

The Regulation and
Quality Improvement
Authority

Kingsbridge Private Hospital
RQIA ID: 10626
811-815 Lisburn Road
Belfast
BT9 7GX

Inspector: Winnie Maguire
Inspection ID: IN024127

Tel: 02890667878

**Approval visit for temporary theatre 4, a recovery
area and ward 3
of
Kingsbridge Private Hospital**

10 February 2016

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1.0 General Information

Name of hospital:	Kingsbridge Private Hospital
Address:	811-815 Lisburn Road Belfast BT9 7GX
Telephone number:	02890667878
Registered organisation/registered provider:	3fivetwo Medical Ltd Mark Simon Regan
Registered Manager:	Sarah Marks
Person-in-charge of the clinic at the time of inspection:	Sarah Marks
Registration Categories:	AH,PD,PT(E),AH(DS)PT(L)
Date and time of inspection:	10 February 2016 10am – 2pm
Names of inspector:	Winnie Maguire

2.0 Introduction

The Regulation and Quality Improvement Authority (RQIA) is empowered under the Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 to inspect independent health care establishments. A minimum of one inspection per year is required and this may be announced or unannounced.

3.0 Purpose of Visit

Kingsbridge Private Hospital have submitted an application for variation of registration to increase overnight beds by six and install and use a temporary theatre facility (to be known as theatre 4), a recovery area and a six bedded ward area (to be known as ward 3). The new facility is a temporary structure with its own entrance situated adjacent to the main hospital. The purpose of the visit is to ensure the temporary theatre 4, the recovery area and ward 3 are compliant with the legislation and Minimum Care Standards for Independent Healthcare Establishments (July 2014).

4.0 Methods/Process

Specific methods/processes used in this inspection include the following:

Prior to the inspection the following records were analysed: submitted application and supporting documentation.

During the inspection the RQIA inspector and RQIA estates officer met with Mr Mark Regan registered person, Ms Sarah Marks registered manager, Mr Stuart Wilson supply chain manager and members of the Vanguard supporting team.

Vanguard is the organisation who has supplied the theatre, the recovery area and a six bedded ward area. Vanguard will provide a range of services to Kingsbridge Private Hospital in relation to the ongoing estates management of the facility.

A range of documentation was examined and a review of the facilities was conducted.

The RQIA's estates officers report will be forwarded separately.

5.0 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	4	6

The details of the QIP within this report were discussed with the Ms Sarah Marks, registered manager, as part of the inspection process. The timescales for completion commence from the date of inspection.

6.0 Findings of Approval Visit

6.1 Staffing

Discussion with Ms Marks and review of the written medical, nursing and allied health professionals staffing framework proposal and a sample nursing duty rota confirmed there are arrangements in place to ensure there are appropriately qualified and experienced staff in sufficient numbers to meet the needs of the patients to be treated and cared for in theatre 4, the recovery area and ward 3.

Ms Marks confirmed the management of Kingsbridge had agreed ward 3 would accommodate a maximum of four patients only.

The catering and other support staff from Kingsbridge Private Hospital main building will also provide services in the above facility.

The current theatre and ward management arrangements will extend to cover theatre 4, the recovery area and ward 3.

6.2 Induction and Orientation

Ms Marks confirmed formal induction and orientation for staff proposed to work in theatre 4, the recovery area and ward 3 had not yet taken place. Some staff had visited and inputted into the development of the new facilities.

A requirement was made to establish written induction and orientation programmes for staff and a record of completion must be maintained for inspection.

A recommendation was made to carry out scenario training exercises with staff for example: resuscitation drills, emergency blood management and transfer of a patient to the main Kingsbridge Private Hospital for further post-operative management.

6.3 Infection Prevention and Control (IPC)

There are a range of Kingsbridge Private Hospital IPC policies and procedures in place. In addition there are Vanguard IPC policies in place. It was suggested to review these policies and procedures to ensure consistency.

Ms Marks confirmed Kingsbridge Private Hospital IPC independent advisor would be carrying out an audit of the facilities on 10 February 2016 and providing a written report.

A recommendation was made to forward the IPC report to RQIA when available and confirm all recommendations have been addressed.

6.4 Dignity Respect and Rights

Ms Marks confirmed the policy of Kingsbridge Private Hospital will be to have single sex theatre lists for this facility where possible to promote the privacy and dignity of patients. Patients will be provided with dressing gowns and privacy screens.

