



KIMS Hospital Quality Account 2021

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2021 Statement of Responsibilities in respect of the Quality Account

The Directors are required under the Health Act 2009 to prepare a Quality Account for each financial year.

The Department of Health has issued guidance on the form and content of annual Quality Accounts (in line with requirements set out in Quality Accounts legislation).

In preparing their Quality Account, Directors should take steps to assure themselves that:

- The Quality Account presents a balanced picture of the Hospital’s performance over the reporting period.
- The performance information reported in the Quality Account is reliable and accurate.
- There are proper internal controls over the collection and reporting of the measures of performance included in the Quality Account, and these controls are subject to review to confirm they are working effectively in practice.
- The data underpinning the measure of performance reported in the Quality Account is robust and reliable, conforms to specified data quality standards and prescribed definitions, and is subject to appropriate scrutiny and review.
- The Quality Account has been prepared in accordance with any Department of Health guidance.
- The Hospital will ensure that all the information provided in this report is not false or misleading.

The Directors confirm to the best of their knowledge and belief that they have complied with the above requirements in preparing the Quality Account.

By order of the Board



Peter Goddard, Chairman

Date: June 2021



Simon James, Chief Executive, KIMS Hospital

Date: June 2021

Statement from Registered Manager & Chief Nurse

2020/21 has been a year where every aspect of our organisation has been challenged, as a result of the Coronavirus pandemic.

However, we have kept patient safety at the heart of all our services, and are very proud of the way in which our teams have adapted and supported our patients and each other through a very challenging year, both personally and professionally. We have continued to keep our three strategic objectives at the forefront of our changing service provision:

- Providing Safe, Outstanding Quality Care
- Working together as one team to make KIMS Hospital a Great Place to Work
- Commercial Success

Our dedicated teams of clinical and non-clinical staff continue to work within these objectives to deliver safe, outstanding quality care.

Despite all the changes and adaptations, we have had to make to the environment, ensuring we were adhering to the 2 metres social distancing requirements, the wearing of masks, appropriate use of PPE, vaccinations and testing regimes for both patients and employees as well as the changes to our patient pathways, we have continued to adapt and develop our services for our patients. In January 2021, we reviewed how we support the quality agenda for our patients and embrace the development of a Co-production framework, to ensure we collaborate more closely with our patient groups on the design, development and improvement of all services at KIMS Hospital. We introduced the roles of Patient Quality Improvement Manager and Patient Insight Lead to work on our focus on patient outcomes, and the voice of the patient within all aspects of the services offered across KIMS Hospital and Sevenoaks Medical Centre.

We have also undertaken a gap analysis of our management of doctors against the Medical Practitioners Assurance Framework [MPAF], taking into consideration the recommendations from both the Patterson and Cumberlege Reviews. As a result of this we agreed to review the structure of our Medical Advisory Committee [MAC] and should see 2021/22 develop a more cohesive way of working with the consultant body in relation to clinical governance and patient safety.

The challenges relating to recruitment and retention continue across the healthcare economy, and as a result of the pandemic we have seen staff making fundamental changes to their lifestyle, resulting in some moving closer to their families, some taking early retirement and others deciding to change their career away from Healthcare. At KIMS Hospital we have also seen some of this movement of staff, and are committed to continue to develop ways to attract, support and retain staff within our organisation. We are focused on providing the desired development programmes for those who wish to progress their careers, an example of which is one of our support workers within our Day-care team, undertaking the nursing associate programme – she is due to graduate in September 2021 – a great achievement. We are also supporting nurses on return to practice programmes and looking to develop theatre support workers to undertake the ODP training, through the Apprentice Levy.

This report also outlines our continued success in managing avoidable infections, with 100% compliance to our targets of zero Bacteraemia infections. The focus of our Infection Prevention and Control (IPC) Lead Nurse has been on COVID-19 requirements, but has also continued to manage our surgical site surveillance, mandatory reporting, and audit compliance. We achieved 85% of patient facing staff receiving the flu vaccination this year.

All of the work carried out this year relating to the IPC agenda is detailed within the Annual Director of Infection Prevention and Control (DiPC) Report.

Finally, I cannot finish without applauding the commitment shown by all our staff during the COVID-19 pandemic. They have continued to work tirelessly to ensure the care they deliver is safe and patient centred. Their dedication and commitment remains truly inspiring, and I would like to personally thank everyone for their dedication, flexibility and courage during these extremely challenging times. We will continue to develop our new ways of working over the coming year, recognising that the delivery of healthcare will need to change to ensure safety remains at the forefront of everything we do.

By order of the Board



Simon James, Chief Executive, KIMS Hospital

Date: June 2021



Jackie Groom, Chief Nurse, KIMS Hospital

Date: June 2021



About KIMS Hospital

About Us

KIMS Hospital is the largest independent hospital in Kent providing prompt, safe, quality care for our patients.

Our hospital provides services for the Kent & Medway Clinical Commissioning Group, over 350 GP practices covering a population within Kent of 1.8 million. Through this reporting period KIMS Hospital saw in excess of 8,500 inpatient and day-care patients.

At KIMS Hospital we 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 over 270 specialist consultants ensure the best treatment available for any patient is promptly delivered.

Our state of the art facilities and innovative technology support a wide range of specialist services, designed with patients in mind.

Our facilities include:

- 72 en-suite bedrooms
- 20 day-care beds
- 17 consultation/examination rooms
- 6 outpatient treatment rooms
- 5 operating theatres
- 1 endoscopy suite
- 2 Cath Labs
- Enhanced care facilities
- Comprehensive diagnostics and imaging suite, including MRI and CT
- Physical Therapy department
- Pathology and Phlebotomy
- Private GP service
- Sevenoaks Medical Centre Part of KIMS Hospital – OPD services
- Outreach clinics across Kent

KIMS Hospital is the only independent hospital in Kent to offer:

- Nuclear Medicine
- Interventional cardiology services



Key Areas

We provide services for NHS, privately insured and self-funded patients.

Our aim is to provide patients and their families with the best service, focusing on four key areas:

The Best Expertise

Our clinical teams are made up of highly qualified individuals and our management and governance teams are highly experienced with backgrounds in both the NHS and the private sector.

The Best Facilities

The hospital design was influenced by our consultants and clinicians which has allowed us to streamline fully integrated care for each patient journey.

The Best Technology

The Hospital is home to state of the art imaging, diagnostic and operating environments. We have UK reference site status for some of the UK's leading medical technology.

The Best Care

We put the care of our patients at the heart of everything we do. This year more than ever, the 6C's of nursing, care, compassion, competence communication, courage and commitment, have been tested and remain firmly embedded in the ethos of KIMS Hospital.

KIMS Hospital is a Bupa accredited Breast Care Centre and Prostate Care Centre. We are recognised for the specialist care we are able to offer our patients through our Breast Care Services and Prostate treatment. We are also a Bupa approved specialist MRI and CT and approved specialist for cataracts.

We continue to expand our boundaries of care for our patients by providing more locally accessible facilities across Kent by offering a range of outpatient services at our five outreach clinics.

We are the private hospital partner for Kent County Cricket Club.

There is continuing expansion of services available at KIMS Hospital with the availability of a new Breast Screening Service and the ongoing development of cancer services.

Mission & Values

Our Mission

To provide the highest quality of **care** in a world class clinical environment for the **people of Kent**. This means being **safe, caring, responsive, effective and well-led**.

To achieve our **Mission** we will work according to our **Values**:

- We will be **caring, confident, dynamic** and respect people.
- We will operate and communicate with **integrity** as a team to bring **quality** and **value**.



The quality of the services we provide is at the heart of what we do and we develop and continually improve our services and systems to support our Mission.

Quality Account Methodology

KIMS Hospital is regulated by the CQC and is committed to publishing a Quality Account that assesses our performance against the five key questions central to their standards.

Are our services **SAFE**?

Are people protected from abuse and avoidable harm?

Are our services **EFFECTIVE**?

Does people's care and treatment achieve good outcomes and promote a good quality of life, and is evidence based where possible?

Are our services **CARING**?

Do staff involve and treat people with compassion, kindness, dignity and respect?

Are our services **RESPONSIVE**?

Are services organised so they meet people's needs?

Are our services **WELL-LED**?

Are services well-led with clear vision, strategy and positive staff culture? Are there effective governance, patient engagement and incident and complaint management procedures?

Overall Good	Safe	● Good	Medical care (including older people's care)	● Good
	Effective	● Good	Surgery	● Good
	Caring	● Good	Intensive/ critical care	● Not sufficient evidence to rate
	Responsive	● Good	Services for children and young people	● Good
	Well-led	● Good	Outpatients	● Good

No CQC inspection was carried out in this reporting period, the last targeted inspection completed was September 2019 looking at our Surgical services and our rating remained good.

Our ongoing journey from Good to Outstanding continues with the 'Good to Outstanding Action Plan' becoming part of our strategic objective for safe outstanding care of patients and is overseen by the Hospital Management Board.



All areas across the organisation are now working towards obtaining a CQC 'Outstanding' rating.

2020 Quality Priority update

Ensuring a COVID safe environment for staff patients and visitors.

Throughout the COVID-19 pandemic KIMS Hospital consistently reviewed its ways of working in line with all guidance to ensure patients, staff and visitors were supported safely. New patient flows, social distancing, the use of facemasks and appropriate PPE measures became the norm and remain part of the ongoing safe environment within the hospital.

