



KIMS Hospital Quality Account 2022

Contents

2022 Statement of Responsibilities in respect of the Quality Account	3
Statement from Registered Manager & Chief Nurse	4
Statement from the Medical Director	7
About KIMS Hospital	8
Safe	14
Effective	18
Caring & Responsive	22
Well-Led	32
Quality Objectives	38
Contact Information	40

2022 Statement of Responsibilities in respect of the Quality Account

The Directors are required under the Health Act 2009 and subsequent Health and Social Care Act 2012 to prepare a Quality Account if they deliver services under an NHS contract, have staff numbers over 50 and an NHS income greater than £130,000 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 Organisation'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 Organisation 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



Prema Subaskaran
Chairperson

Date: June 2022



Simon James
Chief Executive

Date: June 2022

Statement from Registered Manager & Chief Nurse

Over the past year our teams have continued to work within a variety of restrictions and challenges related to Covid-19. However, our focus has remained firmly based our strategic objectives of:

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

We have seen a significant turnover with staffing over the past year, so we have worked closely together to ensure patient safety remained our highest priority. I am delighted that through the hard work of our recruitment team and department managers, we have been able to recruit into most of our vacancies, and this change has brought a wealth of knowledge and experience into our teams. Our recruitment strategy has also brought new recruits from the wider international market who have settled really well within KIMS Hospital. This has meant that our commitment to providing safe, outstanding quality care has continued.

Over the past year we have worked hard to support the development of our Patient Forum, and working with this group to integrate them into the hospital structure. This has led to representation for patients being embedded into the Hospital Management Board (HMB) meetings and Medical Advisory Committee (MAC). The group has provided valuable feedback on the implementation of new services, such as LifeBox™.

Over the past year we have been looking at our quality improvement journey and

identifying services and areas of improvement across the organisation, both clinical and non-clinical.

We have agreed that we want to work at developing a partnership way of working with our patients to support our aim to put our patients at the heart of everything we do.

We have developed our Speaking Up For Safety Programme, working in partnership with our doctors, giving everyone a voice, which is both listened to and heard, and we will be working over the coming 12-18 months on the next part of this agenda: Professional Accountability.

Our focus on the management team has continued to evolve and the Leadership Action Team structure has developed further over the past year to now be our Managers Communication Forum. This has widened the group of managers to engage and work together to support key operational projects, such as reviewing terms and conditions for employees, training and development, pay and reward and quality improvement. We have continued to support managers' personal development with the ILM 3 & 5 programmes, which have now become an integral part of our training strategy.

We have continued to look at quality improvement and have spent time focused on Governance and Quality improvement, building a new team that will support our Patient Safety Strategy, which we aim to publish in the summer of 2022. This will be supported by a named Patient Safety Lead, who will work closely with the Patient Safety Specialists within Kent to deliver against the national Patient Safety Strategy. This individual will also work closely with our Patient Forum to ensure they are working alongside any development or design of services at KIMS

Hospital. We have therefore merged key roles within this change to have clear leadership and accountability for this exciting agenda.

To this end we have reviewed and simplified our Patient Satisfaction Survey, again supported by the Patient Forum, using this as an opportunity to develop and discuss key themes, and this will play a key role in the strategy as it develops. This work we believe is a key part of our journey to move from a rating of 'Good' to 'Outstanding'.

This Quality Account outlines our continued focus on avoidable infections. Within the last year we have welcomed a new clinician into the role of Infection Prevention and Control (IPC) Lead Nurse. This lead is focused on working together with all the clinical teams on the IPC agenda, as well as the integration of the latest IPC national guidance manual over the coming year. With the ongoing challenges of Covid-19 we have remained focused on supporting our patients, staff and consultants to remain vigilant as we move into the "Living with Covid-19" agenda. We have supported the vaccination programme, working together with the local NHS Trusts and encouraging our staff to take up the vaccinations, which has resulted in over 96% of all staff receiving a minimum of two vaccinations, with many also receiving the booster at the latter part of 2021. We also ran our own internal flu vaccination campaign and 78.27% of staff received a flu vaccination before the end of 2021. Details of all the work carried out over the past year is captured within the Annual Director of Infection Prevention and Control (DiPC) Report.

Over the coming year we will continue to develop our IPC Strategy, spanning the next 3-5 years.

We continue to be proud of the services we are able to offer to our patients within our diagnostics and imaging services, both at KIMS Hospital and Sevenoaks Medical Centre, and remain committed to expanding these to increase capacity on our scanners, to meet the continuous demand for diagnostic services.

Our enhanced care service has supported a number of patients with either increased medical needs or those undergoing more complex surgery through their surgical pathway, and has again been complemented through the annual audit of this service by the local Critical Care Network. This coming year we are again looking to enhance this service with additional technology and further staff training, supported by the introduction of a Clinical Skills Facilitator into our team.

