

Providing NHS and Private  
Patient Services



Here for you.

# Quality Accounts

for the year ended 31 March 2023













2. Welcome from the Chief Executive

This quality account reflects the year 1st April 2022 to the year ending 31st March 2023.

Throughout my first year as Chief Executive at Tetbury Hospital Trust, we have been focussing on developing our infrastructure to manage the increase in clinical activity we have been undertaking whilst we support the NHS to reduce their waiting times for elective procedures. We have grown our workforce across clinical and non-clinical roles and have been working hard to improve efficiencies to maintain the high level of quality care that we are proud to deliver.

We have made a commitment to improve how we communicate with our key stakeholders who provide invaluable feedback which supports us to shape the services we offer. Our Marketing and Communications strategy will be a focus during the year ahead which will support us to communicate more effectively across several platforms to share information and celebrate our successes. This is crucial for Tetbury Hospital Trust as an independent provider to remain competitive and to maintain financial sustainability.



I am proud of the progress we have made this year having undertaken some ambitious projects whilst maintaining high levels of clinical activity. We have refurbished our Minor Injury and Illness Unit in 2022/3 which now offers additional capacity and extended opening hours. We now embark on a new challenging estates project which will provide a covered walkway and significant improvements to our driveway and patient parking areas. Investing in our workforce and buildings is imperative to achieving continued success as a valued community asset.

Laura Williams, Chief Executive Officer

3. Introduction to our Quality Accounts

The Health Act 2009 requires all providers of NHS services in England to produce a Quality Account to provide information about the quality of the services they deliver.

There is an exemption for organisations that have fewer than fifty full-time WTE employees and provide under £130,000 of NHS services. Tetbury Hospital Trust Ltd holds contracts with the NHS more than £130,000, however, has fewer than fifty full time employees. In 2022/23 our full-time employee number was 44.66 WTE, with a head count of sixty seven. These figures exclude medical and surgical consultants as they are not classed as employees of the Trust.

We have thirty one Consultants (physicians and surgeons) and thirty three Anaesthetists that hold practising privileges and can manage patient care within our Trust.

A Quality Account is a report about the quality of services delivered by an NHS healthcare provider, this includes independent providers. Although Tetbury Hospital Trust is not mandated to publish this annual report the Board has decided that our quality information should be available to our members, our commissioners and published on the internet for the public to access. It is an important way for us to report on quality performance and show improvements in the services we deliver to our local community and stakeholders. The quality of our service is measured by looking at patient safety, the effectiveness of treatments that patients receive and patient feedback about the care provided.

This is the ninth published set of Quality Accounts for Tetbury Hospital Trust Ltd. The report will set out the approach we are taking to continuously improve quality of care and experience at the Trust. We aim to provide high quality, safe care for all our patients, and this report will document our key achievements for this year and our future.

4. Description of Services

The Trust has several departments which deliver services on behalf of the National Health Service, these are:

4.1 Minor Injuries and Illness Unit (MIIU)

The Minor Injuries Unit became a Minor Injuries and Illness unit on 1st of April 2022 which is open from 8.30am and accepts its last patient at 5.30pm Monday to Friday. It is staffed and led by experienced and skilled Emergency Nurse Practitioners (ENPs). The department has a triage paramedic practitioner and a triage nurse with practice nursing experience, who will be undertaking the Advancing Practice in Clinical Assessment, Reasoning and Differential Diagnosis (APiCA). We have recruited a paediatric trained registered nurse to support care of children and young people visiting the department.

4.2 Outpatient Department (OPD)

The Outpatient Department has seven clinic rooms and a purpose-built procedure room (theatre 2). We have a team of consultants delivering outpatient consultations. We also deliver many outpatient procedures, for example, non-scalpel vasectomy, nasoendoscopy, outpatient hysteroscopy and minor hand surgery.

4.3 Day Surgery Unit (DSU)

The Day Surgery Unit (DSU) offers a bright and private space for day surgery procedures for our patients. The layout of the department provides excellent patient flow and a one-way system. There are eight allocated recovery bays, that offer our patients privacy and dignity. In addition, there is a room that offers quiet space for consultation. We operate using local, intravenous sedation and general anaesthesia for a variety of procedures and specialties.



4.4 Imaging Department

The Imaging Department offers GP direct access for plain film X-rays and a service to our Outpatient Department and Minor Injuries and illness Unit. We also have a C-arm which is used in theatre for pain management procedures.

5. User Involvement

5.1 Local Networks

We continue to represent the hospital at the Tetbury Health, Well-being and Youth Working Group which is a Town Council initiative, where all health and social partners who work in and around Tetbury come together to discuss how we can improve the health and well-being of our communities. Furthermore, we contribute to the Gloucestershire Eye Health CPG which is attended by members of the public, and Wiltshire's BSW Ophthalmology network professionals meeting.

