



PHOENIX  HOSPITAL GROUP

QUALITY ACCOUNTS

2023 - 2024



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PART 1

INTRODUCTION



FOREWORD

Chief Executive Officer's Statement



Andrew Barker

Chief Executive Officer

Welcome to our 2023/24 Quality Accounts. These Quality Accounts are the first report since the acquisition of One Healthcare in September 2023 which brought together two organisations with well-established commitments to offer high quality, person-centred, compassionate and safe care.

Our focus over the past twelve months has been to continue to provide exemplary care, in modern, accessible high quality environments. The powerful combination of modern facilities, along with highly skilled and dedicated staff, has allowed the group to deliver outstanding care.

We continue to receive excellent feedback from our patients about their experiences of care and treatment within our facilities. Over 98% of our patients consistently say they would recommend our services.

Our priorities for the coming year are to continue to build on the broad range of services we provide. We will be improving our infrastructure in preparation for expansion of our hospital group, but will also continue to concentrate on patient safety and excellence in regulatory compliance.

Thank you to everyone who has helped us put this Quality Account together, including our commissioners, and to our staff who are so committed to providing our patients with the highest quality of care.

I confirm that this Quality Account has been discussed with the Phoenix Hospital Group Board, and I declare that to the best of my knowledge the information contained in this Quality Account is accurate.

Andrew Barker

Chief Executive Officer

June 2024



Mr. Angus McIndoe

Group Medical Director
June 2024

We are committed to providing quality care that is sensitive, compassionate, promptly delivered and cost-effective. Our teams are dedicated to understanding the particular needs of the patients and communities we service treating them with respect and dignity, providing care that is both necessary and appropriate.

The Department of Health and Social Care requires providers to submit their final Quality Account to the Secretary of State by June 30 each year. These Quality Accounts provide an important view ‘in the round’ of how well we are living up to our ambition to provide the best care possible to all our patients.

Our Board and Senior Leadership Team accept the responsibility to transparently self-govern and monitor our clinical performance. We are constantly monitoring what we do, to make sure that our standards are as high as possible, identifying and sharing what we learn from when things do not go to plan.

This past year has been an exciting time as we acquired One Healthcare and successfully integrated into the Group. We look forward to the year ahead. I would like to thank all our staff for their continued commitment to providing such excellent and safe care to all of our patients.



Elizabeth Reading

Director of Quality
June 2024

Over the past year, Phoenix Hospital Group has demonstrated a commitment to enhancing patient safety and quality of care through our proactive approach to clinical incident management and our reporting culture. We have focused on fostering an environment where staff are encouraged to report incidents regularly, leading to significant improvements in our understanding and prevention of potential risks. Our continuous quality improvement initiatives have yielded measurable results. By integrating feedback from incident reports, patient surveys and staff input, we have successfully introduced targeted interventions aimed at improving clinical outcomes.

As we move forward, we remain dedicated to maintaining a high standard of care, continuously seeking opportunities for improvement to ensure that we remain at the forefront of patient safety and quality healthcare delivery.

Regulatory Compliance

All our hospitals are inspected by independent healthcare regulators to ensure they meet the fundamental standards of quality and safety as determined by the regulating body of each country. This table details the rating of our hospitals according to the findings of the Care Quality Commission.

Site	Date of review	Overall	Safe	Effective	Caring	Responsive	Well-led
One Ashford Hospital	Sept 2017						
One Hatfield Hospital	Sept 2019						
9 Harley Street	Jan 2019						
25 Harley Street	May 2022	Requires Improvement		Not scored			
Weymouth Street Hospital	July 2023						
Phoenix Hospital Chelmsford	July 2023						



Phoenix at a Glance

About Phoenix Hospital Group

Phoenix Hospital Group provides exceptional patient-centred care through its state-of-the-art medical facilities.

Our vision is to be a leading independent provider of healthcare offering individual and personal care. We make sure patients feel 100% reassured, special and unique at every stage. We work in partnership with our doctors and medical teams to provide the care the doctors would choose for themselves, treating all of our patients with compassion and kindness.



6 Hospitals and Clinics



Over 80,000 patient visits & 10,000 diagnostic scans performed per annum



12 Operating Theatres
7 with Laminar Flow



Over 15,000 operations undertaken per annum



100 Beds



Phoenix Pathology
UKAS accredited laboratory
Processing up to 1,000 samples per day

At Phoenix Hospital Group, we strive to safely deliver a premium and innovative healthcare service adhering to the very highest standards of quality care and clinical excellence. We do this whilst preserving the rights and dignity of our patients, giving our employees the opportunity to grow and develop professionally. Our strategic aims are to:





Our Profile and Evolution

We work with consultants and referrers to provide excellent patient care through our growing portfolio of services and locations.



In September 2023, Phoenix Hospital Group acquired One Healthcare. The acquisition has allowed Phoenix to add to its growing portfolio of state-of-the-art medical centres and expand our successful model of high-quality, patient-centric care to new markets in Kent and Hertfordshire.

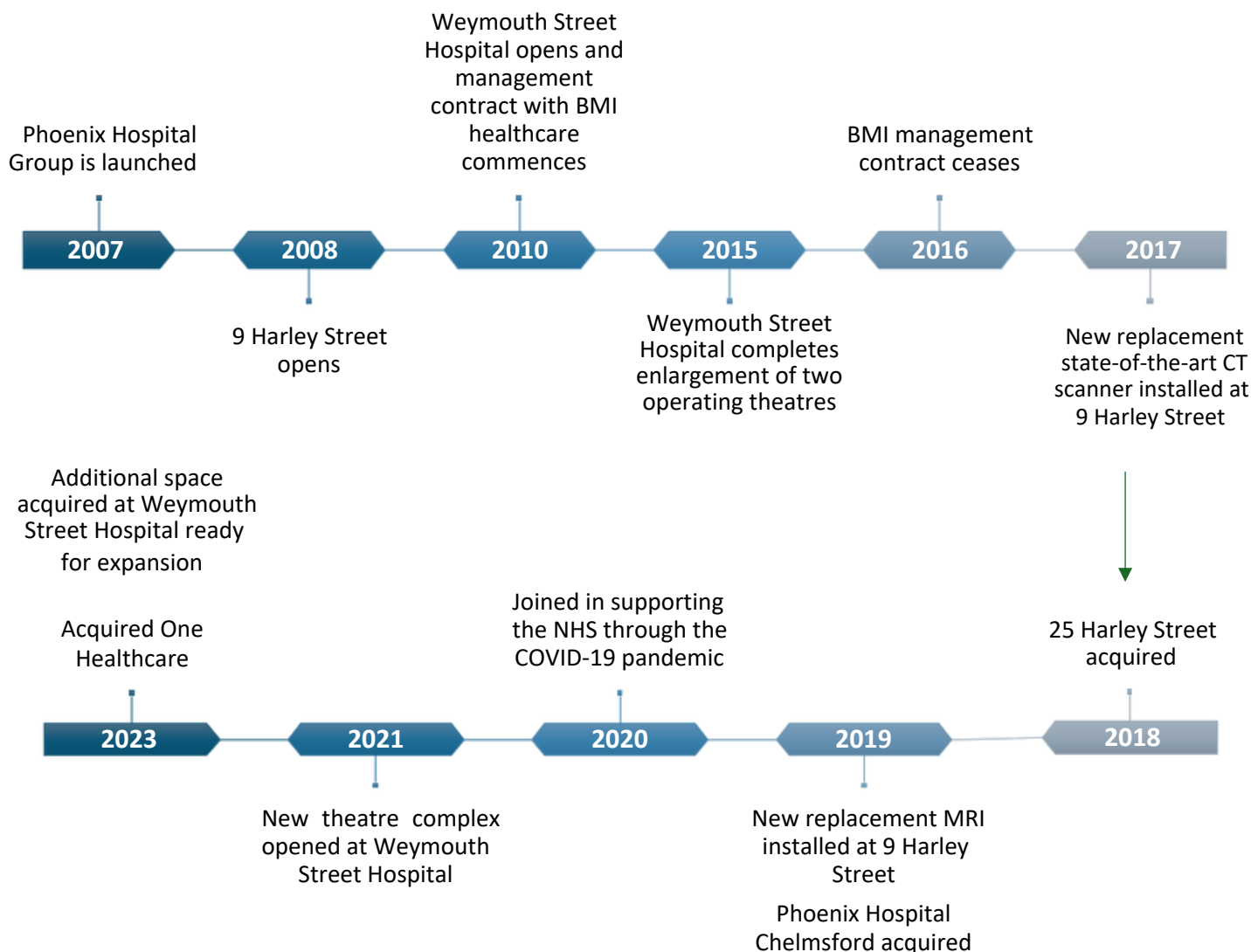
One Healthcare was established in July 2014 to develop and operate modern, purpose-built private hospital facilities with patients at the heart, delivering an extremely high standard of patient care. One Ashford Hospital opened in March 2016 and One Hatfield Hospital opened in December 2017. As well as providing full surgical services, both sites are equipped with state-of-the-art diagnostic and imaging equipment to help specialists provide timely and accurate diagnosis. This addition of these hospitals allowed a large number of Consultants providing care and treatment across a wide range of fields, including orthopaedics, cardiology, dermatology, gynaecology, rheumatology, general surgery and more, to be added to Phoenix Hospital Group’s portfolio.

Our Staff





Our Journey



Evolution



Established within the Harley Street Medical Area, Phoenix Hospital Group was founded by two doctors with the intention of providing outstanding elective surgical and diagnostic care



Until 2016, BMI (now Circle Health) held a management stake and provided management services. The agreement was terminated and Phoenix established their own management team led by Andrew Barker, Chief Executive Officer



Following the ending of the arrangements with BMI, a strategy to seek value enhancing acquisitions was established. The Group has subsequently delivered a series of successful bolt-ons starting with 25 Harley Street, a Central London diagnostic and outpatient provider in 2018



Baddow Hospital (renamed Phoenix Hospital Chelmsford) was acquired in late 2019. The hospital provides outpatients and surgical capabilities, in an under resourced area in Essex



During the COVID pandemic the Group supported the NHS and has subsequently maintained strong links with the NHS



The acquisition of One Healthcare in September 2023 was a landmark transaction for Phoenix as it added two additional full-service hospitals – One Ashford Hospital, Kent and One Hatfield Hospital, Hertfordshire. The acquisition resulted in around 250 One Healthcare staff and over 350 Consultants joining the Group



Weymouth Street Hospital Facilities

- 10 en-suite bedrooms
- 7 day case bedrooms
- 4 theatres
- PACU service

25 Harley Street Facilities

- Pathology laboratory
- X-Ray, DEXA and Ultrasound suite
- Minor ops room
- 13 consulting rooms



9 Harley Street Facilities

- 9 consulting rooms
- 4 treatment rooms
- Cardiology Suite
- MRI, CT and Ultrasound suite





One Ashford Hospital Facilities

- 8 consulting rooms
- 3 minor ops rooms
- 20 en-suite bedrooms
- 2 laminar flow theatres
- Endoscopy suite
- MRI and diagnostic suite

One Hatfield Hospital Facilities

- 10 consulting rooms
- 3 minor ops rooms
- 18 en-suite bedrooms
- 10 day case rooms
- MRI, X-Ray and Ultrasound
- 3 operating theatres



Phoenix Hospital Chelmsford Facilities

- 5 consulting rooms
- 2 theatres
- 8 day-case rooms
- 1 minor-ops suite
- Mobile MRI machine



Our New Management Team

Group Clinical Leadership and Medical Governance

With the acquisition of One Healthcare in September 2023, we have reviewed our leadership arrangements as part of the transition into our new larger organisation. We support our staff and Consultants and continue to embed a safety culture. The organisation’s leaders have a clear understanding that patient safety is their key responsibility; and we use data to drive development and a cycle of continuous improvement ensures constant progress.

