



## Quality Account

2012



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# Quality Account 2012



## Highlights of 2011

- Successful inspection by CQC with no recommendations for improvement
- Recognised in a speech by David Cameron for the service we provide for NHS patients
- Highlighted by Dr Foster Hospital Guide as among the UK's best providers for hip and knee replacement surgery
- Higher than national average scores for PROMS (Patient Related Outcome Measures)
- Zero MRSA or MSSA blood stream infections
- Zero clostridium difficile
- 99% of patients rated the cleanliness of the Centre as good, very good or excellent
- 98% satisfaction rate from patients at very good or excellent
- 100% of patients said they would recommend the Centre
- 98% of patients said the standard of written information they received before leaving the Centre was excellent, very good or good
- Substantial redeveloped areas of the hospital are now in keeping with our therapeutic environment to aid patient recuperation
- Successfully launched outreach clinics in Eastbourne and Hastings, allowing patients in these areas to benefit from our services in their own locality
- Agreed and launched our Environmental Management System and reduced the carbon footprint of The Horder Centre

“The Centre was wonderful and equally as good as the local private hospitals I have visited previously. The entire experience was very pleasant and it’s unbelievable how much difference it has made – my knee feels like it’s getting better every day.”

Mr S, Uckfield

## Improvement points from 2011

- Improve the patients’ involvement in pain management with particular emphasis on effectiveness and evaluation of pain control measures
- Improve patients’ access to health information with particular regard to self-management and health promotion
- Improve patient information for medication to include side effects
- Develop closer links with Primary Care Services and integrate services



# Statement from THE CHIEF EXECUTIVE

**I am very proud to introduce you to our Quality Account, which gives an overview of our performance, in terms of achieving excellence and delivering our strategic aims.**

Over the past year The Horder Centre has invested heavily in improving the fabric of the building, innovative care programmes and in ensuring a highly skilled and dedicated workforce. Through imaginative design and the commitment of our staff we are creating a therapeutic centre of excellence. This has resulted in exceptionally high levels of performance, both in terms of clinical outcomes and patient satisfaction. More than 99% of our patients reported that they are satisfied with their experience, more than 98% percent rating us as excellent or very good.

Our staff take pleasure in delivering their own very special brand of care and are proud of what they do. However we are not complacent and will always strive to continually improve and achieve our charitable aims of benefiting as many people as possible.



## Statement from The Chief Executive

### Who and what we are: **Our Mission**

Founded in 1954, we have developed over 50 years' of healthcare expertise and are now a leading provider of high quality orthopaedic and musculoskeletal services, demonstrably improving patients' mobility and striving to make a positive difference to people's lives.

We are a registered charity dedicated to providing high standards in healthcare on a not-for-profit basis. All surpluses generated from our work are reinvested back into the charity to provide healthcare benefit; to develop staff to deliver the Centre's aims; for investment in quality; and to improve services, facilities and infrastructure.

### Our purpose: **Charitable Aim**

The Horder Centre's charitable purpose is to advance health, and the relief of patients suffering from ill health, aiming to provide 'benefit' to as many people as practicable in our catchment area. The Centre achieves this aim by caring for, and treating, patients with painful and often debilitating arthritic, orthopaedic and related conditions.

### Our primary objective: **Vision**

Our vision is to be the very best provider of orthopaedic and musculoskeletal services, within a therapeutic atmosphere – a great place to work, practice medicine and receive care. It is our ambition to meet and exceed customer expectations and delight patients; bring our services to more people, enhancing the quality of their lives; to deliver high quality, effective and safe care, which is perceived as having a high value.

### Our ideals: **Values**

The Horder Centre is a very special place. Our principled and ethical way of doing things together with our focus on quality truly sets us apart from other healthcare organisations. We promise to always demonstrate our values, which are:

- **Caring** – We believe that all with whom we interact will be treated with the utmost respect and empathy
- **Friendly** – We foster a culture that is warm, welcoming and responsive
- **Quality** – We deliver the best service we can whilst striving to continuously improve
- **Integrity** – We are always reliable, honest, consistent and transparent in our approach
- **Pride** – Our team is proud of what they do, taking pleasure in delivering a unique service

Our commitment to quality is evidenced by our high quality performance and aspiration to continually improve the outcomes and experience for our patients through the dedication of all our team. We have very high levels of patient satisfaction, excellent clinical outcomes and very low levels of hospital acquired infection. We are particularly proud of the improvements we have made to patient care with more informative and consistent patient information throughout their whole pathway of care; the decreased length of stay we have achieved for joint replacements enabling patients to return home sooner; and also the commencement of outreach centres for physiotherapy, enabling local access for patients.

