

Nuffield Health Haywards Heath Hospital

Quality Report

<5 Burrell Road
Haywards Heath
West Sussex>
<RH16 1UD>
Tel:01444 456999
Website:[www.nuffieldhealth.com/hospitals/
Hayward's-heath](http://www.nuffieldhealth.com/hospitals/Hayward's-heath)

Date of inspection visit: 17 October 2017
Date of publication: 21/12/2017

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

Nuffield Health Haywards Heath Hospital is operated by Nuffield Health. The hospital primarily serves the communities of mid Sussex. It also accepted patient referrals from outside this area. The hospital had 27 beds. Facilities included three operating theatres, including one with laminar flow, a two-bedded area for closer post-operative observation, and outpatient and diagnostic facilities.

The hospital provided surgery, medical care, services for children and young people, and outpatients and diagnostic imaging. The main service provided by this hospital is surgery.

We previously visited this hospital in November 2016 as part of our national programme to inspect and rate all independent healthcare providers. We inspected all core services at the hospital, which incorporated all the activity undertaken. We rated both surgery and outpatients and diagnostic imaging as 'good' overall.

Within the outpatient and diagnostic service we found a breach of regulation relating to the maintenance of patient records. This breach related to both adults and the children's services within the outpatients department. If a service is in breach of regulations it means we cannot give a rating higher than requires improvement within that domain. For this reason the service had a 'required improvement' rating in safe for services for children and young people and outpatients and diagnostic imaging.

We told the hospital it must:

- Securely maintain 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.
- Records must be kept secure at all times and only accessed, amended, or securely destroyed by authorised people.

The hospital was in breach of one regulation in relation to this:

Regulation 17 HSCA (RA) Regulations 2014 Good governance (17(2) (c))

We found an area of practice that required improvement in services for children and young people:

- Services did not meet the needs of their young patients fully because many facilities were shared inappropriately with adults, resulting in a lack of privacy and dignity for young patients, and there was a lack of resources available for this patient group.

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 comprehensive report on the actions it planned to take and updated us on progress, as the issues were resolved.

The purpose of our inspection on 17 October 2017 was to see if the hospital had made the necessary changes outlined in the action plan provided. During this follow up inspection we focused on the action plan and the areas of concern highlighted in the previous report. We did not inspect any parts of the surgery core service, and focused on patient records in line with the breach of regulation and the provision for children's services only.

We cannot re-rate these services due to the period of time that had elapsed since the comprehensive inspection, therefore the rating for safe for outpatients and diagnostic imaging remains requires improvement. However, during this inspection we were assured that the hospital had met all the required improvements, recommendations and were no longer in breach of the regulations.

The hospital had significantly improved and had taken action to comply fully with regulations and we found:

Summary of findings

- Patients now have a full set of hospital records. These include outpatient activity
- Secure storage facilities were now in place for patients records, with a further area identified, and funding allocated to ensure a permanent more appropriate records store.
- All consultant documentation was duplicated and placed into the patients records. This included any had written clinic notes and GPs referral letters.
- Monthly Audits were undertaken to ensure compliance.

We also saw evidence that the hospital were stopping the children's and young person's service for children under 16, from October 2017 with current lists continuing until January 2017.

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

Amanda Stanford
Deputy Chief Inspector of Hospitals

Summary of findings

Contents

Summary of this inspection

Background to Nuffield Health Haywards Heath Hospital

Our inspection team

Why we carried out this inspection

Page

6

6

6

Services we looked at

Outpatients and diagnostic imaging; Services for children and young people.

Summary of this inspection

Background to Nuffield Health Haywards Heath Hospital

Surgery is the main inpatient activity within Nuffield Health Haywards Heath. Surgical services cover a range of specialties including orthopaedics, urology, cosmetics and general surgery. The most common surgical procedures included cataract surgery and total hip replacements.

The hospital is set over three floors and has 27 beds, and a two-bedded area for closer post-operative observation. There are two main theatres (one with laminar flow) and a third theatre used for endoscopy and pain procedures without anaesthetic.

Outpatient activity comprised on average 60% of the total activity with inpatients and day cases comprising on average 40%. The majority of patients were adults aged 18 -75. The outpatient department, located on two floors of the hospital, comprised five general consulting rooms, two

ophthalmic (eye) rooms and two minor operation or treatment rooms, plus office and storage areas. The diagnostic imaging department, on the ground floor,

included two x-ray rooms, an image viewing room, offices and stores. The physiotherapy department was located on the second floor and had three treatment rooms, an office, an equipment store and an exercise area.

Services for children and young people at Nuffield Health Haywards Heath consisted of outpatient appointments for children aged between three and 15. There were no inpatient stays for this age group. Patients aged 16 and 17 who attended the hospital were cared for under the adult pathway. The majority of patients accessed the service through a referral from their general practitioner (average of 80%) and were funded privately or through insurance policies.

The hospital had one ward and is registered to provide the following regulated activities:

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

Our inspection team

The inspection was undertaken by two CQC inspectors and was led by Charlotte Clarke.

Why we carried out this inspection

This was an announced, focused inspection to find out if the provider had taken actions to address the concerns outlined in our previous inspection and to check it had taken action against the regulatory breach outlined above.