Our amalgamated Group Clinical Leadership team provides the guidance and leadership to constantly drive to be at the forefront of best practice.

Our Team



Dr. Aubrey Bristow
Board Clinical Lead



Prof Ghassan Alusi
Chairman



Mr. Angus McIndoe
Group Medical Director



Dr. Steven Luttrell
Deputy Medical Director

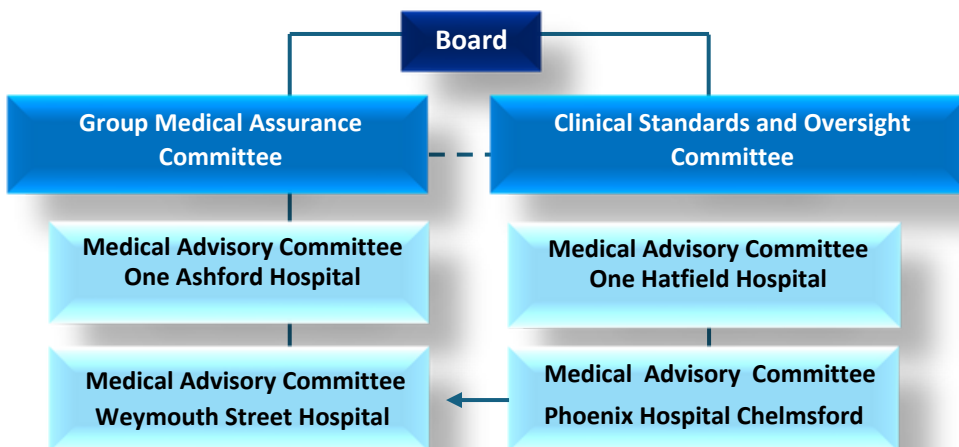


Mr. Gordon Varley
Group Responsible Officer



Mr. Barry Jones
Clinical Governance Chair

As part of our transition, we are also reviewing our policies relating to our approach for the granting of Practising Privileges to our Consultant staff. In early 2024, we established a new Group Medical Assurance Committee (GMAC) which meets quarterly. We have standardised the approach to our Medical Advisory Committees (MAC) at Hospital level, all of which now report into the GMAC. This committee is also supported by a new Clinical Standards and Oversight Committee (CSOC) which provides the oversight of our Clinical Governance arrangements. The CSOC also meets quarterly.



We have also worked hard to implement and embed the guidance set out in the Medical Practitioners Assurance Framework (MPAF) set by the Independent Healthcare Provider Network (IHPN). The MPAF contains key principles to strengthen and build upon the medical governance systems already in place in the private sector and sets out expected practice in a number of key areas.

We are also working towards full compliance with the key principles stated with the IHPN’s newly published guidance – ‘Working with Resident Doctors to Ensure High Quality Care’ (Jan 2024).



Leadership – Our Senior Management Team

“ Leadership means the influence you have on people to do something extraordinary ”

Healthcare leadership isn't about maintaining the status quo, but identifying challenges in the system and finding solutions to those problems.

Since the acquisition of the One Healthcare Group in September 2023, our Chief Executive, Andrew Barker has established a new Senior Leadership Team to lead the expansion of our portfolio of services and continue to drive our ongoing programme of quality and continuous improvement.



“ Leaders set the tone for the entire organization, determining its values and priorities. By prioritising patient-centered care and fostering a positive work culture, leaders can inspire and empower their team to provide exceptional care ”



Our Governance Arrangements

Our Governance Framework sets the structure through which we ensure we deliver our accountabilities for continuously improving the quality of our services and safeguarding the high quality of care we deliver. This includes our systems for quality assurance, quality improvement and risk and incident management. Assurance requires robust monitoring systems and processes to reassure all those involved, from Ward to Board, that the safety of our patients, those that work and practice at our hospitals and those that visit them underpins everything we do and every decision we make.

We aim to make a difference in care to patients by:

- Providing facilities that ensure medical and clinical professional staff have the technology and support required
- Staff are committed to taking pride in caring for patients and for each other
- A commitment to meeting and exceeding regulatory requirements
- Responding efficiently to calls for improvement
- Establishing the belief and practice that clinical and non-clinical quality improvements should be towards safe, evidence based standards, which allow us to monitor and measure our outcomes

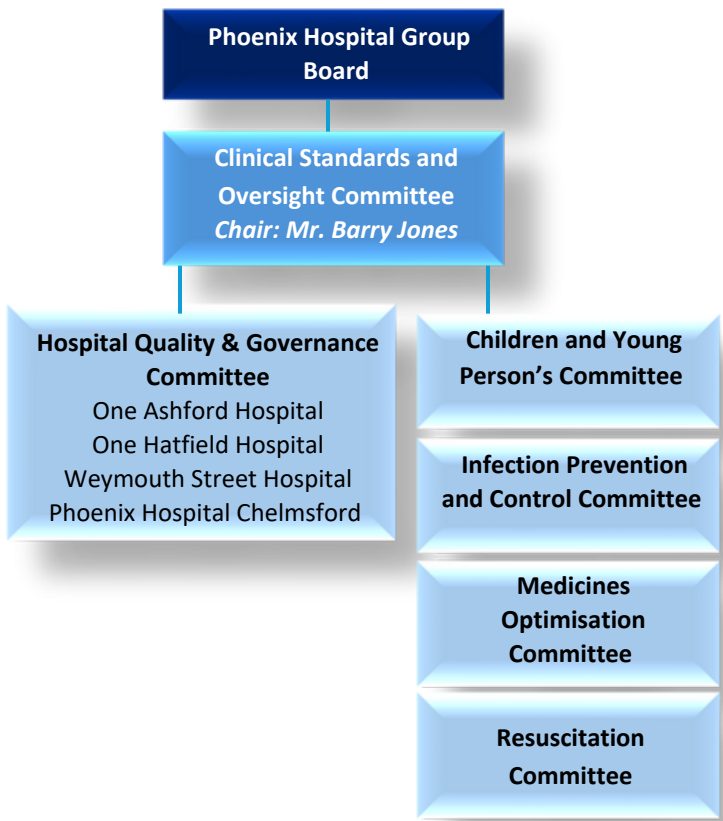
As part of our transition programme we have refreshed our Clinical Governance Committee structure, combining the best from the existing systems within the two organisations.

What were our priorities?

Following our acquisition of the One Healthcare Group, it was a priority that we **improved our Governance systems**. This has included moving to the same electronic platforms for the logging and monitoring of our patient safety incidents (Sentinel) and staff eLearning platform (My Learning Cloud).

In doing so we focused on ensuring we had visibility of our **key performance indicators**. We have refreshed the indicators of quality that we monitor and report to the Board, to provide the assurance required.

With the introduction by the Care Quality Commission of their new Single Assessment Framework, together with the acquisition of new sites as part of our portfolio, we have focused on ensuring all of our sites are **'inspection ready'**.



"Accountability can mean letting people tell their account, their story." - Sidney Dekker

Achievements

One Healthcare successfully obtained sign off of the 2023/24 Plan from the Hertfordshire and West Essex ICB in October 2023. Phoenix Hospital Group achieved this milestone in March 2024, with sign off of the organisation's Plan from North West London ICB.



PSIRF

With the new NHS Patient Safety Incident Response Framework (PSIRF) due to be rolled out nationally in 2023, both Phoenix Hospital Group and One Healthcare began the preparatory work with their respective teams to develop organisational plans and policies. The senior team currently undertakes a weekly review of all incidents occurring across the group to identify learning and improvements.

We are rolling out these new processes across the whole organisation, taking the time to conduct systems-based investigations, challenging us to think differently about learning and what it means for quality improvement. Moving forward, Phoenix will be developing an annual group-wide Patient Safety Incident Response Plan.

National Joint Registry

Both One Ashford and One Hatfield Hospitals participated in the National Joint Registry (NJR) audit in the past year and One Ashford achieved the NJR Quality Data Provider Award for 2023/2024.

PLACE

Patient Led Assessment of the Care Environment (PLACE) assessments were undertaken at our One Ashford and One Hatfield Hospitals during 2023. This assessment provides a framework for assessing quality against common guidelines and standards in order to quantify the facility's cleanliness, food and hydration provision, the extent to which the provision of care with privacy and dignity is supported, and whether the premises are equipped to meet the needs of people with dementia or with a disability. The results were exemplary.

CQC new Single Assessment Framework

Since the roll out of the Single Assessment Framework by the Care Quality Commission, Phoenix has been raising the awareness of staff throughout our organisation, of what these changes mean. Our senior and governance team have been delivering a series of 'Lunch & Learn' sessions, open to all staff – called CQC Bites. These sessions cover a number of key topics including; Safeguarding, Consent, Mental Capacity and Deprivation of Liberty Safeguards, Duty of Candour, the new Sexual Safety Charter and many more.

Phoenix Hospital Group 'CQC- Bites'



To ensure our sites are always CQC Inspection ready, we have scheduled a number of weekly update sessions for all staff within Phoenix Hospital Group, targeting some of the key areas where we have seen national developments or have had requests from staff who would like a better understanding in certain areas.

These sessions are provided by the senior team over Teams and are open to all.



Improving Patient Safety in Light of the Paterson Inquiry

'The report to parliament, 'Continual Improvement in Patient Safety in light of the Paterson Inquiry' was published on 4 February 2020. There were 15 recommendations across 9 areas for organisations including the Government, the NHS and Private Sector, and professional and systems' regulators. Phoenix Hospital Group has monitored the annual Government's updates on national progress against these recommendations. We have focused on:

- A review of our Practising Privileges policy for Consultants who wish to practise in our sites to ensure appropriate governance and oversight of practice within our facilities. This included an update of our Medical Performance and Appraisal Policies; strengthening the biennial review of practising privileges. In 2024, as part of our transition programme, we are merging and aligning our Group-wide Practising Privileges Policy (for One Healthcare and Phoenix), which will include assurance that we are complying with the standards advocated by the Independent Healthcare Providers Network – 'Medical Practitioners Assurance Framework' which was refreshed in September 2022.
- Consultants are required to write to patients, outlining their condition and treatment, in simple language, and copy this letter to the patient's GP. This initiative has been implemented across our services and is now subject to audit.



Compliance of our Pathology Laboratory – UKAS

UKAS is the National Accreditation Body for the United Kingdom which assesses and accredits organisations that provide services including medical laboratories. Our journey with UKAS started just before the pandemic where we performed a detailed gap analysis providing evidence that we are fully compliant with ISO 15189:2012 .

Our Pathology lab – based at 25 Harley Street - received UKAS accreditation for our Haematology and Biochemistry sections in 2023 and Virology accreditation in May 2024. Our next inspection will be in November 2024 and this will be against new standards (ISO 15189:2022).