We have developed our collaborative working agenda further over the past year and seen the commencement of a Bupa Health Assessment Clinic at Sevenoaks Medical Centre, the Bupa Cardiology service at KIMS Hospital as well as the Reflux service, in partnership with Reflux UK.

Our collaborative work has also expanded further within our implementation plan for the Medical Practitioners Assurance Framework (MPAF). We have undertaken a full review and transformation of our Medical Advisory Committee (MAC) structure, giving clear accountability to individuals to support medical Governance across the organisation. We are now developing the purpose of speciality meetings and the focus on patient outcomes and shared learning. This important work will continue over the coming 12 months.



We have continued to support managers' personal development with the ILM 3 & 5 programmes, which have now become an integral part of our training strategy.

When I wrote this summary last year, I praised our teams for their commitment, dedication and resilience through the challenges of the pandemic 2020/2022. At that time, we had no concept of there being further waves of Covid-19 infections and even more restrictions on our way of living. We continue to remain so proud of how our teams have supported themselves, each other and our patients through, what has remained, very challenging circumstances. As we move into the world of 'Living with Covid-19' I am mindful of the impact the past two years have had on the mental health of our teams and the wider society.

We have seen an increase in the use of our Employee Assistance Programme (EAP) service for our staff, and recognise the ongoing challenges they face. To this end we are increasing our numbers of Mental Health First Aiders across the organisation to support our teams. We remain committed to developing our new ways of working over the coming year, recognising that the delivery of healthcare is continuing to evolve with new technologies and innovation, but remaining focused on safety at the forefront of everything we do.

By order of the Board



Simon James
Chief Executive, KIMS Hospital

Date: June 2022



Jackie Groom
Chief Nurse, KIMS Hospital

Date: June 2022

Statement from the Medical Director

We are proud to continue to offer a wide variety of services covering a large number of medical and surgical specialties. It was very much the original vision of KIMS Hospital to provide as much specialist healthcare as possible, both privately and also as a partner to the NHS, in order to save the people of Kent from having to travel into London.

Having a large number of specialists working safely at KIMS Hospital, under a system of practising privileges, requires stringent systems of oversight and Clinical Governance.

Over the last year, we have co-operated widely across the health system, both private and NHS, in response to the Paterson Inquiry report and have made a number of changes to our systems for Medical Governance.

We have further enhanced our professional compliance checks and procedures, instituted some new performance metrics and re-designed our Medical Advisory Committee (MAC).

The MAC now has a chair and six divisional leads who have already had a very positive impact on our organisation. A patient representative now attends MAC meetings, further strengthening patient involvement at all levels of our organisation.

Consultants are now mandated to take part in our Speaking Up For Safety mandatory training, ensuring a safety culture where everyone can raise a concern in an appropriate manner, always free from fear of recrimination.

At KIMS Hospital patient safety comes first and learning is extracted and shared from each opportunity.

Multi-disciplinary Team (MDT) working as well as safe, informed patient consent, are also areas we are currently focusing on and we expect to deliver the relevant Paterson Inquiry report recommendations over this coming year.



Dr Thomas Reichhelm
Medical Director, KIMS Hospital

Date: June 2022





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 eight clinical commissioning groups, over 350 GP practices covering a population within Kent of 1.8 million. Through this reporting period KIMS Hospital saw in excess of 9,000 inpatient and day case 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 expert 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 dedicated nursing teams and over 270 expert consultants ensure the best treatment available for any patient is promptly delivered.

Our facilities include:

- 72 en-suite bedrooms
- 20 day case beds
- 17 consultation/examination rooms
- 6 outpatient treatment rooms
- 6 operating theatres
- 1 endoscopy suite
- Enhanced care facilities
- Comprehensive diagnostics and imaging suite, including MRI and CT
- Physical Therapy department
- Pathology and Phlebotomy
- Private GP service
- Outreach clinics across Kent

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

- Nuclear Medicine
- Interventional cardiology services

Facilities at Sevenoaks Medical Centre include:

- 16 consultation rooms
- 2 treatment rooms
- MRI, CT, X-Ray, Ultrasound and Mammography
- Physical Therapy department
- Private GP service
- One stop breast clinic
- Health Screening

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 experts 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

KIMS 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 technologies.

The Best Care

We put the care of our patients at the heart of everything we do. Our clinical leadership ensures

the 6Cs of nursing including care, compassion, competence and commitment, are embedded across all clinical and non-clinical teams.

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 for MRI and CT and also an approved specialist for cataracts. We offer Bupa Health Assessments at our Sevenoaks Medical Centre.

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 six 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 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.

No CQC inspection was carried out in this reporting period, the last targeted inspection was completed in September 2019, which looked at our surgical services and our rating remained good. In 2021 the CQC changed its methodology and now publish monthly updates with regards to an organisation's ratings based

upon the wide range of intelligence they access. Quarterly engagement meetings with our CQC representative remain a fruitful source of external oversight against the five key questions central to their standards.

