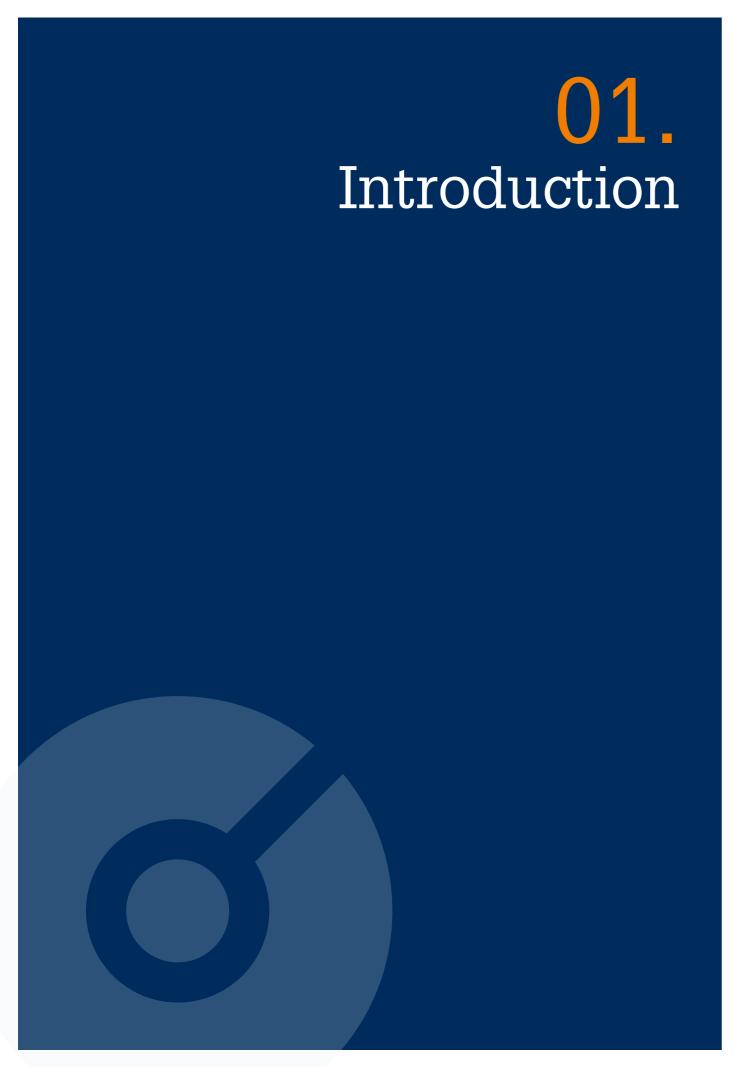


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Founded by the Schön family in Germany in 1985. Schoen Clinic has grown and evolved into a leading healthcare provider delivering award-winning, innovative, personalised treatments for mental health disorders plus orthopaedic and spine conditions at four facilities across the UK.



1

Schoen Clinic Orthopaedic and Spinal Hospital London

Our award winning super-specialised orthopaedic and spine hospital in London's renowned Harley Street Medical District in Marylebone.

2

Schoen Clinic Centre for Mental Health Chelsea

Our discreet, modern and welcoming outpatient clinic for mental health, located just off the iconic King's Road in the heart of Chelsea.

3

Schoen Clinic Newbridge

Our nationally and internationally renowned inpatient hospital for children and young people with eating disorders in Birmingham.

4

Schoen Clinic York

Our specialised inpatient hospital for adults with eating disorders in the north of England.

- 24 hospitals and clinics across Germany and the UK
- Treating 300,000 patients each year
- Employing 11,300 colleagues
- Employing many of our world-leading Consultants
- Highly specialised multidisciplinary teams
- Award-winning facilities
- Nationally and internationally recognised for clinical outcome excellence
- Continuously reinvesting into our facilities, colleagues and technology

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Our Facilities – Orthopaedic and Spine

Schoen Clinic London, Marylebone

Situated in the heart of the Harley Street Medical District in Marylebone, Schoen Clinic Orthopaedic & Spinal Hospital London was one of the first private hospitals in the UK to specialise in orthopaedic and spine treatments, and is now regarded as a leader in this field.

The hospital treats patients for a wide range of orthopaedic and spine conditions, as well as elite athletes and sports injuries. From diagnosis, nonsurgical and surgical treatments, to rehabilitation, we offer the entire treatment pathway for orthopaedic, spine and musculoskeletal (MSK) conditions under one roof. Our leading UK internationally renowned experts work together as a multidisciplinary team to deliver the fastest and best possible recovery to ensure patients get back to doing what they love sooner.

