries a risk of complication so some incidence of returns to theatre is normal. The value of the measurement is to detect trends that emerge in relation to a specific operation or specific surgical team. Ramsay's rate of return is very low consistent with our track record of successful clinical outcomes.



The return to theatre rate for Winfield hospital has increased this year due to the identified increased infection rate. 4 out of the total 9 reoperations were due to infections with the remaining 5 as a result of routine complications of surgery.

3.3.2 Learning from Deaths

Winfield Hospital had 1 unexpected death 2017/2018 which occurred soon after discharge to a community bed. This was fully investigated and a root cause analysis was completed. It was concluded that although the outcome could not have been prevented there were a number of learning points involving Winfield Hospital and other organisations. The root cause analysis produced 12 recommendations which were mainly related to communication and processes within Winfield and also involving the pathology laboratory.

Summary of RCA

More patient information required for pre assessment. The pre assessment process is under review currently and we are working towards a single patient

record which would be available at pre assessment. A GP referral letter has been requested to be made available for the pre assessment team in the meantime.

Blood results not followed up by Winfield staff and not telephoned by GHNHST lab staff. The SLA with the lab has been reviewed and they are phoning all Trop T results regardless of normal or abnormal results. Handovers between RMO's have been improved and a handover sheet has been implemented as a tool to document the handover and aid a verbal handover. An SOP has been written defining the process for requesting and obtaining blood results.

Failure in communication by RMO and nursing staff to Surgeon. This has been addressed with the RMO's through RMO International and a change of RMO has taken place as a result. Ward and pre assessment staff have been made aware of the importance of communicating any concerns with the admitting consultant as soon as possible.

No documented evidence of post op visits by surgeon or anaesthetist. NMC standards of documentation have been reissued to all nursing staff and the documentation of post op visits by consultants was discussed at MAC.

Failure to delay a transfer to a community bed until the patient had been assessed by the surgeon or anaesthetist. With improved communication between nursing staff and consultants this situation should be resolved going forward.

3.3.3 Priority Clinical Standards for Seven Day Hospital Services

Consultants are on call for their patients for the duration of their stay at Winfield Hospital. If during that time they required any intervention or treatment that we were unable to provide, the patient would be transferred to the local trust for ongoing management.

We do not admit emergency patients or treat high dependant patients at this hospital.

Diagnostic services are available on an on call basis out of hours. We have a process in place and a service level agreement with the local trust for any bloods or specimens taken out of hours.

Comprehensive handovers between ward nursing staff happen 3 times a day on the ward, morning, early afternoon and evening.

Patients are given adequate information to enable them to make informed decisions about their care and are consistently treated with dignity, care and compassion seven days per week.

3.4 Patient experience

All feedback from patients regarding their experiences with Ramsay Health Care are welcomed and inform service development in various ways dependent on the type of experience (both positive and negative) and action required to address them.

All positive feedback is relayed to the relevant staff to reinforce good practice and behaviour – letters and cards are displayed for staff to see in staff rooms and notice boards. Managers ensure that positive feedback from patients is recognised and any individuals mentioned are praised accordingly.

All negative feedback or suggestions for improvement are also feedback to the relevant staff using direct feedback. All staff are aware of our complaints procedures should our patients be unhappy with any aspect of their care.

Patient experiences are feedback via the various methods below, and are regular agenda items on Local Governance Committees for discussion, trend analysis and further action where necessary. Escalation and further reporting to Ramsay Corporate and DH bodies occurs as required and according to Ramsay and DH policy.

Feedback regarding the patient's experience is encouraged in various ways via:

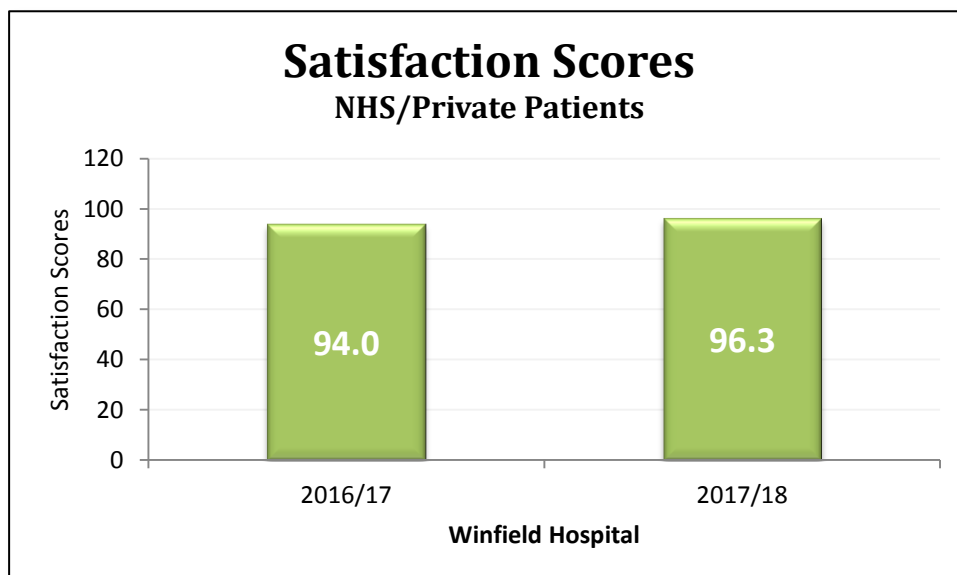
- Continuous patient satisfaction feedback via a web based invitation
- Hot alerts received within 48hrs of a patient making a comment on their web survey
- Yearly CQC patient surveys
- Friends and family questions asked on patient discharge
- 'We value your opinion' leaflet
- Verbal feedback to Ramsay staff - including Consultants, Matrons/General Managers whilst visiting patients and Provider/CQC visit feedback.
- Written feedback via letters/emails
- Patient focus groups
- PROMs surveys