Our ongoing journey from Good to Outstanding continues and in this year, we want to highlight the Pathology services in particular. Pathology has now achieved accreditation with the national accreditation body UKAS, who are appointed by HMS Government to assess and accredit services evidencing quality and safety.

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

Extract from the 2018/2019 CQC Report



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

2021 Quality Priorities Update

KIMS Hospital set itself three priorities for 2021 aimed at improving quality of care.

Implementation of LifeBox™

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 streamline workflows and support personalised patient care throughout their entire journey of care.

The implementation of LifeBox™ at KIMS Hospital began in mid-2021. LifeBox™ means that all patients listed for surgery are visible on one electronic platform that is interactive. There are generally 1,100 patients live on the system at one time at various stages of their consenting process including preparation for theatre. The patients use the system to communicate directly with the clinical team managing their pathway.

An example of its success is where patients may have a concern regarding wound healing. The patient can add a photograph of the wound describing how they feel and when the clinical staff can assess and expedite review where deemed necessary or provide re-assurance and advice electronically avoiding unnecessary visits to a GP or clinic.

Patient Quality Improvement Manager

This was a new post KIMS Hospital invested in as part of organisational reorganisation in 2020. The aim of this was by reviewing several patient-related outcome measures and patient satisfaction the manager would work with individuals, teams and departments on quality improvement projects. In 2021 a further review of good Governance was commenced,

resulting in changes of responsibilities at Executive level. The current Chief Operating Officer now has delegated authority from the Registered Manager and Chief Executive to oversee Governance for KIMS Hospital. In early 2022, due to some changes with our teams, a full review of our Governance structure was completed. The Patient Quality Improvement Manager role has now been incorporated into the revised role of Quality, Governance and Risk Manager role.

Collaborative working with other organisations

Bupa

KIMS Hospital successfully launched a Bupa Health Assessment service at Sevenoaks Medical Centre in January 2022. The service initially offered assessments by health advisors with the GP assessment service commencing in June 2022, enabling us to offer a suite of health assessments.

KIMS Hospital's Bupa Cardiology Service commenced in 2021, offering fast, seamless referrals and treatment service to patients.

KIMS Hospital has been working closely with Bupa to develop five distinct referral pathways for Cardiology patients. To improve the patient experience, the pathways all start with a triage call to 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.

This service will further develop in 2022 when it is expected that technology upgrades will enable the Bupa cardiac team to book patients directly into the KIMS Hospital Cardiology triage clinics. The hospital has received positive feedback from patients, particularly in relation to the speed of the service. Specifically, there has been very positive feedback from patients regarding the triage service taking place within 24 hours of referral, enabling all necessary tests to be

undertaken quickly and treatment changes to be implemented in less than a week.

Reflux UK

A collaboration between Reflux UK and KIMS Hospital is ongoing to create and provide a robust service for patients experiencing symptoms of acid reflux. Specific reflux referrals are reviewed by Reflux UK and booked in to see a relevant consultant; Reflux UK has a multi-disciplinary approach to reviewing patients which includes

Gastroenterologists, ENT consultants, Upper GI Surgeons, GI Physiologists and Dietetics. If reflux is identified then trained Upper GI surgeons will perform reflux surgery at KIMS Hospital including the Linx™ procedure.

We are also promoting this service across a number of specialists and GPs who may come across a patient that upon initial diagnostic investigations requires a referral into the Reflux UK service.





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 audits, risk assessments, complaints, adverse incident reporting and raising concerns but more routinely from tracking trends in performance indicators.

In 2021–2022 KIMS Hospital investigated two patients who died within 30 days of having surgery at KIMS Hospital. Both were reported to the CQC in line with regulatory requirements.

Patient one was investigated for learning purposes. No link could be identified with any act or omission of KIMS Hospital staff. Learning was found in relation to documentation of the multiple appropriate actions taken which could have been more robust. The Matron leading the investigation has continued to monitor the ongoing improvement through a regular documentation audit. Statutory Duty of Candour regulations were adhered to and the Chief Nurse met with the family several times. At a Coroner's Inquest the cause of death was deemed to be natural causes and KIMS Hospital staff were acknowledged by HM Coroner for the care delivered.

Patient two died following developing a chest infection in the community and was investigated for learning purposes. There was no evidence that any act or omission by KIMS Hospital staff contributed to the patient's unexpected death and there were no specific learning points. This was deemed to be a recognised complication of elective surgery. The investigation revealed the outcome could not have been predicted as the patient had no previous history of lung disease.