PART 2
OUR PLANS FOR THE FUTURE
2024/25



Our Quality Priorities for 2024/25

Looking Ahead

We are excited about the year we have ahead. We are part way through our transition, merging One Healthcare into the Group delivering a stronger combined offering. We are using the best of both organisations, standardising our systems and processes. This includes the electronic platforms we have in place to capture and record our patient, staff and quality information. Our IT Steering Group is leading on this review and standardisation.

With ambitions for growth, we have intentions to be a patient focused, efficient and dynamic hospital group with geographical spread. We continue to be agile and innovative in our approach to our business activities. However, safety is at the core of what we do. We will continue to recruit, retain and develop our exceptional workforce to help in delivering these ambitions. We have identified six key priorities to focus on over the upcoming year:



Priority One

Prioritising Patient safety

Embed the Patient Safety Incident Framework

Learning and quality improvement

- Continue to roll out training to all staff to improve awareness, ensuring staff have undertaken the training relevant to their role
- Capture accurate data to inform our next annual plan
- To explore how to recruit a Patient Safety Partner

- Focus on the learning we are identifying from our new approach to incident investigation and have better oversight of our quality improvement initiatives
- Develop a standard operating process on how to disseminate learning from safety incidents

Develop our Group-Wide Policy Library

Embed our new governance arrangements

- Align all of our group policies across the whole organisation making sure staff have access to up-to date policies

- Ensure all staff, including our medical staff, understand our new arrangements
- Ensure oversight, assurance and upward escalation to the Phoenix Hospital Group Board when required
- Rollout a new group-wide clinical audit programme and benchmark the results



Priority Two

Regulatory Excellence

- Be ready for inspection – at all sites
- Maintain and improve regulatory ratings, striving to be Outstanding at all levels
- ‘Move the dial’ on the few services that have historically been scored as ‘Requiring Improvement’

- Continue to raise awareness of the new Single Assessment Framework
- Implement phase two of our staff training/awareness programme
- Proactively seek to improve services using feedback and data



Priority Three

Invest in Our Staff

Creating a fair and just culture

- Continue our work to build a fair and just culture
- Have insight and encourage feedback from staff and consultants
- Act on the feedback we have received from our staff survey
- Ensure our staff forums are being undertaken regularly and act on the feedback we receive from staff
- Ensure our staff model the behaviours we expect
- Monitor and act on any allegations of bullying and harassment

Supporting the wellbeing of our colleagues

- Align our group-wide Health & Wellness Strategy and roll this out across all of our services
- Continue to roll out the Sexual Safety Charter
- Respecting diversity and challenging discriminatory behaviours
- Valuing each other - actively seeking out, listening to and acting on feedback from patients, carers and colleagues

Growing a permanent and stable workforce

- Develop integrated workforce plans for all sites
- Reduce our vacancy levels
- Rollout our new group-wide mandatory training matrix
- Implement our Training and Development committee

Shared understanding

- Ensure that all of our staff understand our new-group wide values and ambitions and the part they play in helping us to deliver these
- Ensure that all our staff understand their roles and responsibilities in our 'new' organisation



Priority Four

Outstanding Experience of Patient Care

- Explore ways in which patients and carers are enabled to make the best contribution possible
- Recruit a Patient Safety Partner – to help us in ensuring that we understand the care and treatment we provide from the patients point of view
- Strive to improve the response rates to our patient surveys, so we hear from more of our patients

- Review and standardise wherever we can, the information we provide to our patients, seeing where we can co-produce written information with our patients
- Renew our focus on ensuring our pathways of care are patient centred, thought listening to patients needs and reflecting these in their care pathways



Priority Five

Reducing any risks for deteriorating patients

- Continue to minimise the risks for patients whose condition deteriorates while with us
- Ensure all our staff remain well trained in recognition of clinical deterioration and make effective decisions for timely transfer when required

Ensure patients risks have been identified appropriately for those undergoing surgery on our sites

- Continue to standardise and optimise our pre-assessment processes across the whole group, ensuring patients are safe to have their surgery
- Standardise our admission criteria
- Minimise cancellations through optimal pre-assessment

Excellence in Patient Outcomes

Monitoring our outcomes

- Prepare for compliance with the new national Outcome Registries Platform
- Continue to have excellent oversight of our clinical key performance indicators and act on any outliers
- Continue to improve the data quality of our submissions to Private Healthcare Information Network (PHIN)

Patient Reported Outcome Measures (PROMS)

- Collect PROMS data on more of the applicable procedures that are undertaken across our services and use this information to inform improvement in our care



Priority Six

Antimicrobial Stewardship

- Renew our focus on antibiotic prescribing
- Establish a group wide Strategy
- Align our practice and protocols to national and local guidelines and continue to audit our practice to ensure compliance

Sustainable use of Medicines

- To understand and optimise our medicines wastage
- To continue to focus on reducing the use of volatile gases and decrease our carbon footprint.

Medicines Optimisation

Standardising our practice

- To establish a group-wide Formulary, ensuring that patients and service users have access to recommended medicines and medical devices
- To better understand our use of medicines and standardise their use, following best practice whilst remaining cost effective
- To closely monitor drug shortages ensuring these don't impact our service to patients
- Standardise our audit programme, thereby monitoring our practice



PART 3
REVIEW OF QUALITY PERFORMANCE
2023/24



Review of Previous Year

Our Transition Journey

A key focus for Phoenix Hospital Group during most of 2023 was the preparation for and completion of the acquisition of the One Healthcare Group. Our staff continued to concentrate on delivering high-quality and safe services for our patients. Our performance continued to show our high-levels of achievement and success across a number of our key areas of priority.



Both Phoenix Hospital Group and One Healthcare had in place existing robust Governance arrangements. A key task following the acquisition in September 2023 has been the review and consolidation of the systems and processes that constitute our governance and assurance frameworks. We have reviewed and rationalised our governance committee structure, with the creation of a new Group level Medical Assurance Committee, which provides oversight of our services and assurance to our Board.

Regulatory Compliance

We are now preparing our sites for inspection under the Single Assessment Framework. Our One Ashford Hospital was last inspected in 2017, and 9 Harley Street and One Hatfield Hospital were assessed in 2019. Although these sites do not have a high risk-profile, we are anticipating on-site inspections during 2024. All of our teams work together to constantly review the evidence we can show to demonstrate our regulatory compliance and always remain 'inspection' ready.



One Hatfield Hospital Quality Account

2022-2023



One Ashford Hospital Quality Account

2022-2023



Review of Previous Year

Patient Safety

Phoenix Hospital Group agreed our Patient Safety Incident Response Plans with our ICBs before the mandated deadline. We are excited about this opportunity to continue our journey of review and improvement, using this whole system change to think about how we respond when an incident happens, and how we can prevent recurrence. Embedding this new approach to the management of patient safety incidents will be a key focus for us during the rest of 2024.

Freedom To Speak Up



Freedom to Speak Up Guardians are in place to support workers to speak up when they feel that they are unable to do so by other routes. They should ensure that people who speak up are thanked, that the issues they raise are responded to, and make sure that the person speaking up receives feedback on the actions taken.

Phoenix has a Freedom to Speak Up Guardian, who is a member of the corporate team. They are supported by a network of champions, who are in place across all of our sites. We are pleased to be able to report that we have not identified any significant patient safety trends from reports we have received from our staff during this period.

Staff Health and Wellbeing

During 2023 we began our journey of putting in place our Health & Wellbeing Strategy. We continue to support our sites to develop a team of Mental Health First Aiders, to provide a support network for their colleagues. All staff also have access to an employee assist programme, occupational health and GP online services.

Staff forums provide opportunities for our staff to provide feedback to their management teams and we also undertake a group wide staff satisfaction survey.

Mortality

There were no reportable deaths recorded during this reporting period of April 2023 to March 2024.

National PROMS

Source: Quality Health PROMs data reports

Patient Reported Outcome Measures (PROMs) assesses the quality of care delivered to patients from the patient perspective. During 2023, our One Healthcare sites collected this information from patients undergoing two clinical procedures, namely hip and knee replacement surgery.

PROMs calculates the health gains after surgical treatment using pre- and post-operative surveys. The pre-operative questionnaire is provided to patients at pre-assessment and the post-operative survey is sent directly to the patients' home address at between three and six months following their operation. This is collected for both NHS and private patients.

During 2023, at our core Phoenix Hospital Group sites (namely Phoenix Hospital Chelmsford and the Weymouth Street Hospital), PROMS data collection had been undertaken by a number of consultant surgeons.



Core Quality Indicators

As we transition and standardise all of our systems and processes, we will be outsourcing our data collation to Quality Health, an IQVIA business. NHS PROMS data is collected nationally, by NHS Digital.



Private Patients PROMS Data – One Healthcare Hip Replacement Surgery

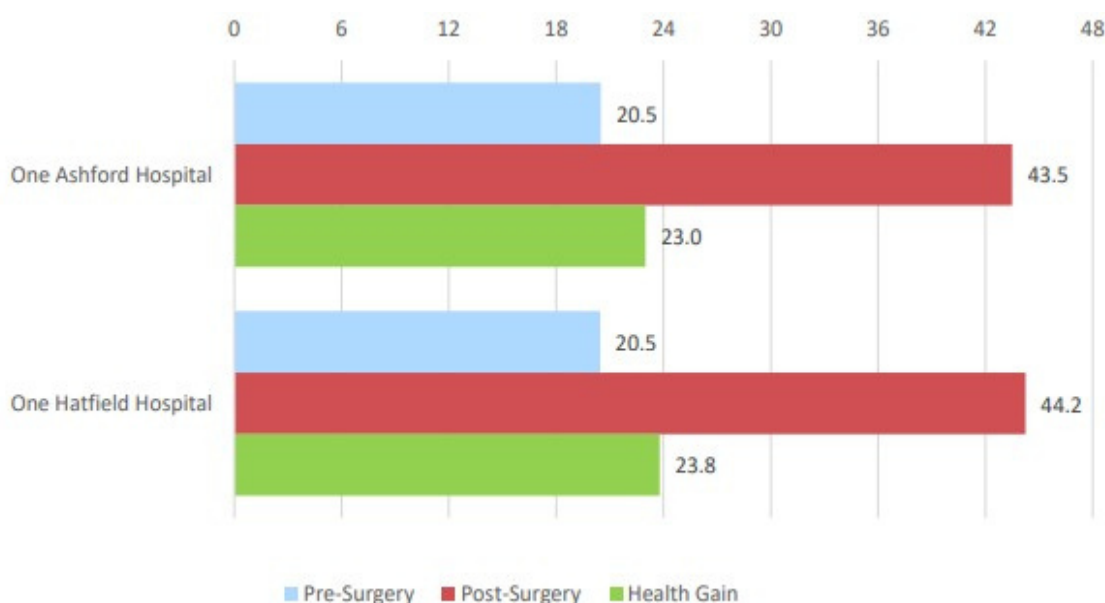
This survey was adapted from Dawson J, Fitzpatrick R, Carr A, Murray D, (1996) Questionnaire on the perception of patients about total hip replacement, British Journal of Bone and Joint Surgery, 78-B, 2,185-190. This survey assesses the level of difficulty patients have completing 12 routine tasks pre-surgery and 6 months after surgery.