Prior to and during our visit, the hospital provided us with clear and comprehensive documentary evidence that demonstrated they had completed the tasks and changes specified in their original action plan. During this follow up inspection we focused on areas of concern, which were centred around patient notes and record keeping in

outpatients and diagnostic imaging. We looked at improvements in relation to the safe domain, in both outpatients and diagnostic imaging and services for children and young people. We did not inspect any parts of the surgery core service.

We conducted interviews with key members of the hospital senior management team including the Hospital Manager, Matron, and the Medical records co-ordinator. We also toured relevant hospital facilities.

Summary of this inspection

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.

As this was a focused inspection to follow up on the action taken by the provider since we last inspected them in November 2016, we had not considered all of the key lines of enquiry.

Services for children and young people

Summary of findings

During our previous inspection in November 2016 we rated services for children and young people as requires improvement. Although there were many good things about the service, it breached a Regulation relating to the maintenance of patient records and we had

concerns regarding the qualifications and safeguarding training of all staff. During this inspection we were told that services for children and young people, under the age of 16, would be stopping from October 2017, with current list running until the end of December 2017. As a result of this we did not need to inspect the service.

Outpatients and diagnostic imaging

| | |
|------------|--|
| Safe | |
| Effective | |
| Caring | |
| Responsive | |
| Well-led | |

Are outpatients and diagnostic imaging services safe?

At our inspection in November 2016, we rated safety as requires improvement for outpatient and diagnostic imaging, in part due to a breach in regulation. At this inspection we reviewed the aspects of safety where we found concerns at the last inspection, to determine if action had been taken to ensure the hospital was no longer in breach of regulation.

Records

- During our previous inspection, we observed a number of outpatient records kept in a lockable filing cabinet in a utility room. We saw the folders contained care notes for patients attending the clinic for dressings or other interventions. These records were stored separately from the medical files we had previously viewed and were papers held loosely in clear plastic wallets. The wallets were labelled with patient's names and all were stored in an alphabetic filing system. Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 17 (2) (c) states the provider 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." The way the records were kept added to the risk that papers could be separated or misfiled, which was an unsafe practice. On our previous inspection we were not assured that the notes we saw had been consistently added to the files.
- During this inspection however, we found the hospital had taken several steps to ensure patient notes and records were managed in-line with expectations.

- We saw evidence in minutes of Medical Advisory Committee (MAC) meetings, Heads of Department (HoDs) meetings and the Quality and Safety Committee (QSC) meetings, outlining changes in practice and what the hospital expected in regards to record keeping.
- The hospital had employed a medical records co-ordinator to ensure notes were correctly managed. The role included preparing clinic notes and following up after clinics to ensure any copies of consultant notes were placed in files after clinics.
- The medical records co-ordinator said the role had been quite challenging at the start as there were differing methods between all the consultants and it required several reminder phone calls to ensure the correct information was passed to them for filing. However, she feels that more recently all the consultants are on board with the changes in expectation.
- When consultants had not been consistent with record keeping they were sent a letter outlining the hospitals expectations again with regards to record keeping. The letters also highlighted that their practising privileges would be removed if they failed to comply with the changes. We saw copies of these letters and were told the response following on from them had been positive.
- Regular audits were taking place to ensure the records were compliant. The audits looked at medical records and care records, and included checking the referral letter was present and clinic letters.
- The most recent audits completed in July 2017 and August 2017 showed that the records were 96% and 92% compliant respectively. Both meeting the target of 90% set by Nuffield Health Haywards Heath.
- We looked at several patient notes from a range of specialties, including: four from an ophthalmic clinic, five from neurosurgery, and a selection from consultant

Outpatients and diagnostic imaging

notes kept on site. We also reviewed some records that had been prepared pre-clinic and two sets of records from patients seen on the day of our inspection. We found they had copies of referral letters, copies of consultant notes and treatment plans all in one folder.

- Most patient notes were fixed into folders and there were no loose pages. The only exception to this was the consultant notes that were kept on-site. These were well organised and kept in separate locked filing cabinets, however the notes were not fixed into the individual files. This could lead to notes falling out or being mislaid.
- The matron informed us that the hospital planned to start auditing these notes and also verbally told us that the hospital would soon be transferring some patient records into long term storage offsite. At the same time as transferring these notes they would be replacing the folders to ensure all notes would be fixed into folders.
- The hospital had plans to convert a larger room into a more permanent records store; this would enable more space and also allow a more standardised way of filing patient records. We saw a copy of the request for funding to Nuffield Health, and saw plans of how to fully utilise this space.
- Nuffield Health is also rolling out a new fully integrated computerised note system which was currently being trialled within the corporation. Nuffield health plans for this to be fully operational within two years across all Nuffield health hospitals.

Are outpatients and diagnostic imaging services effective?

We did not inspect this area of the service, as this was a focused follow up inspection and no concerns were identified at the previous inspection.

Are outpatients and diagnostic imaging services caring?

We did not inspect this area of the service, as this was a focused follow up inspection and no concerns were identified at the previous inspection.

Are outpatients and diagnostic imaging services responsive?

We did not inspect this area of the service, as this was a focused follow up inspection and no concerns were identified at the previous inspection.

Are outpatients and diagnostic imaging services well-led?

We did not inspect this area of the service, as this was a focused follow up inspection and no concerns were identified at the previous inspection.