An external COVID swabbing drive-through clinic, situated in an area of the car park facilities within the grounds of the hospital was introduced for patients due to attend the hospital for any procedure. For all out-patient appointments, we adapted our processes to minimise the number of people within the hospital at any given time. This meant that all patients arriving by car were asked to wait in the carpark and telephone to alert us of their arrival. The reception staff would then send a text message to let them know to enter the OPD areas. This practice has continued throughout the pandemic.

PCR testing for COVID-19 was bought in-house for patient testing prior to admission for any procedures, as well as to support staff testing, which was carried out on a weekly basis. From March 2021, KIMS Hospital continued to support patient PCR testing, however, staff testing moved to twice-weekly lateral flow tests as per national guidance.

Initially, to ensure there were good lines of communication across all areas of the hospital, daily COVID meetings were set up, and a daily briefing was sent out to all staff, to keep them informed of changes to guidance and therefore our ways of working as they occurred. As we have settled into the ways we need to work relating to the management of COVID-19, these meetings have now reduced to weekly, where any new updates in guidance are discussed and changes implemented where required. KIMS Hospital continues to work as a COVID safe environment.

Freedom to Speak Up

Freedom to Speak Up remains an integral part of the organisation in the wellbeing of their staff. Over the last year the team has evolved. After one member stepped down from this role, staff across the organisation were invited to express an interest in becoming a Guardian, which lead to an overwhelming positive response from across the hospital. After an informal interview process, it was agreed to appoint three additional Freedom to Speak Up champions, to work alongside the remaining Guardian, therefore expanding the team to ensure easier availability, and an opportunity for staff to raise any concerns sooner.

The Guardians team attend induction week to give a short introduction of their roles and how they can be contacted to all new members of staff. A dedicated email address is available for confidential communication to the Guardians, which runs alongside other communication channels such as, by telephone or in person. Drop in sessions happen at both the Maidstone and Sevenoaks sites, and the team have also introduced walk around sessions, to highlight the role and the support it can provide.

The team meet quarterly with the KIMS Hospital Chairman where any concerns raised in that period are discussed in a confidential environment. The team have access to the Chairman and other board members at any time should there be a concern raised that needs to be addressed immediately. The hospital now submits required data to the National Freedom to Speak Up office on a quarterly basis regarding any concerns raised.

VTE Exemplar

KIMS Hospital continue on the pathway towards VTE exemplar status working across all areas of the extensive criteria required to meet the standard of excellence. Our multi-disciplinary working party continues to meet and work through the action plan in place against the standards.

A provisional application stating our intent to apply for full exemplar status was submitted in late 2020 after a presentation was given to the Hospital Management Board on the ongoing progress and timeframe for completions.

An essential element of the standards is evidence of staff training against the guidelines and standards regarding VTE, this is now at 70% of all KIMS Hospital staff, and there are further plans being developed to support

this training for all consultants who have not accessed training through either their NHS practice, or other healthcare providers they work with.

A new approach to the collation of data required against the standard criteria has been implemented which is hoped will show completion of all requirements by early 2022, at which time a further application for Exemplar status will be made.

MEET OUR NEW FREEDOM TO SPEAK UP TEAM



Laurel
Neame



Freedom to
Speak Up
Guardian

Freedom to Speak Up Champions



Jodie Dalton



Colin Brisley



Helen Cooksey

CHAT TO OUR FREEDOM TO SPEAK UP TEAM

YOU CAN TALK TO OUR FREEDOM TO SPEAK UP TEAM BY EMAILING SPEAKUP@KIMS.ORG.UK OR YOU CAN CALL OR FIND THEM IN PERSON.



Safe

Safe

Are people protected from abuse and avoidable harm?

Ensuring services across the organisation are safe is a key KIMS Hospital strategic objective.

Risks to patient safety are identified through a number of routes including routine and ad hoc audit, risk assessments, complaints, adverse incident reporting and raising concerns

but more routinely from tracking trends in performance indicators.

Throughout KIMS Hospital the staff work together as One Team to ensure hospital policies and procedures are adhered to.

This helps to reduce infection rates, put checks in place to prevent harm and mistakes, and ensures strong lines of communication between hospital staff, patients, and their families.

Infection Prevention & Control

KIMS Hospital has, since its inception, placed infection, prevention & control (IPC) at the heart of good and safe clinical practice and is fully committed to reducing the risks of healthcare associated infections (HCAIs) being acquired within our hospital.

It is recognised that infection control is everybody's responsibility and must remain a high priority for the organisation ensuring the best outcome for all of our patients.

KIMS Hospital has implemented robust audit and surveillance, an effective training programme and has a zero-tolerance approach to avoidable infection. This collective responsibility places a duty on all staff to minimise the risk of infection at all times.

A three-year infection prevention control strategy has been developed which sets out our continued commitment to ongoing monitoring and improvement across all aspects of IPC within KIMS Hospital.

The annual IPC programme focuses on ensuring the ongoing compliance with all regulatory requirements and this year demonstrated continued commitment to meeting these requirements by:

1. KIMS Hospital participates in the National Public Health surveillance programme for surgical site infection for Hip and Knee joint replacements and has subsequently increased this programme to include Breast Surgery and Abdominal Hysterectomies.
2. KIMS Hospital participates in the national patient-led assessment of the care environment programme and has demonstrated good compliance scores for cleanliness, achieving 97.89% with national standards across healthcare organisations.

KIMS Hospital has continued to focus on reducing the risk of patients acquiring a healthcare acquired infection (HCAI) from any activity undertaken while an inpatient within our hospital through continued surveillance by signing up to the National Surgical Site Surveillance Service monitoring programme for Hip and Knee replacement procedures. KIMS Hospital will be increasing its level of surveillance throughout the forthcoming year to include bowel surgery procedures.

KIMS Hospital introduced two new COVID-19 risk assessments one for patient's attending KIMS hospital which was undertaken by the admitting Consultant and revised and updated

Infection Prevention & Control (cont.)

at the time of their admission, this helped to keep our patients safe and our hospital free of Coronavirus infections. The other for staff identified as extremely clinically vulnerable and working from home as part of

the shielding process. KIMS Hospital actively participated in the Coronavirus vaccination programme with our local NHS Trust to ensure that all KIMS Hospital staff could have access to the Coronavirus vaccination.

Mandatory Reporting

The Infection Prevention & Control (IPC) annual programme (2020–2021) was designed to achieve compliance with the standards identified within the Code of Practice, and achieve all national and local infection related objectives:

Objective	Target	Achieved/Not Achieved
MRSA Bacteraemia	No Avoidable Cases	Achieved
MSSA Bacteraemia	No Avoidable Cases	Achieved
Clostridium difficile	No Avoidable Cases	Achieved

KIMS Hospital have maintained their excellent record against national compliance targets with no cases of Clostridium difficile or MRSA throughout the reporting period.



0 Cases of MRSA
1 Case of C. Difficile
Since opening in 2014

Adverse Incident Reporting

The DATIX incident management system is used to report and record investigation into any incidents that occur across the organisation. These include clinical, non-clinical and Health & Safety incidents along with complaints and compliments.

Incidents are monitored in several ways within the organization; locally at team meetings, at the weekly DATIX review meeting (ensures investigation and actions are assigned to the correct individual(s)), monthly governance meetings, including Clinical Effectiveness.

The Quality and Governance Committee monitors all incidents reported in relation to departments noting any trends.

Significant incidents / never events and trends, when identified, are discussed at the weekly Hospital Board meeting. The final review and discussion occurs at the Quarterly Quality and Governance Sub Committee meetings.

Figure 1 shows the number of incidents raised in 2019-20 and in this reporting year 2020-21.

There is a slight reduction in incident reporting in this period, this in part is due to the lower patient numbers over the reporting period. It also indicates improvement actions put in place are now becoming effective.

No trends were identified throughout the reporting period.