There is a well-established integrated governance structure at The Horder Centre, ensuring all the necessary controls are in place to ensure quality and that the Centre is properly managed and directed at all times.

Rachel Ward, Director of Clinical Services, with Dr Paul Reynolds, the Medical Director, work hand in hand with the Medical Advisory Committee, led by Mr Mike Fordyce, Consultant Orthopaedic Surgeon, who together with the full Board, ensure all clinical professionals deliver high quality, good clinical outcomes, which meet or exceed the ever increasing expectations of our customers.

The creation of this Quality Account has been led by the Director of Clinical Services, who leads Clinical Excellence within the Centre. A great deal of collaboration has taken place, utilising feedback from the Board of Directors, patients, visitors, consultants and staff. I am able to state that to the best of my knowledge, the information in this document is not only accurate but has true meaning to the entire team.



### **Diane Thomas**

Chief Executive  
The Horder Centre



# Quality Priorities 2012 – 2013



The ethos of delivering continuous quality improvement is at the heart of everything we do. The key areas chosen for development during 2012 – 2013 are:

## Clinical effectiveness

- Develop a Centre for clinical excellence, embedding a culture of continuous improvement supported by evidence from clinical audits and outcome data to support recognition of The Horder Centre as a centre of orthopaedic excellence
- To enlighten practice and people through the development and giving of knowledge, providing an information centre to include health promotion and self management material

## Patient experience

- Develop strategically placed outreach clinics to provide services for patients closer to their homes and ensuring a full range of services to enhance the quality of life for more patients
- Commence Phase 3 of the development of our premises, which will include therapeutic walk ways for patients and the community, a new kitchen and dining facility, new supplies department and further development of the ward areas

## Patient safety

- Ensure all process and procedures are in place to ensure revalidation of medical staff to meet agreed timescales by the General Medical Council (GMC)
- Define the complete patient pathway to include criteria for care post discharge supported by clinical outcome data that continues in the community

These areas were chosen through continuous communications with our service users. We have utilised patient satisfaction comments, staff survey feedback and comments from our consultants to ensure priorities were identified.

Progress is reviewed on a monthly basis at key meetings to ensure timescales are met. Feedback is given at management meetings and a summary discussed with the Board of Directors.

We believe that it is really important to monitor satisfaction from our users and utilise questionnaires and forums as a way of achieving this.

“It’s absolutely excellent. It was a very happy experience for me. I didn’t suffer at all. I was only in for one whole day and I thought I was going to be in for four days. It couldn’t have been better. It was very professional but very friendly. The impact on my life has been wonderful.”

Mrs M, West Sussex

## Statements from the Board

This section provides the mandatory information for inclusion in a Quality Account, as determined by Department of Health regulations.

### 1. Review of services

During 2011 – 2012 The Horder Centre provided one NHS service, this being orthopaedics.

The Horder Centre has reviewed all the data available to it on the quality of care in this service.

The income generated by the NHS service reviewed in 2011 – 2012 represents 100% of the total income generated from the provision of NHS services by The Horder Centre for 2011 – 2012.

### 2. Participation in clinical audits

During 2011 – 2012, four national clinical audits and one national confidential enquiry covered NHS services that The Horder Centre provides.

During that period The Horder Centre participated in 100% national clinical audits and 100% national confidential enquiries of the national clinical audits and national confidential enquiries which it was eligible to participate in.

The national clinical audits and national confidential enquiries that The Horder Centre participated in during 2011 – 2012 are as follows:

- National Elective Surgery – Patient Reported Outcome Measures (PROMs)
- National Joint Registry (NJR): hip and knee replacements
- National Cardiac Arrest Audit
- NCEPOD: Peri-operative care study
- EQ-ER audit for primary hip and knee replacements

The national clinical audits and national confidential enquiries that The Horder Centre participated in, and for which data collection was completed during 2011 – 2012, are listed overleaf alongside the number of cases submitted to each audit or enquiry as a percentage of the number of registered cases required by the terms of that audit or enquiry.