One Ashford Hospital/One Hatfield Hospital 2023 results:

	Actual procedures	Returns	Participation rates
Q1 2023 January-March	70	47	67.1%
Q2 2023 April-June	108	49	45.4%
Q3 2023 July-September	58	54	93.1%
Q4 2023 October-December	69	36	52.2%

Oxford Hip Score

Patients were required to state either the level of difficulty/pain/frequency for each of the 12 routine tasks, on a five point verbal scale. The final score produced may range from 0 to 48; a score of 0 indicates the patient is unable to do all of the 12 tasks, while a score of 48 indicates that the patient is able to do the activities with little difficulty.



**Table: Rolling Year Final Score
by Hospital**

One Ashford Hospital
Rolling score **43.5**

One Hatfield Hospital
Rolling score **44.2**



Average Score Versus Health Gain Comparisons

The average health gain for hip replacement surgery stood at 23.3 which is +0.8 above the National NHS average.

	Pre-Oxford Hip Score Average	Post-Oxford Hip Score Average	Oxford Score Av. Health Gain
NHS England	17.2	39.7	22.5
One Healthcare	20.5	43.8	23.3
QH PHIN Average	21.0	42.9	21.9
NHS / One Healthcare actual difference	+3.3	+4.1	+0.8

Knee Replacements Surgery

This survey is also adapted from the Dawson J, Fitzpatrick R, Carr A, Murray D, (1996) questionnaire.

One Ashford Hospital/One Hatfield Hospital 2023 results

	Actual Procedures	Returns	Participation rates
Q1 2023 January-March	53	32	60.4%
Q2 2023 April-June	56	41	73.2%
Q3 2023 July-September	115	31	27.0%
Q4 2023 October-December	61	51	83.6%

Oxford Knee Score

As with hip scores, patients are required to state either the level of difficulty/pain/frequency for each of the 12 routine tasks, on a five point verbal scale. The final score produced can range from 0 to 48; a score of 0 indicates the patient is unable to do all of the 12 tasks, while a score of 48 indicates that the patient is able to do the activities with little difficulty.

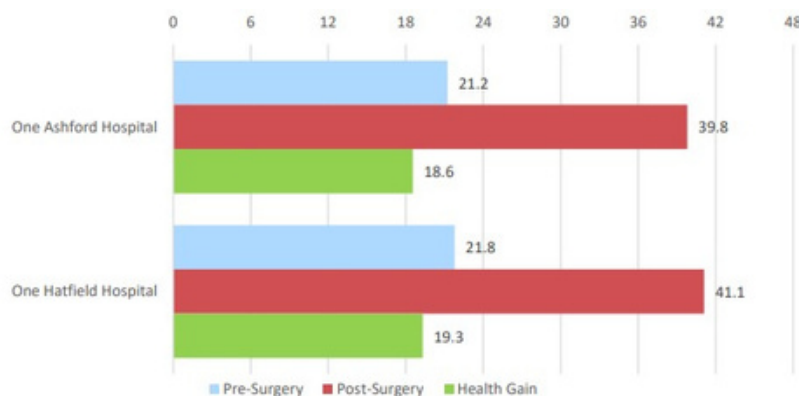


Table: Rolling Year Final Score by Hospital

One Ashford Hospital
Rolling score **39.8**

One Hatfield Hospital
Rolling score **41.1**

Average Score Versus Health Gain Comparisons

The average health gain for knee replacement surgery stood at 18.9, which is +1.4 above National NHS average.

	Pre-Oxford Knee Score Average	Post-Oxford Knee Score Average	Oxford Score Av. Health Gain
NHS England	19.3	36.8	17.5
One Healthcare	21.5	40.4	18.9
QH PHIN Average	23.3	39.6	16.3
NHS / One Healthcare actual difference	+2.2	+3.6	+1.4

NHS PROMS Data

Patients undergoing elective inpatient surgery for hip and knee replacement funded by the NHS are asked to complete questionnaires before and after their operations to assess improvement in health as perceived by the patients themselves. This publication is for finalised Patient Reported Outcome Measures (PROMs) in England - April 2021 to March 2022.

The tables below show the outcomes for One Healthcare, with no data available for the Phoenix sites as no NHS contracts are in place for Hip and Knee replacement surgery.

Organisation level	Organisation name	Modelled records	Average Pre-Op Q Score	Average Post-Op Q Score	Health Gain	Improved	Unchanged	Worsened	Adjusted average Post-Op Q score	Adjusted average Health Gain	Standard Deviation of adjusted Health Gain
England	ENGLAND	14,627	0.328	0.784	0.456	13,096 (89.5%)	727 (5.0%)	804 (5.5%)	0.784	0.456	0.234
Provider	ONE HEALTHCARE (AVQ)	51	0.362	0.859	0.497	46 (90.2%)	3 (5.9%)	2 (3.9%)	0.822	0.494	0.199

Unplanned Readmissions

Source: *Clinical Dashboard*

Hospitals will always encounter some unplanned readmissions, as it is not possible to be sure how a patient's condition will change after they leave hospital. The reasons for readmission are complex and relate to the care patients receive after they leave hospital, as well as the quality of care in hospital. Between April 2023 and March 2024, 12 patients were readmitted for further care or treatment.

Returns to Theatre

Source: *Clinical Dashboard*

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. During this reporting period, a total of 19 patients from across our four acute hospitals were returned to theatre for a follow-up procedure.

Transfers

Source: *Clinical Dashboard*

None of our hospitals have the facilities to provide Level 2 critical care as we do not have Intensive Care or High Dependency Units. However, the Weymouth Street Hospital does have two PACU rooms which could be used for HDU subject to staffing. Therefore, we have formal arrangements in place through NHS Trusts, private hospital partners, Critical Care Networks and ambulance services to ensure that when patients require this level of care, a timely and safe transfer can occur. These transfers are usually rare, as all patients undergoing surgery undergo a pre-operative assessment to ensure they are fit for the elective surgery planned. A total of 19 patients were transferred from our acute hospital sites into NHS facilities during this reporting period, often so that they could receive a higher level of care and monitoring than we were able to provide. In some cases, the transfers were for non-clinical reasons such as consultant preference whilst others follow review of patients previously treated in other hospitals.



VTE Risk Assessments

Source: *Audit outcomes*

Venous Thromboembolism (VTE) is a significant patient risk after surgery. The first step in preventing an adverse event from VTE is to identify those at risk so that preventable treatments can be used. We audit our patient notes on a monthly basis to monitor compliance with risk assessment and NICE based prophylaxis prescribing. Across our sites, we reach a compliance level of between 95 – 100% for these audits. We saw a total of eight patients being diagnosed with either a DVT or PE associated with having recent surgery undertaken on our sites.



Surgical Site Infections

Source: Clinical Dashboard

Post-operative surgical site infections can cause significant harm to patients and result in an increased hospital stay, readmission and re-operations. Monitoring is essential. At the Weymouth Street Hospital, we routinely pre-warm breast and other patients, an intervention that has been shown to reduce SSI. We have surveillance programmes in place in all of our hospitals. A total of 40 potential superficial wound infections were reported during this period, all investigated with no significant causal factors being identified.

Only one of our sites is registered to provide the UK Health Security Agency with data on surgical site infections post Hip or Knee replacement surgery (One Ashford Hospital), however all of our sites undertaking this surgery collect the same data. Only three hip replacement surgery patients have returned to theatre for washouts during this reporting period.



Antibiotic prescribing is monitored closely, with practice audited against our local protocols. Clinical staff have access to our Medical Microbiologist – who will advise on the appropriate protocols to adhere to, especially around any post-operative wound infections, or antibiotic resistance



Patient Safety Incidents

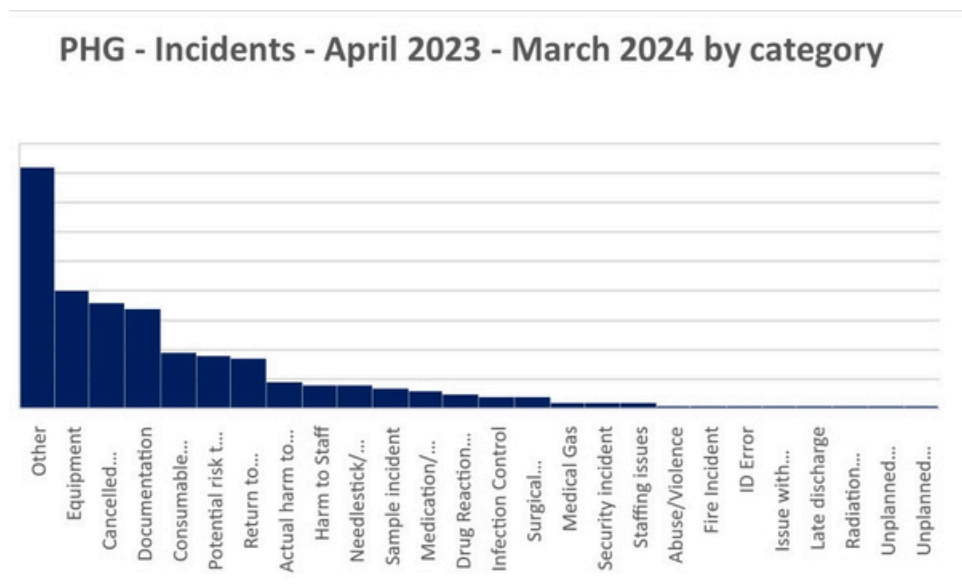
Source: Sentinel

In January 2024, all of our sites aligned their processes for logging incidents and now use Sentinel as the electronic Incident Management System, transitioning from Datix. Staff training was rolled out to enable staff to use this new system.

We have also introduced the new Patient Safety Incident Response Framework. We have robust systems for daily, weekly and monthly monitoring of all incidents, with immediate escalation processes in place.

Now that we have brought together all of our sites in using the same electronic incidents management system, we will be able to collate our data from a group-wide perspective moving forward. However, during this past reporting period, different platforms have been used, so data analysis has not followed a consistent approach. The information below indicates the overall numbers and categories of incidents being logged on these different platforms

Core Phoenix sites - Weymouth Street Hospital, 9 and 25 Harley Street and Phoenix Hospital Chelmsford



A total of 311 incidents were logged from across these sites during this reporting period.

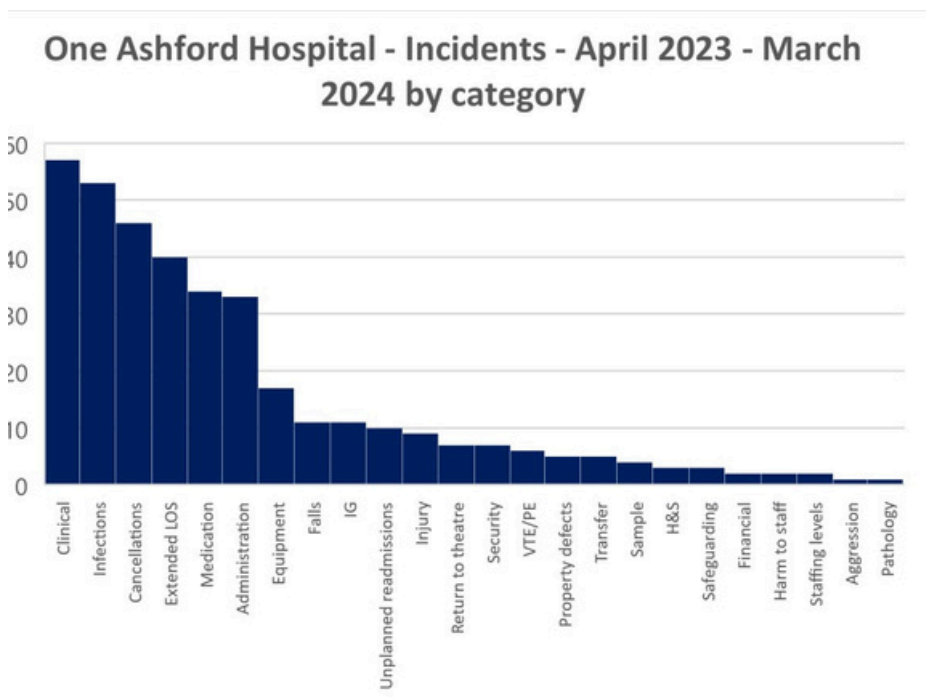
The most frequently logged categories include equipment issues, cancellations and documentation problems.

