

Nuffield Health Woking Hospital

Quality Report

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Woking
Surrey
GU21 4BY






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This report describes our judgement of the quality of care at this location. It is based on a combination of what we found when we inspected and a review of all information available to CQC including information given to us from patients, the public and other organisations

Ratings

Overall rating for this location		Good	
Are services safe?		Good	
Are services effective?		Good	
Are services caring?		Good	
Are services responsive?		Good	
Are services well-led?		Good	

Summary of findings

Letter from the Chief Inspector of Hospitals

Nuffield Health Woking Hospital has 26 beds and is operated by Nuffield Health. Facilities include two operating theatres, a ward that provides level one care, outpatient and diagnostic facilities. The Nuffield Health Woking Hospital provides surgery, outpatients, and diagnostic imaging.

We visited this hospital in November 2016 as part of our national programme to inspect and rate all independent healthcare providers.

While we rated both core services and the hospital as 'good' overall, we found improvements were required to minimise risks and promote safety. We told the hospital it must:

- Maintain securely an accurate, complete and contemporaneous record in respect of each service user, including a record of the care and treatment provided to the service user and of decisions taken in relation to the care and treatment provided. This was because copies of the consultant's individual notes for private patients in the outpatient department were not kept by the hospital; these were kept by the individual consultants. The hospital had a record of the original referral and copies of diagnostic treatments performed only.

We told the hospital that it must give us an action plan showing how it would bring services into line with the regulations. The hospital provided a plan.

At this announced inspection, we focused on the action plan and found that the hospital was not yet compliant but had taken action to improve. The hospital had taken action to comply with the regulation and:

- Were working with the consultant medical staff to improve record keeping within the outpatient department.
- Had put systems in place to improve and audit compliance.

We will continue to monitor the performance of this service and inspect it again, as part of our ongoing programme.

Professor Edward Baker

Deputy Chief Inspector of Hospitals (South East)

Summary of findings

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Good



Nuffield Health Woking Hospital

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Summary of this inspection

Background to Nuffield Health Woking Hospital

Nuffield Health Woking Hospital provides private surgical and outpatient and diagnostic services to residents of the Woking area in Surrey and opened in 1962. It also accepts patient referrals from outside this area. The hospital is situated in a residential area in the second most affluent area in the UK (outside of London) where private medical insurance levels are significantly higher than the national average.

The hospital does not offer surgical services or invasive procedures undertaken on an outpatient basis to anyone under the age of 16 years, although 16 and 17 years olds are accepted.

The hospital has been registered with the CQC to carry out the following regulated activities since 2010:

- Diagnostic and screening procedures
- Surgical procedures
- Treatment of disease, disorder or injury

Additionally, it has been registered for the regulated activity of family planning since 2012

The hospital has had a registered manager in post since 2010.

Our inspection team

The inspection team was led by Sue Johnson and one other CQC Inspector.

The inspection was overseen by Alan Thorne, Head of Hospital Inspection (South East).

How we carried out this inspection

During our visit, the hospital provided us with clear and comprehensive documentary evidence that demonstrated they had completed the changes specified in their original action plan. We reviewed this information in detail.

As a focused inspection, we conducted interviews with three key members of the hospital senior management team, toured relevant hospital facilities and spoke

informally with staff to test and corroborate the documentary evidence supplied. We observed meeting minutes, reviewed audits and checklists and reviewed three patient records.

Our interviews and observations and the documentary evidence supplied by the hospital gave us a satisfactory level of corroboration to provide assurance that the required improvements had been made

Detailed findings from this inspection






Overview of ratings

Our ratings for this location are:

	Safe	Effective	Caring	Responsive	Well-led	Overall
Surgery	Good	Good	Good	Good	Good	Good
Outpatients and diagnostic imaging	Requires improvement	N/A	Good	Good	Good	Good
Overall	Good	Good	Good	Good	Good	Good

Notes

Surgery

Safe	Good 
Effective	Good 
Caring	Good 
Responsive	Good 
Well-led	Good 

Are surgery services safe?

Good 

We did not inspect this area of the service, as this was a focused follow up inspection.

Are surgery services responsive?

Good 

We did not inspect this area of the service, as this was a focused follow up inspection.

Are surgery services effective?

Good 

We did not inspect this area of the service, as this was a focused follow up inspection.