“The first things that come to mind when I think of The Horder Centre are excellence and comfort. My experience was superb. It’s like having new feet. I have no pain now and no discomfort walking. The care was just fabulous. Everybody knew what they were doing and came when they said they would. After three days when I got home, I had a phone call from staff asking how things were going. I can’t fault the communication.”

Mrs C, East Sussex





## PROMs

	Total eligible episodes	Count of questionnaires*	% compliance
Knee replacement	876	1108	127%
Hip replacement	870	1010	119%

*\*On occasion, the pre-operative questionnaire may be completed by a patient significantly in advance of the operation, so the questionnaire may be counted but the eligible episode may not have occurred.*

The PROMs study measures general health improvement as well as site specific Oxford joint scores. The Horder Centre is in the top five largest contributors in terms of patient numbers in the PROMs study for both hip and knee operations, and performed consistently above the national average for both the Oxford joint score and general health index (EQ-5D) for both hip and knee replacements.

## NJR

	Total forms completed*	% compliance
Hip & Knee Replacements	2017	97.3%

*"It was excellent. I came in, had my operation and I was home the following day. My experience here has been absolutely unbelievable. When I had the second operation, I was walking up to the village to pick up the newspaper with one walking stick the day after I was home. Within three weeks, I was back in the gym for three days a week and on the other two days, I was walking at least 7km with a friend of mine."*

Mr C, Sevenoaks



## Dr Foster

The Dr Foster organisation was set up to empower patients and improve transparency in healthcare and do this through the publication of the Dr Foster Hospital Guide. This is an independent and highly respected report, a recognised source of information on hospital performance, which is published annually. The 2011 guide includes, for the first time, information on independent and private hospitals such as The Horder Centre.

We are proud to report that The Horder Centre has been named as among the UK's best providers.

The Horder Centre, as a good performing provider, has fewer long stay patients, lower emergency readmissions and lower revision rates.



**“I couldn't have been treated better. If anyone is as scared as I was, they should be reassured. All the staff at The Horder Centre were very caring.”**

Mrs B, Horsmonden

The reports of four national clinical audits were reviewed by the provider in 2011/12 and The Horder Centre intends to take the following actions to improve the quality of healthcare provided:

- Continue to review length of stay for joint replacement surgery with particular reference to knee replacement patients
- Ensure as many patients complete both PROMS and NJR forms correctly to ensure/maintain high compliance levels
- Review compliance with anti-biotics protocols and documentation in theatre

The reports of three local clinical audits were reviewed by the provider in 2011 – 2012 which were reviewed by our Clinical Governance Committee. The Horder Centre intends to take the following actions to improve the quality of healthcare provided:

- Continue regular audits of compliance to radiology standards
- Mobilise hip patients on day of surgery, ideally in recovery with either active or passive exercises
- Review the use of medication to reduce the risk of deep vein thrombosis due to a change in protocol for knee replacement patients

Other studies conducted at The Horder Centre have included the evaluation of specific prosthesis over time, including a 15 year multi-centre study of the Exeter hip stem. Results to date show excellent outcomes as reported by our patients

### 3. Research

#### Participation in clinical research

The number of patients receiving NHS services provided or sub-contracted by The Horder Centre in 2011 – 2012 that were recruited during that period to participate in research approved by a research ethics committee was zero. However The Horder Centre is still participating in the Exeter study which is research into the long term effectiveness of the Exeter hip prosthesis.

### 4. Goals agreed with commissioners

#### Use of the CQUIN payment framework

A proportion of The Horder Centre's income in 2011 – 2012 was conditional on achieving quality improvement and innovation goals agreed between The Horder Centre and any person or body they entered into a contract, agreement or arrangement with for the provision of NHS services, through the Commissioning for Quality and Innovation payment framework.

### 5. Statements from the Care Quality Commission (CQC)

The Horder Centre is required to register with the Care Quality Commission and its current registration is full registration under the Health and Social Care Act 2008.