Incident Reports

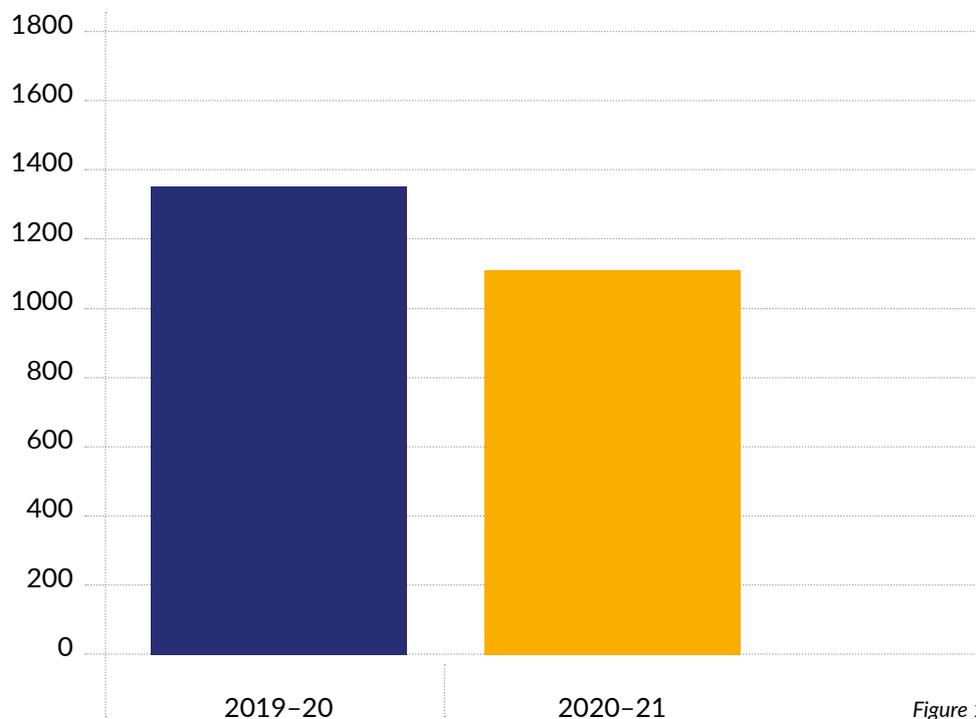


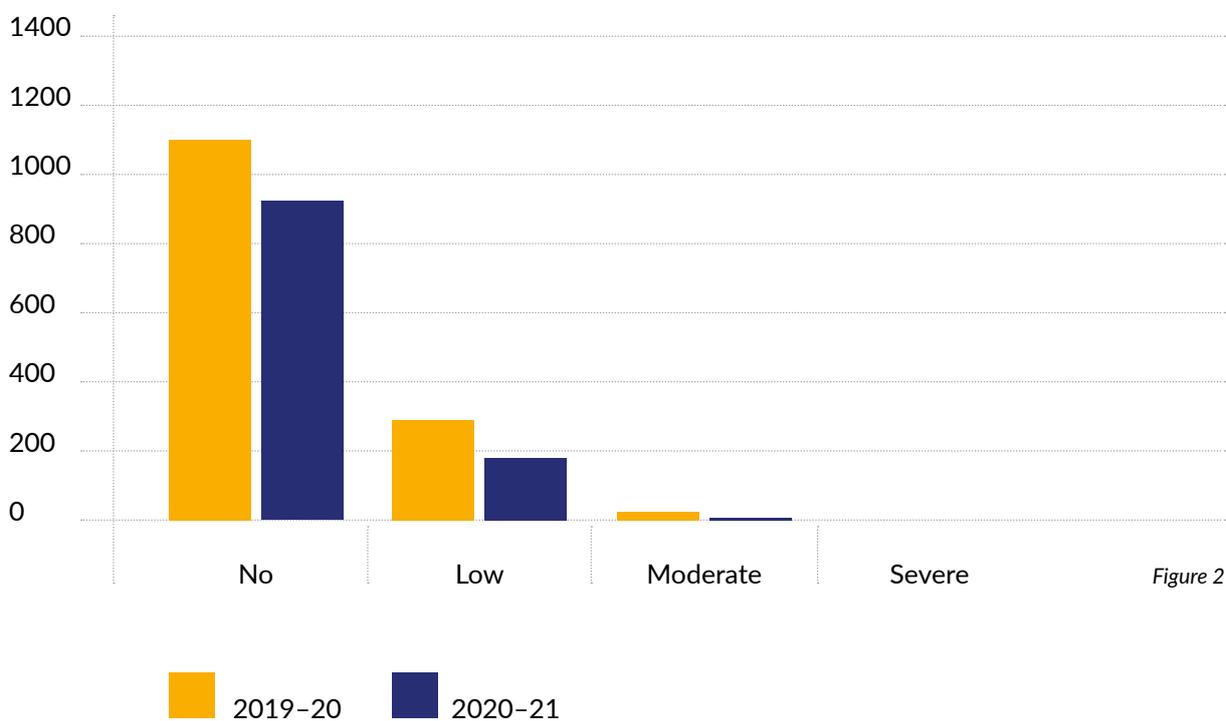
Figure 1

Incident By Severity

Figure 2 shows the breakdown of incidents by severity. The majority of which cause no harm, due to the event having occurred but leading to no injury or harm. Harm events are broken down further to low harm, moderate harm and severe harm incidents.

No severe harm incidents occurred in this reporting year.

Incident by severity



“Everything was excellent, every aspect of the overall experience was to an extremely high standard. Everybody I met was very friendly, approachable and professional.”

Patient feedback, April 2021

Never Event & Lessons Learnt

Wrong site surgery

In July 2020 a patient was admitted to KIMS Hospital to undergo release of de Quervains tendon (under local anaesthetic) of the left thumb under the care of an Orthopaedic Consultant.

The patient had been treated by the consultant over a long period of time for both trigger thumb/finger as well as issues of the de Quervains tendon.

The consultant met with the patient on admission and performed the required checks, then fully consented and marked the patients left thumb.

The patient was taken to theatre where the WHO checklist was completed by both the theatre team and the consultant and the patient proceeded into the theatre. The procedure began under local anaesthetic and was completed with no complications.

When brought to recovery and on review of the patient notes by the recovery nurse it was identified that the wrong procedure had been completed, release of trigger thumb had been performed rather than release of de Quervains tendon.

The consultant agreed that the patient would need to return to theatre for the correct consented procedure to be carried out. After discussion and an apology to the patient it was agreed that this would be done immediately.

The patient returned to theatre and the consented procedure was completed without complication.

When the patient returned to the ward the consultant visited him to discuss what had happened in theatre, performing duty of candour.

The patient was fit for discharge the same day and was scheduled for routine follow up with the consultant via outpatients.

The investigation

As with all incidents at KIMS Hospital, an investigation was initiated via DATIX and a full review of the patient's notes was undertaken for completion of a comprehensive root cause analysis (RCA). Statements from all staff involved were requested and the Medical Director met with the consultant involved to discuss the event. CQC were informed and a post never event case conference was organised, attended by all staff involved in the incident, the Medical Director, Chief Nurse, CEO and Quality and Governance manager (Investigator and RCA author).

The investigation identified, that due to the patient being treated for both trigger thumb and de Quervains tendon issues on the same digit, the consultant not making the final check of the consent form prior to starting the procedure had led to the wrong procedure being completed.

The scrub nurse, who was a long-time colleague of the consultant wrote in their statement 'the incision position was unexpected', but she trusted the consultant's skills and knowledge, therefore did not query this at the time of the procedure.

On review of the medical records it was identified that the wrong site surgery was not noted by the consultant within the documentation, and also that the duty of candour was completed without a KIMS Hospital staff member present.

Lessons learnt

After the RCA was completed and the case conference was held, several lessons learnt were identified which has led to some changes in practice.

The consultant noted that having treated the patient for two different issues with the same digit he should have marked the patient in a different way prior to the surgery.

Never Event & Lessons Learnt (cont.)

Although he had clearly indicated with markings the digit for the procedure he had not been clear where the incision should have been made.

The surgeon also acknowledged that before the first incision there should be a verbal acknowledgement to the theatre team of the procedure to be carried out. This forms a final check prior to knife to skin. The surgeon also acknowledged that he should always ensure there is a KIMS Hospital staff member present when completing the duty of candour conversation.

The surgeon has reflected and made changes to his practice, and also fed back regarding the

event in the Orthopaedic specialty meeting to share best practice and lessons learnt. Human factors were also identified as a causative factor, in that the scrub nurse had worked with the surgeon for many years and was confident of his knowledge and skills, therefore did not question the location of the incision, even though they felt it was unusual. The scrub nurse has reflected on this event and will be attending the Speaking Up for Safety training™ which explains about how to effectively communicate concerns to others for patient safety.



“I found the nursing team to be far over and above what I expected. They have outstanding knowledge, are friendly and patient. The care they provide is excellent.”

Patient feedback, January 2021



“Lovely clean, helpful hospital, couldn’t do enough for you. Lovely private rooms with great care given at all times. Made me feel at ease about my procedure, will highly recommend this hospital. ”

Patient feedback, June 2021



Effective

Effective

Does people's care and treatment achieve good outcomes and promote a good quality of life, and is this evidence based where possible?

By effective, we mean that people's needs are met and that their care is in line with nationally recognised guidelines and relevant NICE quality standards. Also, that we offer the most effective techniques to give patients the best chance of recovery.

Clinical care, treatment and decision making should reflect evidence-based best practice to ensure that the risk of inappropriate or unnecessary treatment and care is reduced to the lowest possible level. Here at KIMS Hospital we:

- Keep up with evolving practice and provide efficient and effective response to promote safe and clinically effective care

- Have systems and processes in place to ensure compliance with safety and clinical directives in a timely way, including any new safety alerts and NICE guidance
- Regularly monitor patient outcomes both locally and by use of nationally available tools such as Patient Reported Outcome Measures (PROMs)

KIMS Hospital ensures effective treatment for their patients by keeping policies up to date and inclusive of guidance from standards and best practice alongside regular monitoring of adherence to such policies. This helps to safeguard patients best interests by use of evidence-based care. By consistently monitoring patient outcomes we can assure our patients, Clinical Commissioning Groups (CCGs) and partners that our care continues to be effective.



“Kind knowledgeable staff. Clear explanations given at every interaction. Made to feel safe at all times. My dignity and privacy was maintained at all times and I felt included on everything that was happening.”

Patient feedback, March 2021

Clinical Outcomes

The ultimate measure by which to judge the quality of a medical effort is whether it helps patients (and their families) as they see it. Anything done in healthcare that does not help a patient or their families is, by definition, waste, whether or not the professions and their associations traditionally allow it. (Berwick 1997).