Work is now underway to further understand what falls within the category 'Other'. Our incident reporting system has been configured to reflect this piece of work.

With the implementation of our new Patient Safety Incident Response Plan, we have also started to reconfigure our incident data capture and reporting processes to reflect the key priority areas which have chosen to focus on. Again this includes reconfiguring our electronic incident management system.



One Ashford Hospital

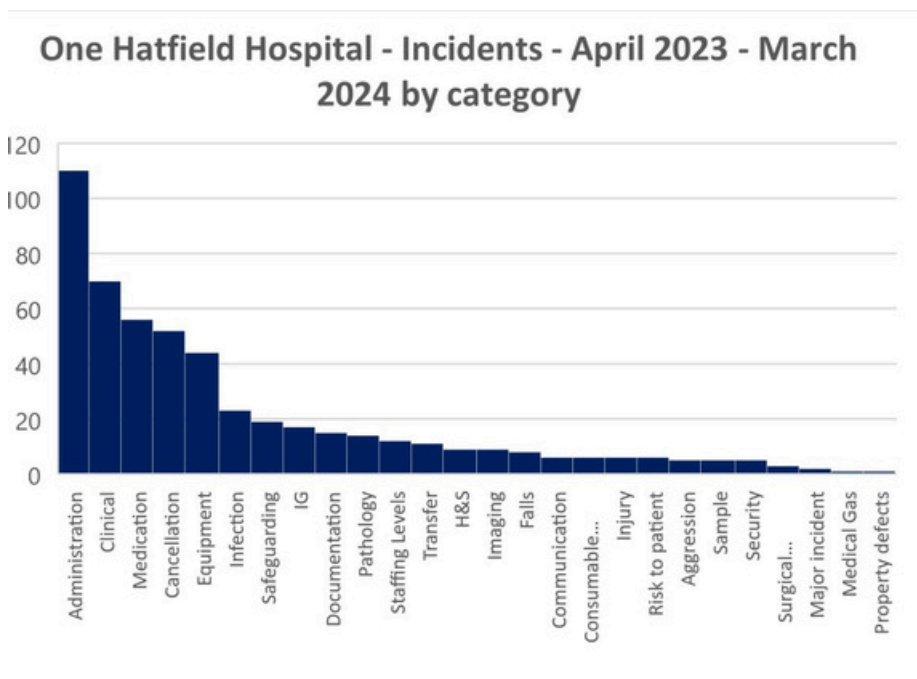


The Hospital has a strong reporting culture. A total of 369 incidents were logged during this reporting period. These numbers remain a small percentage of the hospital's activity.

We promote an environment where every variance is reported as an incident so we can identify patterns not only to ensure safety and efficiency.

We anticipate the focus on optimising and standardising our approach to pre-admission will reduce the risk of patients' procedures being cancelled.

One Hatfield Hospital



The Hospital has a very strong reporting culture, promoted by the Senior Management Team. A total of 515 incidents were logged during this reporting period.

Again, these levels of incident reporting by category remain a small percentage of the hospital's activity.

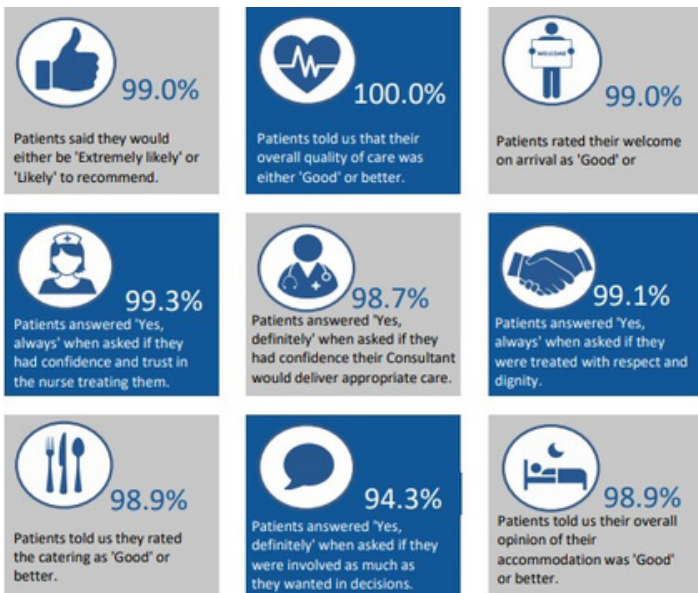
The Hospital has promoted a targeted focus during this period on its administration processes, in order to track where improvements can be identified and implemented.

Over the next year we will be continuing our journey of embedding the Patient Safety Incident Response Framework (PSIRF) across all of our sites. We understand that the patient and family voice is vital for both organisational learning from incidents and for putting actions in place to prevent them in the future. We will continue to ensure early engagement with staff and patients in our investigation processes, to assist us in identifying learning and quality improvement opportunities.

Patient Experience

Source: HWA reports

Patient experience is what the process of receiving care feels like for our patients. We remain extremely proud of the feedback we received from our patient through our patient surveys. Our scores remain very high throughout all of the key measures. The graphs below show the 2023 annual results for the key measures.



Weymouth Street Hospital Inpatient and day-case results

2023
99%

of patients said they would either be 'Extremely likely' or 'Likely' to recommend

Patient comments

"All staff were fantastic – nurse, reception team, surgical team and recovery team. Wonderful. Thank you"

Source: Survey

One Hatfield Hospital Inpatient results 2023

99.3%

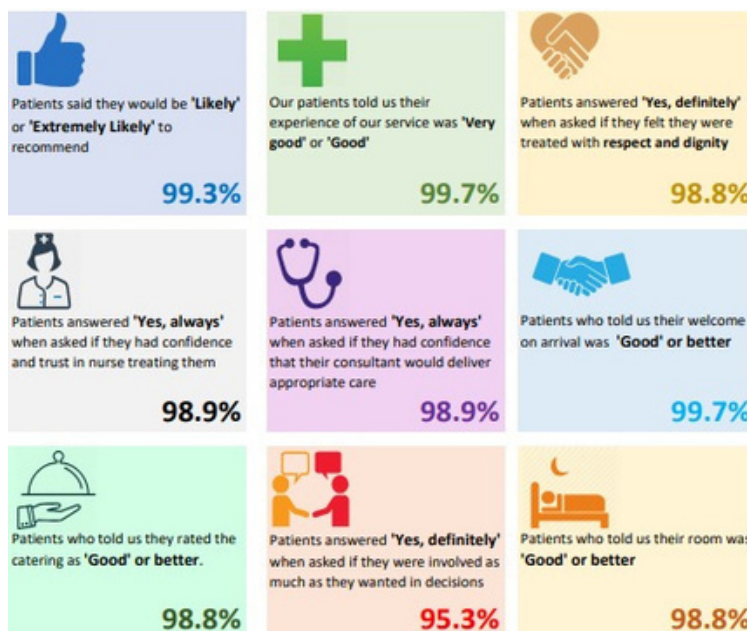
of patients said they would either be 'Extremely likely' or 'Likely' to recommend

Patient comments

"All staff were very helpful and the hospital was spotless"

"My whole experience from first consultation to surgery, physio and follow up has been excellent"

Source: Doctify



Phoenix Hospital Chelmsford Inpatient and day case results

2023
98.9%

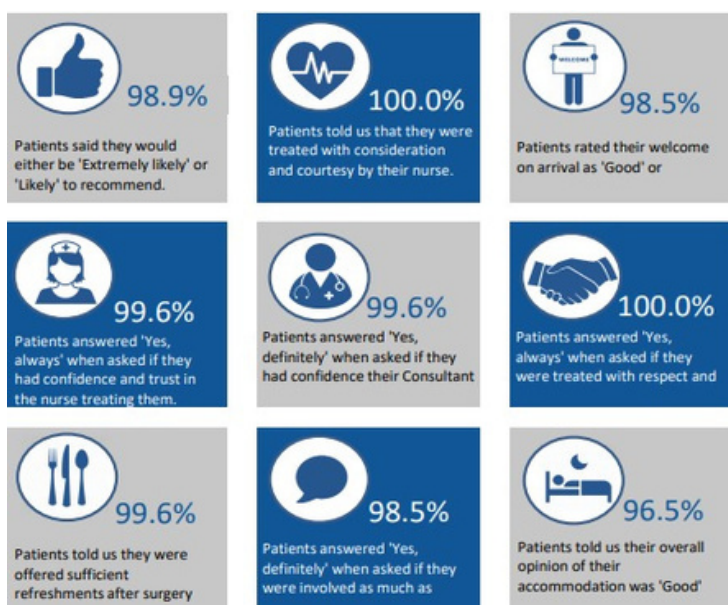
of patients said they would either be 'Extremely likely' or 'Likely' to recommend

Patient comments

"Completely satisfied. This is how seeking advice should be. Thank you"

"Left the surgery filled with confidence that I have been diagnosed correctly and have had the time and care required to help me to get to the bottom of my problem"