Are surgery services well-led?

Good 





We did not inspect this area of the service, as this was a focused follow up inspection.

Are surgery services caring?

Good 

We did not inspect this area of the service, as this was a focused follow up inspection.

Outpatients and diagnostic imaging

Safe	Requires improvement 
Effective	
Caring	Good 
Responsive	Good 
Well-led	Good 

Are outpatients and diagnostic imaging services safe?

Requires improvement 

Are services at this hospital safe?

At our November 2016 inspection, we rated services at the hospital as good, we rated outpatients services as good, but in outpatients we rated safe as requires improvement due to record keeping. This was because:

- The copies of individual notes for private patients in the outpatient department were not kept by the hospital; these were kept by the individual consultants. The hospital had a record of the original referral and copies of diagnostic treatments performed only. This does not meet the requirements of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This states provider must maintain securely an accurate, complete and contemporaneous record as respect of each service user, including a record of the care and treatment provided to the service user and of decisions in relation to care and treatment provided.

Outpatient Records

- Following publication of the CQC report in February 2017, the hospital submitted an action plan showing interim processes had been put in place to improve record keeping in the outpatient department. Quarterly audit and review was planned to ensure changes were sustained and were to be reported through to the hospital's Quality and Safety/Clinical Governance and Medical Advisory Committees. The action plan was

dated 15 February 2017 and stated that activity to ensure full compliance from the Consultants was expected to require monitoring during the period 2017 to 2018 with quarterly audits.

- At the focussed inspection, we saw that the hospital had established a medical records committee to support the capturing of patient records information in the outpatients department. Minutes of the meetings held on the 31 March and 1 June 2017 showed discussion and progression of implementing the action plan.
- The outpatient records audit for the period from 1 January through to 31 March 2017, demonstrated poor compliance on capturing a referral letter, documentation of discussion and follow up letter. The records audit tool, was redesigned in line with the requirement for the outpatient patient records and a commitment was made to audit every three months.
- The minutes of the last three medical advisory committees showed discussion and agreement that all consultants must provide the hospital with records for each patient attending the outpatient department.
- We saw a letter to all consultants dated 31st March 2017 from the hospital manager and medical advisory committee lead which stated all consultants must provide the hospital with a copy of the referral letter, a copy of documentation of discussion, a copy of procedures and or medicines administered and follow up record for each patient seen in the outpatient department.
- The hospital senior management team told us they see all new consultants as part of their induction to the hospital and document the consultant's agreement that record keeping in the outpatient department will be in line with hospital requirements.

Outpatients and diagnostic imaging

- The Matron told us that they had established links with another independent hospital in the locality as many of the consultants worked across the two sites. This was seen as an opportunity to share and encourage best practice in outpatient record keeping.
- We visited the outpatient department and saw a current medical records action log on the staff information board. The action log showed all actions taken since the last records audit, for example the involvement of the consultant's secretaries to encourage best practice and the plan to re audit patient records in June 2017. If compliance did not show improvement, the frequency of audits would be increased to monthly.
- The outpatient manager showed us she was asking all consultants to use carbon copied Nuffield patient notes to ensure a copy was captured into the patient records.
- The minutes of the outpatient team meeting minutes showed discussion with staff of the records audit and actions to be taken.
- Since the inspection, a new initiative had ensured that all pre-assessment patients seen in the outpatient department had a printed copy of their past medical history, obtained from their general practitioner, placed in their patient record.
- We visited the medical records department and saw that records were kept securely.
- We looked at three sets of notes and saw that referral letters were in place.
- The Hospital Manager informed us that the new electronic patient record system 'would generate an accurate, complete and contemporaneous record for all those patients whose entire journey is within Nuffield Health Group.

- This new electronic record system is expected to be available in the next two years.

Are outpatients and diagnostic imaging services effective?

We did not inspect this area of the service, as this was a focused follow up inspection.

Are outpatients and diagnostic imaging services caring?

Good 

We did not inspect this area of the service, as this was a focused follow up inspection.

Are outpatients and diagnostic imaging services responsive?

Good 

We did not inspect this area of the service, as this was a focused follow up inspection.

Are outpatients and diagnostic imaging services well-led?

Good 

We did not inspect this area of the service, as this was a focused follow up inspection.