

# BMI Bishops Wood Hospital

## Quality Report

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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

# Summary of findings

## Letter from the Chief Inspector of Hospitals

BMI Bishops Wood is operated by BMI Healthcare Limited. It is a private acute care hospital built on the grounds of Mount Vernon Hospital - a facility operated by a National Health Service (NHS) trust. The hospital specialises in cancer services but also provides a wide range of services and specialities to adults and children over the age of three.

Pinner Park Oncology Ward (which will be referred to as Pinner Ward in this report) is the medical ward at BMI Bishops Wood. Pinner Ward is one of the two inpatient wards located on the first floor of the hospital. There are 42 beds spread between Pinner Ward and the surgical ward (Northwood). The 42 beds are made up of 29 inpatient beds, five day case beds, one enhanced recovery bed and seven chemotherapy day rooms. Beds on the surgical ward can be used to admit medical patients if all medical beds are full and vice versa. Staff from the medical ward are responsible for any medical patients on the surgical ward. Pinner Ward is open 24 hours a day, seven days a week. The hospital also provides outpatients and diagnostic imaging services.

We inspected this service in October 2016 using our comprehensive inspection methodology. We found BMI Bishops Wood to be in breach of two regulations of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 including regulation 12, which relates to safe care and treatment. We identified concerns about the administration and prescribing of chemotherapy at this location. We also found that BMI Bishops Wood was in breach of regulation 17 which relates to good governance. This was based on a failure to assess, monitor and mitigate risks related to chemotherapy as well as failure to maintain complete and accurate records for some chemotherapy patients.

We asked BMI Bishops Wood to provide an action plan detailing how they would make improvements to become compliant with the regulations and the hospital provided this action plan. On 4 October 2017, we carried out an unannounced focused inspection to follow up on concerns around the administration and prescribing of chemotherapy and to check whether the provider had made the improvements set out in the action plan provided to us.

### Services we rate

We did not rate this hospital following the inspection on this occasion. This was because we only looked at one aspect about which we had concerns at our previous inspection. Our inspection focused on the chemotherapy concern only.

The concerns we had following the October 2016 inspection were:

- Staff administered part bags of chemotherapy to patients putting them at risk of harm.
- There was no uniformity in the protocols and guidance staff referred to in relation to chemotherapy treatment at the hospital.
- We found evidence of staff without prescribing qualifications prescribing or amending prescriptions.
- Not all paper chemotherapy prescriptions altered by Registered Medical Officers (RMOs) were countersigned by a consultant. Failure to countersign prescription alterations made by RMOs in the absence of a consultant was not in line with good practice.
- The hospital did not always use proformas for paper prescribing of chemotherapy and this was not in line with best practice and increased the risk of errors.
- Some chemotherapy prescriptions had been prescribed with no route, volume or diluent. This put patients at risk of having chemotherapy administered via the wrong route or being given the incorrect dose.
- Chemotherapy had been stored in the same fridge as other medicines.

However, during our 4 October 2017 inspection, we found the provider had made changes and improvements which were:

# Summary of findings

- New processes and procedures had been implemented in relation to chemotherapy in order to improve the clarity and safety of processes at the hospital.
- The administration of part bags of chemotherapy had stopped.
- Staff told us over 93 to 94 % of chemotherapy prescriptions were electronic and this reduced the risk of errors involved with paper prescribing.
- The paper prescriptions we checked during the inspection were on proformas, were legible, and had been completed fully.
- New processes for staff training had been implemented since our visit in October 2016. This included competency based training for oncology pharmacists.
- Staff were able to access and demonstrate how they used BMI policies for chemotherapy and there was uniformity in what protocols and guidance were referred to.
- We also found that staff in the oncology department were continuing to develop further policies and procedures to make processes more robust.

We found the following areas of good practice:

- Improvements had been made in response to our findings during the 2016 inspection. For example, the administration of part bags of chemotherapy had stopped.
- There were clear protocols for the administration and prescribing of chemotherapy which staff were aware of.
- Staff in the oncology department were developing further policies and procedures to further improve medical services in relation to chemotherapy.
- The majority of chemotherapy prescriptions were on the hospital's electronic system and this meant more safeguards against errors in prescribing and administering chemotherapy.

**Amanda Stanford**

**Deputy Chief Inspector of Hospitals, on behalf of the Chief Inspector of Hospitals**

# Summary of findings

## Our judgements about each of the main services

### Service

#### Medical care

### Rating Summary of each main service

BMI Bishops Wood Hospital is a 42 bedded independent acute care hospital providing services to adults and children over the age of three. The hospital specialises in cancer services. BMI Bishops Wood also provides medical services, surgery, and outpatients and diagnostic imaging services including physiotherapy. Medical services are those services that involve assessment, diagnosis and treatment of adults by means of medical interventions rather than surgery. Chemotherapy treatments undertaken as a day case are also included within medical care. We inspected the service in October 2016 and published the report in June 2017. We had concerns about the prescribing and administration of chemotherapy within the service. Following the inspection we asked BMI Bishops Wood to make changes to the way chemotherapy was prescribed and administered. In October 2017 we carried out an unannounced inspection as a follow up to check if BMI Bishops Wood had made improvements following our inspection in 2016. We found BMI Bishops Wood had addressed our concerns from the previous inspection by making changes which improved the service. We also found that changes were continuing in order to make the systems and process around the administration and prescribing of chemotherapy more robust. We did not rate this service because we only looked at part of the service. During the inspection we focused on the prescribing and administration of chemotherapy.