5.2 NHS Friends and Family Test

The Trust always values patient experience feedback. We have expanded ways for our patients to leave feedback through QR code and online methods. The NHS Friends and Family Test is a national programme which encourages our patient's voice to be heard. Patients are also encouraged to use alternative methods of giving feedback which are detailed on our website. The friends and family forms can be downloaded from our website and shared with the hospital. We continue to enable feedback via the, "Speak Up" link on our website which is supported by the NHS to help improve opportunities for patients who may need additional help with understanding and completing patient experience forms.

Any comments received are reviewed monthly at the Hospital Quality Committee by the Chief Executive Officer, Matron, Lead Nurse Quality, Audit and Risk, together with Departmental Managers.

The patient experience NHS survey was completed in November 2022, with 99% of respondents rating our service as very good/good. The Trust values all patient experiences as well as providing us information on what could be improved.

5.3 Members, Friends and Volunteers

As a charity we have fifty six Members, more than eight hundred Friends on our database and twenty two Volunteers. eighteen of our volunteers form The Friends of Tetbury Hospital, our fundraising committee. four volunteers work in our reception department. All staff are encouraged to become Members. We pull from this representational group to advise us on areas of the hospital that they feel can be improved. Their involvement and support are essential to the continued programme of work and respect of the hospital in the community.

The Friends of Tetbury Hospital are an established team of valued volunteers. They are well-known and respected and organise a programme of annual events, that are supported and anticipated by the local community. Additionally, they support the Trusts Fund-raiser to drive forward the fundraising strategy to raise funds for vital medical equipment and upgrades to the hospital facility that are not funded by the NHS. Last year donations, grants and legacies raised a net income of £88,710. Most of these funds contributed to the upgrade to our Minor Injuries and Illness Unit (MIIU).

The Friend's Committee is working towards an equal, diverse, and inclusive team. There are currently eighteen members, four male and fourteen females, across varying professions and age groups. There are three Trust Board members on the Committee. Committee meetings are held monthly and are attended by the Trusts Chief Executive. Over the last year meetings have been held on and off-site. Members may attend virtually or face to face.

5.4 PLACE

Patient Led Assessment in the Care Environment (PLACE) was completed in September 2022 with the support of two volunteer assessors. The results were very positive (Part 3 sec.19).



6. Outside Quality Inspections

The Chief Executive is the CQC Registered Manager for the Trust and following the retirement of Sarah Taylor in October 2022, Susan Probert was appointed to Matron and became the Nominated Individual for the hospital.

Tetbury Hospital was formally inspected by the Care Quality Commission (CQC) on 3rd and 4th May 2022 and was rated as 'Good'. This supports the hard work and dedication of our hospital team, and we continue to work hard to develop high quality services for the community.

The Trust is also registered with the Private Healthcare Information Network (PHIN) and provides information on its private operations to the Network.

7. Safety of Medications, including Controlled Drugs

The Chief Executive is the Accountable Officer. The role of the Accountable Officer is to ensure the safe management of medicines including controlled drugs from ordering through to their disposal. The Accountable Officer makes quarterly reports to NHS England on any concerns within the organisation, this is achieved by completing an occurrence report.

7.1 The Safer Management of Controlled Drugs

The Trust continues to benchmark from the "Learning from Gosport" document, which was published in November 2018. The Trust will continue to review the eight recommendations. The Trust Board has concluded that due to the nature of the care we deliver, there are robust embedded processes that would prevent anything similar occurring Tetbury Hospital.

We have continued to maintain safety and implement procedures for our patients in relation to controlled drugs. We do not offer palliative care services and our overall clinical usage of controlled drugs is minimal. In our Day Surgery and Minor Injuries and Illness unit, we follow policy on prescribing and administering controlled drugs. We have a service level agreement in place regarding auditing of medicines and patient group directives. We have a quarterly external controlled drug audit by Gloucestershire Hospitals NHS Foundation Trust which evidence safety and compliance.

8. Registration

The Trust welcomes regulatory inspections to support our internal monitoring processes, we continue to report to our Board using five key questions

- *Are we Safe?*  
✓ Ensuring people are protected from abuse and avoidable harm
- *Are we Effective?*  
✓ Promoting a good quality of life and achieving good evidenced based outcomes
- *Are we Caring?*  
✓ Involving people and treating them with compassion, kindness, dignity and respect
- *Are we Responsive?*  
✓ Organizing products and services to provide wide access to meet people's needs
- *Are we Well-led?*  
✓ Promoting high quality person-centred care through strong leadership

The Trust was inspected by the Care Quality Commission (CQC) on 3rd and 4th May 2022. The outcome was very positive, and the hospital was rated as 'Good'.



