

Oaklands Hospital

Quality Account 2022/23



Ramsay
Health Care

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Welcome to Ramsay Health Care UK

Oaklands Hospital is part of the Ramsay Health Care Group

Statement from Nick Costa, Chief Executive Officer, Ramsay Health Care UK

Being part of a responsible, global healthcare provider widely respected for a strong reputation of delivering, safe, high quality, patient centred care with positive outcomes is something we are incredibly proud of in Ramsay Health Care UK.

Patients are confident when they come to one of our hospitals for treatment because we are unwavering in our commitment to maintaining the highest standards of clinical quality and providing exceptional care. We see this in our consistently high patient feedback, as well as achievements such as 95% of our endoscopy services being JAG accredited, Bupa recognition as a Breast Centre of Excellence in two of our hospitals providing cancer services, and an overall 97% record of our hospitals being rated as 'Good' by the Care Quality Commission.

We are committed to being a welcoming and supportive organisation for all people who come into contact with us and our services. We want to make sure that we are listening to the needs of our colleagues, teams, and patients in order to create an inclusive and diverse organisation that is known not only for its high-quality services and clinical outcomes, but also for its welcoming and supportive culture. We were thrilled to launch our People and Culture Forum in 2022, with representatives from across the organisation joining forces to make Ramsay a truly great place to work. I am personally delighted that this forum is co-chaired by a Consultant Orthopaedic Surgeon who has chosen to establish an independent practise with Ramsay and is committed to promoting Diversity, Equity, and Inclusion.

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 teamwork is the central foundation in meeting the expectations of our patients.

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



Nick Costa

Chief Executive Officer

Ramsay Health Care UK

Statement from Jo Dickson, Chief Clinical and Quality Officer, Ramsay Health Care UK

I joined Ramsay Health Care UK in December 2022, having previously worked in both the NHS and the independent sector. For me, the prospect of being clinically responsible for the services and care provided across all 34 hospitals in Ramsay UK's estate is both daunting and exciting. The extremely high standards that are expected of our clinical teams to deliver clinical services to our patients has allowed Ramsay to cultivate a strong reputation for providing excellent care with excellent outcomes.

Ramsay leads the industry by having implemented an electronic patient record across all hospital sites. With immediate access to patient records that are updated at the point of care, clinicians and staff can be confident that they have the most up-to-date information about the patient, giving confidence to both the team treating the patient and the individual receiving care. We have more plans for increasing the use of digital services to improve care in coming years.

I am looking forward as we continue this journey to support our ongoing commitment to providing high-quality health services to our patients, with continued investment and a focus on utilising digital systems to support the patient journey.



Jo Dickson

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Introduction to our Quality Account

This Quality Account is Oaklands 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.

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Part 1

1.1 Statement on quality from the Hospital Director

Mrs Margaret-Ann Worrell, Hospital Director

Oaklands Hospital

I am delighted to introduce our Quality Account for 2022/23 which demonstrates our commitment to delivering high quality care. The report focuses upon our performance over the last year and describes our priorities for the next year.

Our Vision is to be the preferred provider for patients.

I am very pleased to be able to state that due to the persistent focus on improving patient satisfaction and clinical outcomes, we have seen significant improvement in these key areas. Furthermore, by listening to our stakeholders and to our patient feedback, we have been able to identify areas of good practice and the areas to focus on to further improve patient care.

Whilst patient feedback and involvement is extremely important to us, we also rely heavily on other measures of safety and clinical effectiveness which we use to satisfy ourselves that treatment is evidence-based and delivered by appropriately qualified and experienced doctors, nurses and other key healthcare professionals. Further information on these measures and outcomes are evident throughout the Quality Account.

Our priorities for the coming year include ensuring continuous improvement, getting it right first time and putting patient safety at the heart of everything we do. Building upon the excellent joint working with commissioners and local trusts on quality initiatives is also a key priority for the hospital.

As Hospital Director of Oaklands Hospital, ensuring the delivery of high standards of clinical care for our patients remains my highest priority. The Quality Account is an accurate representation of our hospital's performance and outlines the ongoing initiatives to continuously improve the quality of services that we provide.



Margaret-Ann Worrell

Hospital Director, Oaklands Hospital

Ramsay Healthcare UK

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.

Mrs Margaret-Ann Worrell

Hospital Director

Oaklands Hospital

Ramsay Health Care UK

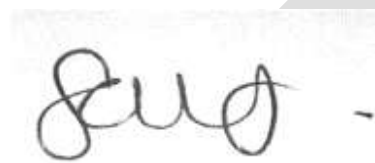
This report has been reviewed and approved by:

Mr Shailesh Agrawal- Consultant ENT Surgeon

Medical Advisory Committee Chair

Mrs Sarah Simpkin

Head of Clinical Services



Mrs Michelle Williamson

Associate Director – Quality and Safety (Salford)

NHS Greater Manchester Integrated Care

Welcome to Oaklands Hospital



Oaklands Hospital is one of Greater Manchester's leading private sector hospitals with an excellent reputation for delivering high quality healthcare treatments and services. Located in the heart of Salford, Oaklands is close to the A580 and the M602 motorway helping to ensure the hospital is accessible to those in all areas of the Greater Manchester region

and beyond.

The hospital opened in 1990 and in recent years has seen two large developments, which has expanded the hospital's size considerably.

At Oaklands, we offer care to patients aged 18 and over with a wide range of treatment specialities to both privately funded or self-pay patients. Oaklands has a close partnership with their neighbouring hospital, Salford Royal NHS Foundation Trust (SRFT) and with other trusts around the Greater Manchester area, which allows us to support the NHS and offer a range of treatments via NHS choose and book services.

The Hospital offers free car parking and is accessible for all patients.

Oaklands Hospital Facilities.

Oaklands Hospital has 25 single inpatient rooms all with ensuite facilities. There is an additional day surgery unit with 11 individual pods. There is WIFI connectivity available throughout the building.

There are three fully equipped ultra clean air theatres within Oaklands, all with laminar air flow technology and there is also a dedicated JAG accredited endoscopy theatre.

The Outpatient department consists of 7 consultation rooms with an additional 2 being developed, , 1 treatment room, 1 phlebotomy room and 2 pre-operative assessment rooms. At Oaklands, we were part of a Ramsay pilot scheme to introduce a Triage process into patient's pathway to determine suitability for site and any specific patient led investigations required. This triage also helps determine the type of pre-assessment required dependant on patient clinical presentation and procedure listed for. This triage assessment occurs directly from consultation when listed and this allows any patient deemed unsuitable for Oaklands to be referred into the NHS in a timely manner. This pilot was successful and Oaklands have been a driving force within this, and are currently supporting other Ramsay sites to implement the same pathway due to the successful implementation here.

We are able to provide a range of outpatient consultations for our patients including face to face, virtual or telephone appointments and are able to offer appointments at weekends and out of hours to support patients lifestyles. .

The Radiology department offers x-ray services for both inpatients and outpatients, ultrasound scanning and also provides a DEXA scanning service. Ramsay Healthcare Diagnostics UK (RDUK) provide both MRI and CT scanning services delivered via mobile units based within the hospital grounds. A business case is in development for the investment for static MR scan on site at Oaklands and has attracted a great deal of support from the Executive Board.

Oaklands Hospital provides physiotherapy services for pre and post-operative patients in both an inpatient and outpatient setting, and provides education, exercises and treatment modalities such as gait education, cryotherapy and respiratory techniques. The outpatient gym has a newly fitted incline treadmill, exercise bike, seated cross trainer and a selection of proprioceptive equipment and free weights.

A resident medical officer (RMO) is on site at all times to provide medical care at all times. They are able to contact the admitting consultants and anaesthetists with any concerns for support, advice and guidance in relation to patient treatment plans when required.

Visiting hours at Oaklands have been re-introduced following the COVID-19 pandemic. Visiting times are Monday to Friday 18:00hrs- 20:00hrs with extended hours at weekends and bank holidays 14:00hrs - 16:00hrs and 18:00hrs - 20:00hrs. All other COVID restrictions, such as staff testing and face coverings have been lifted.

Treatments and services

Oaklands Hospital has 124 consultants who work at the hospital to provide quality outpatient appointments, outpatient procedures, clinical investigations/diagnostics, surgery and follow-up care.

Oaklands Hospital offers the following specialty services to our patients;

- Orthopaedic
- General surgery
- Ear, Nose and Throat
- Gastroenterology
- Gynecology
- Urology
- Cardiology
- Dermatology
- Ophthalmology
- Bariatric/Weight loss
- Varicose Vein treatment

We also offer a range of cosmetic surgery at our hospital for self-paying patients.

The endoscopy service at Oaklands Hospital is accredited by the Joint Advisory Group on GI Endoscopy (JAG) and provides a full range of endoscopy services to both private and NHS patients.

During the last 12 months the hospital has treated 6,792 inpatients, of which 88% were treated under the care of the NHS.

Oaklands Hospital employs 151 substantive members of staff and has an extensive pool of bank staff to support the team.