A requirement was made to clearly identify single sex washing and toilet facilities.

6.5 Care Pathway

A review of the facility was conducted in line with the patient's journey and the patients care pathway and discussed with Ms Marks. In light of the discussion a requirement was made to devise a patient's care pathway procedure for this facility. It must outline specific pre-operative, peri-operative and post- operative arrangements.

Ms Marks confirmed the present patient care record documentation would be used in this facility and patient care records would be securely stored in a locked cupboard.

6.6 Surgery

Discussion with Ms Marks and review of documentation confirmed it is the aim of Kingsbridge Private Hospital to limit the surgical procedures performed in theatre 4 to spinal surgery requiring no more than a two night stay. Ms Marks confirmed a maximum of four patients and then two patients on alternate days would be scheduled for surgery in theatre 4.

CSSD will be received from the main CSSD store in Kingsbridge Private Hospital daily accordingly to the lists and available space for storage. It was noted the potential for storage was limited and a recommendation was made to devise specific procedures in consultation with surgeons and theatre nursing staff to outline arrangements to effectively manage storage to ensure timely access to surgical equipment and instruments.

There are a range of policies and procedures for surgical services in place.

A recommendation was made to devise a written procedure which outlines arrangements for blood and blood products management in theatre 4, the recovery area and ward 3.

There is a defined staffing structure for surgical services that defines lines of accountability, specific roles and details responsibilities for areas of activity.

6.7 Risk Assessment

On discussion with Ms Marks it was clear consideration had been given to managing theatre 4, the recovery area and ward 3 in a safe and effective manner. However a formal overall risk assessment had not been carried out. A requirement was made to carry out a risk assessment, action accordingly and reference in the corporate risk register.

6.8 Governance Arrangements

Ms Marks confirmed the present audit systems will be extended to theatre 4, the recovery area and ward 3. In light of the uniqueness of the provision of service in theatre 4, the recovery area and ward 3 a recommendation was made to develop targeted audits to review the quality of care and treatment provided in this area. This should include patient experience feedback and staff feedback.

On discussion with Ms Marks and the Vanguard support team and review of documentation it was noted Vanguard are to undertake tasks associated with estates management of theatre 4 the recovery area and ward 3. Whilst Ms Marks and Mr Regan demonstrated an understanding of their accountability in this regard there were no clear written governance arrangements underpinning the oversight of Vanguards services by Kingsbridge Private Hospital. A recommendation was made to develop written governance arrangements in relation to the delivery of services by Vanguard.

7.0 Conclusion

A further inspection will be conducted 17 February 2016 to review the facilities when all installation works have been completed. The areas outlined in the QIP should be actioned and relevant evidence available for inspection.

As theatre 4, the recovery area and ward 3 are a temporary structure and following discussion and agreement with Mr Mark Regan registered person and Ms Sarah Marks registered manager a condition will be placed on the registration indicating RQIA will conduct a formal review of theatre 4, the recovery area and ward 3 in 18 months from the date of approval for use.

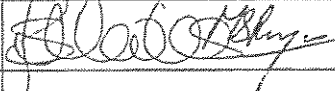

8.0 Actions Taken by the Registered Manager/Registered Person

The QIP will be completed by the registered manager to detail the actions taken to meet the legislative requirements stated. The registered person will review and approve the QIP to confirm that these actions have been completed by the registered manager. Once fully completed, the QIP will be returned to independent.healthcare@rqia.org.uk and assessed by the inspector.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the establishment. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person/manager from their responsibility for maintaining compliance with minimum standards and regulations. It is expected that the requirements and recommendations set out in this report will provide the registered person/manager with the necessary information to assist them in fulfilling their responsibilities and enhance practice within the establishment.