Later in 2023, the CQC will implement a new regulatory approach and assessment framework, with integrated assessment teams and the support of new technology. Ratings and the 5 key questions will remain. Quality statements will focus on topic areas under the key questions. There will be 6 new evidence categories under the statements.

9. Hospital Accountability Statement

To the best of my knowledge the information in the report is accurate. Laura Williams, Chief Executive.

This report has been reviewed and approved by the Chair of the Medical Advisory Committee, Mr Michael Rigby, Medical Director.

10. The Board of Trustees Statement

The Board of Trustees is fully committed to the provision of a high-quality service. This report has been approved by the Board for publication.

The Hospital has a robust clinical and corporate governance structure, with members of the Board playing an active part in ensuring the Trust fulfils its mission, according to its charitable intentions and ensuring the organisation remains responsible and compliant in all areas of CQC registration, health and safety, employment law and other relevant legislation.

11. Feedback comments on our Quality Accounts

This year is the ninth time Tetbury Hospital Trust has published a set of Quality Accounts. We would value your feedback on whether you found them useful and easy to follow.

If you would like to feedback, please email [enquiries@tetburyhospital.co.uk](mailto:enquiries@tetburyhospital.co.uk), or write to:

The Chief Executive Officer  
Tetbury Hospital Trust  
Malmesbury Road  
Tetbury  
Gloucestershire  
GL8 8XB





12. A review of our Quality priorities

What we achieved in 2022/23 (looking back)

Day Surgery Unit (DSU)

We have had a successful recruitment drive into new roles as well as replacing employees that have retired. We have created new job role opportunities for health care assistants with specialist theatre competencies.

We purchased a new ophthalmic microscope and anaesthetic induction machine. We continue with a rolling programme of investment in new and replacement equipment.

Our activity of theatre, running at 100% capacity, has limited opportunities to develop new pathways. We will, however, continue to review any opportunities as they arise.

Minor Illness and Injuries Unit (MIIU)

The unit was commissioned as a Minor injuries and Illness Unit in April 2022. This represents a benefit to the local community. Additional ENP's were recruited into MIIU to increase care to our community. We have extended our MIIU provision to include extended opening hours. We are scoping to extend this further in 2023/24.

The MIIU refurbishment was undertaken in 2022/23. Much of this work has now been completed, including reconfiguration of the main treatment area, murals and new furniture for the waiting room and children's wait room, new flooring and ceilings, new cabinetry, and redecoration.

All staff complete Resuscitation Council training and will continue to do so annually. One trainee emergency care practitioner works as a paramedic and one ENP works in primary care. The department also has a paediatric trained triage nurse with a specialist interest in safeguarding.

We will invest in our staff to complete further training to allow for career progression, ensuring that practitioners are also trained to be independent non-medical prescribers.

Outpatient Department (OPD)

The procedure room was reassigned to the day surgery unit, to ensure the skill mix available to utilise the space.

We continue to develop the health care assistant competencies and have supported with the development of a further ophthalmic technician role.

The organisation will focus on how we can continue to increase levels of patient activity whilst ensuring a robust and resilient infrastructure. We will deliver this by implementing a new patient clinical administration system to improve overall efficiency.

We will continue our dialogue with patients to ensure that services are meeting needs and achieve a positive experience and outcome.

Health, Safety and Risk

We have increased the focus on safety and increased the scope of our Lead Nurse to oversee risk and patient safety in the organisation.

We have appointed a Health and Safety Officer who has engaged with all departments to support the development of a positive health and safety culture.

Administration

We have delivered a patient administration system that our staff have developed with our in-house design team to reduce duplication, improve patient care and facilitate national and local reporting.

We will integrate our system to enable text messaging and emails to be sent to patients thereby reducing the use of resources such as ink, toner, paper, postage.

We have started to migrate our medical records to electronic, firstly the new patients have been transferred. This will reduce non-reusable resources, waste and improve communication between healthcare professionals. Many GP surgeries use this system which will enable much safer information sharing for patient care.

The infrastructure of the administration team has been reviewed and continues to be assessed against activity. We have increased the number of medical secretaries and have recruited into administrative support roles.

Estates

The majority of improvements to the MIIU's working environment were completed by April 2023.

We have installed compact energy efficient gas heating boilers and replaced the cold-water system pipework and fitted a new cold-water storage tank which has improved the non-potable water quality throughout the hospital. Upgrades to the buildings mechanical system has resulted in significant reductions in energy consumption and costs, as we are able to better control requirements.

We have upgraded the lighting in our theatre suite and have carried out work to improve availability of electric capacity.

We have continued to provide transport services and have ensured contingencies are in place.

Marketing, Referrer Liaison and Fundraising

We have investigated re-branding to improve our communications with the community and wider reach. We have upgraded to a new Customer Relationship Management (CRM) system to improve online and offline communications.