Ramsay UK Consultant Pulse Survey Results 2023

Ramsay Health Care conducted its first global survey of Doctors working in its facilities across the territories where it operates in 2022. Despite a low response rate, this provided key areas of focus

in the UK. We committed to conducting a follow-up survey to assess our impact as part of our action planning, which focused on communication, visibility of our Executive and Senior Leaders, and engagement. In April 2023, Ramsay UK conducted a follow up pulse survey to assess the level of engagement and advocacy with our Doctors. Overall, 25% of the Consultant body completed the survey, which was a significant improvement over the previous year, and the results showed a positive response in terms of engagement and advocacy of Ramsay UK. More work is required to build on this, with an initial focus on Hospital Medical Advisory Committees and how to better support these important forums for Doctors' voices.

Nursing and medical care.

At Oaklands Hospital, all patients are allocated a 'named nurse' on each shift. The role of the named nurse is to provide coordinated care, support and personalised treatment in order to meet the patient's individual needs. The named nurse approach enables our patients to identify the nurse who is consistently responsible for their overall nursing care.

We have faced significant challenges at Oaklands in relation to staffing and recruitment. We have successfully managed to mitigate the risk by using a small number of agency staff where possible who are able to provide continuity for both patients and staff/

We have recently had a successful recruitment campaign and have secured and onboarded highly skilled staff who are currently being inducted into the facility. Ramsay have also commenced an International recruitment campaign and Oaklands were the first Ramsay site to secure 2 registered nurses and 1 operating department practitioner from India who are expected to join late summer 2023. In addition, we have recently welcomed a transfer from Ramsay Australia and have a physiotherapist due to leave the UK for a Ramsay Australia site highlighting the global reach Ramsay has.

We have a robust Governance framework which is supported by specialist committees with associated leads who are able to provide assurance of regulatory requirements.

These key governance and quality roles include:

Infection Prevention and Control Lead Nurse (IPCLN) ensures actions in the Infection Prevention and Control Annual Plan are completed. This is used to evidence compliance with requirements of the 'Health and Social Care Act 2008 – Code of Practice for Health and Adult Social Care on the

Prevention and Control of Infections', related guidance and 'Care Quality Commission Standard Outcome 8 - Regulation 12 - Cleanliness and Infection Control'.

The IPCLN provides training and support to the clinical and operational teams in regards to Infection prevention and Control. The IPCLN also supports the departmental link staff with audit completion and ensuring actions are taken with any departments that fail to meet the required audit standard. Any suspected or confirmed Surgical Site Infection is subjected to a full investigation to determine compliance with policy and if any lapses in care have occurred and the IPCLN will liaise with Head of Clinical Services to provide assurance of this together with ensuring appropriate external reporting.

Resuscitation & Critical Care Lead who ensures we follow guidance set by the Resuscitation Council UK (RCUK) and we have safe systems, policies, processes and protocols which enable us to care for patients where their condition may deteriorate. This includes (but not limited to) training (Basic Life Support, Intermediate Life Support, Advanced Life Support, Acute Illness Management, RADAR training, and Transfer) which we work with an independent partner (A&E training) to provide the high standards required to maintain patient safety. To support this training and in collaboration with the external trainers, we hold unannounced monthly resuscitation simulations and debriefs, in all areas in and around the hospital

The external trainer is also a key committee member within the hospital resuscitation and critical care committee providing a national oversight and local feedback on training and simulations.

Blood Transfusion Lead who is responsible for ensuring Oaklands blood storage, sampling, prescribing and administration processes are in line with Medicines and Healthcare Products Regulatory Authority (MHRA) regulations. The blood transfusion Lead is also required to provide training to staff who are involved in the blood transfusion processes and maintain accurate records of compliance. Oaklands is supported by the wider blood transfusion team including a Consultant Haematologist based at SRFT.

Occupational Health Link Nurse (OHLN) is available to ensure all staffs wellbeing is supported physically by maintaining an oversight of vaccination history and provide support to the IPCLN with the monitoring the of skin integrity (hands) of clinical staff. The OHLN is supported by 3 fully trained mental health first aiders.

The medical care and treatment provided at Oaklands Hospital is all Consultant led. All our

Consultants have regular appraisals, annual scope of practice reviews and are encouraged to submit data to the Private Healthcare Information Network (PHIN). All consultants are able to use Multi-disciplinary team working to remove the potential for one Consultant to make key decisions in complex cases.

The RMO (Resident Medical Officer) is on site at all times to support the Consultants and together with the nursing team, provides 24-hour medical care and support to all our patients.

The hospital continues to build excellent working relationships with our local Commissioners, Salford Integrated Care Board (ICB) and the local Salford Royal Foundation Trust, Northern Care Alliance and Tameside & Glossop Integrated Care NHS Foundation Trust in order to deliver excellent patient care across Greater Manchester's healthcare landscape

Our hospital staff are fully trained in the latest procedures and techniques and the team maintain their continuous professional development requirements to the highest standards. Any patient who wishes to satisfy themselves on the quality of the hospital and its consultants can be reassured by the Care Quality Commission (CQC) report which is available on the website, certificates are also displayed in main reception as per current regulation.

An internal Ramsay peer review was undertaken in April 2023 which allowed the site to showcase the improvements made and provided the Ramsay Executive team with assurances of the quality and robustness of safety and governance processes.

Working within the Department of Health guidelines, we screen patients who meet a set criteria for MRSA. As part of the step down with COVID restrictions, pre-operative COVID testing has ceased at site. One of Oaklands key objectives is to focus on improving patient safety and we recognise that cleanliness and infection prevention compliance is vital to minimising infection, therefore additional handwashing basins have been installed throughout the hospital.

Sustainability and Environmental focus

We know that a thriving planet is important to our health and wellbeing. Our services rely on a significant amount of resources, such as energy, surgical equipment and consumables. Without thoughtful practices, these resources can cost our planet. We are focused on climate action and environmental performance across our value chain.

Ramsay Health Care recognises that protecting the environment for future generations is critical.

We are focused on:

- Reducing greenhouse emissions and acting against climate change
- Reducing energy and water usage
- Reducing resources use, including single use plastics, whenever it is safe to do so
- Increasing recycling and reducing waste
- Working with our suppliers on more sustainable product choices

Working with the Local Community

Oaklands Hospital continues to focus on delivering high standards of patient care in a friendly and approachable manner. Working with our stakeholders, which include local GPs, consultants and other specialists, we deliver an individual personal service to patients, tailored to meet their needs.

The role of the GP Liaison Officer (GPLO) is to engage with local healthcare professionals across the healthcare community to ensure all clinical stakeholders are fully aware of the services available at Oaklands Hospital and that they have access to any information that can assist them when referring into a secondary care provider, specifically Oaklands Hospital. The GPLO ensures that by meeting regularly with the referring teams, they remain fully aware of new services being developed, new consultants, changes on services etc.

Another part of the GP Liaison's role is to coordinate a bespoke educational programme for GP Practices across the wider local community and is offered on a regular basis. These sessions aim to cover a wide range of topics and are relevant to those attending. These would previously have taken place in surgery settings but are now being offered virtually (making access even easier for clinical colleagues to attend) and still completely free of charge.

In 2022, Oaklands Hospital celebrated Queen Elizabeth II's Platinum Jubilee by participating in the Queen's Green Canopy Initiative. The initiative invites people from across the United Kingdom to 'Plant a tree for the Jubilee'. Oaklands Hospital plans to plant three cherry trees within the hospital grounds and register them as Jubilee trees. This exciting initiative will allow our staff the opportunity to participate in this once in a lifetime event, which will leave a positive impact on the local environment not just in the near future, but also for generations to come.

In 2022, Oaklands Hospital held a harvest festival which supported the “Salford Loaves and Fishes” charity which helps to support the local community with food items, toiletries, flasks and clothing. Wipe Your Tears is another local charity that supports children who are victims of domestic violence. Oaklands Hospital supported Wipe Your Tears undertaking a pumpkin carving competition and cake and bake sale and this enabled Wipe Your Tears, as part of their “project cuddle bag” to purchase 3 cuddle bags thus providing some comfort to the children in making a sad time a little bit happier.

Another charitable initiative that Oaklands Hospital participated in was Children in Need, where over the course of a week there were many fundraising activities, from a (static) bike ride, cake sale to a pop up shop, all in which raised a fantastic amount of money for a great charity.

One of our staff nurses from the Outpatient department, along with her partner (who is a paramedic), was also invited to one of her local schools and asked to teach the children about “Real Life Heroes”

Oaklands Hospital was also a central collection point for kit that was donated to Ukraine as part of the ongoing war including items such as , portable defibrillators, anaesthetic machines, syringe pumps and much more.

Part 2

2.1 Quality priorities for 2022/23

Plan for 2022/23

On an annual cycle, Oaklands 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 Leadership 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 2021/22 (looking back)

Clinical Priority 1- Improve patient experience at Oaklands. – Partially achieved

A strong emphasis has been placed on patient experience at Oaklands in the previous year.