Our state of the art, purpose built hospital boasts three operating theatres, on-site diagnostic imaging, outpatient consultation suites, treatment and therapy facilities, 39 custom-designed inpatient bedrooms and five post-anaesthetic care beds. The hospital also has Consultant Intensive Care Physicians onsite 24 hours a day, meaning in the unlikely event of a patient requiring an advanced level of clinical care post-surgery, the highest level of clinical expertise is always available.

In recognition of its excellence, Schoen Clinic London won the prestigious LaingBuisson Hospital of the Year award 2019, and the CQC rated this facility as Good across all domains, just 6 months after opening.

About our Hospital Director



Stephen is responsible for the overall leadership, growth and development of Schoen Clinic London. He manages Consultant relationships (both employed and independent) and welcomes new Consultants to drive quality healthcare and the clinical excellence Schoen Clinic London is widely known for. He also welcomes relationships with stakeholders, private medical insurers, GPs and allied health professionals.

Stephen's extensive experience spans 35 years and includes Interim Hospital Director of Spire Claremont Hospital, National Managing Director of Virgin Care (UK) and Hospital Director at BMI Healthcare. He also comes with a wealth of international experience, having previously held senior positions in Australia and the middle east.

About our Medical Director Dr Tim Wigmore



Dr Wigmore has recently been appointed Group Medical Director to strengthen and enhance our group governance structures, improve oversight and visibility of all clinical and medical outcome data and ensure compliance and regulatory requirements are consistently met.

Dr Wigmore has been Medical Director at Schoen Clinic London since it opened in 2018, leading exemplary safety standards and building our reputation as a data driven provider. In addition, he has over 25 years' experience in the NHS as a Consultant Anaesthetist in Intensive Care, researcher and Senior Medical Manager at The Royal Marsden.



Winners

2020 LaingBuisson Hospital Group of The Year

2020/2021 National Joint Registry (NJR) Quality Data Provider

2019/20 National Joint Registry (NJR) Quality Data Provider

2019 LaingBuisson Hospital Of The Year

Finalists

2022 Health Investor Private Hospital Group of the Year

2021 LaingBuisson Hospital Of The Year

2020 Health Investor Private Hospital Group of the Year

2019 LaingBuisson Hospital Group of the Year

2019 LaingBuisson Nursing Practice

2019 Health Investor Awards Hospital Group of the Year

Stephen Smith



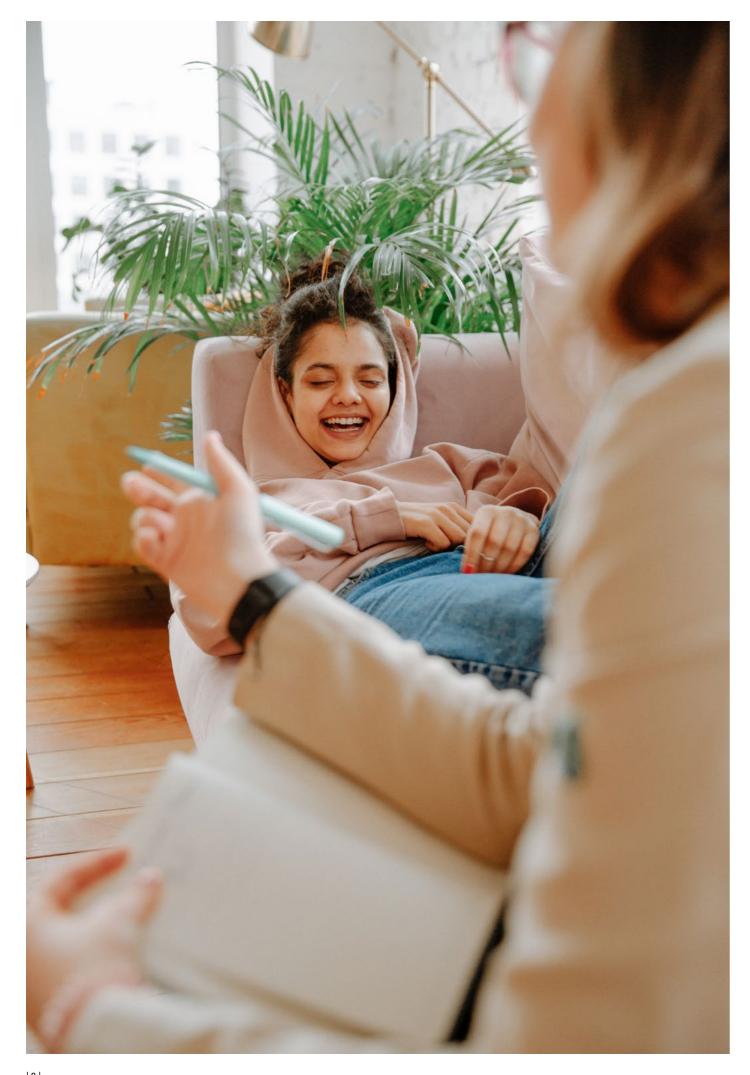








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Our Facilities – Mental Health