Patient Reported Outcome Measures (PROMs) is a national programme organised by NHS England and is run on their behalf by Quality Health and a number of other approved contractors. It is a mandatory national data collection system and its purpose is to gather key information on the health state of patients before their operation and after it. This information is needed to ensure that the operations that patients have are effective and lead to improvements in their health.

The patients from which data is collected are having planned procedures. The programme does not cover emergency cases.

The programme covers both NHS hospitals and Independent Sector Providers in England that undertake elective operations on four procedures for NHS patients. PROMs covers patients who are having procedures such as hip replacements, knee replacements, groin hernia and varicose vein operations. Here at KIMS Hospital we collect data on patients who undergo knee and hip procedures and also cataract operations. The number of patients undergoing varicose vein procedures does not meet the minimum number required for participation in the data collection system.

There are two questionnaires: the pre-operative survey, administered by staff in hospitals, and the post-operative survey, sent to patients 3 months or 6 months after their operation, direct to their home address.

Review of most recent data indicates that KIMS Hospital is not an outlier for data recorded and in fact sits slightly above National figures by 1.4%. Hips and knees are very effective across all measures and are thus seen as successful procedures within KIMS Hospital.

Figures 4 & 5 below show KIMS Hospital PROMS data against NHS England data.

EQ5D Total Knee Replacement

NHS England KIMS Hospital

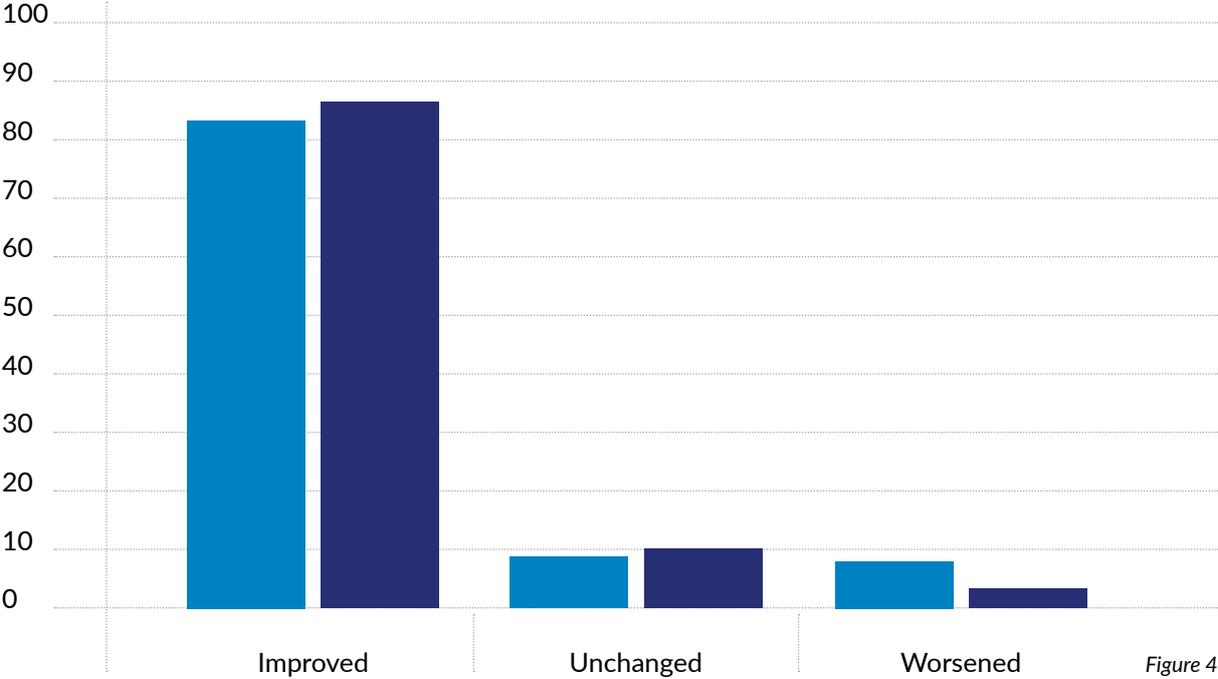


Figure 4

EQ5D Total Hip Replacement

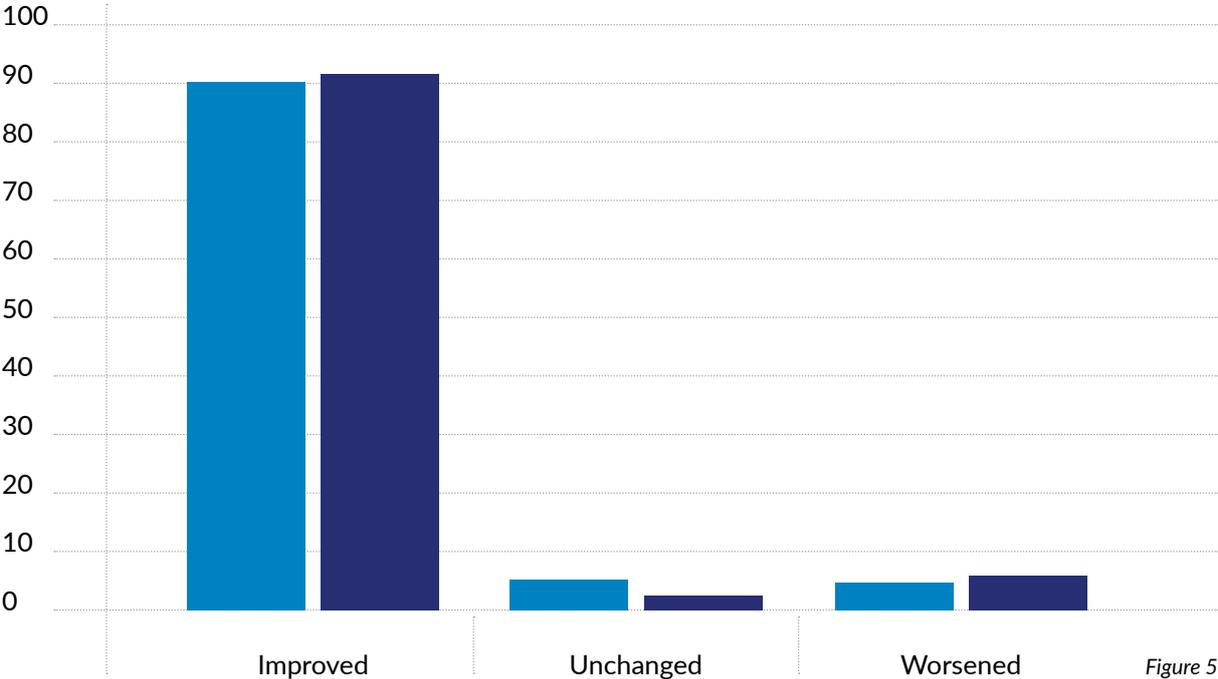


Figure 5

Unplanned Readmissions / Return to Theatre

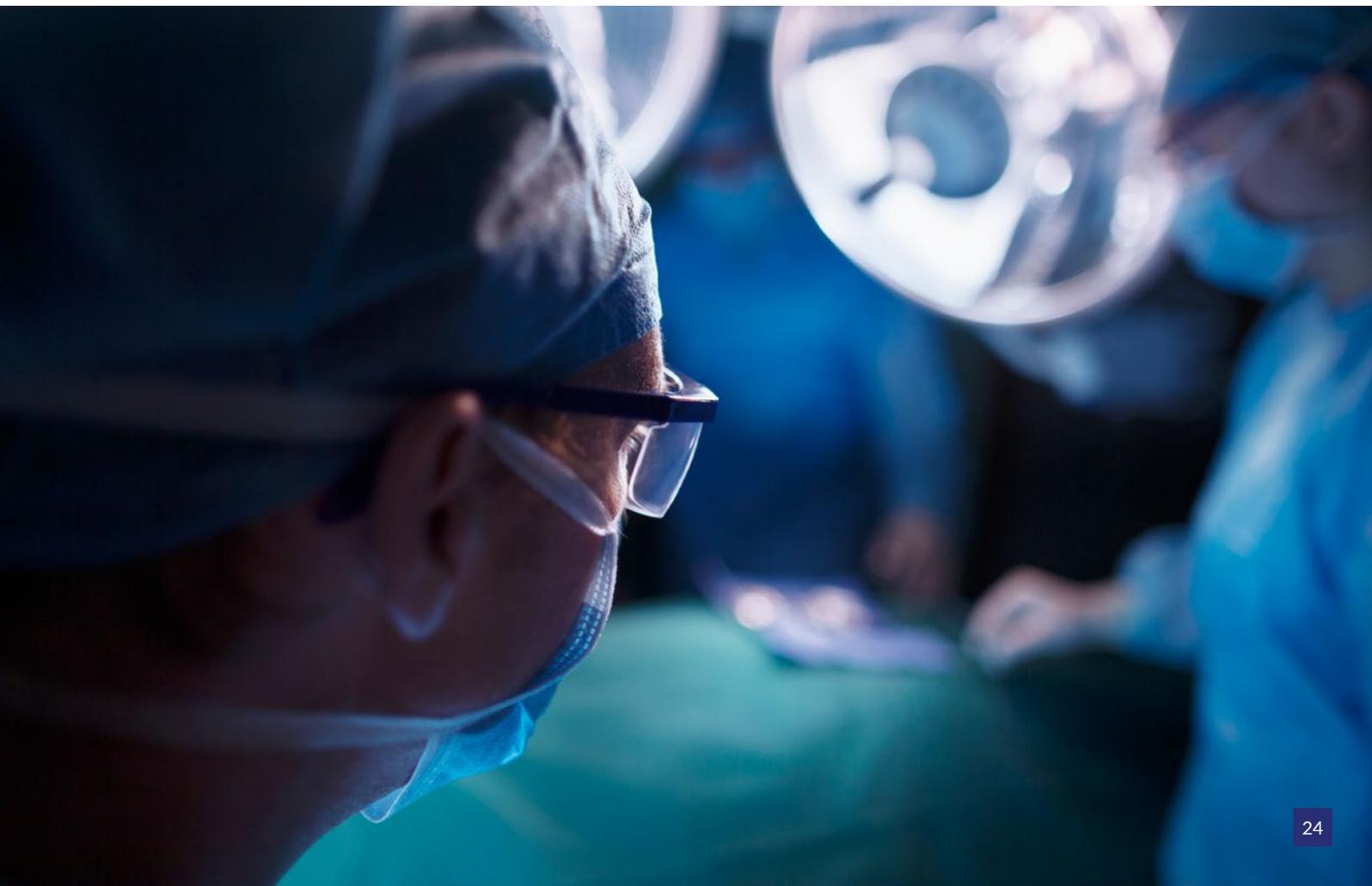
One way of measuring the quality, as well as the effectiveness of treatment and care provided by KIMS Hospital, is by looking at the number of patients who have an unplanned readmission within 30 days of being discharged and/or unplanned return to theatre. Unplanned readmissions and returns to theatre can be affected by many factors, including a patient's medical condition, age, living conditions, or post discharge support.