We have engaged with GP practices and Opticians in Gloucestershire and referral support teams in Wiltshire. We have kept referrers up to date regarding our NHS wait times and our private patient service, to enable all patients to have choice when considering their patient pathway.

We have continued to work on our programme of referrer education events at the hospital to showcase our facility and enable referring teams to meet our consultants.

The Friends of Tetbury Hospital successfully resumed their face-to-face fundraising events with the annual Charity Walk and Boules Tournament. The Door-to-Door collection resumed in a new format through the local Tetbury Advertiser magazine.

Fundraising Project 2022-2023

Refurbishment of the minor injuries and illness unit, and a new childrens waiting area



The plan for 2023/24 (looking forward)

On an annual basis, the Trust develops an operational plan to set objectives for the year ahead. The priorities are determined by the leadership team considering patient feedback, audit results, national guidance and recommendations from various committees and staff meetings. We have used the same methodology as previous years to develop the priorities for improvement going forward.

They have been identified through the collation of different sources of information, these included, but were not limited to:

- Output from clinical audits
- NHS Health Security Agency, NHS England and Government directives
- Patient and carer experience feedback
- Views from employees, Friends of Tetbury Hospital and volunteers
- Identification of service gaps
- Review of incidents and complaints



The direction of travel for the coming year 2023/24 is being developed as follows:

Day Surgery Unit (DSU)

We shall maximize greater utilization of the procedure room (theatre 2). We will improve and scope for increased theatre efficiency, to maximize theatre time whilst maintaining safe standards of personalised care.

Minor Injuries and Illness Unit (MIIU)

We will complete further training to allow for career progression, ensuring that practitioners are also trained to be independent non-medical prescriber's.

We will continue working closely with the Integrated Care Board (ICB) to ensure that we are in line with other Minor Injuries & Illness Units in Gloucestershire.

We will complete a trial of extended opening hours and evaluate the viability of continuing this aspect of the service.

We will continue to explore opportunities to ensure continued professional development and competencies relevant to roles.

We will access additional supervision that is clinically focused, covering areas related to safeguarding and clinical practice development.

We will evaluate and identify appropriate national templates which support clinical decision making and guidelines.

Outpatient Department (OPD)

The department will continue to support and develop new services during 2023 for example: an orthopaedic clinic (hand surgery) and non-scalpel vasectomy.

Health, Safety and Risk

We will to continue to meet current Health and Safety Guidelines and legislation, to protect the Trust and employees.

Administration

Looking ahead we will continue to review the administration structure. We are planning to move to a voice recognition dictation system. This will enable the secretaries to dedicate more time to answering patient queries and ensure results are received and acted on in a timely manner.

IT infrastructure will be reviewed to ensure that we have good working systems to enable us to continue delivering an efficient electronic service. We hope to be able to move to text messaging reminders for patients and for all notes to be fully electronic.

Estates

We will complete the 'External Improvements Project' and plan works to further improve the roadway and external estate.

We will identify further energy saving essential service upgrades, including a standby generator, and produce a replacement strategy.

We will consider installing photo-voltaic energy capture, to offset our energy costs and provide our hospital with renewable energy resources.

We will enhance working environments by creation of internal waste facility and cleaning equipment/consumables room.

Marketing, Referrer Liason and Fundraising

As part of our communication's strategy, we will work on our branding and external messaging to improve engagement with our community and wider reach.

Referrer Liaison

We will continue to engage with GP practices, Optometrists and Dentists in Gloucestershire, South Gloucestershire and Wiltshire. We will update referring teams regarding services, NHS wait times and availability. We will work on our programme of referrer education events to showcase our facility and enable referring teams to meet our consultants.

Friends of Tetbury Hospital

The Friends of Tetbury Hospital will support the hospital with fundraising events and the annual Door-to-Door collection. The Friends will further support, in their capacity as the voice of the hospital in the community regarding fundraising and services..

Part 3

13. Data Quality

We will continue to build our reporting requirements. Our SUS (Secondary Uses Service) extract is now submitted by our Senior Analytics Officer. Mandatory reports are performed in-house extracting information from our patient administration system. The data is audited and checked by our Trust to ensure it is robust.

Data contained within the medical records are part of our annual audit programme, this includes our medicine management audit.

We complete the clinical Indicator submission for the Health and Social Care Information Centre (HSCIC).

We complete monthly data submissions to the Private Health Information Network (PHIN) as per the Competitions and Markets requirements.

Our quality and access standards are monitored by Bath, North-East Somerset, Swindon and Wiltshire Integrated Care Board (ICB) and Gloucestershire ICB. We formally meet quarterly with Gloucestershire ICB.