About our Director of Mental Health ServicesRachel Matthews



Rachel is responsible for the overall UK strategy for mental health and is clinical by background, having been heavily involved in research positioning Schoen Clinic Newbridge on the world stage for children's eating disorders. Rachel leads on the development of our mental health portfolio, ensuring we are recognised for delivering the highest standards of mental health care.

Rachel has extensive experience in mental health services, both in the community and hospital settings. Rachel has was worked in Australia, as well as the UK having worked at Schoen Clinic Newbridge, Birmingham Children's Hospital, CAMHS and Forensic Mental Health Services.

About our Medical Director Dr Tony Winston



Dr Winston has worked as a Consultant at Schoen Clinic Newbridge since it was established and was Medical Director there before taking on additional responsibility for Schoen Clinic York and Schoen Clinic Chelsea. He provides medical leadership and ensures all treatment is safe and effective.

Dr Winston qualified in medicine in 1987 and undertook postgraduate training in general medicine, psychiatry, psychotherapy and eating disorders before becoming an NHS Consultant in 2000. He combines his role at Schoen Clinic with continuing work in the NHS, where he also has many years' experience as a Medical Manager.

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Schoen Clinic Chelsea, London

Our highly specialised outpatient clinic providing personalised treatment packages for patients and their families suffering from eating disorders and anxiety and mood disorders. Using a multidisciplinary mixture of group and one-to-one therapies, every patient receives the personalised treatment plan they need for a successful recovery.

Schoen Clinic Chelsea is nestled in a discreet location in the heart of Chelsea, treating patients 11 years+ with eating disorders and adults (18 years+) with anxiety and mood disorders such as depression, OCD and panic disorders. This service is perfect for patients not requiring inpatient care but in need of fast access to specialised treatment. Consultations and therapy sessions are accessible both online and in clinic.

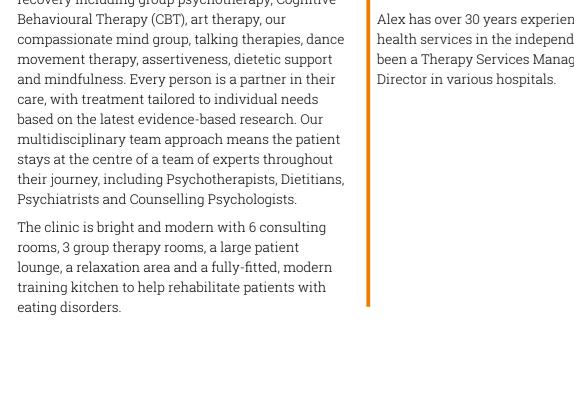
Our treatment programmes cover key areas for recovery including group psychotherapy, Cognitive

About our Clinic Director Alex Blatch



Alex joined Schoen Clinic UK in September 2020 and is responsible for the overall management and clinical and operational performance of Schoen Clinic Chelsea.

Alex has over 30 years experience working in mental health services in the independent sector and has been a Therapy Services Manager and Hospital









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Schoen Clinic Newbridge, Birmingham

Schoen Clinic Newbridge is recognised as an international centre of excellence for children and young people experiencing eating disorders and delivers specialist care for 8-18 year olds and their families. Originally founded by Professor Hubert Lacey, a world renowned expert in the field of eating disorders, the extensive multidisciplinary team continues to grow, comprising of psychiatrists, nurses, occupational therapists, dietitians, family therapists and individual therapists collaborating together to offer a comprehensive and bespoke treatment programme for their young people.

The hospital, acquired in 2017 by Schoen Clinic UK, was already a hub for assessing and treating young people and a £1.6M investment has expanded capacity further and refurbished the hospital itself. The improvements completed in 2021 added new, larger classrooms to ensure young people can continue their education, several new therapy rooms, 6 additional inpatient beds, new dining and communal areas and an outdoor garden project for all.