- Care pathways – patient are encouraged to read and participate in their plan of care

3.4.1 Patient Satisfaction Surveys

Our patient satisfaction surveys are managed by a third party company called 'Qa Research'. This is to ensure our results are managed completely independently of the hospital so we receive a true reflection of our patient's views.

Every patient is asked their consent to receive an electronic survey or phone call following their discharge from the hospital. The results from the questions asked are used to influence the way the hospital seeks to improve its services. Any text comments made by patients on their survey are sent as 'hot alerts' to the Hospital Manager within 48hrs of receiving them so that a response can be made to the patient as soon as possible.



As can be seen in the above graph our Patient Satisfaction rate has remained at a high level and this has been consistent for a number of years.

Services covered by this quality account

Winfield Hospital



Winfield Hospital has 39 beds. Three theatres all with laminar flow – endoscopy procedures are performed within a dedicated theatre.

On site facilities include, Radiology, Physiotherapy, Mobile MRI/CT, Pharmacy.

Winfield Hospital is located on the outskirts of the City of Gloucester. Winfield is equipped to cover a wide range of diagnostic and treatment services within its X ray and Outpatient departments, including a mobile MRI and CT service, physiotherapy on site and at Richmond Village Care Home, Painswick), The main specialty is Orthopaedic Surgery with 13 Consultants who all sub specialise.

We work with a dedicated Team of Nurses and Consultants with regular reviews through the CEC and MAC Committee's.

Location: Winfield Hospital, Tewkesbury Road, Longford, Gloucester, GL2 9WH

Tel: 01452 331111

Registered Manager: Kathie Rimmer

kathie.rimmer@ramsayhealth.co.uk

	Services Provided	Peoples Needs Met for:
Treatment of Disease, Disorder Or injury	<ul style="list-style-type: none"> Cardiology, Chiropody and podiatry, Cosmetics, Dermatology, Ear, nose and throat (ENT), Elderly care, Endocrinology, Gastroenterology, General medicine, Genito-urinary medicine, Gynaecology, Neurology, Ophthalmology, Orthopaedic medicine, Pain management, Paediatric medicine, Psychology, Physiotherapy (with Winfield Hospital patients and at Richmond Village Care Home, Painswick), Rheumatology, Sports medicine, Urology, Weight loss 	All adults
Surgical Procedures	Ambulatory, Day and Inpatient Surgery, Colorectal, Cosmetics/plastics, Ear, Nose and Throat (ENT), Gastrointestinal, General surgery, Gynaecology, Neurology, Ophthalmic, Oral maxillofacial, Orthopaedic, Urology	All adults <ul style="list-style-type: none"> Patients with blood disorders (haemophilia, sickle cell, thalassaemia) Patients on renal dialysis Patients with history of malignant hyperpyrexia Planned surgery patients with positive MRSA screen are deferred until negative Patients who are likely to need ventilatory support post operatively Patients who are above a stable ASA 3. Any patient who will require planned admission to ITU post surgery Dyspnoea grade 3/4 (marked dyspnoea on mild exertion e.g. from kitchen to bathroom or dyspnoea at rest) Poorly controlled asthma (needing oral steroids or has had frequent hospital admissions within last 3 months) MI in last 6 months Angina classification 3/4 (limitations on normal activity e.g. 1 flight of stairs or angina at rest) CVA in last 6 months BMI > 35 (individual cases will be reviewed by an anaesthetist) <p>All patients will be individually assessed and we will only exclude patients if we are unable to provide an appropriate and safe clinical environment.</p>
Diagnostic and screening	GI physiology, Imaging services	All adults 18 yrs and over

Appendix 2 – Clinical Audit Programme 2017/18. Findings from the baseline audits will determine the hospital local audit programme to be developed for the remainder of the year.