In this timeframe there have been two trends identified in regards to clinical incidents:

1. Increasing numbers of thrombosis in the post-operative period

The Governance and Clinical teams noted a gradual increase of patients experiencing thrombosis and this was escalated to the Hospital Management Board (HMB). This trend was in line with the findings of research into emerging trends noticed nationally and internationally after the Covid-19 pandemic. 19 confirmed thrombosis were identified in the year. In response, a deep dive exercise led by the Quality, Governance & Risk Manager was undertaken in Q3 of the year. Actions were commenced immediately, focussed in particular upon ensuring risk assessments were accurate. In Q4, following a thematic review of all investigations, an overarching action plan was developed and is now a standing agenda item at the monthly Quality & Governance Committee. A new Clinical Governance Lead has been appointed and currently they are collaborating with a Haematologist and Arthroplasty Surgeon and an anaesthetist to review and update the KIMS Hospital policy aimed at reducing variation in providing thromboprophylaxis across the hospital. We continue to work towards VTE Exemplar status.

2. 16 delayed wound healing/surgical site infections were investigated

The initial concern was raised by our Infection Prevention and Control (IPC) Lead who noted inconsistencies in approach to patients returning with wound related concerns. This was presented to the HMB and then the Patient Safety Committee. The Patient Safety Committee immediately initiated a wound management group that meets weekly. Our IPC Lead reviewed the patient pathway and presented a quality improvement initiative to the HMB who supported the suggestion. The group report to the Patient Safety Committee on a monthly basis and the overarching action plan is monitored through the Quality & Governance Committee.

SAFE (cont.)

Throughout KIMS Hospital the staff work together as 'One Team' to ensure hospital policies and procedures are adhered to. An example would be the 10@10 meeting every morning, where every department is represented and have the opportunity to discuss issues, incidents and feedback where

immediate learning has been identified and can be shared. In addition, it provides an opportunity to acknowledge staff that have 'Spoken Up For Safety' and to extend thanks to an individual or teams who have gone above and beyond, demonstrating commitment to KIMS Hospital's values.

Lessons Learnt

Never Events are serious incidents that are considered preventable because guidance or safety recommendations providing strong systemic protective barriers are available at a national level, and should have been implemented by all healthcare providers.

In 2021-2022 KIMS Hospital investigated two such incidents and as a result initiated an independent external safety review by colleagues working within the private sector. The HMB has accepted all the recommendations made and has a comprehensive Action Plan monitored through the Quality & Governance Committee. Two themes emerged from the learning related to Human Factors and variability in practice. As a result, in 2022-2023 there will be a greater focus upon reducing variability through

engagement with the speciality meetings where new terms of reference were agreed to enhance content and increase engagement.

In line with the NHS Patient Safety Strategy aiming to reduce the risks associated with variability in healthcare, KIMS Hospital has invested in the development of a new role within the Governance team who will become our Patient Safety Lead. The NHS Patient Safety Strategy stresses the importance of in-depth training in patient safety for Patient Safety Specialists. This will be based on the national patient safety syllabus currently in development with Health Education England. In addition, KIMS Hospital is collaborating with our local Clinical Commissioning Group to work towards moving to the new national reporting requirements.

Infection Prevention & Control

KIMS Hospital continues to place Infection Prevention and Control (IPC) at the centre of good and safe clinical practice. The hospital is fully committed to reducing the risks of healthcare associated infections (HCAIs) being acquired at our hospital. Infection control is everybody's responsibility and remains a high priority for the organisation, ensuring the best outcome and safety for all of our patients. As the Covid-19 pandemic continued the team

at KIMS Hospital worked hard to ensure that the hospital remained compliant with national guidance relating to Infection, Prevention and Control throughout, maintaining our green site hospital status.

KIMS Hospital continues to implement an audit and surveillance programme alongside a training programme for our staff. There has been increased strengthening of the IPC link

role in all departments which ensures collective responsibility for all staff to minimise the risk of infections at all times. The Infection Prevention and Control Strategy 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 ongoing compliance with all regulatory requirements. KIMS Hospital has continued its success in managing avoidable infections, with 100% compliance of the targets of zero reportable infections.

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. The hospital participates in the mandatory reporting to the National Surgical Site Surveillance Service monitoring programme for Hip and Knee replacement procedures. KIMS Hospital continues to participate in the national patient-led assessment of the care environment programme and has demonstrated good compliance scores against the national standards for health care organisations in 2021. KIMS Hospital continues to participate in the annual seasonal flu campaign, with 78.27% of staff accessing a flu vaccination during the 2021-2022 flu season.

Mandatory Reporting

The Infection Prevention and Control (IPC) annual programme (2021-2022) is 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 has maintained its excellent record against national compliance targets with no cases of Clostridium difficile or MRSA throughout the reporting period.



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 are 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 its patients by keeping policies updated 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

Effective

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.

Medical Governance

In line with best practice our Consultants' practising privileges (PPs) are regularly reviewed, making use of performance metrics and feedback received.