Internal metrics have significantly improved including feedback and scoring on Cemplicity. Cemplicity is a patient satisfaction survey that patients will receive on discharge and seeks feedback on all aspects of care from referral to discharge. Within this audit programme, patients are asked to score the service and facility and this generates a Net Promotor Score (NPS) which

we are able to bench mark throughout the Ramsay group in the UK. Historically, Oaklands have struggled to reach the Ramsay benchmark of 85 however in the last year, have repeatedly received results that have exceeded this national benchmark. Due to this ongoing improvement, the Ramsay central Executive team have been keen to learn how we have achieved this and are asking we share any lessons to other sites.

Whilst the NPS fluctuates, the plan for 2023/24 will be to maintain a score that exceeds the Ramsay benchmark.

Friends & Family Testing (FFT) remains a challenge, particularly with outpatient services. We are not currently meeting the national benchmark of 15% response rate despite visual prompts around the site to aid patients to feedback. This is a clear focus for 2023/24 priorities. Inpatient response rate is significantly better and runs at around 18-20% monthly and provides the site with predominately positive feedback about patients experience.

The previous patient focus group has been disbanded and a new committee established. This committee is being chaired by Oaklands Head of Clinical Services where it was previously chaired by the Operation Manager.

Clinical Priority 2 - Establishment of a Nurse Led Pre-Assessment Triage Clinic following participation in a successful Ramsay Pilot – fully achieved

All patients at Oaklands who are seen in consultation and listed for surgery have an appointment with member of Pre-assessment team to assess suitability for site, determine the level of pre-assessment required depending on medical history and surgery planned and baseline observations and basic blood profiles obtained. This allows the pre-assessment staff to identify any patient led needs that can be supported. The process also identifies patients who have a complex background and would not be suitable at Oaklands and allows this to be actioned immediately allowing patients to receive the care required at a more appropriate site.

As this process is fully embedded at Oaklands, partly due to being part of the pilot sites, Oaklands are seen nationally as the leading site with this and has attracted interest and visits from many of other Ramsay sites.

Clinical Priority 3:

Implementation of 24 hrs arthroplasty service: - partially achieved

Whilst this has not progressed to full implementation, a working group with key staff has been identified and a working group established with clear objectives to measure success. Staffing within the theatre and ward team and a higher reliance with agency staff that we would like has impacted this objective however staffing is improving with highly skilled staff being secured and inducted, we are confident we can make progress in 2023/24

Pre-operative 'surgery school' classes are fully embedded with Oaklands for patients undergoing arthroplasty procedures.

Clinical Priority 4:

To review the feasibility of internal and external accreditation status – partially achieved.

Oaklands were subjected to an internal Ramsay peer review within the reporting year which provided the wider clinical and operational teams to assess Oaklands and determine their scoring based on the internal Ramsay Audit Schedules. Whilst we are not currently able to benchmark the site in line with other Ramsay sites as we were the pilot site for the new inspection model, it has provided Oaklands with the evidence and assurances that our auditing schedule is robust and objective. This has provided us with the data to review the standards for the initial Bronze accreditation with Aseptic Non Touch Technique which is being led by the sites Infection and Prevention Control Lead Nurse.

Oaklands has a fully accredited JAG Endoscopy Unit.

2.1.2 Clinical Priorities for 2023/24 (looking forward)

The focus clinically at Oaklands for 2023/24 is to continue to build on the improvements made in the previous year.

Clinical Priority 1- Improve patient experience at Oaklands.

This will be achieved by:

- A strong and effective Customer Focus Group with patient representation on the committee chaired by Oaklands Head of Clinical Services. This patient representation will ensure any actions and changes derived from the committee include a service users perception and input. The changing CQC framework will be instrumental in success of

this committee as this places a large emphasis on patient involvement and satisfaction within the Quality statements and will focus the remit of this committee.

- An ongoing focus on receiving all patient feedback. Friends and Family Testing (FFT) is one of many forums in which our patients can provide us with feedback. By encouraging patients to complete FFT, particularly in the outpatient departments, due to current low response rates, will allow us to review experience at a specific point in their journey. FFT also allows us to easily benchmark against other healthcare providers and our neighbouring NHS Trust. FFT response rate in inpatient areas is achieving the benchmark however this focus must remain and we will continue to strive to receive feedback at all points in the patient's journey.
- Cemplicity Net Promoter Score must be maintained at or above the Ramsay benchmark.

Clinical Priority 2:

Implementation of 24 hrs arthroplasty service:

This will be achieved by:

- Framework to be developed to allow pre-assessment staff and surgeons to identify suitable candidates for 24hr pathway.
- Intense physiotherapy provision post operatively. This will involve a full physiotherapy service and staffing review.
- Full review of ongoing practices that may involve changes to medicines optimisation to allow patients to recover more quickly.

Clinical Priority 3:

To review the feasibility of internal and external accreditation status

This will be achieved by:

- Bariatric specialist group to be established to review the requirements of accreditation and undertake a gap analysis of what is required to achieve.
- ANTT Bronze accreditation application to be submitted

- Association for Peri-operative Practice (AfPP) specialist group to be established to review the requirements of accreditation and undertake a gap analysis of what is required to achieve.
- Ortho accreditation
- Maintain JAG accredited status

In combination of the above clinical priorities, we will be implementing the national Patient Safety Incident Response Framework (PSIRF) ensuring all learning from unexpected events is patient focused. Ramsay are also introducing a new incident reporting model called RADAR.

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 2022/23 Oaklands Hospital provided and/or subcontracted 6,090 NHS services.

Oaklands Hospital has reviewed all the data available to them on the quality of care in all 6,090 of these NHS services.

The income generated by the NHS services reviewed in 1 April 2022 to 31st March 2023 represents 87 per cent of the total income generated from the provision of NHS services by Oaklands Hospital for 1 April 2022 to 31st March 2023

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 Leadership Team together with 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 2022/23, the indicators on the scorecard which affect patient safety and quality were:

Human Resources

Staff Cost % of Net Revenue	39%
HCA Hours as % of Total Nursing	
Agency Cost as % of Total Staff Cost	32%
Ward Hours PPD	5.4 (56,727 hours)
% Staff Turnover	24.7%
% Sickness	5.28%
% Lost Time	20%
Appraisal %	85%
Mandatory Training %	95%
Staff Satisfaction Score	
Number of Significant Staff Injuries	0
Formal Complaints per 1000 HPD's	0.003%
Patient Satisfaction Score	87.6%
Significant Clinical Events/Never Events per 1000 Admissions	0
Readmission per 1000 Admissions	0.0007%
Workplace Health & Safety	92.2%
Infection Control Audit Score-	IPC Governance & Assurance Audit 100%

2.2.2 Participation in clinical audit

During 1 April 2022 to 31st March 2023 Oaklands Hospital participated in 100% national clinical audits it was eligible to participate in.

The national clinical audits and national confidential enquiries that Oaklands Hospital participated in, and for which data collection was completed during 1 April 2022 to 31st

March 2023, are listed below alongside the number of cases submitted to each audit or enquiry as a percentage of the number of registered

Name of audit / Clinical Outcome Review Programme	% cases submitted
Elective Surgery - National PROMs Programme	Hip 90.4% Knee 86.9%
National Bariatric Surgery Registry (NBSR) ²	95%
National Joint Registry (NJR) ^{2, 3}	100%
Surgical Site Infection Surveillance Service	100%

Footnotes:

¹ National Clinical Audit and Patient Outcomes Programme (NCAPOP) project

² Project participates in the Clinical Outcomes Publication (COP)

³ Projects with multiple work streams are reflected in the [HQIP National Clinical Audit and Enquiries Directory](#)
Version: January 2019

The reports of four national clinical audits from 1 April 2022 to 31st March 2023 were reviewed by the Clinical Governance Committee and Oaklands Hospital intends to take the following actions to improve the quality of healthcare provided.

Actions ongoing:

- Improved response rate for all PROMs.
- Improved compliance with NBSR registry

Local Audits

The reports of 416 local clinical audits from 1 April 2022 to 31st March 2023 were reviewed by the Clinical Governance Committee on a monthly basis. Oaklands Hospital strives to make continuous improvements within the benchmarking of the local audits to ensure that there are improvements in the quality of the provided healthcare to take the actions to improve the quality of healthcare

A copy of the Ramsay Clinical Audit Programme can be found in Appendix 2

2.2.3 Participation in Research

There were no patients recruited during 2022/23 period 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

Oaklands Hospital's income from 1 April 2022 to 31st March 2021 was not conditional on achieving quality improvement and innovation goals through the Commissioning for Quality and Innovation payment framework because the quality measure continues to be suspended since the COVID-19 pandemic.

2.2.5 Statements from the Care Quality Commission (CQC)

Oaklands 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.

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

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2.2.6 Data Quality

Data is used to aid in the decision-making process, which has led to an increased importance of data quality within the business. Data quality is important because it ensures that the information used to make key business decisions are reliable, accurate and complete.

As an organisation we work to achieve the completeness, consistency, accuracy of our data within a timely manner. We then validate our data to ensure that we are achieving and maintaining a high quality standard.