Audit Programme v10.0 2017/18												
Hospital Name:												
Authors: S. Harvey / A. Hemming-Allen / S. Needham / N. Carre / A. McDonald												
Use arrow symbol to locate required audit												
	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
Medical Records - POA, admission, theatre, discharge	Med Rec	→	→	→	→	→	→	→	→	→	→	→
Patient Journey	Patie Journey	→	→	→	→	→	→	→	→	→	→	→
Ward	Ward Operational	→	→	→	→	→	→	→	→	→	→	→
Outpatients	OPD M Rec	→	→	→	→	→	→	→	→	→	→	→
Outpatients	OPD Operational	→	→	→	→	→	→	→	→	→	→	→
Controlled Drugs			Control Drugs	→	→	Control Drugs	→	→	Control Drugs	→	→	Control Drugs
Prescribing / Medicines Management				Medicine Management	→	→	→	→	→	Medicine Management	→	→
Medicine Safe and Secure	Safe & Secure	Safe & Secure	Safe & Secure	Safe & Secure	Safe & Secure	Safe & Secure	Safe & Secure	Safe & Secure	Safe & Secure	Safe & Secure	Safe & Secure	Safe & Secure
Medicine Medical Records	Med Recs	Med Recs	Med Recs	Med Recs	Med Recs	Med Recs	Med Recs	Med Recs	Med Recs	Med Recs	Med Recs	Med Recs
Medicine Missed Dose	Missed Dose	Missed Dose	Missed Dose	Missed Dose	Missed Dose	Missed Dose	Missed Dose	Missed Dose	Missed Dose	Missed Dose	Missed Dose	Missed Dose
Radiology	Med Rec	→	→	→	→	→	→	→	→	→	→	→
Radiology	Operational	→	→	→	→	→	→	→	→	→	→	→
Radiology - MRI / NRR		MRI Report	NRR	→	MRI Report	→	→	MRI Report	NRR	→	MRI Report	→
Radiology - CT		CT Report	→	→	CT Report	→	→	CT Report	→	→	CT Report	→
Physiotherapy	Med Rec	→	→	→	→	→	→	→	→	→	→	→
Physiotherapy	Operational	→	→	→	→	→	→	→	→	→	→	→
TSSU	Operational	→	→	→	→	→	→	→	→	→	→	→
Decontamination	TSSU	→	→	→	→	→	→	→	→	→	→	→
Decontamination	Endoscopy	→	→	→	→	→	→	→	→	→	→	→
Theatre	Operational	→	→	→	→	→	→	→	→	→	→	→
Theatre	Observation	→	→	→	→	→	→	→	→	→	→	→
Infection Prevention and Control*	Infect Control	→	→	→	→	→	→	→	→	→	→	→
IPC - CVCCB (if applicable)	CVCCB	→	→	→	→	→	→	→	→	→	→	→
IPC - Isolation (if applicable)	Isolation	→	→	→	→	→	→	→	→	→	→	→
Infection Prevention and Control*	Hand Hygiene	→	→	→	→	→	→	→	→	→	→	→
IPC - Hand Hygiene Action			Hand Hygiene Action	Hand Hygiene Action	Hand Hygiene Action	Hand Hygiene Action	Hand Hygiene Action	Hand Hygiene Action	Hand Hygiene Action	Hand Hygiene Action	Hand Hygiene Action	Hand Hygiene Action
IPC - Environmental	Environ	→	→	→	→	→	→	→	→	→	→	→
IPC - Cleaning Schedules	Clean Sched	Clean Sched	Clean Sched	Clean Sched	Clean Sched	Clean Sched	Clean Sched	Clean Sched	Clean Sched	Clean Sched	Clean Sched	Clean Sched
Transfusion (if applicable)	Compliance	→	→	→	→	→	→	→	→	→	→	→
Transfusion (if applicable)	Autologous	→	→	→	→	→	→	→	→	→	→	→
Bariatric Services (if applicable)	Bariatric Services	→	→	→	→	→	→	→	→	→	→	→
Childrens Services (if applicable)	Childrens Services	→	→	→	→	→	→	→	→	→	→	→



Traffic light score		
Green	95%*	
Amber	70% - 94%	
Red	69% and under	

* or above previous audit score if 95% or more, or s

Winfield Hospital

Ramsay Health Care UK

We would welcome any comments on the format, content or purpose of this Quality Account.

If you would like to comment or make any suggestions for the content of future reports, please telephone or write to the General Manager using the contact details below.

For further information please contact:

01452 331111

www.ramsayhealth.co.uk/hospitals/winfield-hospital