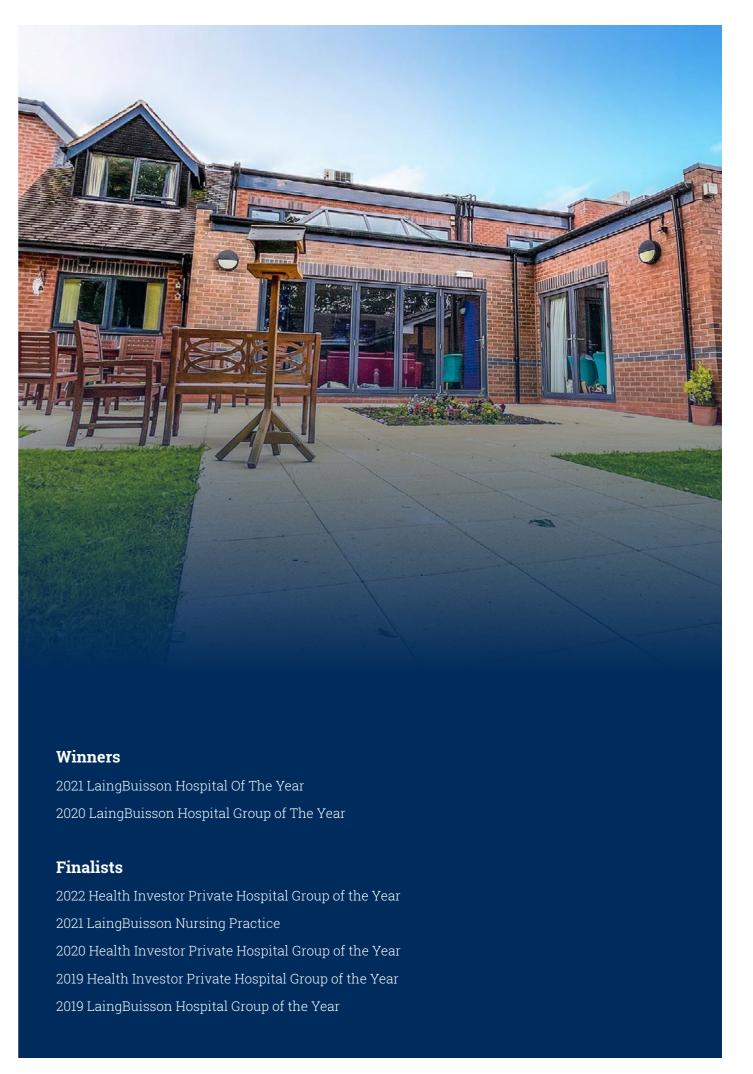
In recognition of its excellence, Schoen Clinic Newbridge won the prestigious LaingBuisson Hospital of the Year 2021 award and has been rated Outstanding twice in a row by the Care Quality Commission.

About our Hospital Director Natalie Maley



Natalie joined Newbridge House (now Schoen Clinic Newbridge) in January 2013. Natalie is accountable for the financial and operational performance of the hospital and ensuring the highest standards of care to the young people and families. Natalie has been instrumental in Newbridge being awarded the prestigious "Outstanding" Care Quality Commission rating in 2016 and 2018.

Natalie has a wealth of experience in child and adolescent mental health services, in both community and hospital settings. Previous work as Clinical Manager at Newbridge Hospital has ensured a comprehensive understanding of patient care, community liaison and multidisciplinary care.









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Schoen Clinic York

Schoen Clinic York is a highly specialised inpatient hospital for adults with eating disorders. Their multidisciplinary team work with the patient as part of a recovery programme with the aim of helping patients overcome their eating disorder and regain their independence.

The treatment programme is founded on the principle of helping patients to recognise their own difficulties and needs, agreeing and reaching shared goals.

There are a range of treatments and therapies incorporated into treatment including Cognitive Behavioural Therapy (CBT), Compassion Focussed Therapy (CFT) and integrative supported therapy adapted from Maudsley Anorexia Nervosa Treatment for Adults (MANTRA). There are group programmes including DBT skills, Bodywise, core CBT, YEAT (York Exercise & Activity Treatment) and Practical Body Image (PBI).

Schoen Clinic York comprises 15 ensuite inpatient bedrooms, in addition to tranquil, welcoming communal spaces, an occupational therapy kitchen, daily living room, a quiet room and a peaceful talking therapy room. Residents also have access to landscaped gardens that are safe, secure and peaceful.