Source: Doctify





One Ashford Hospital Inpatient results 2023

99%

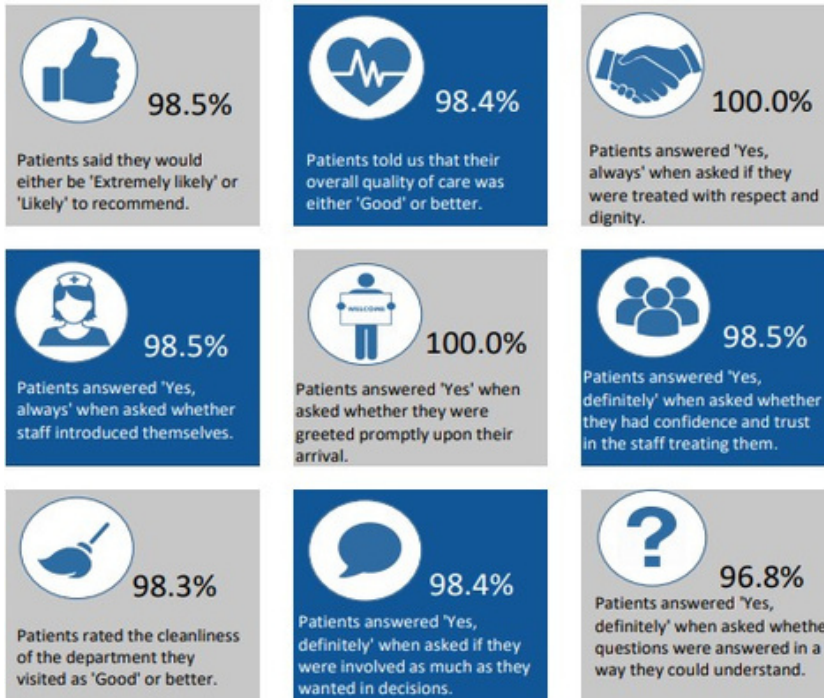
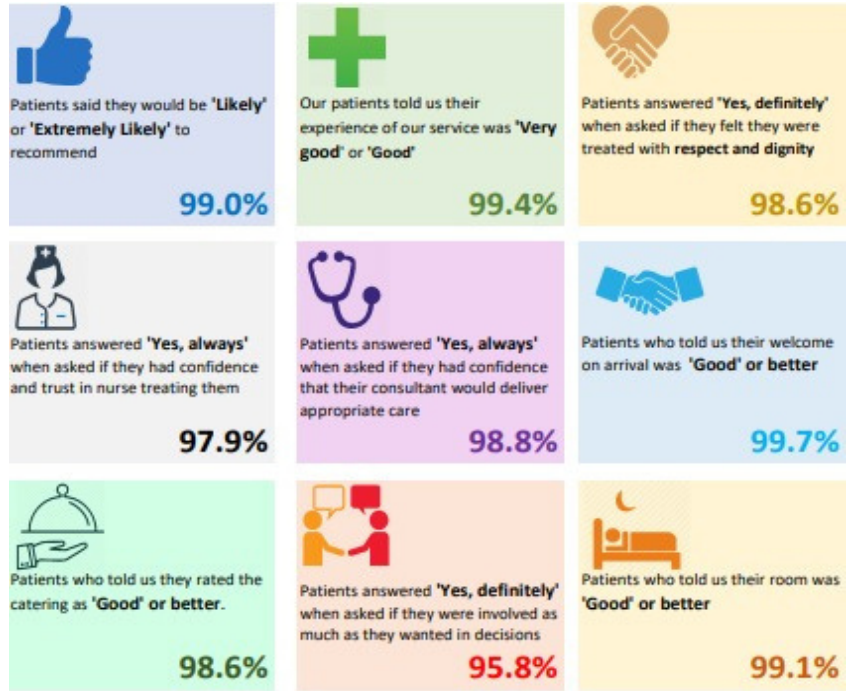
of patients said they would either be 'Extremely likely' or 'Likely' to recommend

Patient comments

“Throughout my treatment staff have been excellent. They kept me informed and fully explained and reassured me with their expertise.”

“I found the hospital to be a modern, clean and tidy place which was most welcoming to its patients. I would be happy to be treated again at this hospital.”

Source: Doctify



9 and 25 Harley Street Outpatient Services results Q4, 2023

98.5%

of patients said they would either be 'Extremely likely' or 'Likely' to recommend

Patient comments

“Everything was very easy, on time and all the staff were very professional and helpful”

“I cannot thank and praise them enough. The entire experience was really great, smooth and efficient. The team was simply amazing”

Source: Doctify





Complaints

Source: Complaints log

We seek to ensure that every opportunity is taken to listen to patients' and key stakeholders' feedback, including concerns and complaints. We consider these as opportunities to improve the care and services we provide. We take every complaint seriously and usually offer complainants the opportunity to meet the senior management at the site, to discuss their concerns. Lessons learnt from complaints and feedback are shared with wider staff groups to encourage an improved understanding of the impact every issue has had on the individual involved. We have a structured complaints procedure that follows 3 stages, including escalation to the Independent Sector Complaints Adjudication Service (ISCAS) for external review. During this period we received a total of 82 complaints. Our approach is to include any issues raised by patients, including purely administrative and non-clinical concerns. Each one is fully investigated and responded to by our Hospital Directors.

Audit

All of our sites participate in a comprehensive internal audit programme to monitor patient safety and clinical effectiveness. Standards are set for each audit with reference to regulation, national guidance, and our healthcare policy with the intention of monitoring compliance with these standards. The audits are undertaken monthly or quarterly and can be increased in frequency if necessary. Audit results are monitored locally within quality meetings, and also corporately at Governance Committees. Action plans are created for those audits which show a decrease in compliance, these are comprehensive and specific, with named persons to complete the plans. During 2024, we will be reviewing each sites existing local audit programme and developing a group wide Corporate Audit Schedule, to standardise the approach to audit and allow more effective benchmarking.

A number of the current audits undertaken are listed below

Audit	Description
Venous Thromboembolism (VTE)	Patient risk assessment document and relevant prophylaxis administered
Clinical Record Keeping	Documentation in clinical records is compliant with national and local standards and requirements
Consultant Record Keeping	Clinical record keeping within outpatient patient notes
Practising Privileges	Documentation supporting the granting of practising privileges to Consultants is accurate and up-to-date
Biennial Reviews	Documented to evidence Consultants' appraisal and revalidation are accurate and up-to-date
National Early Warning System (NEWS2)	Observations fully recorded to aid early detection of potential deteriorating conditions
Patient Consent	As part of the clinical records audit – consent documented
Mandatory Training Compliance	Staff training completed
World Health Organisation (WHO) Surgical Safety Checklist	Process accurately undertaken for every patient having a surgical procedure
Diagnostic Imaging – suite of audits	Monitoring our compliance with IRMER
Medicines Audits – a suite of audits	Includes a range of processes that determine how medicines are used and looks at compliance with national standards and legislation
Controlled Drugs	The ordering, supply and destruction of controlled drugs meets national and local standards
Prophylactic Antimicrobial Prescribing and Usage	Prophylactic Antimicrobial Prescribing and Usage
Prescribing	Documented the appropriateness, accuracy and legibility of prescribing meets national and local standards
Medical Gases	Ensured medical gases are used safely and stored securely
Health & Safety Audits	Observational audits of our facility to monitor compliance with legislative requirements



Infection Prevention & Control audits – a suite of audits	Monitoring our compliance with the required standards for Infection Prevention and Control (IPC)
Theatre Team Brief	Documented evidence of relevant communications between all members of the theatre team prior to an operating list commencing
Resuscitation	Equipment checks fully and accurately recorded
Patient Led Assessment of the Care Environment (PLACE)	An annual appraisal of the non-clinical aspects of NHS and independent/private healthcare settings, undertaken by teams made up of staff and members of the public (known as patient assessors)

Changes we have implemented as a result of local audit outcomes during 2023

- We reviewed VTE assessment and policy to align with national guidance
- We have implemented a new audit to monitor documentation by Consultants in outpatient records
- We have reviewed our Controlled Drugs audit tool and are aligned with the CQC’s comprehensive controlled drugs audit tool
- We have reviewed our policies relating to antibiotic protocols

Infection Control

We continue to monitor and report, as mandated, all MRSA, MSSA, C Diff, E Coli bacteraemia. We are pleased to be able to report there were no incidences of any of these bloodstream infections during the 2023/24 reporting period.

Post-surgery infections can cause significant harm to patients and result in increased hospital stay, readmissions and re-operations. Despite not all of our sites being able to report externally to the mandatory UK Health Security Agency Surgical Site Infection Surveillance scheme, we continue to collect our own internal data set in relation to SSI for our hip and knee replacement surgery.

To ensure we raise awareness with our Consultant staff, we share statistics, trends or concerns relating to infections at the quarterly Hospital Medical Advisory Committee (MAC). A Consultant representative for each specialty attends this committee, as well as the Consultant Microbiologist. Oversight of trends or concerns are also monitored through our daily, monthly and quarterly reporting and governance systems.



Weymouth Street Hospital

Our Hospitals and Services

About the Hospital

Situated between Harley Street and Marylebone High Street in the heart of Central London, the Hospital provides a wide range of surgical and medical facilities in modern surroundings.

Our patients have consistently rated us as their first choice London Hospital for patient care since we opened in 2010. Along with a boutique environment, the hospital boasts 17 luxury bedrooms and an in-house pharmacy.

Having undergone recent expansion, the Weymouth Street Hospital has 4 state-of-the-art theatres, including one laminar flow theatre, and two PACU rooms. This new complex provides access to advanced surgical and medical care in response to today's clinical needs.



Marcus Whiteley
Hospital Director



I am proud to say that in our recent unannounced CQC inspection, we clearly demonstrated that we were a professionally run, safe hospital with a high level of stakeholder satisfaction. This was clearly demonstrated to our CQC inspectors.



Highlights

- Our Weymouth Street Hospital underwent an on-site inspection under the new Single Assessment Framework in February 2024. We are awaiting the inspection report
- We have cancelled no surgical cases (unless inappropriate for surgery)
- Our Google Rating is a consistent 4.5, better than any other local hospitals
- All clinical indicators remain below 1% of patient activity
- We have had no Never Events in the last year
- We also support Middlesex University and act as a learning placement for nurses
- We successfully supported the NHS with waiting list initiatives through undertaking contracts for gynaecology, plastics and trauma surgery





9 and 25 Harley Street

9 Harley Street is an impressive outpatient consulting and imaging department, offering access to leading specialists and the highest standards of care. It offers a quick and efficient service with appointments available to suit you and with no waiting lists. We aim to provide a prompt diagnosis and rapid access to healthcare.

The diagnostic suite offers MRI, CT and Ultrasound facilities operated by our radiology team and supported by leading Consultant Radiologists. 9 Harley Street offers a wide range of high quality medical services, alongside medical professionals who are experts in their field. Specialties include: GP services, Paediatrics, ENT, Orthopaedics, Cardiology, Urology, Cosmetic and Reconstructive Surgery and Pain Management.

25 Harley Street also provides outpatient and diagnostics with access to specialists across a broad range of healthcare services, but specialises in certain areas for which we are particularly renowned. These are: Ophthalmology, Dermatology, Gynaecology, private GPs and physiotherapy.

The site also provides an impressive range of diagnostic and imaging services in our dedicated imaging suite, including the latest DEXA and X-Ray facilities.

Phoenix Pathology, our quality-assured multidisciplinary laboratory, is located in the basement of 25 Harley Street. Built on expertise, the lab offers blood tests with results provided quickly and efficiently.



Marcus Whiteley
Hospital Director

“ We have a very loyal Consultant base with high patient satisfaction in our Harley Street outpatient buildings receiving consistent feedback that we deliver a better level of service than other places on Harley Street or in the vicinity. ”

Highlights

- We have been awarded and maintained our UKAS accreditation for our Pathology services
- Embedding our Health Screening Services to deliver an increasing numbers of screens
- The monthly satisfaction on Google Reviews at 4.7, significantly higher than our local competitors
- Successful establishment of a well-led and conscientious outpatient team (both clinical and non-clinical) who have are highly regarded by our Consultants and patients alike





Phoenix Hospital Chelmsford



About the Hospital

Phoenix Hospital Chelmsford is a boutique private hospital in Chelmsford, Essex, offering a wide range of high quality medical and surgical procedures.

The hospital aims to meet the needs of patients outside London. It is an elective surgery hospital with a strong presence in many of the specialties carried out at Weymouth Street Hospital. As well as fully equipped operating theatres, day case rooms and consulting suites, patients are able to access comprehensive surgical, diagnostic and outpatient services. Phoenix Hospital Chelmsford also provides a range of Health Screening services.

The Hospital offers a comprehensive range of healthcare services, including our newly dedicated Mohs and Skin Cancer Clinic, MRI scanning, extensive Health Screening packages and Paediatric services.