As there are many variables not attributable to KIMS Hospital, this may not be the best measure of quality. It is however, a useful indicator of effective development of processes and procedures which may prevent these unplanned readmissions and returns to theatre.

Both these measures have been identified as being sensitive to improvements in coordination, process of care and discharge planning for patients. All readmission and return to theatre data is reviewed and monitored at the Hospital Mortality and Morbidity meeting to ensure any trends are identified and acted upon in an appropriate and timely way.

Figures 6 & 7 show numbers and rates of readmission and returns to theatre over the last two reporting periods.

There is a decrease in both readmission and return to theatres. This reflects the lower numbers of patients seen throughout the reporting period due to COVID-19 changes, it is also reflective of the improvement processes used throughout the clinical areas including the triple lock pre-operative checks and KIMS Hospital robust processes and policies in place.



Readmission / Return to Theatre



Figure 6

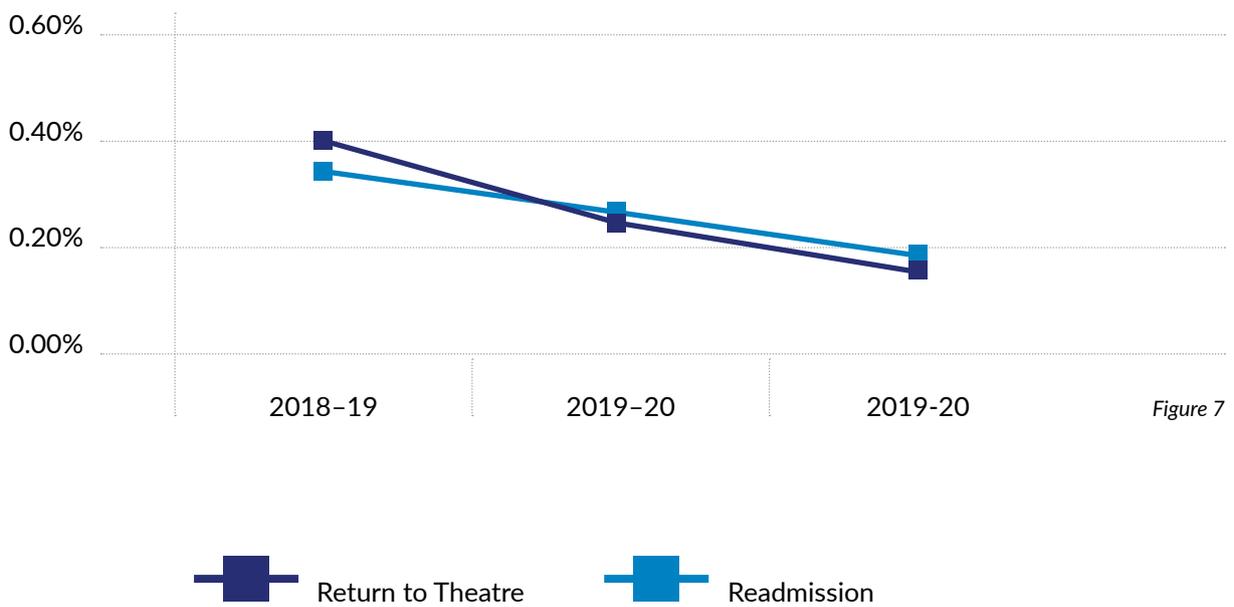


Figure 7



Caring & Responsive

Caring & Responsive

Do staff involve and treat people with compassion, kindness, dignity and respect?

Are services organised so they meet people's needs?

All staff at KIMS Hospital treat patients and their families with kindness, dignity, respect and compassion. Staff take time to interact with patients and those close to them and are always respectful of the patient's privacy and dignity.

Patients were also involved in their treatment and care if this was required. KIMS Hospital introduced 'KIMS Angels', a group of volunteers who come into the hospital and support patients both emotionally and with any help they may require.

This caring approach of all staff across the organisation is reflected in the recent 2020 friends and family test results (92% would recommend KIMS Hospital, and in February a change to friends and family to extremely likely to recommend KIMS Hospital showed a result of 95%) and in consistently positive results gained from the inpatient questionnaires.

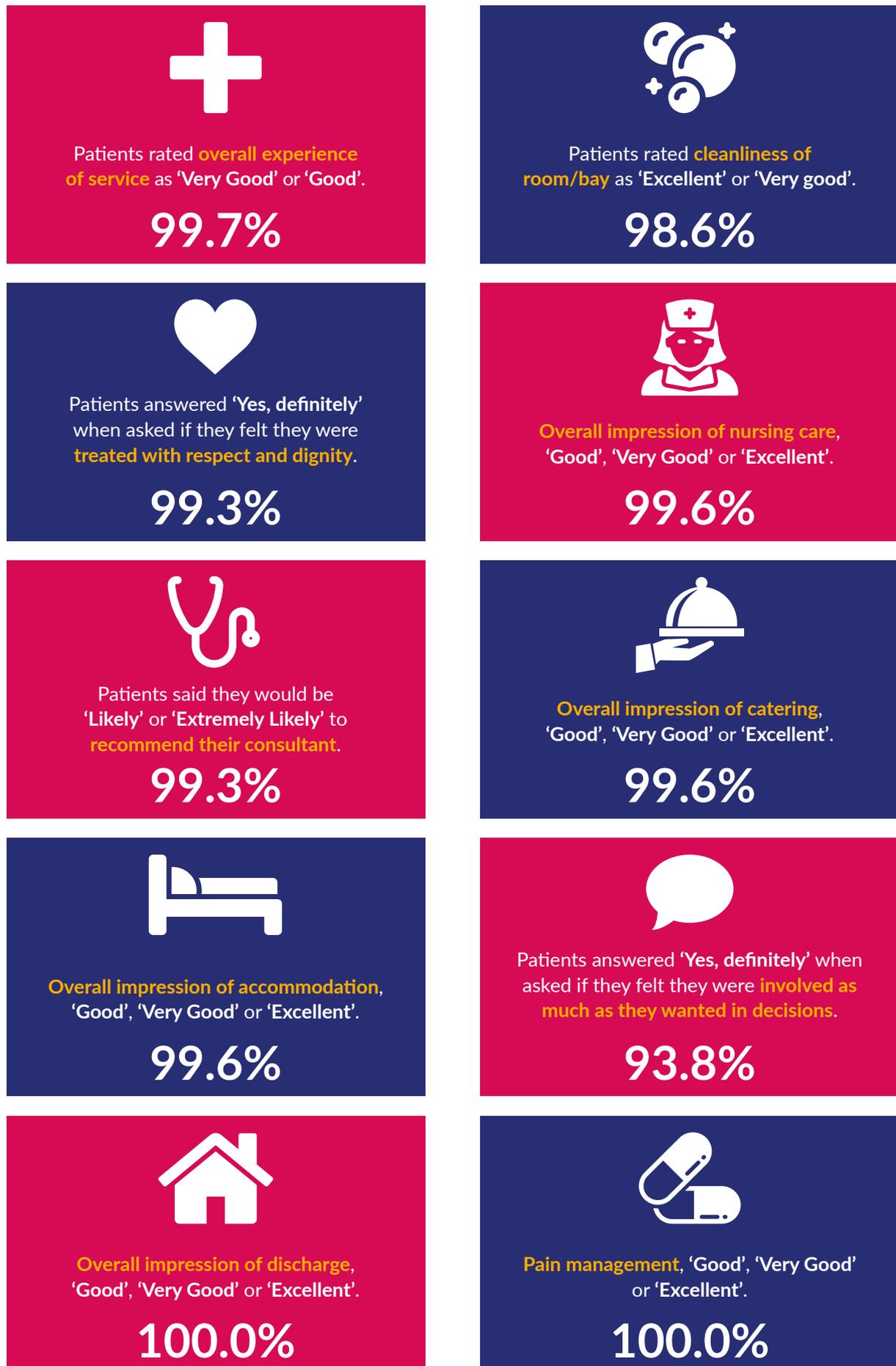
Results of these questionnaires are openly displayed around the hospital, information includes both positive and negative comments.