# Summary of findings

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# BMI Bishops Wood

**Services we looked at:**

Medical care

# Summary of this inspection

## Background to BMI Bishops Wood Hospital

BMI Bishops Wood is operated by BMI Healthcare Limited. The hospital opened in 1990. It is a private hospital in Northwood, London. The hospital shares the site with Mount Vernon Hospital, a National Health Service (NHS) facility which is also a centre for cancer treatment. BMI Bishops Wood specialises in cancer treatment. Other services and specialities provided at BMI Bishops Wood include physiotherapy, ophthalmology, orthopaedic, ear, nose and throat surgery (ENT), gynaecology, complementary cancer therapies, palliative and End of Life care, endoscopy, urology, maxillofacial, plastic and cosmetic surgery, diagnostic imaging, pharmacy and paediatrics.

BMI Bishops Wood occupies a 42 bed capacity across both the surgical and oncology wards. This includes a five bedded day unit and seven chemotherapy day rooms, the hospital has an operating department complex consisting of two operating theatres and one minor procedures theatre and a recovery area.

The hospital's registered manager had been in post since September 2016.

We inspected medical services but only in relation to the prescribing and administration of chemotherapy to patients.

## Our inspection team

The team that inspected the service comprised a CQC lead inspector and a member of the CQC medicines team.

## Why we carried out this inspection

We inspected this service in October 2016 using our comprehensive inspection methodology. We found BMI Bishops Wood to be in breach of two regulations of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 including regulation 12, which relates to safe care and treatment. We identified concerns about the administration and prescribing of chemotherapy at this location. We also found that BMI Bishops Wood was in breach of regulation 17 which relates to good governance. This was based on a failure to assess, monitor and mitigate risks related to chemotherapy as well as failure to maintain complete and accurate records for some chemotherapy patients.

We asked BMI Bishops Wood to provide an action plan detailing how they would make improvements to become compliant with the regulations and the hospital provided this action plan. On 4 October 2017, we carried out an unannounced focused inspection to follow up on concerns around the administration and prescribing of chemotherapy and to check whether the provider had made the improvements set out in the action plan provided to us.

## How we carried out this inspection

During the inspection, we spoke with nine staff including chemotherapy nurses, an oncology pharmacist, and a consultant. We looked at seven chemotherapy prescriptions, five electronic and two in paper form. We also looked at training documents for oncology

pharmacists and some policies relating to the prescribing of chemotherapy. As a response to our findings in 2016, we asked the provider to provide us with an action plan detailing how they would make improvements in order to become compliant with the regulations. We took the

# Summary of this inspection

action plan and accompanying documents into account in carrying out this inspection and in deciding whether the provider had taken the necessary action to make improvements.

## Information about BMI Bishops Wood Hospital

BMI Bishops Wood is a private hospital specialising in cancer services. We carried out an unannounced inspection of the hospital's medical services focusing only on the administration and prescribing of chemotherapy. The hospital has both a surgical and a medical inpatient ward. We inspected the medical ward only, namely Pinner Ward.

The hospital is registered to provide the following regulated activities:

- Diagnostic and screening procedures
- Family planning services
- Surgical procedures
- Treatment of disease, disorder or injury, and
- Diagnostic and screening services.

## Detailed findings from this inspection

# Medical care

## Safe

### Summary of findings

Our key findings were:

- New processes and procedures had been implemented in relation to chemotherapy in order to improve the clarity and safety of processes at the hospital.
- The administration of part bags of chemotherapy had stopped.
- Staff told us 93 to 94% of chemotherapy prescriptions were electronic and that this reduced the risk of errors involved with paper prescribing.
- The paper prescriptions seen on the inspection were on proformas, were legible, and had been completed fully.
- Staff told us paper prescriptions were considered controlled documents in the hospital and were made available only on request by a consultant on the chemotherapy prescribing register.
- New processes for staff training had been implemented since our visit in October 2016. This included competency based training for oncology pharmacists.
- Staff were able to demonstrate how they used the hospital's policies for chemotherapy. There was uniformity in the protocols and guidance staff referred to.
- We also saw that staff in the oncology department were continuing to develop further policies and procedures to make processes more robust.

### Are medical care services safe?

#### Summary

We found the service had addressed the concerns identified during the inspection in October 2016 in relation to the prescribing and administration of chemotherapy and made improvements. These concerns were the administration of part bags of chemotherapy, chemotherapy not being stored in a separate refrigerator to general use medicines, and a lack of uniformity in the protocols and guidance staff referred to in relation to chemotherapy treatment. We also had concerns about consultants' failure to countersign prescriptions altered by Registered Medical Officers (RMOs), prescribing by staff with no prescribing qualifications, not using proformas for paper prescriptions, and partially completed and illegible paper prescriptions.