We work in line with the GDPR Principles for data accuracy which states that data has to be of good quality, for example, the data has to be accurate and up to date. This ensures that if we discover that personal data is inaccurate or not up to date, we have a duty to ensure that steps are taken towards rectification or deletion of this data.

The quality of our data is important as our Healthcare professionals need to have confidence in the information that we provided to them. Better quality data empowers doctors and nurses, and this gives them confidence in their decision making. It also helps to build good customer relations and provides assurance to our patients that we protect both their personal and sensitive data.

Oaklands Hospital are taking the following actions to improve data quality:

- Ensure that our teams are trained and share knowledge to manage and maintain data quality issues within their areas.
- Ensure worklists within our EPR system have owners and are managed accordingly by the relevant departments.
- All reports received are reviewed and actioned to ensure we hold one live working document.
- Minimum data set checks (Patient Full Name, DOB, Address, Telephone Number, Email Address, GP and Next of Kin) are undertaken by our reception team when a patient registers for their appointment or admission, and also by the bookings teams when arranging activity for our patients.
- Electronic Registration Forms and Medical Questionnaire forms are sent to patients. These are then checked and the system updated by the reception and medical records teams.
- A weekly activity meeting takes place to assess procedures, allergies, alerts and equipment, along with procedure times and quality of the theatre list.
- Regular reviews of our data – we meet weekly to review and assess worklists and agree which areas to focus on in regards to allocating resource to support and identify any training requirements.

- Audits are in place to support medical records with the plan going forward being to implement further audits across the administrative areas.

NHS Number and General Medical Practice Code Validity

Oaklands Hospital submitted records during 2022/23 to the Secondary Uses Service (SUS) for inclusion in the Hospital Episode Statistics (HES) which are included in the latest published data. The percentage of records in the published data which included:

The patient's valid NHS number:

- 100% for admitted patient care;
- 100% for outpatient care;
- NA for accident and emergency care (not undertaken at our hospital).

The General Medical Practice Code:

- 96.7% for admitted patient care;
- 96.6% for outpatient care;
- NA for accident and emergency care (not undertaken at our hospital).

<https://digital.nhs.uk/data-and-information/data-tools-and-services/data-services/data-quality#top>

Information Governance Toolkit attainment levels

Ramsay Health Care UK Operations Ltd submitted its response on 30.6.22 for 2021/2022. The status is 'Standards Met'.

<https://www.dsptoolkit.nhs.uk/>

Clinical coding error rate

Oaklands Hospital was subject to the Payment by Results clinical coding audit during 2022/23 by the Audit Commission and the error rates reported in the latest published audit for that period for diagnoses and treatment coding (clinical coding) were:

Hospital Site	Primary Diagnosis	Secondary Diagnosis	Primary Procedure	Secondary Procedure
Oaklands	100%	99%	98%	90%

**Ramsay Health Care DSPT_IG Requirement 505 Attainment Levels as at September 2020*

2.2.7 Stakeholders views on 2022/23 Quality Account_

awaiting response from ICB at time of submission

DRAFT

Part 3: Review of quality performance 2022/2023

Ramsay Clinical Governance Framework 2022/23

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.

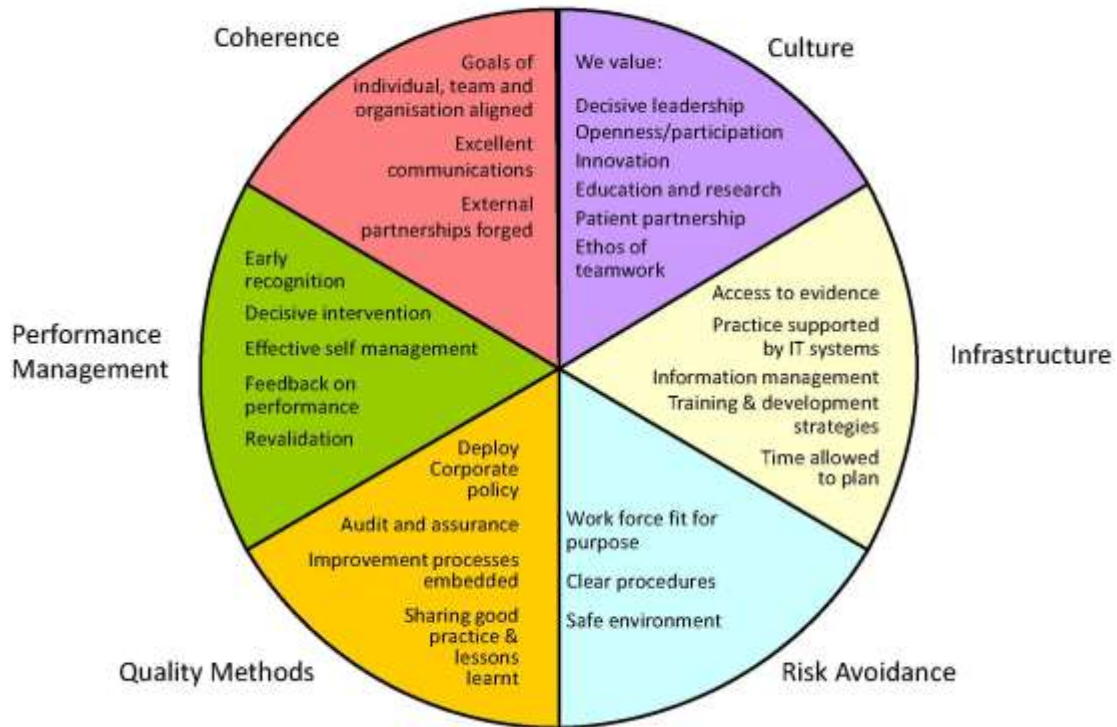
The emphasis is on providing an environment and culture to support continuous clinical quality improvement so that patients receive safe and effective care, clinicians are enabled to provide that care and the organisation can satisfy itself that we are doing the right things in the right way.

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

The following tables and graphs show comparisons regarding key data between the following:

1. The best scoring hospital for this quality indicator based on all NHS England hospitals providing NHS services
2. The worst scoring hospital for this quality indicator based on all NHS England hospitals providing NHS services
3. The average score for this quality indicator

4. Oaklands Hospital

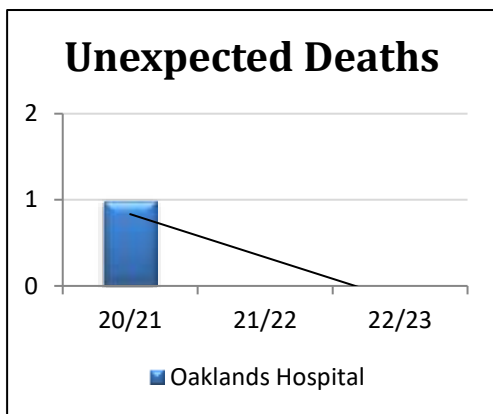
Mortality

Mortality:	Period	Best		Worst		Average		Period	Oaklands	
	Apr20 - Mar 21	RRV	0.6908	RM1	1.201	Average	0.0078	21/22	NVC12	0.0000
	Dec21 - Nov22	R1K02	0.2456	RHCH	2.1583	Average	1.0965	22/23	NVC12	0.0000

Oaklands Hospital considers that this data is as described for the following reasons;

This data is reporting that Oaklands Hospital has had zero unexpected deaths within this reporting period.

rate per 100 discharges



National PROMS

PROMS: Hips	Period	Best		Worst		Average		Period	Oaklands	
	Apr19 - Mar 20	NTPH1	25.5465	NT411	17.059	Eng	22.6867	Apr19 - Mar 20	NVC12	21.048
	Apr20 - Mar 21	NV302	25.7015	NVC20	17.335	Eng	22.9812	Apr20 - Mar 21	NVC12	23.153

PROMS: Knees	Period	Best		Worst		Average		Period	Oaklands	
	Apr19 - Mar 20	RR7	20.6878	R1K	12.6215	Eng	17.4858	Apr20 - Mar 21	NVC12	18.336
	Apr20 - Mar 21	NVC23	20.2502	RXP	11.9159	Eng	16.8858	Apr19 - Mar 20	NVC12	19.803

Oaklands Hospital is pleased to report a significant jump in our reported health gain over the last 12 months. For the period April 2020 – March 2021, Total Hip Replacement health gain was just below the national average. This is now above the national average and a testament to the hard

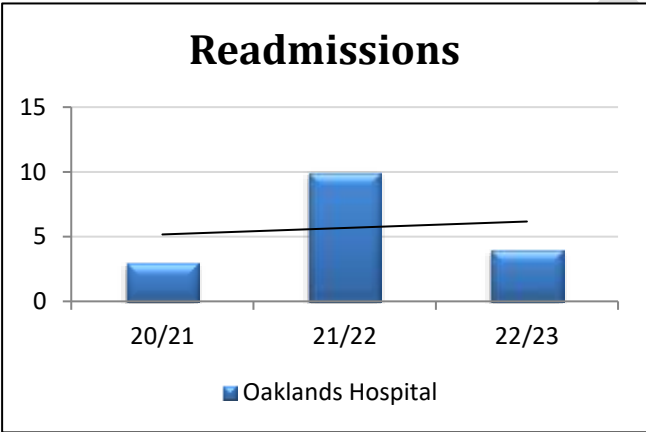
work of our clinical teams in a challenging period. There is a continued focus on PROMs and this will remain a priority in the coming year to not only improve participation and response rates, but to keep our Health Gain score above the English national average.