About our Hospital Director Adam Bloor



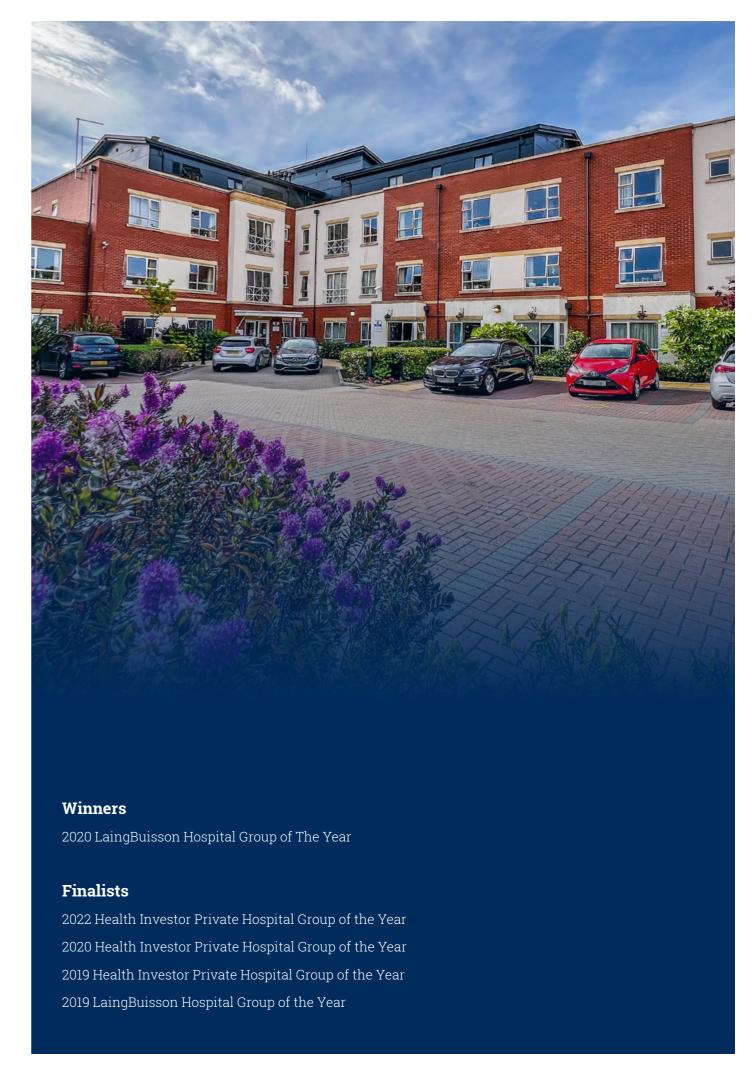
Adam joined Schoen Clinic York in May 2022 as Interim Hospital Director. He has over 16 years' experience working with people with mental health conditions as well as those with learning disabilities and complex needs.

Adam brings with him a wealth of knowledge and experience from a range of areas within the sector, from rehabilitation to secure provisions. He has previous experience as the Hospital Director of an 85 bed hospital treating a range of conditions including eating disorders, adult psychiatry, CAMHS, addictions and Huntington's Dementia. Adam has also held the position of Operations Director nationally overseeing 12 mental health hospitals/services across the UK.





 $\ensuremath{\mathsf{CQC}}$ logos featured on hospital pages were correct for the reporting period of this Quality Account



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Working with the NHS

During April 2021-March 2022, Schoen Clinic London provided support to four NHS Trusts as part of the ongoing Covid-19 Recovery Programme. This work represented less than 9% of total revenue. Schoen Clinic London has provided theatre space to enable NHS Trusts to undertake additional, and much needed, elective surgical activity utilising their own surgeons. Schoen Clinic London has also undertaken elective surgery for NHS patients on behalf of three NHS Trusts.

Schoen Clinic London has provided orthopaedic, spinal and neurosurgical support to University College London Hospitals (UCLH) NHS Foundation Trust. We continue to support their spinal and neurosurgical patients and are very proud to have enabled our colleagues at UCLH's Queen Square Hospital to clear the backlog of patients who required implantation of Occipital Nerve Stimulator implants.

The Whittington Health Care NHS Trust utilised Schoen Clinic London facilities for both orthopaedic and spinal surgery. Schoen Clinic London's surgeons have also operated on Whittington Health Care NHS Trust patients.

Guys and St. Thomas' NHS Foundation Trust utilised Schoen Clinic London facilities for orthopaedic surgery. Schoen Clinic London's surgeons have also operated on Guys and St. Thomas' NHS Foundation Trust patients.