The Horder Centre is registered in respect of the following regulated activities:

1. Treatment of disease, disorder or injury
2. Diagnostic and screening procedures
3. Surgical procedures

The Apollo at Eastbourne is also registered for part 1 as above.

Hastings Plaza is also registered for parts 1 and 2 as above.

The Horder Centre was inspected by the CQC in February 2012 and demonstrated that it meets all the National Minimum Standards inspected and has no areas of non-compliance.

The Horder Centre has not participated in any special reviews or investigations by the CQC during the reporting period.

The Care Quality Commission has not taken enforcement action against The Horder Centre during 2011 – 2012.

### 6. Data quality

The Horder Centre has undertaken an in depth review of its computerised patient management system, to ensure data quality across the hospital is as high a standard as possible. In addition during 2012 a data warehouse system was introduced, which has centralised the data stored across the hospital improving its data verification and analysis capabilities, providing essential management information.

#### 6.1 NHS Number and General Medical Practice Code validity

The Horder Centre submitted records during 2011 – 2012 to the Secondary Uses Service for inclusion in the Hospital Episodes Statistics which are included in the latest published data.

With the installation of the Demographics Batch Service (DBS), The Horder Centre is now able to trace and verify NHS numbers. An annual resubmission has meant that for the period 2011 – 2012 the percentage of records in the published data, which included the patient's valid NHS number, was 99.72%.

In the future, The Horder Centre is confident that 100% of NHS numbers will be verified for both the admitted patient care and outpatient care.

The percentage of records in the published data, which included the patient's valid General Medical Practice Code, was:

- 100% for admitted patient care; and
- 100% for outpatient care.

#### 6.2 Information Governance Toolkit attainment levels

The Horder Centre successfully submitted the IG Toolkit for 2011 – 2012. This web-based self-assessment system, run by Connecting for Health for the NHS, is an effective way of demonstrating IG compliance so as to be able to deliver NHS services. As an independent provider of NHS services, there are 29 criteria for which there has to be demonstrably correct processes in place and evidence that they are being adhered to, ensuring that patients' information is being used correctly. Each of these 29 criteria is judged on a 0 to 3 basis with 0 being failure and 3 being the highest rating an organisation can achieve. As an independent provider of NHS services, The Horder Centre is required to achieve at least a level 2 for each criterion; however, the final result was better than that, scoring 18 at level 2 and 11 at level 3, giving an overall score of 79%.

**“The staff were so friendly and caring. The operation has had such a positive impact and has enabled me to work full time. Thank you for giving back my active life.”**

Mr M, Hastings

“I would recommend The Horder Centre to everyone I know. The staff were fantastic, from the day and the night nurses to the physiotherapists...they could not have been more attentive and I cannot thank them enough for the way I was treated.”

Mr P, Whitstable

### 6.3 Clinical coding error rate

Our last audit in 2009 –2010 showed a Healthcare Resource Group (HRG) error rate of just 5%, compared to the 2009 – 2010 NHS average of 9.1%. HRGs are based on diagnosis and procedure codes which generate a code of the payment due. The Horder Centre’s results of 5.9% is significantly better than the national average of NHS providers audited. Due to the positive result in 2010 it was decided by the Audit Commission that it was unnecessary for The Horder Centre to be audited in 2011.

In the Audit Commission’s Report there were no cases judged unsafe to audit within the episodes provided for audit. The Horder Centre was commended for this.


All three of the recommendations made in the Audit Commission’s Report have been implemented. The main one, to provide support and training for the Clinical Coder, is well underway with a dedicated contracted qualified coder/trainer with a structured training programme (including mandatory Connecting for Health training courses) in place for 2012. One of our future goals is to potentially provide Clinical Coding training for coders based at other organisations, to be undertaken at The Horder Centre.

“My GP referred me to The Horder Centre and I was admitted only a few weeks later. The care I received was superb. One thing that really impressed me was the way my doctor talked me through everything that was going to happen.”