Readmissions within 28 days

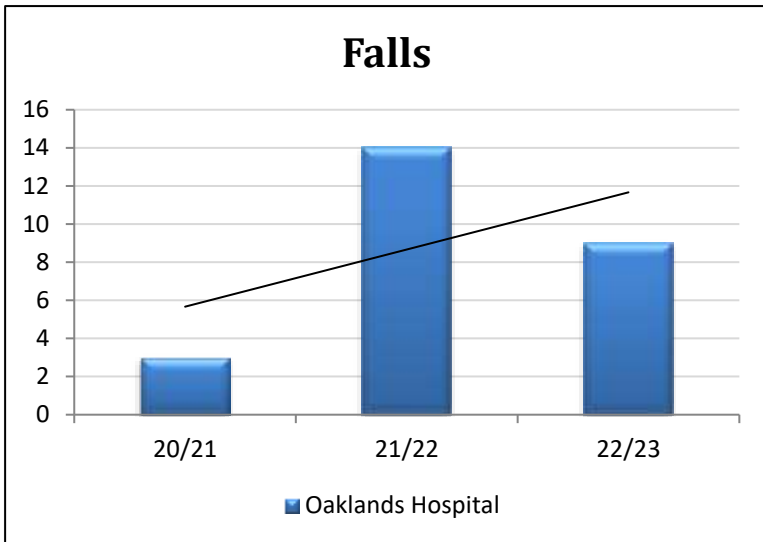
Readmissions:	Period	Best		Worst		Average		Period	Oaklands	
	18/19	N/A	N/A	N/A	N/A	Eng	14.3	21/22	NVC12	0.00
	19/20	N/A	N/A	N/A	N/A	Eng	13.7	22/23	NVC12	0.00

Oaklands Hospital considers that this data is as described for the following reasons:
 The data is no longer being reported and there has been no data published since 2019/20.

rate per 100 discharges



Over the last 12 months, Ramsay as a whole had seen an increase in patient falls. Following a national review, a post falls analysis tool was devised to be completed for every patient who had a fall to enable us to see if there were any theme or trends that contributed as to why the patient fell. There has been the implementation of “call don’t fall” signs in every patient bedroom, bathroom and toilet facilities within the hospital.



PHIN Experience score (suite of 5 questions giving overall Responsive to Personal Needs score):

Summary of PHIN Patient Experience performance

Date Range: 01/04/2022-31/03/2023

Filter set one: Hospital: Oaklands Hospital





Break down per question and overall responsiveness score taken from Ramsay's external patient experience survey, Period April 2022 - March 2023:

VTE Risk Assessment

VTE Assessment:	Period	Best		Worst		Average		Period	Oaklands	
	Q1 to Q4 18/19	Severall	100%	NVCOM	41.6%	Eng	95.6%	Q1 to Q4 18/19	NVC12	92.7%
	Q1 to Q3 19/20	Severall	100%	RXL	71.8%	Eng	95.5%	Q1 to Q3 19/20	NVC12	99.0%

Oaklands Hospital considers that this data is as described for the following reasons:

Due to the continuing COVID-19 pandemic, this submission was paused. There has been no data published after Q3 2019/2020.

C difficile infection

C. Diff rate: per 100,000 bed days	Period	Best		Worst		Average		Period	Oaklands	
	2020/21	Severall	0	RPC	81.0	Eng	15.0	2021/22	NVC12	0.0
	2021/22	Severall	0	RPY	54.0	Eng	16.0	2022/23	NVC12	0.0

Oaklands Hospital considers that this data is as described for the following reasons:

There has been no incidence of C. Diff infections at Oaklands Hospital in this period.

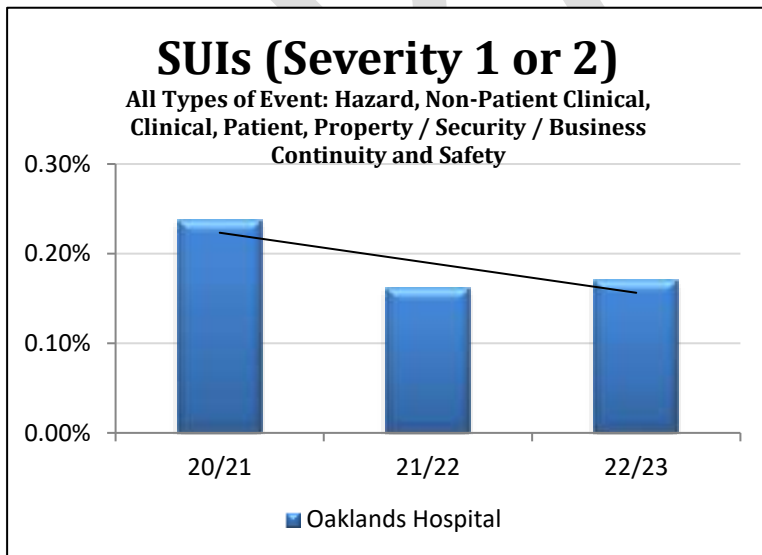
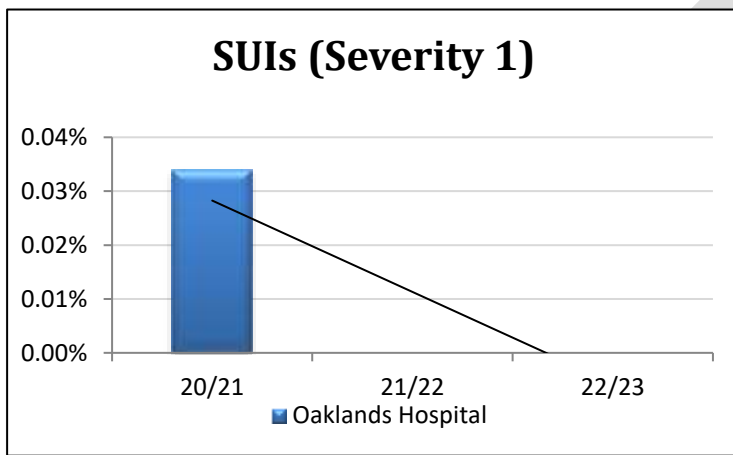
Patient Safety Incidents with Harm

SUIs: (Severity 1 only)	Period	Best		Worst		Average	
	Oct19 - Mar20	Several	0.00	Several	0.50	Eng	0.20
	2021/22	RAX	0.03	RJR	1.08	Eng	0.30

Period	Oaklands	
2021/22	NVC12	0.00
2022/23	NVC12	0.00

Oaklands Hospital considers that this data is as described for the following reasons:

This data has not been captured nationally for the independent sector. Ramsay has reviewed the internal reporting system to pull through our own data and the data is recorded in the table and graphs provided. There were no recorded severity one incidents in 2022/23.



Friends and Family Test

F&F Test:	Period	Best		Worst		Average	
	Feb-22	Several	100%	RTK	77.0%	Eng	94.0%
	Feb-22	Several	100%	RAL	56.0%	Eng	95.0%

Period	Oaklands	
Feb-22	NVC12	97.0%
Feb-23	NVC12	99.0%

Oaklands Hospital considers that this data is as described for the following reasons:

There has been a focused and positive drive to improving and sustaining FFT response at Oaklands. This feedback and response rate is reviewed at the customer focus group, which forms part of the governance framework as described above.

3.2 Patient Safety

At Oaklands Hospital, we are committed to ensuring the safety of every single patient under our care.

We are consistently working on making improvements to patient safety, whether it be through audit, incident reporting and management, lessons learned, complaints; and we are able to track any themes or trends and action them where necessary. We are not afraid to make changes that can influence a change in patient safety.

We are an open, honest and transparent hospital, and we believe in keeping patient at the heart of everything that we do

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

3.2.1 Infection Prevention and Control

Oaklands Hospital has a very low rate of hospital acquired infection and has had no reported MRSA Bacteraemia in the past 3 years.

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.