We complete the nationally mandated Data Landing Portal and provide the NHS with additional data regarding our waiting lists, as we work with them to develop a national picture of number of patients waiting and the clinical urgency of procedures listed.

We have assessed our compliance against the General Data Protection Regulations (GDPR) which came into force in May 2018. We continue to complete the Data Security and Protection Tool-kit annually and meet standards.

14. Information Governance

Information governance sits alongside clinical and corporate governance. The aim of Tetbury Hospital is to ensure that information is dealt with legally, securely, efficiently and effectively. In addition, it is also about supporting the provision of high-quality care by ensuring that the right information is available to the right people, when and where it is needed to deliver the best possible care. There is a range of national guidance that Tetbury Hospital complies with.

At Tetbury Hospital we operate two separate IT systems. The patient administration system operates through a secure network called Health and Social Care Network (HSCN) provided by NHS digital. This ensures that patient information is kept secure. Tetbury Hospital is monitored for compliance through the Data Security Protection Tool-kit, for which we have obtained 'standards met' this year. The Hospital is also registered with the Information Commissioners Office, who can impose fines for any breach of security.

Alongside the patient administration system, the hospital runs a separate IT network which deals with the charitable business. This system requires compliance with information governance as we do handle identifiable information such as staff records, card payments etc. The Trust is looking towards obtaining Cyber Essentials certification to show compliance with IG throughout both systems.

14.1 Assurance Framework

The Chief Executive Officer has overall responsibility for the compliance with the relevant legislation surrounding Information Governance – The Chief Executive Officer is also the Senior Information Risk Owner. The Caldicott Guardian, is the Medical Director, who is responsible for the arrangements around the use and sharing of clinical information.

The Information Governance Lead (Head of Information, Technology & Administration) is responsible for the development, communication and monitoring of Information governance policies, procedures and action plans. The Information Governance Lead is also the Trusts Data Protection Officer (DPO).

The Information Governance Committee is responsible for providing assurance to the Board that the Information Governance Framework is implemented, and that information governance systems and processes are developed, co-ordinated and monitored.

All employees are responsible for any records or data they create and the information they use. They must adhere to all information governance policies, procedures and standards which are written into the terms and conditions of their contracts of employment.

The Trust continues to complete the mandatory Data Security and Protection Tool-kit. Moving forward the Trust IT system, which is used for the charitable work, is working towards Cyber Essentials Certification.



15. Environmental Objectives and Monitoring

We remain in the largest gas and electric buying consortium for public sector services and our energy costs. Increases in consumption can be attributed to clinical services across all departments, as the installation of our new energy efficient, heating only boilers with a new building mechanical system, has provided significant energy and cost savings.

Waste disposal costs have increased, in line with inflation, and additional costs to the waste carriers. The amount of household waste continues to reduce, and our dry mixed recycling is increasing, and we are seeing more staff keen to promote recycling in their departments.

The external environment is now being managed, to provide wildlife habitats with the use of organic, natural methods for pest and disease control. We are introducing planting schemes to encourage pollinators and provide a calming and nurturing environment that can be appreciated by our patients, staff and visitors.

15.1 National Guidance

The Trust complies with the recommendations contained in National Institute for Health and Clinical Excellence (NICE) and safety alerts, as issued by the Medicines Health Regulating Authority (MHRA) Central Alerting System.

We scrutinise national guidance, at the Hospital Quality Committee (monthly) and Medical Advisory Committee (quarterly), selecting those that are applicable to our services for review and action.

15.2 Sustainability

Within the Care Quality Commission good governance regulation, there is an expectation that Tetbury Hospital Trust 'understands any negative impact of our activities on the environment and we strive to make a positive contribution in reducing it and support people to do the same.' Extract from Regulated Activities Regulations 2014.

Tetbury Hospital will continue to work toward its sustainable goals, set out in our strategy and annual committee plan, whereby department's will undertake energy-saving projects, for example, on-line, electronic stored HR and payroll systems and reducing single-use clinical equipment. These projects are planned after considering the 'Greener NHS' ambitions.

16. Review of Quality Performance

16.1 Commissioning for Quality and Innovation (CQuIN)

The last two years have been unprecedented for the NHS and Independent providers. The COVID-19 pandemic has presented a unique set of challenges which has required innovative new ways of working. CQuIN targets were not part of the Trust contract for 2022/23.

We are working with the NHS to reduce waiting times in the county with demand outstripping capacity, thereby, our wait times may be more than 18 weeks from referral to treatment in some specialities. This is a national dilemma and not one unique to our Trust.

17. Infection prevention and Control (IPC)

The focus on Infection Prevention and Control remains a priority. The CEO, Matron, Medical Director and the Board continued to identify the priorities to support safety.

The Trust participates in the screening program for MRSA at pre-operative assessment, where the speciality requires, before patients are admitted to the day surgery unit.