“Every member of staff was friendly and approachable. I was always treated with dignity and respect. I felt thoroughly supported throughout every aspect of my treatment.”

Patient feedback, December 2020

Figure 8 is the latest Patient Satisfaction Outcomes (inpatients, April 2021).



Complaints

KIMS Hospital has a responsibility to establish a complaints procedure in line with statutory requirements. The arrangements are made accessible to all patients and their families. Our process ensures that complaints are dealt with promptly and efficiently and that complainants are treated courteously and sympathetically. Our comments and complaints procedure has three main elements:

- Listening – to hear and take seriously all feedback that is received, whether that is a formal complaint, a compliment or other patient experience.

- Responding – to provide a full written response to complaints. All responses are investigated by an appropriate senior manager and reviewed by the Chief Nurse.
- Improving – our complaint processes not only provide an investigation and formal response to the complainant but aims to identify gaps in our service provision and changes that may be needed to improve our services for patients.

Learnings from complaints received are highlighted at meetings which include; Clinical Effectiveness, Quality and Governance and Board level meetings.

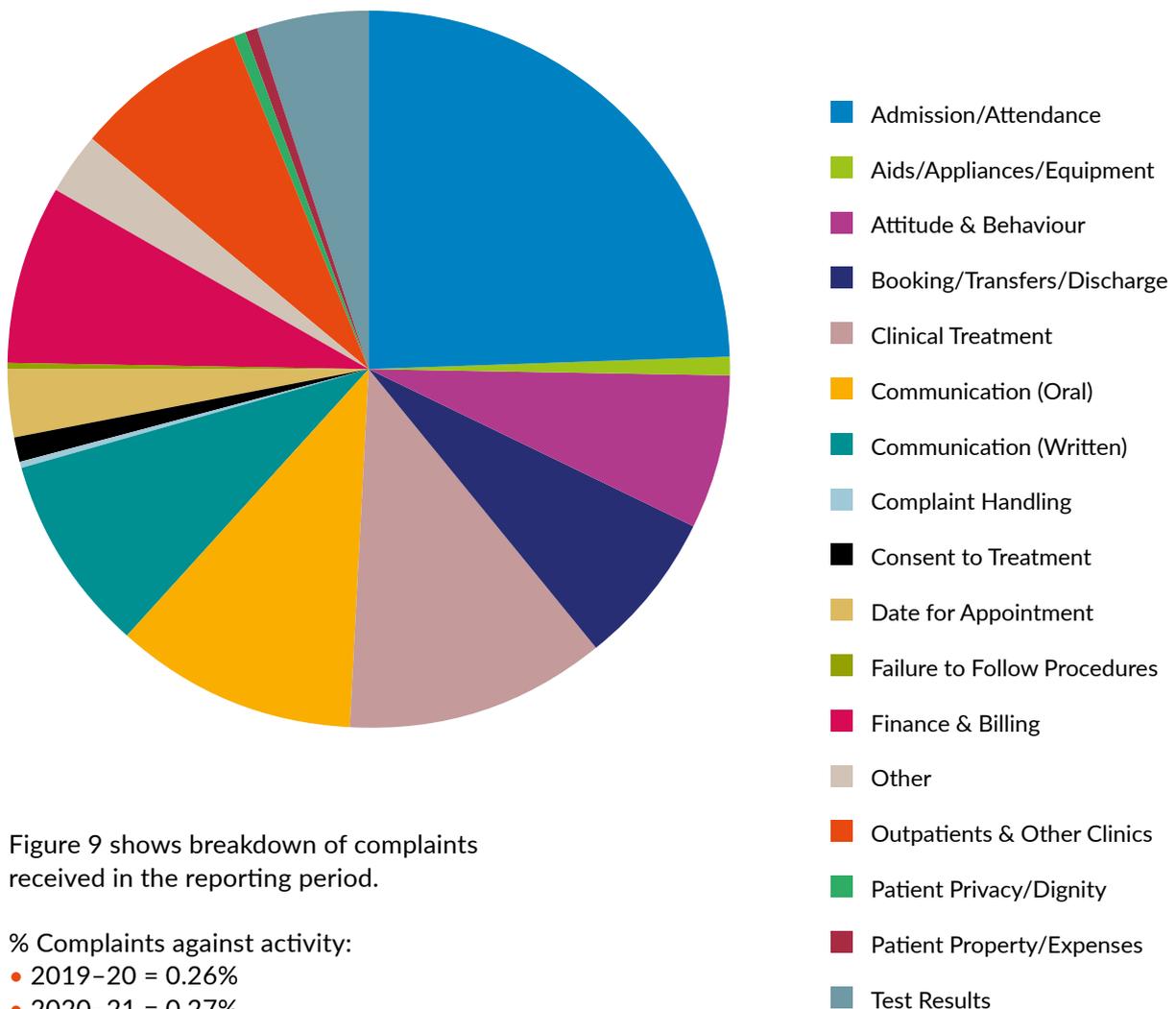


Figure 9 shows breakdown of complaints received in the reporting period.

% Complaints against activity:

- 2019-20 = 0.26%
- 2020-21 = 0.27%

KIMS Hospital Outreach Clinics

A large number of patients at KIMS Hospital undergo orthopaedic surgery, which often requires follow up appointments including review and physiotherapy. To make this easier for our patients who do not live within the locality of the hospital in Maidstone,

KIMS Hospital is continuing to develop its outreach services with an increase in the number of clinics available. This continues to be an ongoing project with further outreach clinics planned. (Figure 10) Services include x-rays, physiotherapy, pre and post op appointments.

Figure 10 KIMS Hospital Outreach Clinics



KIMS Hospital and its services during the COVID-19 Pandemic

During the height of the COVID-19 pandemic through 2020 KIMS Hospital, the largest independent private hospital in Kent, worked in partnerships with the local NHS Trusts (Maidstone & Tonbridge Wells (MTW), Medway NHS Foundation Trust (MFT) and Darent Valley Hospital (DVH) to provide a number of services to support patients requiring both urgent and long-term care. KIMS Hospital also released several of its theatre staff members to support both MTW and MFT in intensive care treatment of COVID-19 patients.

In order to achieve this, all organisations worked together to work collaboratively, setting up honorary contracts for therapy, nursing and specialist theatre staff, and providing an emergency practicing privileges process to accommodate the medical staff required to support the provision of these services.

Below is an outline of the services provided during this time:

Services provided for MTW

In March 2020 KIMS Hospital made changes to one of the wards to enable the MTW stroke rehabilitation unit to be re-housed. During this time a number of both short- and long-term patients attended the unit, and underwent rehabilitation with support from MTW therapy staff whilst nursing care was delivered by KIMS Hospital staff. This service remained in place until August 2020.

Gynaecology oncology surgery, outpatient gynaecology oncology, ultra sound and colposcopy services, urgent urology surgery, and acute renal surgical and outpatient services were also provided to MTW patients. An urgent pain management service and urgent CT scans were also available. These services ran from March 2020, until late 2020 with some services remaining until March 2021.

8 theatre staff members were seconded to MTW to support the intensive care treatment of COVID-19 patients for an 8-week period

Services provided for MFT

Throughout 2020 and continuing in 2021 KIMS Hospital provide services within the Cardiac Catheterisation Laboratory (Cath Lab) for patients requiring both elective and urgent angiograms and angioplasty.

Breast cancer surgery services were provided from early 2020 until July 2020, along with urgent urology services from May to August 2020 and then from January 2021 until March 2021.

Echocardiogram services and vascular clinics were provided between June 2020 and March 2021.

4 theatre staff members were seconded to MFT to support the intensive care treatment of COVID-19 patients for a 2-week period.

Services provided for DVH

Services to DVH included urgent CT scans, urgent urology surgery and urgent pain management services. These ran from early 2020 until March 2021.



Well-Led

Well-Led

Are services well-led with clear vision, strategy and positive staff culture?

A positive workplace culture leads to increased productivity, better employee morale and the ability to keep experienced workers. It also develops a team approach as well as individual responsibility, which ensures positive results not only for everyone in the team but also for each and every patient.

A key strategic objective is to work as One Team making KIMS Hospital a great place to work. This is reflected in our annual staff survey, which provides continually positive feedback in both communication, friends and family and engagement.

During 20/21, the COVID-19 pandemic naturally had a vast impact on KIMS Hospital and our staff. This period changed ways of working for our employees, our patients journey and the support for our local community. Our employees demonstrated our One Team ethos by supporting each other as well as our colleagues in the NHS, working on the front line in our local NHS trusts. Additionally, our employees supported our patients through this difficult time, going above and beyond, often working in different areas of the hospital to their usual job, to ensure patients had outstanding care.