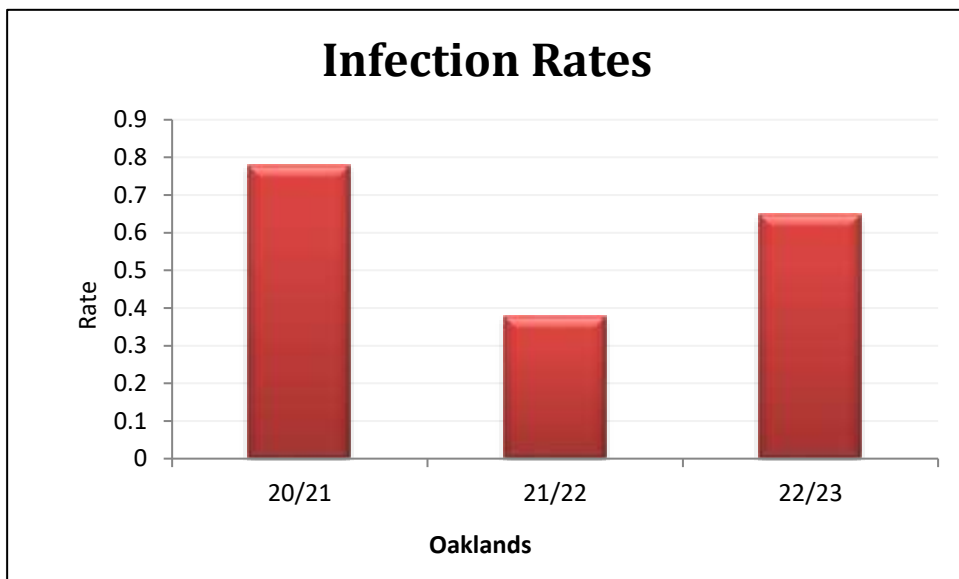
Infection Prevention and Control management is very active within our hospital. An annual strategy is developed by a Corporate level Infection Prevention and Control (IPC) Committee and group policy is revised and re-deployed every two years. Our IPC

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.

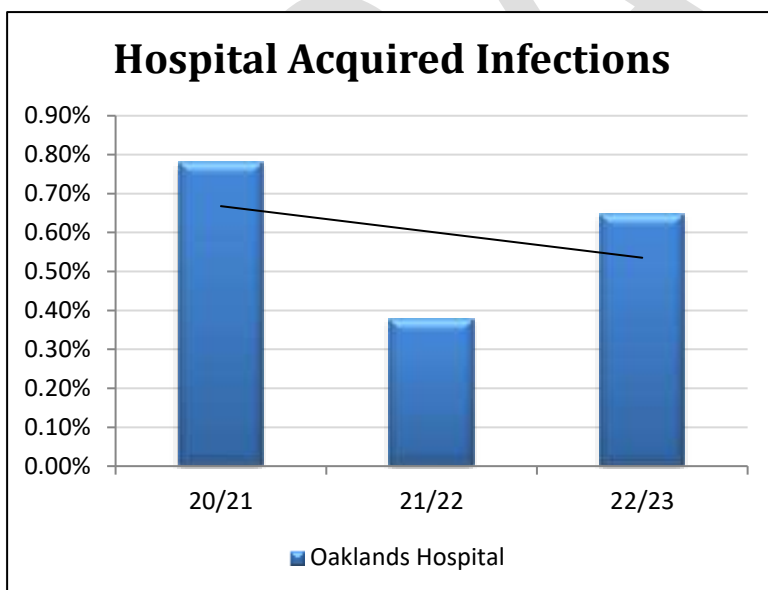
Programmes and activities within our hospital include:

- IPC Links for all clinical and non-clinical departments
- Monthly Infection Prevention Control Committee (IPCC) meetings with IPC links representative of all clinical and non-clinical departments
- Monthly IPC audits, results and Tenable actions discussed at IPCC meetings. Issues raised from the audits added to Action log
- IPCC meeting minutes shared with staff at monthly departmental meetings
- World Hand Hygiene day as part of the annual WHO campaign, celebrated across the hospital with infographics created involving clinical and non-clinical staff; awareness sessions with departments visits where the opportunity is taken to do skin surveillance
- Antimicrobial stewardship with Medical Advisory Committee approved formulary which follows SRFT guidelines in place; compliance closely monitored with audits and case investigations
- Ban on the use of lanyard and replaced by card holders clipper
- Compliance with dress code/ uniform policy closely monitored with a growing and encouraging compliance rates. Bare below elbow; hair away from the uniform collar and wipeable shoes is the current and common practice
- Wall mounted sharp bins support in place where applicable
- RCAs and modified RCAs for HCAs and SSIs completed for all cases meeting the criteria. Investigations results and learnings shared with IPC links and HoD to be shared and discussed with the wider team
- Normothermia training session for clinical IPC links delivered in April 2023
- IPC Mandatory training presentation made available for all clinical and non-clinical staff as a narrated session with easy access via G:
- Standard template for wound management in Dressing Clinic created by OPD IPC Link, which includes wound cleansing product; dressing use and rationale; wound dimensions and characteristics
- Mandatory SSIS data submission process reviewed and flow chart was created to improve the Patient Discharge Questionnaire. Physio team was involved in the process with success as the PDQ are being captured at this stage. The numbers of PDQ returned by post has increased during the first and second quarters of 2023
- IPC related information made easily accessible via the share drive
- Posters about hand washing and hand rubbing; ANTT techniques; sharps management; management of body fluids exposure and spillage on display throughout the hospital



As can be seen in the above graph our infection control rate has increased over the last year however this is due to an increased awareness and openness to report in a timely manner.

Rate per 100 discharges:



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 Oaklands 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.

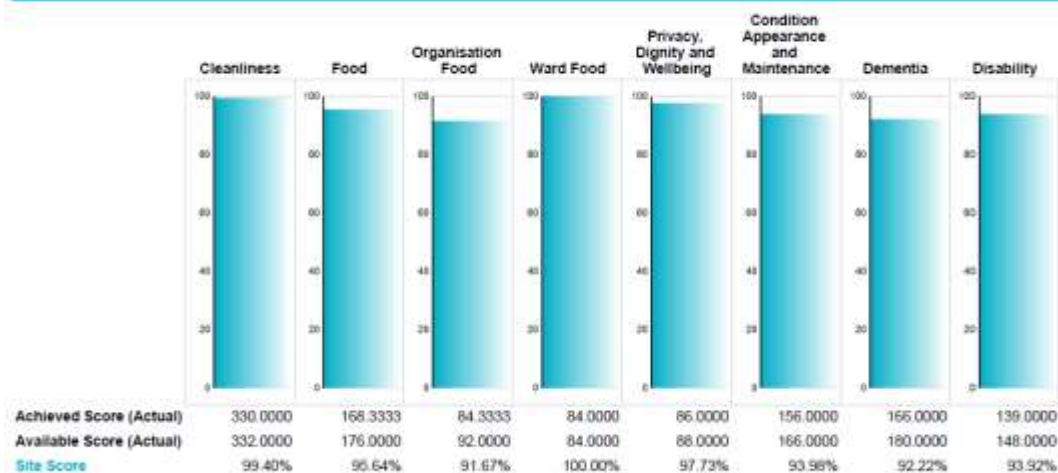
Oaklands PLACE assessment took place in November 2022 with an overall score of 96%. The overall opinion from our patient assessors was extremely positive and supportive. The patient assessors followed the patients journey around the hospitals amenities and had the opportunity to taste a selection of offerings from the patient menu's.

The Patient Assessors feedback was as follows:

- The overall standard of cleanliness and the service delivered by our teams were excellent
- That they were confident that we offered excellent care to our patients
- Staff were accessible and friendly
- That the food menus, quality and quantity offered to patients was excellent
- Facilities were good however there were a few places that looked tired and required some attention with the reception area in particular however there is work ongoing this year to fully upgrade this area.

The areas highlighted for us to review in preparation for the next assessment are:

- Dementia Strategy and Support- to be reviewed
- Catering – review of the requirement for the implementation of hot evening meals, and accessibility to food at all times by both patient and visitor provisions
- Signage review to be undertaken with a focus on the car park and radiology
- Review of decor in regards to the walls, door frames and ceiling tiles



3.2.3 Safety in the workplace

There are numerous processes that safeguard staff's physical and mental wellbeing within Oaklands. Within the last 12 months, we have trained an additional Mental Health First Aider ensuring staff have access to 2 fully accredited individuals who can provide initial advice and guidance to staff with diminishing mental health.

All staff also have access to the Employee Assistance Programme who provide a 24hrs helpline for staff to access for support for a wide range of lifestyle concerns or issues.

At Oaklands we ensure all staff undertake mandatory and supplementary training which provides knowledge and skill in maintaining their and their colleagues safety. Modules include fire, moving and handling infection prevention and control for example.

Additionally, there is further training undertaken by nominated clinical senior staff in regards to the management of medical gases. These staff are the Designated Nursing Officer in the event of having to shut off the gas supply.

All chemicals used are risk assessed by department and registered within the Chemedox system.

All departmental risk registers and assessments are reviewed monthly at Clinical Governance. Any risk identified scoring 9 or above is escalated to the Hospital risk register via the Senior leadership team. The hospital risk register is also reviewed monthly.

There is a robust Health & Safety framework that is supported by a multi-departmental committee chaired by the Facility Manager that reviews any staff and patient safety incidents or concerns and share lessons learnt.