Quality Improvement Plan	
Statutory Requirements	
<p>Requirement 1</p> <p>Ref: Regulation 18 (2)</p> <p>Stated: First time</p> <p>To be Completed by: 17 February 2016</p>	<p>The registered provider must establish written induction and orientation programmes for staff and a record of completion must be maintained for inspection.</p> <p>Response by Registered Manager Detailing the Actions Taken: Written induction and orientation plans have been written to combine Vanguard systems training and scenario based drills particular to the Vanguard facility. Staff are being trained on Vanguard systems by the Vanguard ODP and by peer mentors for the scenario based drills</p>
<p>Requirement 2</p> <p>Ref: Regulation 16 (3)</p> <p>Stated: First time</p> <p>To be Completed by: 17 February 2016</p>	<p>The registered provider must clearly identify single sex washing and toilet facilities.</p> <p>Response by Registered Manager Detailing the Actions Taken: Due to the nature of the facility and number of washing and toilet facilities it has been agreed with RQIA that interchangeable signs will be placed on the toilet/shower room doors dependant on mix of patients</p>
<p>Requirement 3</p> <p>Ref: Regulation 37 (1)</p> <p>Stated: First time</p> <p>To be Completed by: 17 February 2016</p>	<p>The registered provider must devise a patient's care pathway procedure for this facility. It must outline specific pre-operative, peri-operative and post-operative arrangements.</p> <p>Response by Registered Manager Detailing the Actions Taken: A detailed patient pathway has been completed.</p>
<p>Requirement 4</p> <p>Ref: Regulation 25 (2)</p> <p>Stated: First time</p> <p>To be Completed by: 17 February 2016</p>	<p>The registered provider must carry out a risk assessment, action accordingly and reference in the corporate risk register.</p> <p>Response by Registered Manager Detailing the Actions Taken: As agreed with RQIA the Business Continuity Plan has been updated to include the Vanguard facility</p>

Recommendations	
<p>Recommendation 1</p> <p>Ref: Standard 13</p> <p>Stated: First time</p> <p>To be Completed by: 17 February 2016</p>	<p>It is recommended to carry out scenario training exercises with staff for example: resuscitation drills, emergency blood management and transfer of a patient to the main Kingsbridge Hospital for further post-operative management.</p> <p>Response by Registered Manager Detailing the Actions Taken: Scenario based training has been conducted in accordance with the training and induction programme outlined in requirement 1.</p>
<p>Recommendation 2</p> <p>Ref: Standard 20</p> <p>Stated: First time</p> <p>To be Completed by: 17 February 2016</p>	<p>It is recommended to forward the IPC report to RQIA when available and confirm all recommendations have been addressed.</p> <p>Response by Registered Manager Detailing the Actions Taken: IPC signoff has been obtained and recommendations adhered to.</p>
<p>Recommendation 3</p> <p>Ref: Standard 32</p> <p>Stated: First time</p> <p>To be Completed by: 17 February 2016</p>	<p>It is recommended to devise specific procedures in consultation with surgeons and theatre nursing staff to outline arrangements to effectively manage storage to ensure timely access to surgical equipment and instruments.</p> <p>Response by Registered Manager Detailing the Actions Taken: An SOP has been written to outline this process</p>
<p>Recommendation 4</p> <p>Ref: Standard 32</p> <p>Stated: First time</p> <p>To be Completed by: 17 February 2016</p>	<p>It is recommended to devise a written procedure which outlines the arrangements for blood and blood product management in theatre 4, recovery area and ward 3.</p> <p>Response by Registered Manager Detailing the Actions Taken: A written procedure for blood and blood product management has been written for the Vanguard facility</p>
<p>Recommendation 5</p> <p>Ref: Standard 9</p> <p>Stated: First time</p> <p>To be Completed by: 17 February 2016</p>	<p>It is recommended to develop targeted audits to review the quality of care and treatment provided in this area. This should include patient experience feedback and staff feedback.</p> <p>Response by Registered Manager Detailing the Actions Taken: Targeted audits have been created to cover the Vanguard facility. Patient satisfaction surveys will be collated separately for the Vanguard facility and Staff feedback forms have been created. Additionally, the facility will fall into the 2016 audit schedule for KPH for regular audit.</p>

Recommendation 6	It is recommended to develop written governance arrangements in relation to the delivery of services by Vanguard.		
Ref: Standard 9	Response by Registered Manager Detailing the Actions Taken: A governance policy has been written to outline these arrangements		
Stated: First time	Response by Registered Manager Detailing the Actions Taken:		
To be Completed by: 17 February 2016	Response by Registered Manager Detailing the Actions Taken:		
Registered Person Approving QIP		Date Approved	17/2/16
RQIA Inspector Assessing Response		Date Approved	29/2/16
RQIA Inspector Assessing Response		Date Approved	

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