There is mandatory training for all employees and the Trust is aligned with Gloucestershire Health & Care NHS Foundation Trust (GHCNHSFT) IP&C team, to ensure we are compliant.

Our infection case rates between April 2022- March 2023 were:

- Zero MRSA bacteremia
- Zero MSSA
- Zero E. coli
- Zero Clostridium Difficile

We are not required to submit surgical site infection (SSI) data to UK Health Security Agency (UKHSA), as we do not perform hip or knee replacements at the Trust.

Environmental cleanliness is essential to infection prevention and control. Patient feedback supports that patients/ visitors find the hospital clean and tidy. This standard was reflected in the 2022 Infection Prevention & Control (IP&C) Audit, undertaken by GHCNHSFT.

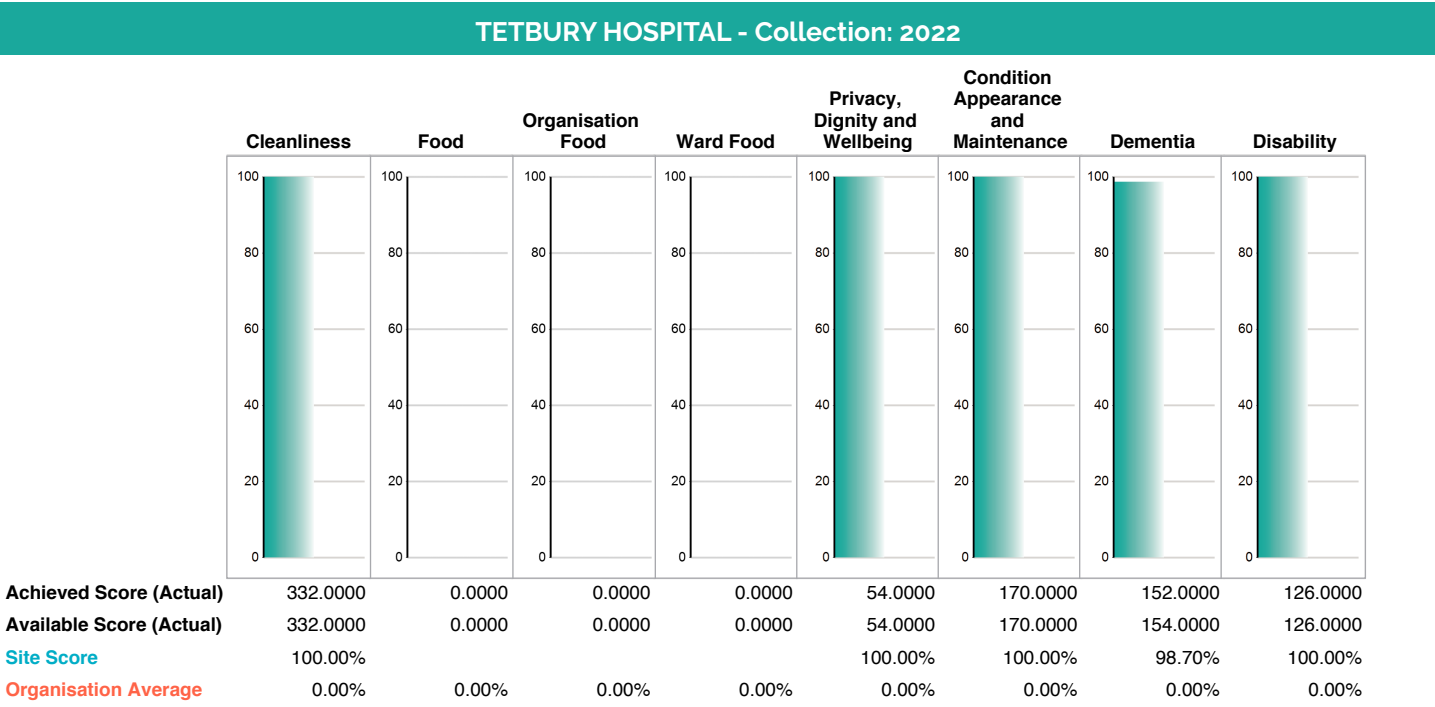
In terms of COVID-19, in line with UK Health Security Agency (UKHSA) and NHS England, the Trust infection control IP&C risk assessment has been updated.

18. Safety in the workplace

The recruitment of a Health and Safety Officer, and the involvement of the Lead Nurse Quality, Audit and Risk role, has enhanced our patient safety and risk agenda. All incidents are reported via our manual incident reporting system and discussed through the Trust Governance process.