During this time, it was essential that we supported and had awareness of the impact on our employee's mental health and wellbeing.

During the pandemic the health and wellbeing of our employees was paramount, it was important that we could find a platform that would reach everyone from being based in the main hospital, office based or working from home. It was after this that Evolve was born "KIMS Hospital One Team Wellness Programme" which was developed and launched to support employee wellbeing.

We discussed our thoughts with employees to understand what was required and many of the ideas were based on information and ideas they suggested. Additionally, we provided other resources and reviewed best practice from across lots of industries, not just healthcare. The purpose of Evolve was to provide not just our employees but families and friends with lots of new things to explore, some fun and different challenges, at a time when we were limited in what we could do and access. Evolve had many great tips on staying active (from Joe Wickes workouts to a class with the Royal Ballet), working from home, a series of webinars were commissioned to assist with emotional resilience that cover topics like – 'Am I the only one feeling like this' and you can even go on a tour of the Great Wall of China – a virtual holiday experience. Three editions of Evolve were published during this time.

Due to the pandemic and a change in our priorities we implemented two Wellness Touch Point Surveys to enable us to understand how our employees were feeling. These initiatives reflect that the hospital is well-led and administered, and that morale and culture is a top priority. Both health and wellbeing of staff at KIMS Hospital is of high importance and we continue to grow and develop our strategy to support both physical and mental wellbeing of staff.

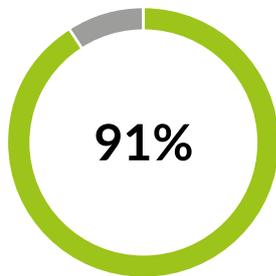
We continue to ensure our employees have an opportunity to voice any concerns confidentially, and so KIMS Hospital have increased their designated 'Freedom to Speak Up Guardians' who can be contacted at any time for confidential conversations and advice. KIMS Hospital also introduced Mental Health first aiders to ensure mental health and wellbeing of all staff, giving them somewhere confidential and supportive to turn to whenever required.

A Motivated and Engaged Workforce

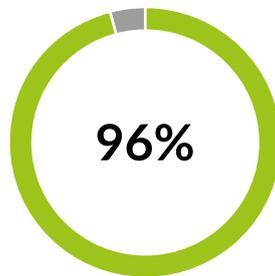
Annual Staff Survey completed
January 2020.

- 455 staff invited to participate (including regular Bank)
- 388 responses received = 85% response rate

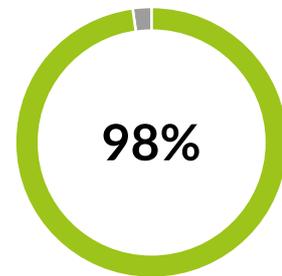
Our Staff Engagement Scores



I have confidence in the leadership of our Executive Management Team



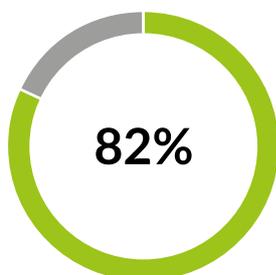
I am proud to work for KIMS Hospital



I have a good understanding of KIMS Hospital Mission

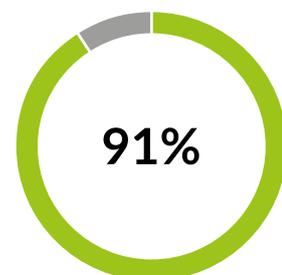
Health & Wellbeing

Following on from the touch point surveys should that employees felt support and well-led during the pandemic:



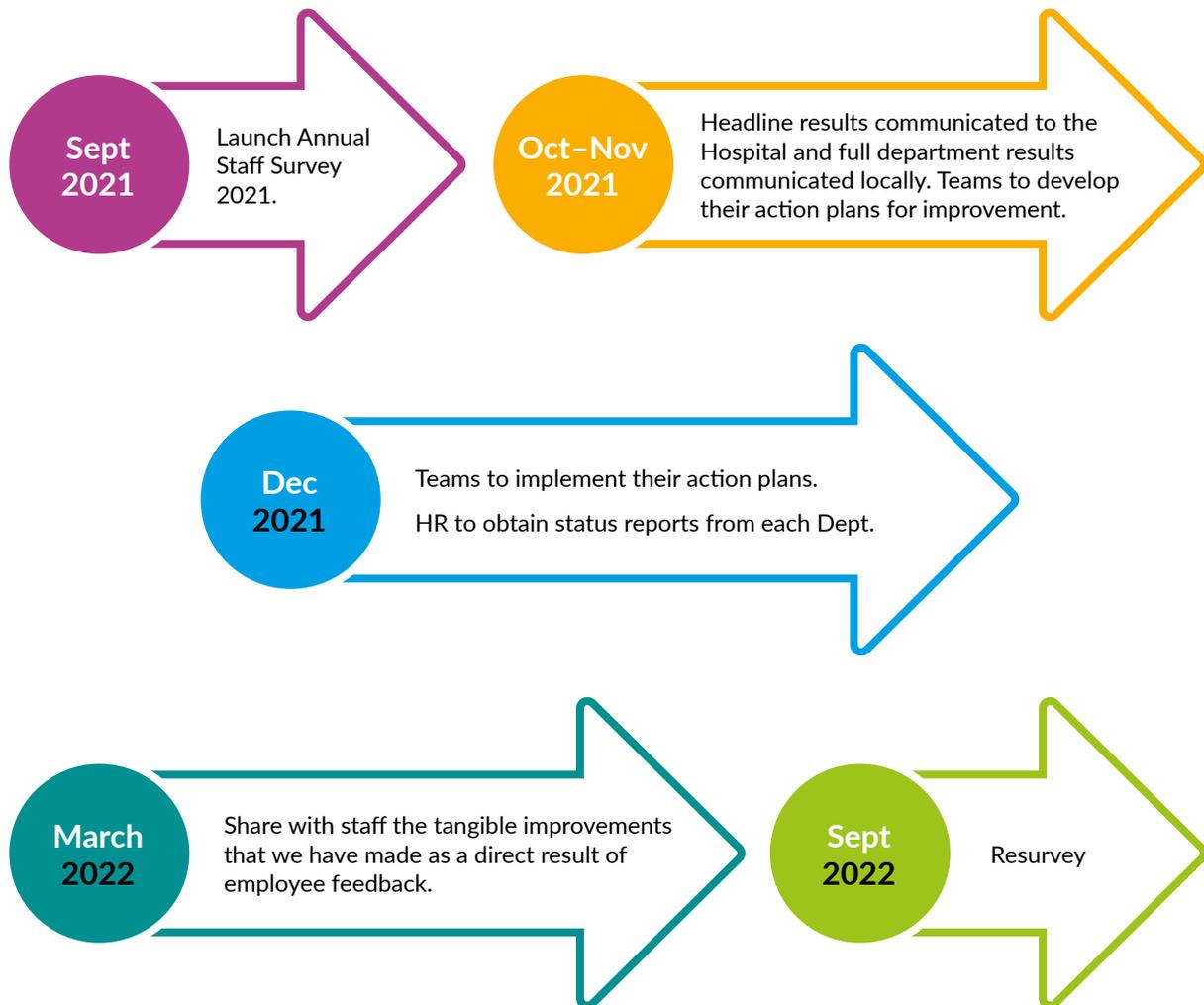
I felt support by my manager during the pandemic

I feel very thankful and well supported by the management at KIMS in this time of crisis



The organisations communication about the pandemic has been clear and timely

Our next steps...



“Kind knowledgeable staff. Clear explanations given at every interaction. Made to feel safe at all times. My dignity and privacy was maintained at all times and I felt included on everything that was happening.”

Patient feedback, March 2021

Recruitment & Retention, Staff Development & Training

Learning & Development

Our focus continues on our commitment to develop the career pathways. Supporting both clinical and support staff in developing new innovative roles to differentiate our offering. We offer preceptorships for new nurses, return to practice support and student nurse placements – a new pool of candidates for us to attract. We are also supporting staff through the nursing associate training course, and are planning to support theatre support workers to become ODPs through a course supported by the Apprentice Levy.

KIMS Hospital Career Pathways, is a great way to understand what you need to achieve within the hospital to develop your career. The Clinical teams have been supported by our Practice Development Nurse and we also work closely with the University of Kent on retention of staff and moving forward. We have a Training Co-Ordinator who supports the Non-Clinical Employees within the hospital to develop their pathways. The appraisal system supports the pathways and the development of our clinical and support teams. We have a very informative corporate induction that ensures all our new employees are trained to the highest standards before they join their departments. We continue to receive extremely positive feedback about their experiences

One Team

We embrace a One Team culture – a way of working that we believe makes our hospital unique. By being open, listening and communicating with our staff, we nurture relationships, respect staff opinions and use their views to help shape our patient's experiences. We want our staff to share their knowledge, share our values and believe in what the hospital can achieve.

Following the launch of the Hospital GO Scheme, staff were enabled to bring their ideas to the "Dragons Den" and pitch cost effective initiatives. This has been a great success where already 5 ideas were invested in by the Dragons and implemented into the Hospital. Due to the pandemic, this initiative was suspended during 2020. However, the GO Scheme will be re-launched in 2021 and inviting employees to pitch new ideas in early 2022.