Natasha Browne
Hospital Director

“ Phoenix Hospital Chelmsford is the most recent addition to the Essex healthcare community. We are brilliantly situated for ease of access to all and offer an increasing wealth of services to ensure the local demographic of privately insured and self-paying patients are able to access the healthcare they need, with ease.

Last year we restructured our MAC, and welcomed our new Chair along with a number of new representatives to further support growing demand. This has continued into 2024 with representation for Paediatrics and ENT. We are also incredibly proud to have launched our in-house learning and development programme. We have supported our Senior HCA into a governance post with responsibility for leading our PSIRF roll-out and creating a ‘Learning from Incidents’ action plan to ensure our staff our continuously learning, improving and reflecting to support patient and staff safety, and a well-led service. ”

Highlights

- Investment into Morpheus8 and launch of the Outpatient Aesthetic clinic
- Collaboration with Remedy/Medinet to support ENT Outpatient DMAS work
- Launch of the new Private Mohs Skin Cancer service, the only Private Mohs service in Essex
- Launch of our new Paediatric Outpatient and Minor Ops service
- Launch of our new mobile MRI scanner to support diagnostic demand and create a full pathway for patients
- Q1 2024 we entered into DMAS agreement with NHS
- March 2024 we welcomed a £100k investment – purchasing a new Ultrasound machine and increasing our capabilities for Paediatrics, Echocardiograms and Early Pregnancy Scans



One Ashford Hospital



About the Hospital

One Ashford Hospital is an elective inpatient facility encompassing 20 en-suite patient rooms and 6 individual day procedure rooms. These facilities are further supported by a modern operating theatre suite catering for a range of surgical procedures and treatments. One Ashford also provides specialist physiotherapy services alongside outpatient diagnostic facilities including X-Ray, MRI, including cardiac MRI, Ultrasound and endoscopy.

The last 12 months have seen a number of changes for One Ashford Hospital. Firstly the hospital gained new owners in September 2023, Phoenix Hospital Group. This new enterprise has helped continued growth and development, building on the hospital's reputation for outstanding care and satisfaction from service users. In March 2024, the hospital celebrated its 8th Birthday as it continues to offer and develop a wide range of procedures and services for the local population, including a private GP service and new GP-led Health Screening service. The hospital works closely with its Consultants and the commissioners at the Kent and Medway ICB, as well as East Kent Hospitals University Foundation Trust, supporting them with their waiting list initiatives. It also engages with local GP's, through a diverse programme of CPD events and this past year we have worked closely with Allied Health Professionals, such as Physiotherapists.

We are currently supporting 4 staff who are undergoing higher level university training through our apprenticeship levy scheme, including training as a Nursing Associate, Operating Department Practitioner, Radiographer and Pharmacy Technician.



“ Patient Satisfaction remains high, 99% of patients would recommend us to their friends and family. We capture monthly feedback, as well as requesting feedback via Doctify and Google reviews, so have a number of avenues for patients to tell us their views. Each year we develop a new strategy and this year it is based around Our People, Our Patient and Our Promise, under these 3 pillars we will strive to deliver first class, patients centred safe care. ”

Jo Nolan
Hospital Director





One Ashford Hospital Continued



OUR STRATEGIC FOCUS 2024

OUR PEOPLE

- We will support, develop and reward good quality people.
- We will listen and communicate well with each other.
- We will take pride in our work and grow in confidence by working together.
- We will treat each other with dignity & respect.
- We will challenge ourselves to expand our thinking and knowledge.

OUR PATIENTS

- We will deliver exceptional, safe and patient centred care.
- We will be open, truthful & honest in all we do for our patients.
- We will follow up to date guidelines in all areas of our work.
- We will treat all our patients as individuals, and listen to their voice.
- We will ensure our patients feel confident in our hospital and our care.

OUR PROMISE

- We will be an innovative business always striving for excellence.
- We will have robust monitoring and evaluation processes to ensure we deliver great care.
- We will grow and increase our activity in all areas.
- We will be responsible for effective cost control whilst delivering exceptional service.
- We will learn and listen to all types of feedback.
- We will be responsive to the health needs of our local community.

Highlights

- We continue to support our local GPs and Allied Health professionals
- 17 virtual and face-to-face CPD events were held during the year, conducted by members of our consultant body. We also worked with a number of GP practices and Ashford Rural PCN to support their CPD programmes
- Over the past 12 months, we have successfully recruited 11 new Consultants, bringing our total to 132. This included 3 GPs, with the launch of our private GP service in July 2023
- One Ashford Women's Health Mornings provide education on a number of topics, including Menopause, endometriosis, general gynaecology and cardiology
- We took part in the world antimicrobial resistance week, with promotion information available to staff and our patients
- We encourage staff progression, in the last year, six staff have been promoted into more senior positions





One Hatfield Hospital

About the Hospital

One Hatfield Hospital is an 18 bed elective inpatient unit located on Hatfield Business Park, offering a full range of surgical procedures and treatments. The hospital also provides specialist physiotherapy and outpatient diagnostic facilities including fast-track access to X-ray, MRI, ultrasound, and CT. It is ideally located just a short distance from the M25 and A1 motorways, ideally located for patients in Hatfield, St Albans, Stevenage, Watford, North London and throughout Hertfordshire and Bedfordshire.

Our focus and vision is to continue to develop on the foundations put in place and create the 'One' Hospital of choice in the local area for staff, consultants and patients. Our feedback throughout the last year has supported this vision, with excellent scores from our patients in both Inpatient and Outpatient settings.

Our pathways of care strive to provide the best possible care to our patients at every stage of their journey, from diagnosis to recovery. Our dedicated nursing teams and 165 specialist consultants ensure the best treatment available for any patient is promptly delivered.



Claire Armstrong
Hospital Director

“ The past year has been hugely positive, we have continued to increase our activity and support local patients with increasing ERS services, and also offering a wider provision within our GP services to offer Health Screening to our patients.

We have continued to focus on maintaining a positive and safe governance structure here at the Hospital and have seen this come through in our patient satisfaction which has seen an increase in responses and ratings. We have looked to bring in a culture of 'you said, we did' from our patient feedback, and have introduced our "Joint School" off the back of this. ”

Highlights

- Introduction of our "Joint School" to support our enhanced recovery pathways for patients undergoing joint replacement surgery, reducing the average length of stay in hospital to 1 night
- Introduced Prostate MRI Scans
- Continued improvement of management of patients post operatively with weekly wound clinics led by our IPC nurse to support aftercare
- Introduction of Hernia, Gall Bladder, Pain and Foot ERS services to our NHS patients
- Introduction of Health Screening within our GP Service





PART 4

OTHER INFORMATION



Participation in Clinical Audit

During this reporting period of April 2023 to March 2024 Phoenix Hospital Group participated in the national clinical audits and national confidential enquiries for which it was eligible to participate in. The compliance data is outlined in the table below:

Name of audit / Clinical Outcome Review Programme	% cases submitted
Hip and Knee replacement Surgery - National PROMs Programme	All patients are asked to participate, response rates vary
National Joint Registry (NJR)	One Healthcare sites: 96 – 98% PHG site 91%
National Breast and Cosmetic Implant Registry	100%

Clinical Coding

From 2016, it became mandatory for private care providers to clinically code their activity to the same standards as the NHS. This was in response to the Competition and Markets Authority (CMA) report into the private healthcare market, which looked to provide a level of transparency through comparison of private providers on the Private Healthcare Information Network (PHIN) website. This enables patients to make an informed choice regarding their healthcare provider, much the same as the Choose and Book system within the NHS. Consultants can also view their activity across different providers to ensure it accurately reflects the work they undertake. Data submitted to PHIN is also processed by NHS Digital, allowing comparisons across both the private sector and the NHS.

Clinical Coding is performed using the full case notes as the source documentation, the clinical codes are entered onto the Patient Management System (Compucare) which includes basic code validation. In addition to coding private activity for submission to PHIN, coding is completed for NHS funded activity from local NHS Trusts and ICBS. For this NHS activity, additional billing information is provided which includes generating a Healthcare Resource Group (HRG) code using the HRG-4 grouper tool and providing the billing team with the HRG as well as the corresponding tariff price.

The Clinical Coding audit is an essential component of our internal information governance regime. In order to provide accurate, meaningful statistical information, the clinically coded data needs to be accurate. Our audit is part of a robust, continuous quality assurance programme to ensure the accuracy of the clinically coded data produced for our One Healthcare Hospitals. Our audit follows an approach equivalent to that set out in the NHS Digital Data Security Standard 1 Data Quality, which specifies assessment of clinical coding based on the Clinical Coding Audit Methodology Version 15.0.

Our annual audit is undertaken by accredited, experienced and registered NHS Digital approved Clinical Coding Auditors. The audit was undertaken at One Hatfield Hospital in August 2023 and at One Ashford during June 2023.

Table - Summary of coding errors for One Hatfield Hospital

% coded incorrectly (including coder and non-coder errors)				
Primary Diagnosis	Secondary Diagnosis	Primary Procedures	Secondary Procedures	
3.50%	1.33%	1.11%	1.45%	
% coded correctly				Overall level of accuracy
Primary Diagnosis	Secondary Diagnosis	Primary Procedures	Secondary Procedures	
96.50%	98.67%	98.89%	98.55%	



Table - Summary of coding errors for One Ashford Hospital

% coded incorrectly (including coder and non-coder errors)				
Primary Diagnosis	Secondary Diagnosis		Primary Procedures	Secondary Procedures
2.50%	1.53%		1.01%	1.71%
% coded correctly				Overall level of accuracy
Primary Diagnosis	Secondary Diagnosis	Primary Procedures	Secondary Procedures	
97.50%	98.47%	98.99%	98.29%	

During 2023, Phoenix Hospital Group received a letter from the Complaints and Markets Authority (CMA) in relation to supply of data to the Private Healthcare Information Network (PHIN). An action plan was put in place for November 2023, with significant improvements made and compliance now achieved.

CQUIN (Commissioning for Quality and Innovation) Framework

Phoenix Hospital Group’s income from April 2022 to March 2023 was not conditional on achieving quality improvement and innovation goals through the Commissioning for Quality and Innovation payment framework, as no CQUIN targets were set.

Secondary Uses Service

Phoenix Hospital Group submitted records during 2023/24 to the Secondary Uses Service for inclusion in the Hospital Episode Statistics which are included in the latest published data. Our One Healthcare sites collect NHS numbers for patients from the NHS Summary Care Record accessed via a secure connection to the Health and Social Care Network. These are stored in our patient administration system CompuCare.

Compliance	Valid NHS Number	Valid General Medical Practice Code
Inpatient	50%	99%
Outpatient	97%	99%

Information Governance

Information Governance (IG) at our organisation is underpinned by a secure and robust framework that safeguards all data, assuring compliance with prevailing regulations and legislation. One Healthcare is proud of our Cyber Essentials certification, a testament to our uncompromising commitment to robust cybersecurity. As part of our transition, the rest of the Phoenix Hospital Group will be working towards this during 2024.

Phoenix Hospital Group understand the need to protect and maintain the confidentiality of patient information, and take our responsibilities in this important area very seriously. We pride ourselves on our accountability and transparency. The Caldicott Guardian, who is responsible for the security of patient information, leads this work and is ably supported by the Senior Information Risk Owner and Data Protection Officer.