From late 2023, all organisations with a standard NHS Contract (NHS England), will be required to submit significant incident reports. Any areas for learning or improvements will be identified, as part of the Patient Safety Incident Framework (PSIRF)/Learning from Patient Safety Events (LFPSE) . The Trust is prepared for this transition and is working with Gloucestershire Integrated Care Board (GICB) and other local healthcare providers to support patient safety and system learning.

19. NHS Patient Led Assessment of the Care Environment (PLACE)



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The NHS Patient Led Assessment of the Care Environment (PLACE) was undertaken in September 2022 by two voluntary assessors, supported by the Estates Manager and Lead Nurse, Quality and Risk. The role of the volunteers is to help review the environment and identify any areas, that may need improvement in and around the hospital. Tetbury Hospital does not have overnight patient beds; therefore, the NHS PLACE 2022 results are not nationally comparable.

Tetbury Hospital scored (100%) for cleanliness, appearance, disability. Dementia scored (98%), this was due to the patient toilet in the Minor Injuries and Illness Unit requiring upgrading. This work was planned for 2022, but was not completed at the time of the NHS PLACE assessment.





20. Clinical Incident Reporting

A culture of patient safety requires staff to report and learn from errors or near misses, and therefore, we need a reliable system for doing this. We do not currently report our incidents onto the National Reporting and Learning System (NRLS), we record our incidents on a paper form and then input manually onto a local data base. We encourage all incidents or events where things did not quite go right to be reported. These can be clinical and non-clinical.

Going forward in 2023, the transfer over to NHS Learning for Patient Safety Events (LFPSE) and NHS Patient Safety Incident Reporting Framework (PSIRF) is being introduced for all organisations with a standard NHS provider contract. Incidents will be required to be reported via an NHS digital web portal. The focus is on learning and inclusivity in reporting to help reduce risk and support patient safety.

All incidents clinical and non-clinical are discussed at the Hospital Quality Committee and reported to the Board. The reporting system enables staff to highlight potential problems and have them investigated. Actions are put in place to reduce the risk to patients and improve their experience whilst in the Trust. No incidents in the Trust resulted in patients experiencing severe harm or death.

The Trust reported eighty two near misses or incidents during the financial year 2022/23. Our reporting includes any near miss, or incident that occurred within the building or grounds, whether the incident was our regulated activity or another provider who rents our facility. seventy seven incidents (94%) resulted in no or low harm, only five incidents (6%) were assessed as moderate.

21. Clinical Effectiveness

Our Medical Advisory Committee and Hospital Quality Committee meet throughout the year to monitor safety, quality, and effectiveness of care. All clinical incidents and feedback are reviewed. This is important, to determine if there are trends which require, investigation, learning or changes in practice.

The Medical Director is the designated responsible officer. The role of the responsible officer is to ensure the Trust has robust processes that provide a framework within which medical staff maintain and improve their practice. Responsible officers play a crucial role in improving and maintaining the quality and safety of patient care.

22. Parity of Esteem

The Trust is continuing to support mental health and well-being of our employees and patients. Clinically, the Trust is continuing to evaluate our services around mental health and any forward referrals. We support employees through one-to-one clinical supervision and have increased the sessions available for employees, with our Well-being and Resilience Co-ordinator. The Trust is a Mindful Employer and is committed to empowering with information and support for all our employees.

23. Re-admissions within twenty eight days of discharge

Any re-admission within twebty eight days of surgery is recorded as a clinical incident and reviewed case by case at the Medical Advisory Committee with any patterns or themes identified. There were no patients that required re-admissions to theatres following an operation at the Trust in 2022/23.

24. Venous Thromboembolism (VTE) risk assessment

The Trust carries out VTE risk assessments as part of our routine pathway in day surgery. In 2022/23, 100% of patients who required a VTE assessment had this completed. This is result is better than the national average.

25. Duty of Candour

Patients should be well informed about all elements of their care and treatment and all Trust employees have a responsibility to be open and honest. A culture of candour is essential to maintain the safety of patients, employees, and visitors. If mistakes happen, we will:

- Offer an opportunity to discuss what went wrong.
- Discuss any harm experienced.
- Identify learning to prevent it happening again.
- Offer an apology.

Our Freedom to Speak Up Guardian, Kathy Callaghan, is also a Trustee. We welcome all forms of feedback through Friends and Family forms and online via our website. We recognise that making a complaint can be stressful. In handling any complaint, our aim is to be transparent and open to improve the journey through the process and communicate effectively.

26. Participation in clinical audits

Tetbury Hospital Trust undertakes a full annual clinical audit programme.

The audit programme covers a range of areas including:

- Clinical record keeping
- Patient/carer experience
- Infection control
- Medicine management
- Safeguarding children
- Surgical safety
- Discharge summary
- National Vasectomy Audit (Association of Surgeon's in Primary Care, ASPC)

Action plans are produced from each audit report and outcomes are discussed at the Clinical Audit Committee, Hospital Quality Committee and Medical Advisory Committee. Audit results are shared with the clinical teams, hospital board, commissioners, and Care Quality Commission as requested.