We continue to focus on our Corporate Social Responsibility with links to local charities and KIMS Hospital charity of the year. This year we are proud to support a charity that was linked to a colleague that we sadly lost during the pandemic.

Our commitment to making KIMS Hospital a great place to work is evident when celebrating our long service colleagues, with a third of our employees now achieving a minimum of 5 year's service.

Quality Improvement Objectives 2020–2021

For improvements to be successful, we must provide a framework which embraces change and continuous quality improvement. There are nine quality objectives set (Appendix 1), these are to be fully reviewed during 2021-22 reporting period to ensure each of them are still appropriate with our strategic objectives and CQC domains.

Our ongoing review of quality and Governance continues to develop as a measure of ongoing

improvement across the organisation, relating to the quality and safety of our services and the care delivered to our patients. KIMS Hospital's culture of openness and transparency supports an environment of learning and improvement across all of our services, and the ongoing quality strategy ensures that these improvements continue to develop.

Priorities for 2021–2022

Implementation of LifeBox – A Digital pre-operative assessment (ePOA) for hospital and patient

LifeBox is a web based digital pre-operative assessment (ePOA) app – accessible on phone, tablet or computer, that intelligently guides the patient to provide information that supports their entire hospital journey. This allows patients to complete part of their pre-operative assessment in their own time and at their own pace. The information provided is then available for clinicians to securely access, allowing for early triage and risk stratification, which therefore streamlines workflows and supports personalised patient care throughout their entire care pathway.

The implementation of Lifebox at KIMS Hospital will begin mid-2021 and will mean that any patient due to undergo surgery will go directly to the Pre-assessment Department after their consultation where they will be given a LifeBox account by our Pre-assessment Team. This will enable the patient to complete their health questionnaire in the comfort of their own home and at a time that is suitable for them. This will also allow them easier access to family support and any relevant medical information.

For those patients unable to access the internet or where they may need extra support in completing their pre-assessment, the team will be able to help and support them in using LifeBox under the Digital Assist element of the programme, during an arranged pre-assessment appointment.

LifeBox has been chosen as it will enable the KIMS Hospital team to review patient's suitability for surgery more effectively and efficiently. In addition, through a series of videos, LifeBox also helps educate patients about their pathway, including, consent, the procedure and anaesthetics. This in turn supports better informed patient consent. The information provided is then available for clinicians to securely access, allowing for early triage and risk assessment, which streamlines workflows and supports personalised patient care.

LifeBox is also used to monitor post-operative recovery at home allowing patients with significant concerns to be flagged to clinical staff, thus the system not only supports the pre-operative aspects of patient care, but can be used for the entire patient journey.

Priorities for 2021–2022 (cont.)

Introduction of Patient Quality Improvement Manager

KIMS Hospital has introduced a new role within the Clinical team the Patient Quality Improvement Manager – This role supports the organisational focus on quality of care, patient safety, and patient experience.

The everchanging world of healthcare is now becoming even more focused on the needs and wishes of patients to ensure patient centred pathways, and to ensure the focus is on co-production working. The new CQC strategy brings focus on people's needs and their experiences rather than on how they are delivered, and therefore to ensure KIMS Hospital aligns itself to these new ways of working the Patient Quality Improvement Manager has been introduced.

Their role will have responsibility for the development of the patient outcome agenda, and will bring patient focus to the forefront of the organisation's plans for service improvement, design and delivery. In conjunction with the Chief Nurse, Medical Director and operational leaders, the clinical direction and leadership of the hospital remains to deliver safe, outstanding, quality patient care in line with the KIMS Hospital vision and strategy.

The role will also be responsible for championing the patient experience across the organisation from board to ward and ward to board, and promote a multiagency collaborative approach to quality improvement. We have also introduced another key role, the Patient Insight Lead, who reports to the Patient Quality Improvement Manager and, together they will lead joint working across the organisation, ensuring improvements are made in all areas including outreach clinics and Sevenoaks Medical Centre.

Collaborative working with other organisations

KIMS Hospital is an advocate of collaborative working and understands the advantages of this way of working. It reduces duplication of effort, improves working relationships and provides a better experience for patients who use the services by reducing waiting times and improving the entire patient journey.

Over the coming year KIMS Hospital will begin some new collaborative ventures including: BUPA Health assessment Clinic – following a successful tender process, KIMS Hospital is to become a franchise partner of BUPA Health Clinics. This means that we will be developing and delivering a BUPA branded service out of our Sevenoaks Medical Centre from early 2022.

BUPA Cardiology – KIMS Hospital has been working closely with BUPA to develop 5 distinct referral pathways for Cardiology patients. To improve the patient experience the pathways all start with a triage call from a Cardiac Nurse. Once triaged a patient is directed down the appropriate pathway, which involves a number of diagnostic tests and blood tests, before seeing a Consultant Cardiologist with all of the test results.

Reflux UK – KIMS Hospital is currently developing a Reflux service in partnerships with Reflux UK to offer patients a full MDT approach to reviewing their reflux symptoms including the introduction of the Linx system.



Appendix

Appendix 1 – Prescribed information

	Prescribed information	Type of trust	Comment
18	<p>The trust's patient reported outcome measures scores for:</p> <ul style="list-style-type: none"> (i) groin hernia surgery (ii) varicose vein surgery (iii) hip replacement surgery and (iv) knee replacement surgery 	Trusts providing relevant acute services	<p>Available for 2019-20 only at time of reporting:</p> <ul style="list-style-type: none"> (1) Groin hernia (EQ-5D) = NA (2) Varicose veins - NA (3) Hip replacement (Oxford hip score) = 22.873 (4) Knee replacement (Oxford Knee score) = 15.813
19	<p>The percentage of patients aged:</p> <ul style="list-style-type: none"> (i) 0 to 14 and (ii) 15 or over <p>readmitted to a hospital which forms part of the trust within 28 days of being discharged from a hospital which forms part of the trust during the reporting period.</p>	All trusts	<p>All patients readmitted to KIMS Hospital are over the age of 15 years</p> <ul style="list-style-type: none"> i) 0% ii) 100%
20	The trust's responsiveness to the personal needs of its patients during the reporting period.	Trusts providing relevant acute services	KIMS Hospital patient satisfaction survey is given to all inpatients and measures the responsiveness to personal needs of its patients (92% for overall quality of service over the reporting period).
21	The percentage of staff employed by, or under contract to, the trust during the reporting period who would recommend the trust as a provider of care to their family or friends.	Trusts providing relevant acute services	I would recommend KIMS Hospital to friends and family if they needed care or treatment – 92%
22	Friends and Family Test – Patient. The data made available by National Health Service Trust or NHS Foundation Trust by NHS Digital for all acute providers of adult NHS funded care, covering services for inpatients and patients discharged from Accident and Emergency (types 1 and 2).	Trusts providing relevant acute services	Friends and Family recommendation of care 92%

	Prescribed information	Type of trust	Comment
23	The percentage of patients who were admitted to hospital and who were risk assessed for venous thromboembolism during the reporting period.	Trusts providing relevant acute services	Assessment for VTE for NHS patients = 97.5%
24	The rate per 100,000 bed days of cases of C.difficile infection reported within the trust amongst patients aged 2 or over during the reporting period.	Trusts providing relevant acute services	0 bed days cases of C.difficile
25	The number and, where available, rate of patient safety incidents reported within the trust during the reporting period, and the number and percentage of such patient safety incidents that resulted in severe harm or death.	All trusts	7 patient safety incidents reported, 0 reported as severe harm.

Appendix 2 – Quality Objectives

2018–2021 (under full review during next reporting period)

Quality Objectives		Strategic objectives	Quality domains	KIMS Value
1	To work towards CQC outstanding rating in all core areas.	Safe outstanding care Working as one team Commercial success	Caring Responsive Effective Well-Led	Caring Dynamic Respect Integrity Quality
2	Maintain and exceed our position in both staff and patient experience.	Safe outstanding care Working as one team	Caring Well-Led	Respect Integrity Caring
3	Continue to improve the safety culture by effectively managing risk to maintain quality of care and to develop a learning organisation.	Safe outstanding care Working as one team	Safe Caring	Caring Confident Dynamic
4	Implement and embed a quality management system (QMS) across the organisation leading to successful accreditations and certifications (ISO, JAG, VTE).	Safe outstanding care Commercial success	Safe Responsive	Integrity Quality Value
5	Actively improve and promote visibility of clinical outcomes by publication and monitoring.	Safe outstanding care Commercial success	Responsive Effective	Confident Value

Quality Objectives		Strategic objectives	Quality domains	KIMS Value
6	Compile and complete a robust audit schedule across all areas of the organisation to drive continuous improvement and a culture for change.	Safe outstanding care Working as one team	Safe Responsive	Integrity Quality Dynamic
7	Performance benchmark (using a quality dashboard) against published internal and external data.	Safe outstanding care Commercial success	Safe Responsive Effective	Confident Quality Integrity
8	Work creatively with partners to develop and sustain high quality of care as part of the health economy of the future.	Working as one team Commercial success	Effective Well-Led	Quality Caring Value
9	Value and promote our environmental and social responsibilities within the local community.	Working as one team Commercial success	Caring Well-Led	Caring Respect

KIMS Hospital is situated on the outskirts of Maidstone.



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 Free parking

 Disabled access