At the time of writing this report, 279 consultants hold PPs with KIMS Hospital and

Sevenoaks Medical Centre. Over the last year, 143 PPs renewals have taken place, 27 new consultants granted PPs and 22 consultants have either relinquished their PPs or had them withdrawn as a result of low activity.

During 2021/2022 no PPs were withdrawn or not renewed due to safety or clinical concerns.

Online Booking System

KIMS Hospital is launching a new feature that allows patients to book and pay for appointments through its website.

This new feature has been designed to offer more convenience to patients, and will allow patients to pay up front using a debit or credit card, or supply their private medical insurance details.

As the system is fully integrated with KIMS Hospital's PAS system, patients will see live appointment availability, and be able to book directly into clinics at either KIMS Hospital or Sevenoaks Medical Centre.

Onboarded consultants and their secretaries have all had demonstrations of how patients can access the new system, and have each signed contracts detailing their practice is administered in the correct way to facilitate the project.



As the system is fully integrated with KIMS Hospital's PAS system, patients will see live appointment availability



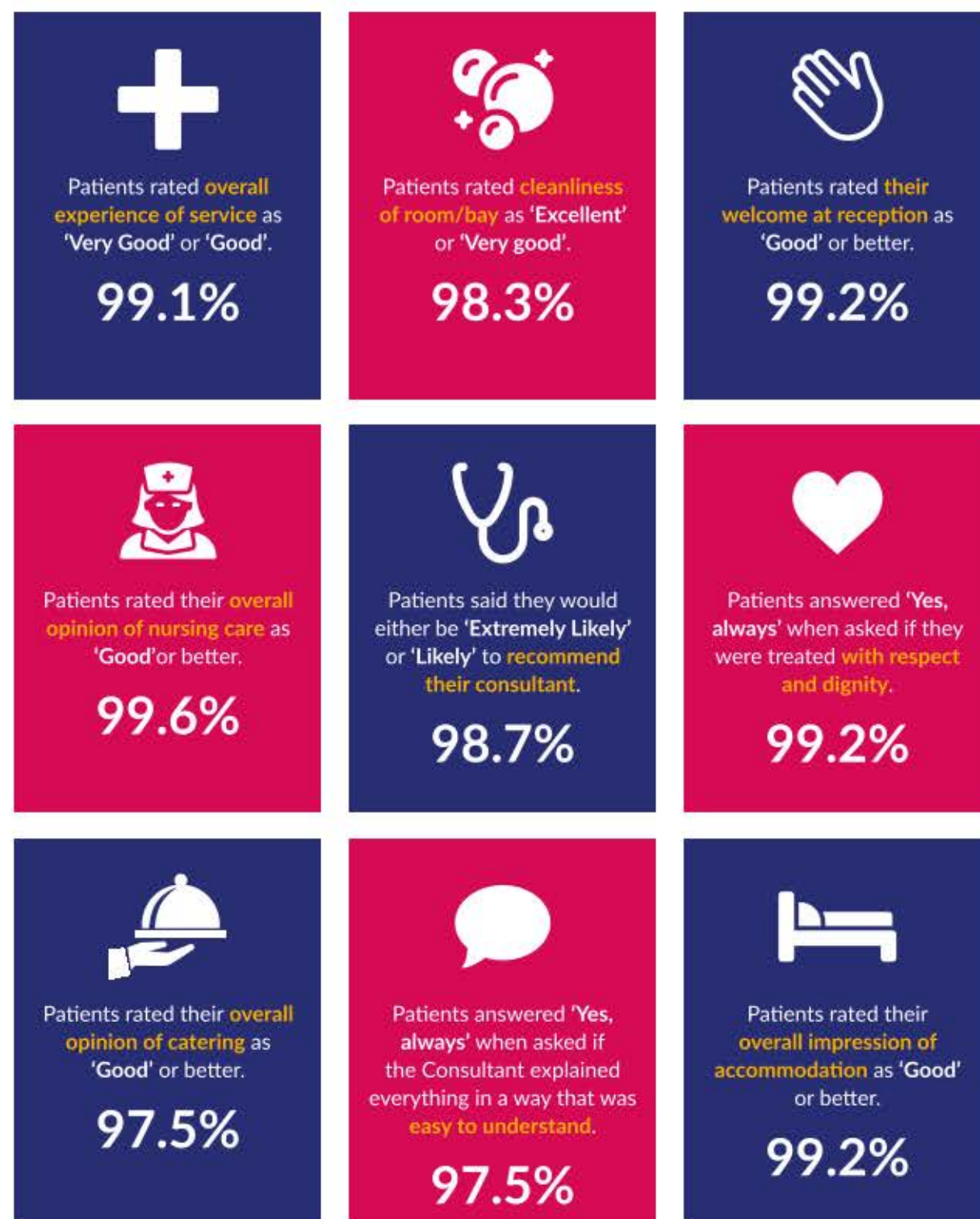


This word cloud summarises the type of words used by patients to describe the KIMS Hospital teams.