Mr S, Mayfield



## Key Achievements 2011 – 2012

A photograph of a modern lounge area. In the foreground, there are two armchairs: one with a green and white patterned fabric and another with a solid brownish-grey fabric. A dark wood coffee table sits between them, holding a stack of brochures. The background features a stone wall and large windows with dark frames. The floor is light-colored wood.

“As soon as you walk in the front door of The Horder Centre people are friendly and smiling. It reassures you and gives you confidence. Nothing was too much trouble. My whole experience can be described as one of compassion and caring from truly dedicated staff.”

Mrs T, West Sussex

# Quality Overview 2011 – 2012

The key areas that were chosen for development during 2011 – 2012 were:

## Clinical effectiveness

1. *Enhance our joint pathway programme which includes clinical pathways of care and patient information which results in 'best in class' outcome data, supporting recognition of The Horder Centre as a centre of orthopaedic excellence.* This work has commenced and new patient information books have been launched for hip and knee replacement patients. There are also plans for a patient DVD to be made as soon as key areas in the building programme are available.
2. *Build on our acute, and develop chronic, back pain services which offer active rehabilitation and 'Fast Track' services for businesses, creating a facility which can be utilised by other patients such as general active rehabilitation and 'step down'.* A review was undertaken and this was not felt to be achievable at this time although the acute pain service was launched together with developments in the rheumatology service.

## Patient safety

3. *Introduce an Environmental Management System, which leads to ISO 14001 accreditation and incorporates an effective Waste Management Programme.* This was commenced with the employment of a lead environmental advisor and the development of an environmental focus group. Improvements have already been initiated.

## Patient experience

4. *Develop an approach to business development, realising the full potential of The Horder Centre whilst developing a network of strategically placed outreach clinics to provide services for patients closer to their homes.* Outpatient physiotherapy services have commenced at Eastbourne and Hastings enabling patients to be treated closer to their homes. Plans are in place for further expansion during 2012 – 2013.
5. *Commence Phase 2 of the development of our premises, which will include state of the art pre-admission, admission and day care suites and the continued implementation of comfortable en-suite rooms and therapeutic gardens – to be enjoyed by patients, staff and visitors.* The development has continued with new areas available for patients as detailed under 'Capital investment programme'.

These areas were chosen through continuous communications with our service users. We have utilised patient satisfaction comments, staff survey feedback and comments from our consultants to ensure priorities were identified.

Progress is reviewed on a monthly basis at key meetings to ensure timescales are met. Feedback is given at management meetings and a summary discussed with the Board of Directors.

We believe that it is really important to monitor satisfaction from our users and utilise questionnaires and forums as a way of achieving this.

The Horder Centre's wider goal of advancing health and providing benefit to ever increasing numbers of patients in the South East Coastal area, by providing orthopaedic and musculoskeletal services, has been achieved with a total of 4507 patients benefiting from treatment, care and services.





## Capital investment programme

Our new build project has continued as per schedule with the following areas having been completed:

- 24 new en-suite bedrooms on Dufferin ward
- New lift and staircase from main theatres to Dufferin ward
- New main reception area
- New coffee shop in main reception with internet café
- New physiotherapy gym area opened by Sally Gunnell
- Refurbished en-suite rooms on Dufferin ward
- New pharmacy
- Patient lounge on Dufferin ward
- New clinical room on Dufferin ward
- Landscaped gardens to include a therapy garden for patients to exercise outside

By the end of July 2012 we will also have finalised:

- New day care and admissions suite
- In patient physiotherapy gym
- Resource room for staff
- Improved internal and external signage

We are also planning to develop therapeutic walk ways through the grounds with areas for quiet contemplation and reflection and other areas for fitness and exercise. These will be open to the community, capitalising on our beautiful location in the heart of the Ashdown forest.

## Quality and range of therapeutic treatments, care and rehabilitation programmes

Our pain service was extended this year to include access to acupuncture clinics and further pilates classes. A musculoskeletal (MSK) operations manager was also appointed to lead the team in the development of a full MSK service both at The Horder Centre and at outreach clinics. The physiotherapy service has grown at both the Apollo Health Centre in Eastbourne and at Station Plaza in Hastings providing care nearer to the patient's own home. This gives patients wider choice and services within their locality but also fits with our aim to reduce our carbon footprint in line with our new environmental policy.