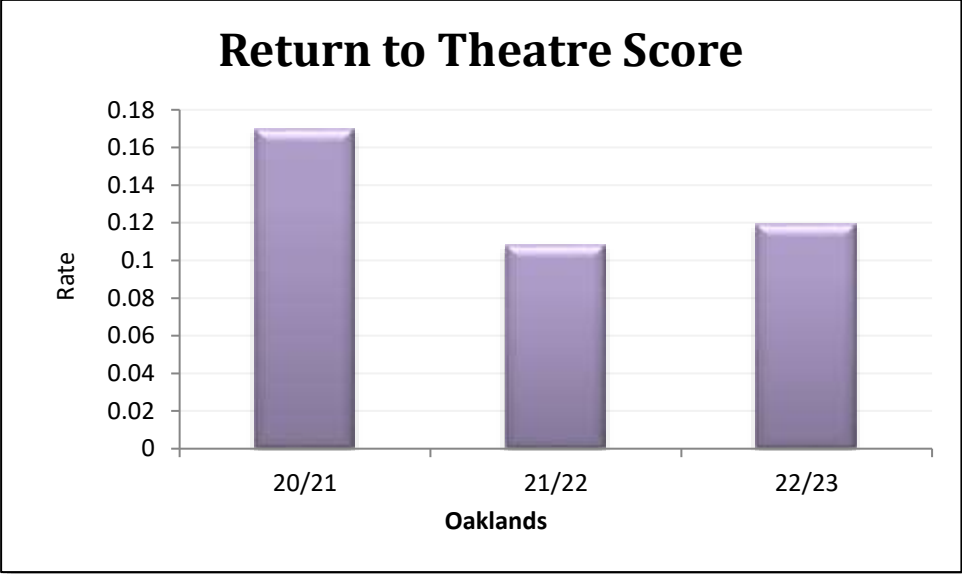
All patient safety alerts such as medical device recalls or policy changes are disseminated by the Ramsay central alert system thus enabling Oaklands staff to keep up to date of any changes or concerns.

3.3 Clinical Effectiveness

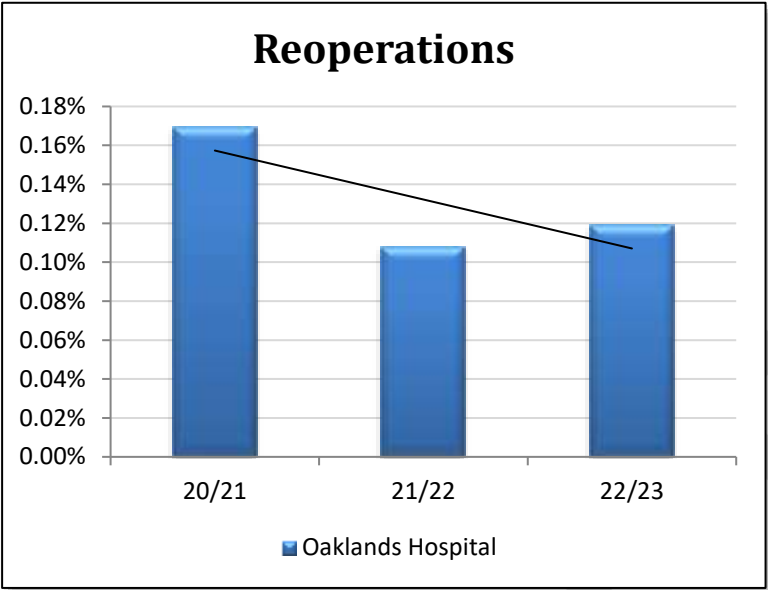
Oaklands Hospital has a Clinical Governance team and committee that meet regularly through the year to monitor quality and effectiveness of care. Clinical incidents, patient and staff feedback are systematically reviewed to determine any trend that requires further analysis or investigation. More importantly, 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

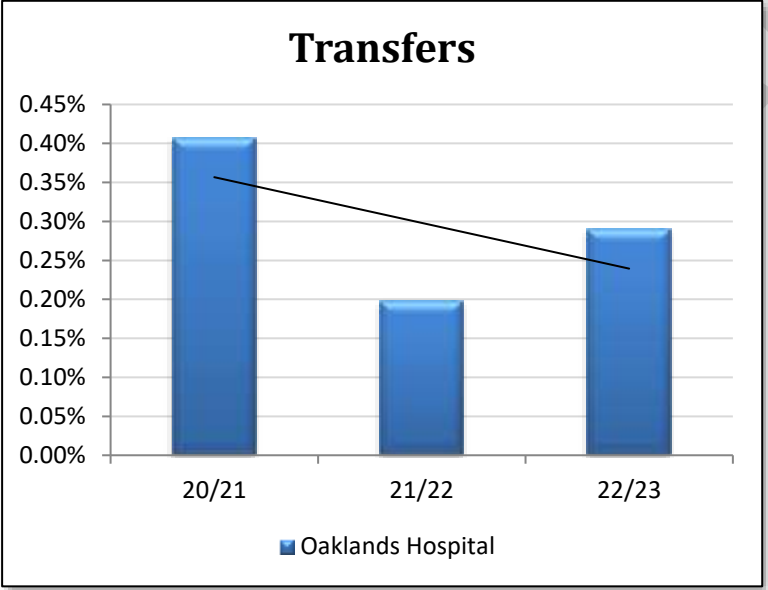
Ramsay Health Care UK is treating significantly higher numbers of patients every year as our services grow. The majority of our patients undergo planned surgical procedures and so monitoring numbers of patients that require a return to theatre for supplementary treatment is an important measure. Every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



Rate per 100 discharges:



Rate per 100 discharges:



3.3.2 Learning from Deaths

At Oaklands Hospital during 2022/2023, we had no unexpected patient deaths reported.

3.3.3 Staff Who Speak up

In its response to the Gosport Independent Panel Report, the Government committed to legislation requiring all NHS Trusts and NHS Foundation Trusts in England to report annually on staff who speak up (including whistle-blowers). Ahead of such legislation, NHS Trusts and NHS Foundation Trusts are asked to provide details of ways in which staff can speak up (including how feedback is given to those who speak up), and how they ensure staff who do speak up do not suffer detriment by doing so. This disclosure should explain the different ways in which staff can speak up if they have concerns over quality of care, patient safety or bullying and harassment within the Trust.

In 2018, Ramsay UK launched 'Speak Up for Safety', leading the way as the first healthcare provider in the UK to implement an initiative of this type and scale. The programme, which is being delivered in partnership with the Cognitive Institute, reinforces Ramsay's commitment to providing outstanding healthcare to our patients and safeguarding our staff against unsafe practice. The 'Safety C.O.D.E.' enables staff to break out of traditional models of healthcare hierarchy in the workplace, to challenge senior colleagues if they feel practice or behaviour is unsafe or inappropriate. This has already resulted in an environment of heightened team working, accountability and communication to produce high quality care, patient centred in the best interests of the patient.

Ramsay UK has an exceptionally robust integrated governance approach to clinical care and safety, and continually measures performance and outcomes against internal and external benchmarks. However, following a CQC report in 2016 with an 'inadequate' rating, coupled with whistle-blower reports and internal provider reviews, evidence indicated that some staff may not be happy speaking up and identify risk and potentially poor practice in colleagues. Ramsay reviewed this and it appeared there was a potential issue in healthcare globally, and in response to this Ramsay introduced the 'Speaking Up for Safety' programme.

The Safety C.O.D.E. (which stands for Check, Option, Demand, Elevate) is a toolkit which consists of these four escalation steps for an employee to take if they feel something is unsafe. Sponsored by the Executive Board, the hospital Senior Leadership Team oversee the roll out and integration of the programme and training across all our Hospitals within Ramsay. The programme is employee led, with staff delivering the training to their colleagues, supporting the process for adoption of the Safety C.O.D.E through peer to peer communication. Training compliance for staff and consultants is monitored corporately; the company benchmark is 85%.

Since the programme was introduced serious incidents, transfers out and near misses related to patient safety have fallen; and lessons learnt are discussed more freely and shared across the organisation weekly. The programme is part of an ongoing

transformational process to be embedded into our workplace and reinforces a culture of safety and transparency for our teams to operate within, and our patients to feel confident in. The tools the Safety C.O.D.E. use not only provide a framework for process, but they open a space of psychological safety where employees feel confident to speak up to more senior colleagues without fear of retribution.

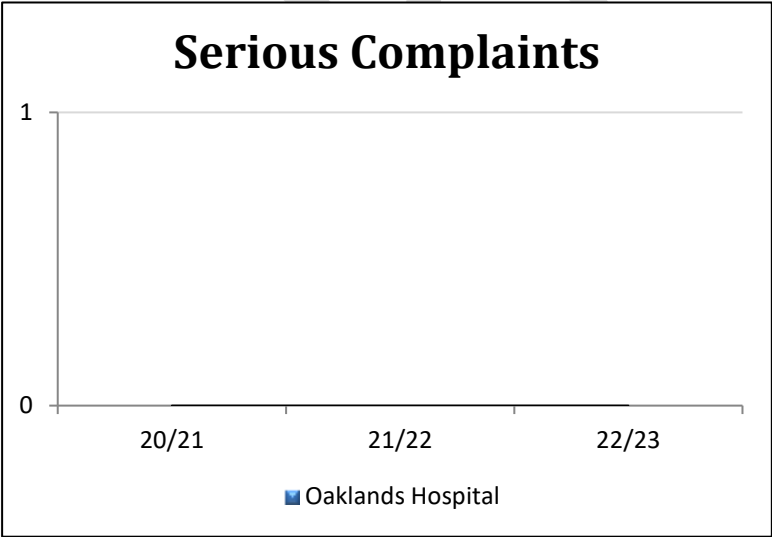
Ramsay UK is currently embedding the second phase of the programme which focuses on Promoting Professional Accountability, specifically targeted for peer to peer engagement for our Consultant users who work at Oaklands Hospital and within Ramsay Health Care.