Tetbury Hospital Trust has not engaged in any formal research and is not commissioned to do so.

27. Risk Management

The Trust identifies risks to ensure that they are removed or mitigated against where possible. Through our governance processes we discuss and report on these formally to the Hospital Quality Committee, Medical Advisory Committee, and Health and Safety Committee. Patient safety is a priority and to support this, we have expanded our focus on health and safety and risk within the Trust, by directly employing a health and safety officer.

28. Complaints and Compliments

28.1 Complaints

The Trust received five formal complaints during the financial year 2022/23; with a regulated activity of 21,967 patient care episodes. The percentage from these five formal complaints against this regulated activity is 0.02276% or a ratio of 4,393:1. 100% of patient complaints were responded to within twenty five working days. There have been no requests from the Ombudsman.

28.2 Compliments

The Trust received one hundred and thirty two compliments which were reported to the board in 2022/23:

Sixty five iWantGreatCare

Twenty eight letters/cards/emails.

Twenty two NHS UK reviews.

Seventeen Google reviews.

Tetbury Hospital was awarded the iWantGreatCare certificate of excellence for our patient care activity in 2022/23.



28.3 NHS Friends & Family

NHS Friends and Family feedback is discussed monthly at the Hospital Quality Committee.

In 2022/23, the Trust received a total of one hundred and sixty three responses. 100% of patients rated their experience of Tetbury Hospital as very good/good.

Through the Trust website, patients can complete online feedback via a QR code. There is also a link to 'ASK, LISTEN, DO' (NHS England), to support patient feedback with concise information and pictures to help guide them through the process.

A selection of reviews and comments received from our patients are on the following pages.





★★★★★

Rated 5 stars out of 5 (Anonymous)

"My mother had a cataract operation here, she couldn't fault the service and advice received, details provided before were clear, arrived at time given, operation and after care advice completed within 2 hours of arriving, all super clear, friendly and helpful staff, operation successful. She would highly recommend & will be returning to do second eye in a few months."

★★★★★

Rated 5 stars out of 5 (Anonymous)

"I attended the Hospital last week for an x-ray. Fantastic experience, Friendly staff (Both reception and X-ray dept) I arrived early but was seen straight away and free parking!!! Thanks all."

★★★★★

Rated 5 stars out of 5 (Anonymous)

"Very professional and welcoming receptionist. Nursing staff giving excellent first class service. Taking care and time to examine, discuss, listen and answer my questions. It was refreshing to see that all the staff looked happy in their workplace"



NHS Friends and Family feedback

"Because they were very nice and they were very helpful." (age 12 years)

"This is the nicest hospital I have ever been to. Very friendly nurses and doctor. An appointment on time – no waiting for hours and everything clearly explained."

"I was impressed by the efficiency of all the staff I met on the day of my cataract operation. The surgeon was a superb consultant with a calm, knowledgeable attitude and his team worked hard to make sure I knew what was happening and was comfortable."

"Excellent!"

NHS Ratings and reviews

Excellent experience

★★★★★ Rated 5 stars out of 5 (Anonymous - posted 22nd February 2023)

"I had an excellent experience at Tetbury Hospital. All the staff were wonderful and I was very well looked after. Long may this important local service continue."

Visited Pain Management on February 2023

A very good level of care

★★★★★ Rated 5 stars out of 5 (Anonymous - posted 9th June 2022)

"I received a very good level of care prior to, during and after my surgery at Tetbury Hospital. They were considerate and I felt very well cared for. It was my first experience of NHS care services and I can confidently say it was excellent. I recommend Tetbury Hospital"

Visited Urology on June 2022



★★★★★

Written by an NHS patient 18th January 2023

"My son with learning difficulties had an operation in your Day Surgery Unit. He was treated with so much care and respect. I cannot praise everyone from the surgeon, Mr Brendan McIlroy to the nurses highly enough"

Recommend	★★★★★	Dignity/Respect	★★★★★
Involvement	★★★★★	Information	★★★★★
Cleanliness	★★★★★	Staff	★★★★★
Safe	★★★★★		

★★★★★

Written by an private patient 15th November 2022

"The experience of Tetbury Hospital was first class from the moment of arrival through to departure. Totally professional staff in a very clean and well run hospital. All staff made me feel at ease and such ensured a totally stress free visit. First Class Service all round. "

Recommend	★★★★★	Dignity/Respect	★★★★★
Involvement	★★★★★	Information	★★★★★
Cleanliness	★★★★★	Staff	★★★★★
Safe	★★★★★		

Here for you.







Friends of  
Tetbury Hospital



Here for you.



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