#### Medicines/Chemotherapy

New processes and procedures had been implemented in relation to chemotherapy. Staff told us the changes had improved the clarity and safety of processes at the hospital.

- In October 2016 we found there were instances when staff administered part bags of chemotherapy to patients where a reduced dose of chemotherapy was required. For example, we identified a 500mg dose of chemotherapy had been given to a patient from a 700mg bag. The use of part bags of chemotherapy introduced a high risk of error with potentially serious consequences for patients. In October 2017 we found this practice had stopped.
- All staff we spoke with told us part bags of chemotherapy were no longer being used at BMI Bishops Wood. This was also detailed in the hospital's policy.
- Where patients needed dose reductions, arrangements were made for them to return at a later date or where possible the correct bag size was issued whilst the patient was there.
- In October 2016 we found not all staff were clear on the protocols to be referred to in relation to chemotherapy with different staff referring to different protocols and

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guidance. In October 2017 staff demonstrated knowledge of what protocols and guidance they referred to and were able to show us how to access these protocols.

- Staff told us there may be rare occasions when other literature or policies from other hospitals was used. This was usually the case when patients with a rare cancer presented for treatment and a BMI protocol for that type of cancer was not already available. However, we found that staff in the oncology department were continuing to develop further policies and procedures to make processes more robust and to fill in these gaps. Overall, there was uniformity of approach in relation to policies, protocols and guidance for chemotherapy.
- Following the inspection in October 2016 we were concerned the hospital did not always use proformas for the prescribing of chemotherapy on paper. At the time, the hospital had developed a new electronic prescribing system for chemotherapy prescriptions but only breast and bowel cancer prescriptions could be completed electronically. About 60% of chemotherapy prescriptions were still in paper form. Of those paper prescriptions 90% were not on proformas. When we inspected the service in 2017 we found improvements had been made.
- Staff told us the majority of prescriptions were now on the electronic prescribing system and we saw evidence of this on the day. Staff told 93 to 94% of chemotherapy prescriptions were on the electronic prescribing system. The hospital aimed to have 95% or more of prescriptions on the electronic prescribing system and a monthly audit was being introduced to provide evidence of this.
- Following the 2016 inspection we had concerns that not all paper chemotherapy prescriptions altered by Registered Medical Officers (RMOs) were countersigned by a consultant and this was not in line with best practice. During the most recent inspection staff told us the electronic prescribing system meant that there was minimal use of paper prescriptions reducing the need for RMO to have to alter paper prescriptions.
- During the previous inspection we found instances where staff with no prescribing qualifications had prescribed or made amendments to prescriptions on the hospital's prescribing system. In October 2017 we found that the electronic prescribing system meant that only staff with prescribing qualifications could prescribe on the system. Other staff such as pharmacists could only make notes on the system but would not be able to prescribe or alter a dose. Staff told us consultants had remote access to the system and could alter remotely without having to be on site.
- We reviewed five electronic prescriptions for treatments that had been administered the previous day. All the prescriptions were complete and correctly signed on the electronic system by the prescriber, pharmacist and nurses.
- In 2016 staff told us that getting hold of consultants to amend chemotherapy prescriptions where a reduced dose was required was often difficult. As a result they asked RMOs to make the amendments. In October 2017, staff told us consultants were easily contactable when off site and that the electronic prescribing system meant consultants could make prescription amendments remotely.
- We saw two paper prescriptions in use on the day of our visit. These prescriptions were on pre-printed proformas and all details were complete and legible. Staff explained that paper prescriptions were still needed in exceptional circumstances as the validation process for new regimes on the electronic prescribing system took five days.
- Staff told us paper prescriptions were considered controlled documents in the hospital and were made available only on request by a consultant on the chemotherapy prescribing register.
- During the previous inspection in 2016, we found multiple paper prescriptions where chemotherapy had been prescribed by a consultant with no route, volume or diluent. In some cases the missing details had been filled in by the pharmacist but in some cases we found they had been left blank. This put patients at risk of having chemotherapy administered via the wrong route or being given the incorrect dose. In the most recent inspection we found improvements. All paper prescriptions we looked at were in proforma and had been completed fully and were legible.
- New processes for staff training had been implemented since our last visit. This included competency based training for oncology pharmacists. A policy detailing the

## Medical care

training process was in place. The training was supervised by senior oncology pharmacists within the BMI group. Pharmacy staff told us that enough staff had completed the training to provide adequate cover for sickness and absence.

- At the previous inspection we were concerned that chemotherapy in the ward area was not being stored in a separate refrigerator. In October 2017 we found this had been changed. There was a separate fridge for chemotherapy and this was in line with best practice.

# Outstanding practice and areas for improvement

## Areas for improvement

### Action the provider SHOULD take to improve

- During the inspection, staff told us some policies about the prescribing and administration of chemotherapy specific to BMI Bishops Wood and not BMI as a corporate provider were still being written. The

provider should continue to make improvements where they see fit in order to ensure that the prescribing and administration of chemotherapy at BMI Bishops Wood is safe.