Results of these questionnaires are openly displayed around the hospital; information includes both positive and negative comments. The results for inpatients and outpatients for KIMS Hospital and for outpatients at Sevenoaks Medical Centre for March 2022 are shown here:

KIMS Hospital Inpatient Report March 2022



These figures are based on opinions of 249 Inpatients and Daypatients responding during March 2022.

KIMS Hospital Outpatient Report March 2022



These figures are based on opinions of 521 Outpatients responding during the reporting period stated above.

Sevenoaks Medical Centre Outpatient Report March 2022



These figures are based on opinions of 112 Outpatients responding during the reporting period stated above.

Patient Forum

KIMS Hospital has an active Patient Forum that plays a crucial role in the hospital.

It consists of patients who have experienced inpatient and/or outpatient treatment at KIMS Hospital or Sevenoaks Medical Centre. Its members have varying backgrounds offering a range of broad life experiences that may benefit patients of KIMS Hospital.

Under the chairmanship of Geoff Raisbeck, the forum meets bi-monthly at the hospital. They discuss and request information from the clinical and leadership teams with a focus on the patients' experience and improvements/enhancements to their care during the hospital

experience. The forum is supported by the leadership team at KIMS Hospital, and has an active input into the initiatives and patient improvement programmes, with talks from various staff and leaders who also attend our meetings. The Patient Forum chair regularly attends other meetings including the Hospital Management Board meetings to give the patients' perspective.

The Patient Forum plays a real and fulfilling role within KIMS Hospital.

Geoff Raisbeck
Chair of Patient Forum

Sevenoaks Medical Centre

Sevenoaks Medical Centre has been open for two years, offering scans, tests and outpatient treatments. During the pandemic it was closed for the first half of 2020, reopening finally in July 2020. A new manager has been appointed who has also taken over the role of the Registered Manager at Sevenoaks Medical Centre.

2021/2022 has continued to provide challenges as a result of the pandemic. However, the teams at Sevenoaks Medical Centre have managed to remain agile to change, which have at all times been led and supported by the KIMS Hospital Quality Governance structures. This has enabled our teams to deliver safe, outstanding and quality care to our ever-growing patient community.

This year we have been focused on bringing KIMS Hospital's quality objectives, strategic objectives and values to life at Sevenoaks Medical Centre. The teams at Sevenoaks Medical Centre are fully aligned with KIMS Hospital and have active membership in all of the Governance structures/ committees and wider team meetings. This has enabled us to continuously improve through shared learning, embedding a learning culture for us all.

Throughout the height of the pandemic, we were able to support our local health partners in providing Covid-19 vaccination clinics from Sevenoaks Medical Centre for the community. This has built a great foundation for us to provide further services, responding to the needs of patients from the community, supported by the GPs. We continue to provide monthly education events for local clinicians by our Consultant body.

During the last year we have successfully implemented a new initiative: Bupa Health Assessments. This new venture is a collaborative franchise partnership focussed on early intervention and promoting wellness for our locality.

We have also joined 'My Sevenoaks Community' which is a community interest group where we have promoted our services, our involvement in the community and invited members and patients to join the Patient Forum. We are keen to provide patient insight from Sevenoaks and the surrounding areas. This will help us shape and define our services, truly demonstrating responsiveness to needs and experiences of our patients and how they can access services. For this upcoming year, we will become further involved with them to begin some CSR initiatives.

The team at Sevenoaks Medical Centre has refined the 'daily huddle' and improved visibility of the daily activities, both clinically and operationally. We have implemented a 'safety board' where daily safety responsibilities are allocated and communicated. We use this as another tool to ensure we are adequately staffed to keep patients, staff and visitors safe whilst they are onsite.

We are embracing the Equality, Diversity and Inclusion strategy and have a section within our departmental meetings where we review a diversity calendar and discuss upcoming celebrations. This has provided the team with talking points and research opportunities to learn about different cultures and communities.

We review and share feedback from patient questionnaires at our departmental meetings and discuss and implement improvement measures via the KIMS Hospital Patient Feedback group.

For this coming year, we will continue to invite patients to provide feedback on their experience at the centre. We have introduced a new digital platform for patients to complete their questionnaire.

KIMS Hospital Outreach Clinics

A large number of patients at KIMS Hospital undergo Orthopaedic surgery, which often requires follow up appointments 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. Services include X-rays, physiotherapy and pre and post operation appointments.