3.4 Patient Experience

All feedback from patients regarding their experiences with Ramsay Health Care, and Oaklands are openly welcomed.

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 Oaklands Clinical and Integrated 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.

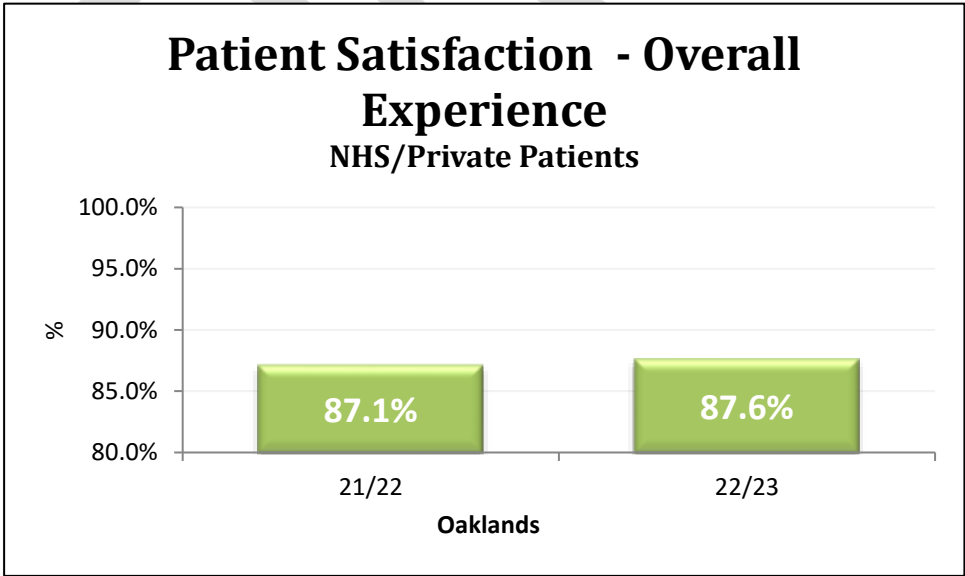
Feedback regarding the patient’s experience is encouraged in various ways via:

- Continuous patient satisfaction feedback via a web based invitation (Cemplicity)
- Alerts received within 48hrs of a patient making a comment on their web survey
- Friends and family questions asked on patient discharge
- ‘We value your opinion’ leaflet
- Verbal feedback to Ramsay staff - including Consultants, Heads of Clinical Services / Hospital Directors 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 Cemplicity. 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 increased over the last year. Considerable focus at Oaklands has been on improving patient experience as a whole and capturing data at every point of contact. It has also been helped by undertaking nurse leader rounding in order to better deal with any feedback at the point of hospital stay.

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Appendix 1

Services covered by this quality account

	Services Provided	Peoples Needs Met for:
Treatment of Disease, Disorder or Injury	Cosmetics, Dermatology, Ear, Nose and Throat (E.N.T), General Surgery, Gynaecological, General medicine, Ophthalmic, Orthopaedic, Physiotherapy (including satellite clinic), Rheumatology, Cardiology, Sports medicine, Urology, Weight loss.	All adults 18 years and over
Surgical Procedures	Breast Surgery, Cosmetics, Day and Inpatient Surgery, Dermatology, Ear, Nose and Throat (E.N.T), General surgery, Gynaecological, Ophthalmic, Orthopaedic, Urology, Bariatric.	<p>All adults aged 18 years and over excluding:</p> <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 ventilator 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 the 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 <p>However, 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	Imaging services, Phlebotomy, Urinary screening, specimen collection and Endoscopy service including OGD, colonoscopy, flexi sigmoidoscopy and cystoscopy.	All adults 18 years and over
Family Planning Services	Gynaecology patient pathway, insertion and removal of inter uterine devices for medical as well as contraception purposes.	All adults 18 years and over as clinically indicated

Appendix 2 – Clinical Audit Programme 2022/23.

Audit	Department Allocation / Ownership	QR Code Allocation	July	August	September	October	November	December	January	February	March	April	May	June
Hand Hygiene Technique (Assurance)	Ward	Ward	■			■			■			■		
Hand Hygiene Technique (Assurance)	Theatres	Theatres	■			■			■			■		
Hand Hygiene Technique (Assurance)	Radiology	Radiology	■			■			■			■		
Hand Hygiene Technique (Assurance)	Physio	Physio	■			■			■			■		
Hand Hygiene Technique (Assurance)	Outpatients	Outpatients	■			■			■			■		
Hand Hygiene observation (5 moments)	Ward	Ward	■	■	■	■	■	■	■	■	■	■	■	■
Hand Hygiene observation (5 moments)	Theatres	Theatres	■	■	■	■	■	■	■	■	■	■	■	■
Hand Hygiene observation (5 moments)	Radiology	Radiology	■	■	■	■	■	■	■	■	■	■	■	■
Hand Hygiene observation (5 moments)	Physio	Physio	■	■	■	■	■	■	■	■	■	■	■	■
Hand Hygiene observation (5 moments)	Outpatients	Outpatients	■	■	■	■	■	■	■	■	■	■	■	■
Surgical Site Infection (One Together)	Theatres (IPC)	Theatres				■						■		
IPC Governance and Assurance	IPC	Whole Hospital	■						■					
IPC Environmental Infrastructure	IPC	Whole Hospital		■						■				
IPC Management of Linen	Ward	Ward		■						■				
Sharps	IPC	Whole Hospital		■				■				■		
High Risk PPE	IPC	Whole Hospital		■						■				
Standard PPE	IPC	Whole Hospital	■						■					
Cleaning (49 Steps)	Ward	Ward	■	■	■	■	■	■	■	■	■	■	■	■
Cleaning (49 Steps)	Theatres	Theatres	■	■	■	■	■	■	■	■	■	■	■	■
Cleaning (49 Steps)	Radiology	Radiology	■	■	■	■	■	■	■	■	■	■	■	■
Cleaning (49 Steps)	Physio	Physio	■	■	■	■	■	■	■	■	■	■	■	■
Cleaning (49 Steps)	Outpatients	Outpatients	■	■	■	■	■	■	■	■	■	■	■	■
Peripheral Venous Cannula Care Bundle	Ward	Ward	■											
Peripheral Venous Cannula Care Bundle	Theatres	Theatres	■											
Surgical Site Infection	IPC	Theatres				■						■		
Urinary Catheterisation Bundle	Ward	Ward	■											
Urinary Catheterisation Bundle	Theatres	Theatres	■											
Isolation	IPC	Whole Hospital				■								
Patient Journey: Safe Transfer of the Patient	Ward	Ward	■						■					
Patient Journey: Intraoperative	Theatres	Theatres		■						■				
Patient Journey: Recovery Observation	Theatres	Theatres			■						■			

Appendix 3

Glossary of Abbreviations

ACCP	American College of Clinical Pharmacology
AIM	Acute Illness Management
ALS	Advanced Life Support
CAS	Central Alert System
CCG	Clinical Commissioning Group
CQC	Care Quality Commission
CQUIN	Commissioning for Quality and Innovation
DDA	Disability Discrimination Audit
DH	Department of Health
EVLТ	Endovenous Laser Treatment
GP	General Practitioner
GRS	Global Rating Scale
HCA	Health Care Assistant
HPD	Hospital Patient Days
H&S	Health and Safety
IHAS	Independent Healthcare Advisory Services
IPC	Infection Prevention and Control
ISB	Information Standards Board
JAG	Joint Advisory Group
LINK	Local Involvement Network
MAC	Medical Advisory Committee
MRSA	Methicillin-Resistant Staphylococcus Aureus
MSSA	Methicillin-Sensitive Staphylococcus Aureus
NCCAC	National Collaborating Centre for Acute Care
NHS	National Health Service
NICE	National Institute for Clinical Excellence
NPSA	National Patient Safety Agency
NVC12	Code for Oaklands Hospital used on the data information websites
ODP	Operating Department Practitioner
OSC	Overview and Scrutiny Committee
PLACE	Patient-Led Assessment of the Care Environment
PPE	Personal Protective Equipment
PROM	Patient Related Outcome Measures
RIMS	Risk Information Management System
SUS	Secondary Uses Service
SAC	Standard Acute Contract
SLT	Senior Leadership Team
STF	Slips, Trips and Falls
SUI	Serious Untoward Incident
TLF	The Leadership Factor
ULHT	United Lincolnshire Hospitals Trust
VTE	Venous Thromboembolism

Oaklands 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 Hospital Director using the contact details below.

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