## Leadership

Our competency assessment framework was reviewed and reissued with further training given to key staff. Leadership and management training took place for all managers with specific coaching skills for senior managers in order to support their staff.

## Stakeholder engagement

We are continually reviewing the service level given to our users with the aim of continuous improvement. All inpatients and day case patients are sent a patient satisfaction questionnaire after discharge from hospital to ascertain any areas for improvement. Currently 98% of our patients rate the care received from The Horder Centre as excellent or very good. This compares with 96% last year.

The highlights from the responses to these questionnaires include excellent results for:

- the information given to patients prior to admission;
- the confidence and trust patients have in the doctors and nurses treating them;
- the maintenance of patient privacy and dignity;
- the overall cleanliness of the Centre.

Feedback is also sought from our consultants. As well as the practice privileges process (the method by which consultants are approved to work at The Horder Centre), Medical Advisory Committee and consultant appraisal system, a business development meeting was held with each consultant orthopaedic surgeon. The purpose of the meeting was to establish where the Centre could do more to support them or identify ways to attract more patients or provide more benefit.

Every consultant was pleased with the efficiency of the Centre, particularly in the way the operating theatres were run. They also helped us to identify new areas for business development, having an awareness of the specific needs of the local population where each of them worked.



“It’s a fabulous, warm place to come to and you feel safe and secure. It’s very pleasant, you’re well looked after and I do think it’s the centre of excellence for arthritis. For me, it was just a very positive experience altogether. It’s changed my life completely. I was in a lot of pain before my first knee was done. I’m a dancer and I virtually couldn’t do anything. I could hardly walk. I don’t have any more pain now. I’m back to doing what I enjoy. I was line dancing again three months after the operation.”

Mrs S, Kent

## Information technology

In the last year we have introduced a data warehouse into which two of our main systems iPM and sage are linked. This has enhanced reporting from both systems. The key in the next year is to push our other systems, such as E-learning, Datix, Risk Management System and HR, through the data warehouse. The internet café was expanded and moved to the new coffee shop. Wi-Fi is also available for patients in the outpatient waiting areas.

A secure remote solution has been put in place for The Horder Centre for new outreach clinics so staff can still connect to the main network and have access to patient information at any time.

The IT department has also started to virtualise our main servers to improve our Disaster Recovery Plan (DRP). The maximum down time will be reduced to as low as five minutes.



## Care Quality Commission (CQC) Indicators

Each quarter, the Horder Centre is required to submit data to the CQC on a defined set of clinical indicators. Our results reflect the high level of care given to our patients and provide evidence for our claim of low infection rates and excellent outcomes.

Indicator	Total Number for the 12 Months April 2011 to March 2012	%
Inpatient mortality	0	0
Peri-operative mortality (i.e. within 48hrs of surgery)	1	0.04
Unplanned readmissions within 29 days of discharge	11	0.42
Unplanned returns to the operating theatre	4	0.16
Unplanned transfers to another hospital	17	0.65
Mortality within 7 days of discharge	1	0.03
Pulmonary Embolus at The Horder Centre	14	0.55
Deep Vein Thrombosis (DVT) at The Horder Centre	5	0.19
Inpatient dislocation at The Horder Centre	1	0.10
Unplanned overnight admission following day case surgery	76	3.16
Hip replacements (arthroplasty) infection rate	1	0.10
Knee replacements (arthroplasty) infection rate	2	0.21
MRSA positive blood cultures	0	0
MSSA positive blood cultures	0	0



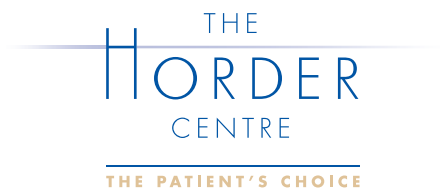
## Statements from the **Co-ordinating Commissioner**

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Sussex Commissioning Support Unit confirms the information published in the Quality Account, although not fully audited, to be a true and accurate representation of the services and quality standards attained by The Horder Centre. We continue to be very satisfied with the treatment and levels of care our patients receive.

Paul O'Toole, NHS Sussex – Senior Account & Contract Manager – Sussex Commissioning Support Unit





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