Registered Outreach Clinics Actively Hosting Orthopaedic Clinics:



KIMS Hospital

Sevenoaks Medical Centre, Part of KIMS Hospital

Towns

Registered Outreach Clinics Actively Hosting Orthopaedic Clinics:

- 1 **Kingsnorth Medical Practice (Ashford):** Hip & Knee
- 2 **Wye Surgery (Ashford):** Hip & Knee, Upper Limb, Foot & Ankle
- 3 **Charing Surgery (Ashford):** Hip & Knee, Upper Limb, Foot & Ankle
- 4 **Estuary View Medical Centre (Whitstable):** Hip & Knee, Knee, Upper Limb, Foot & Ankle
- 5 **Faversham Medical Centre (Faversham):** Hip & Knee, Foot and Ankle, Upper Limb (planned for 2022)
- 6 **Springhead Health Ltd (Northfleet)*:** Hip & Knee, Upper Limb, Foot & Ankle

**In Nov 2021 we successfully registered and started hosting Orthopaedic Outreach clinics at Springhead Health Ltd. in Northfleet. The clinics aim to offer patients within the Dartford, Gravesham & Swanley area more local access to secondary care services on behalf of KIMS Hospital, closer to where they live. The clinics are outpatient consulting only, with any intervention happening at KIMS Hospital.*



Complaints

KIMS Hospital has a responsibility to establish a complaints procedure in line with statutory requirements. We are registered with the Independent Sector Complaints Adjudication Service (ISCAS) and follow their guidance on best practice in managing complaints for private patients.

Our compliance with the ISCAS standards is recognised by the Care Quality Commission as assurance of an effective complaints process. ISCAS provides an independent review process that complainants can utilise when they regard our local process has not met their needs. In this last year, no complainant has sought this independent review as all were satisfied with the management of their complaint locally.

For NHS patients we work closely with NHS Resolutions and the Ombudsman.

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:

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

2. Responding – to provide a full written response to complaints. All responses are investigated by an appropriate senior manager and reviewed by the Chief Nurse.

3. 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.

We agree with Bill Gates when he says "Your most unhappy customers are your greatest source of learning"

The following stories summarise some of the learning and our improvement actions

- The team received a complaint regarding poor clinical outcomes. The complaint investigation led to KIMS Hospital requesting an external review by the Royal College of Physicians and the Royal College of Surgeons after an internal review identified inconsistencies. We are currently implementing the recommendations made by the Royal Colleges, which will continue to strengthen our Medical Assurance Framework. KIMS Hospital continues to support both staff and patients related to this review.
- A patient complained that the size of the bins on the wards were insufficient for their needs. An immediate change was made and all wards now have larger bins.
- Feedback regarding the quality and content of the patient information leaflet received in advance of their procedure led to the Imaging team reviewing the leaflet and updating it to improve clarity.



Our compliance with the ISCAS standards is recognised by the Care Quality Commission as assurance of an effective complaints process

Cosmetic Pathway

Following a review of the CQC guidance on cosmetic patient pathways, we have undertaken a review of our own cosmetics patient pathway, and as a result have made the following amendment:

We introduced a mandatory Holistic Assessment service (HA) with a Psychologist prior to any cosmetic surgery requiring an admission.

- HA aims to screen cosmetic patients for conditions the surgeon may not otherwise identify, such as body dysmorphia
- HA helps prepare patients for the psychological impact major surgery can have, and ensures patients are fully prepared from

a psychological perspective that surgery is the right option for them. Motivation for surgery is always discussed to ensure the patient is able to consider all options available to them

- HA helps to prepare patients psychologically for aesthetic outcomes that may not be as desired

We have also implemented a new process for all consultants conducting cosmetic surgery to detail the diagnosis made, and to declare the purpose of why the primary procedure is being conducted. This new process provides a way for consultants to capture this information in a consistent manner, and is much easier for the relevant authorities to interpret.





Well-Led

Employee Wellbeing

Staff mental health and wellbeing is a key factor in the development of a sustainable, high performing workforce.

It is an important influence in staff satisfaction, performance and retention.

In addition to the external factors including Covid-19 and inflation, employees face a range of challenges including changes within their teams and making pay go further in these uncertain times.

Mental health and wellbeing in the workplace is increasingly important. Employers must show equal consideration towards mental health, as is required for physical health concerns in the workplace.

Over the last two years, KIMS Hospital has invested in developing new approaches that will support the development and delivery of our mental health, health and wellbeing strategies and policies.

To support this goal, we have published four editions of Evolve, our online magazine that provides employees information about our wellness approach.



The first issue looked at a wellness wheel which highlighted how if one of the elements is not in place it can knock us off balance. The magazine offered a combination of advice, resources and tools to help with our employees' wellbeing and that of their families.



"I love the job I do, the variety of what I do, the team I work with and how my manager encourages me to reach my potential."

Staff Survey

We conduct an annual staff survey, with the last one taking place in October 2021:

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

This provided a staff engagement score of 88%, indicating our staff are highly engaged.