We have also continued to develop and support our staff with education around Information Governance and their roles and responsibilities with the addition of a face-to-face training implemented alongside the online training we already provide. We also have regular and on-going guidance on secure passwords, phishing and email detection and other cyber security issues to ensure this remains at the forefront of our teams minds. During this reporting period, the One Healthcare team have successfully patched over 16,000 vulnerabilities across our systems, enhancing our cybersecurity posture significantly. Our policy framework mandates regular reviews and updates to maintain compliance and address emerging threats proactively.



Data Quality

Phoenix Hospital Group maintains a comprehensive data protection and governance policy framework. This is subject to regular review in order to maintain modern governance standards as set forth within the UK-GDPR and national data protection standards established by the National Data Guardian. Key to our activities is the objective that our high-quality data is fit for its intended use in supporting operational activities, decision making and planning.

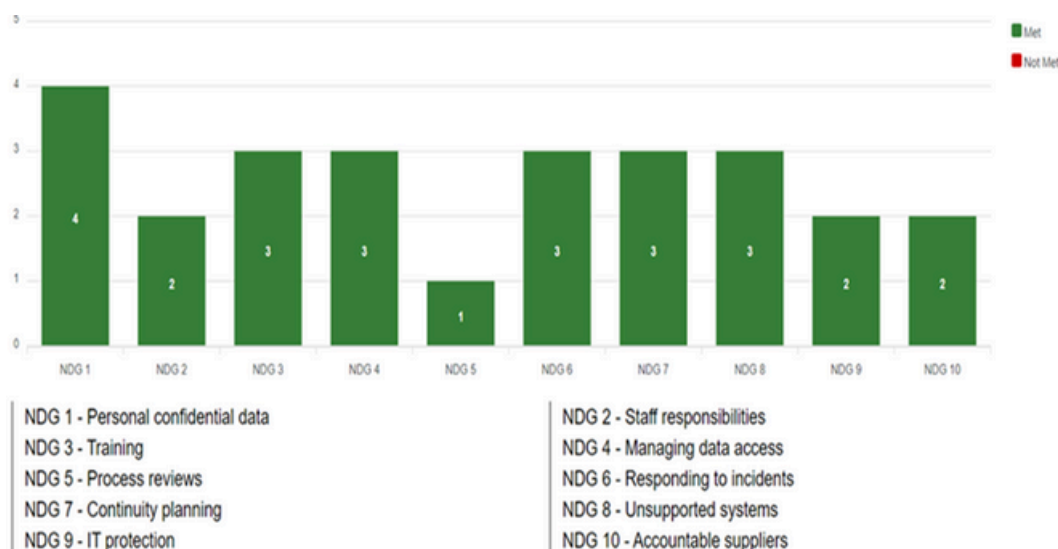
During 2023/24 Phoenix Hospital Group has taken the following actions to improve data quality:

- All staff must complete the Information Governance e-learning training course. Compliance at Phoenix sites sits at 91% while compliance for the One Healthcare sites slightly lower as we have been transferring to our new e-Learning platform, and we expect compliance to increase dramatically once all staff have been transferred over to the new e-learning system (My Learning Cloud)
- Appropriate technical controls, backup and patching processes are in place to ensure modification to software when required to fix bugs, improve security and performance
- Introduced further integration of systems and process to improve our data accuracy

Data Security and Protection Compliance

Phoenix Hospital Group submitted their Data Security and Protection Toolkit online self-assessment in June 2023. This tool allows us to measure our performance against the National Data Guardian's 10 data security standards. One Healthcare's 2022/23 annual Data Security and Protection (DSP) toolkit submission in June 2023 met all requirements. Phoenix Hospital Group's 2022/23 annual Data Security and Protection (DSP) toolkit submission also met all requirements.

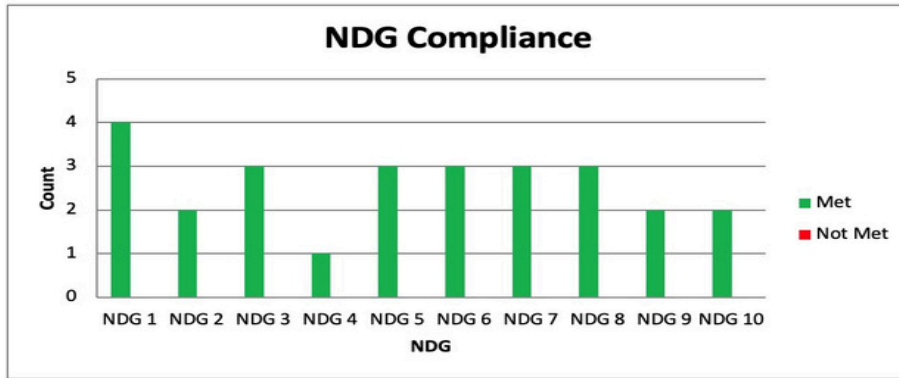
Core Phoenix - 2022/23 compliance levels



Phoenix Hospital Group's submission results for the 2022/23 DSP Toolkit are shown here. The graph demonstrates our compliance with the National Data Guardian Standards. All standards were met.



One Healthcare Partners – 2022/23 compliance levels



One Healthcare Partners submission results for the 2022/23 DSP Toolkit are shown here. The graph demonstrates our compliance with the National Data Guardian Standards. All standards were met.

NDG 1 - Personal confidential data
 NDG 3 - Training
 NDG 5 - Process reviews
 NDG 7 - Continuity planning
 NDG 9 - IT protection

NDG 2 - Staff responsibilities
 NDG 4 - Managing data access
 NDG 6 - Responding to incidents
 NDG 8 - Unsupported systems
 NDG 10 - Accountable suppliers

Information Related Incidents

All data security events and IT incidents are logged and reviewed. For the period April 2023 to March 24, we reported a total of potential data breaches as:

- 31 internal IT incidents;
- Nil ICO reportable incidents



Security/Cyber Security

Across our One Healthcare sites, email encryption is available through Egress software. However, we have also put in place the technical controls required to meet the NHS Secure Email standard (DCB1596). Due to this (and our ongoing Transport Layer Security (TLS) strategy), around 99% of our outgoing email traffic is encrypted to the TLS1.2 protocol. Tessian, our new email protection system to increase our Cyber Security resilience and avoid potential fraud, has been successfully rolled out across the sites. Tessian accurately detects and prevents advanced email threats that email gateways and built-in security within Microsoft fail to stop.

During 2023, One Healthcare’s annual network Penetration Test was performed by a specialist external company. This Penetration Test simulates a cyber-attack against our computer system to check for exploitable vulnerabilities. Any vulnerabilities identified were actioned.

The existing security systems across Phoenix Hospital Group core sites include:

- The use of Egress encryption for all external communication requiring confidentiality
- All computer systems are continuously monitored for performance and security events
- All computer systems are kept up to date by automated patching
- Office 365 is monitored for unusual login behaviour, mail rules and app registrations

Electronic Patient Record (EPR)

In our ongoing efforts to enhance patient care and operational efficiency, Phoenix Hospital Group is actively moving away from paper-based processes towards an integrated electronic system. This transition to electronic patient pathways aims to increase data accuracy, reduce manual processes and enhance the overall quality of patient care. By leveraging the advanced electronic patient records systems, we can ensure that patient data is accurately captured, easily accessible and securely stored, facilitating better clinical decision-making and improving patient outcomes. This initiative is being led by members of our IT and reservations teams, with oversight provided from our One Hatfield Hospital Director, with the aim of having the whole of Phoenix Hospital Group adopt these processes during the integration of our different systems.



Our organisation is dedicated to improving patient care through the implementation of a fully integrated Electronic Patient Record (EPR) system. Key benefits will include:

- Improved Patient Care: Providing access to comprehensive patient information in real-time, facilitating better clinical decision-making and outcomes
- Operational Efficiency: By streamlining administrative processes, reducing paperwork and manual data entry
- Enhanced Data Security: Ensuring secure storage of digital records and compliance with data protection regulations
- Improved Patient Engagement: By providing digital tools for online appointment scheduling and access to health records

Our strategy moving forward is to integrate our systems across the whole organisation, including between our electronic systems and devices, to increase data accuracy and eliminate manual processes.

Staff Training

At Phoenix, we are committed to investing in the training and development of all of our staff and celebrate our learning culture. In early 2024, we undertook a large project to move all of our staff over to one e-Learning platform – My Learning Cloud. We have also undertaken a review of our statutory and mandatory training matrix, to ensure all of our staff across the organisation are supported in undertaking their roles, through a consistent approach to training.

Over 2023/24 we have continued our focus on:

- Improving staff understanding of the new Patient Safety Incident Response Framework (PSIRF), through roll out of the level 1 and 2 on-line training through Health Education England (HEE)
- The roll out of Oliver McGowan training across our staff groups to improve awareness of Autism and Learning Disabilities, so our staff are better prepared to meet the specific needs of these patients
- Staff awareness of the new processes and requirements of the Care Quality Commissions new Single Assessment framework for regulatory compliance. In early 2024 we rolled out an internal programme of staff awareness sessions, called 'CQC Bites'. This programme was delivered by members of our Senior Leadership Team, through 'Lunch and Learn' sessions, targeting bite size sessions of a number of key regulatory compliance areas
- We look forward to our exciting journey ahead, continuing to celebrate our successes and embrace learning whenever the opportunities arise.





APPENDICIES



NHS Hertfordshire and West Essex Integrated Care Board (HWE ICB) response to the Quality Account of Phoenix Hospital Group - OneHatfield Hospital for 2023/2024.

NHS Hertfordshire and West Essex Integrated Care Board (HWE ICB) welcomes the opportunity to provide this statement on the Phoenix Hospital Group – One Hatfield Hospital Quality Account for 2023/24. The ICB would like to thank One Hatfield Hospital for preparing this Quality Account, developing future quality priorities, and acknowledging the importance of quality at a time when they continue to deliver services during ongoing challenging periods. We recognise the dedication, commitment and resilience of staff, and we would like to thank them for this.

HWE ICB is responsible for the commissioning of health services from One Hatfield Hospital. During the year the ICB has been working closely with One Hatfield Hospital in gaining assurance on the quality of care provided to ensure it is safe, effective, and delivers a positive patient experience. In line with the NHS (Quality Accounts) Regulations 2011 and the Amended Regulations 2017, the information contained within the Quality Account has been reviewed and checked against data sources, where this is available, and confirm this to be accurate and fairly interpreted to the best of our knowledge.

The ICB would like to recognise One Hatfield Hospital for their ongoing work related to the implementation of the Patient Safety Incident Response Framework (PSIRF) which sets out how the NHS responds to patient safety incidents for the purpose of learning, improving patient safety and outcomes for our population. The ICB looks forward to working in partnership and across the system as we collectively take forward PSIRF in 2024/25.

During the year the ICB have been working closely with One Hatfield Hospital gaining regular assurance on the quality and safety of provision to ensure a positive patient experience. Looking forward to 2024/25, the ICB supports One Hatfield Hospital’s quality priorities and we look forward to a continued collaborative working relationship, including through building on existing successes and collectively taking forward needed improvements to deliver high-quality services for this year and thereafter.

Mary Emson

Deputy Director of Nursing & Quality, Hertfordshire and West Essex ICB

Dr Jane Halpin, Chief Executive

Rt. Hon. Paul Burstow, Chair