Following the survey, the results were analysed and we acted upon the feedback.

Initial steps taken included:

- Payroll cut-off dates were changed so any bank, additional or unsocial hours are paid sooner

- Senior managers were moved to offices within the main hospital to be more visible
- A training prospectus was launched

In addition, five working groups have been established aimed at developing the key themes. The groups contain staff from across the organisation who are passionate about the subject matter the group aims to tackle:

- Leadership
- One Team
- Developing People
- Attraction and Retention
- Pay, Reward and Recognition

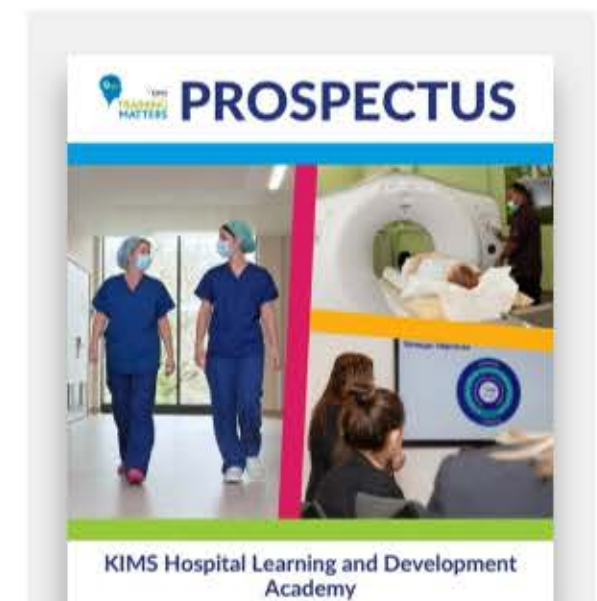
Each working group is accountable to the Chief Executive and Chief Operating Officer.

Training and Development

We have done a significant amount of work in raising the awareness of the importance of training and developing our workforce. We have launched our first training prospectus and a monthly Training Matters newsletter which details courses coming up and news of new initiatives. These have included resilience training, diversity and inclusion, and mental health first aid training.

The training prospectus includes the following sections which are full of interesting and challenging opportunities for learning and development:

- Personal Effectiveness
- Wellness and Life Skills
- Clinical Skills
- Non-Clinical Skills
- Leadership & Management
- Apprenticeships
- Our Learning Journeys
- Other Opportunities



We received very positive feedback on the first edition, so three further editions were produced.

Our most recent edition has paid particular attention to mental health, safeguarding, menopause, food banks and financial support available in the community.



Developing our Safety Culture

We have invested in developing our safety culture by engaging with the Cognitive Institute of Australia and their Speak Up For Safety programme.

The Cognitive Institute partners with healthcare providers globally to share their knowledge, insights and experience, to equip leaders and their teams with non-technical skills to empower them to raise and escalate any safety concerns they have, enabling us to practise safer, more reliable and kinder healthcare.

We have trained Speak Up For Safety trainers from across KIMS Hospital and Sevenoaks Medical Centre, who train new starters and consultants on how to Speak up for Safety and the Safety Code and ensure that safety is an intrinsic part of our culture.

All our staff are trained in the Speak Up For Safety programme during the corporate induction programme. Our consultants are also trained, with over 40% of consultants undergoing training in 2021/2022.

Equality, Diversity and Inclusion

We have developed an Equality, Diversity and Inclusion strategy to ensure we have an inclusive and supportive workplace.

We have diversity and inclusion champions who meet regularly to discuss improving equality, diversity and inclusion across

the hospital. Staff are required to attend a mandatory Equality, Diversity and Inclusion workshop to understand the benefits of a diverse and inclusive workforce, and to raise awareness of unconscious bias. We have celebrated and raised awareness of events and festivals, including Easter, Ramadan and Pride Month. We are recognised as a Disability Confident Employer.



We have diversity and inclusion champions who meet regularly to discuss improving equality, diversity and inclusion across the hospital





Quality Objectives 2022–2023

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.

Key priorities for quality improvements over the coming year include:

- Reduction of avoidable harm related to thrombosis and deep wound infection
- Provide training for staff expected to lead root cause analysis to enhance the quality and objectivity of KIMS Hospital investigations
- Integration of Medical and Clinical Governance processes to enhance efficacy of the quality assurance framework
- Further development of the Speak Up For Safety programme to focus on professional accountability



Our ongoing review of Quality and Governance continues to develop as a measure of ongoing improvement across the organisation

Quality Objectives

KIMS Hospital is situated on the outskirts of Maidstone.




 KIMS Hospital,
Newnham Court Way,
Weaving,
Maidstone,
Kent ME14 5FT

 01622 237 500

 enquiries@kims.org.uk

 kims.org.uk

 Free parking

 Disabled access