Chelsea and Westminster NHS Foundation Trust have utilised Schoen Clinic London facilities to undertake additional orthopaedic surgical activity. Schoen Clinic London has managed a proportion of lower limb direct referrals from primary healthcare to Chelsea and Westminster NHS Foundation Trust as well as providing surgery for long wait patients.

NHS patients treated at Schoen Clinic London have remained on their referring Trusts PROMS and PREMS outcome pathways. Quality of care data outside of PROMS and PREMS has been reviewed by Schoen Clinic London and is reported with non-NHS funded patients.

The Mental Health Division currently includes three mental health sites. The inpatient facilities in Birmingham and York have NHS contracts for NHS patients, this represented 98% and 97% of total revenue at each site.

Schoen Clinic Newbridge NHS contract 2021/2022 was in place for 1 year only, because the West Midlands CAMHS Provider Collaborative (WMCPC) was being created. The NHS 2021/2022 contract increased the number of NHS commissioned beds from 24.5 to 32 NHS commissioned beds. The WMCPC did not go live in line with other Provider Collaboratives and is now set to go live in July 2022 with Birmingham Women's and Children's NHS Foundation Trust (BWC) being the Lead Provider. Schoen Clinic Newbridge is represented at Board level on the WMCPC partnership.

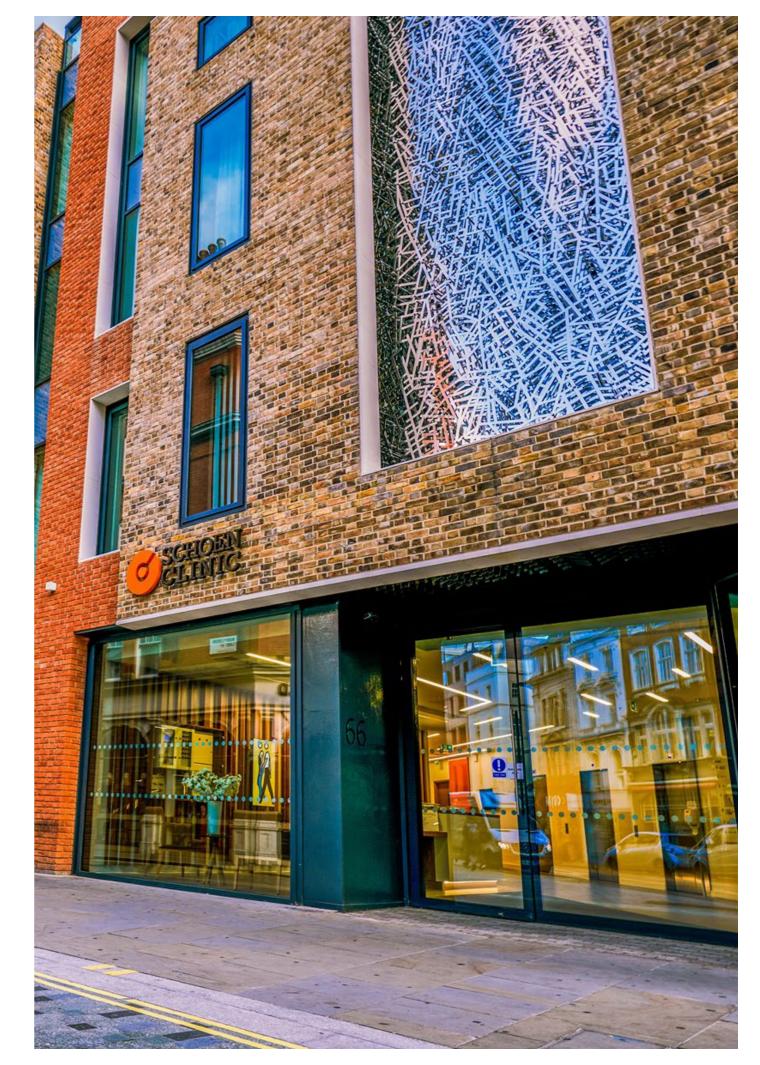
Schoen Clinic Newbridge can accept privately insured and self-pay patients for inpatient, day care and outpatient services.

Schoen Clinic York has a three year NHS contract with the Humber Coast and Vale (HCV) provider collaborative. Within this new partnership agreement, HCV have been able to adapt their commissioning approach and they have incorporated day care as part of a best practice pathway for an eating disorder patient. Schoen Clinic York is represented at the HCV oversight meeting.

Schoen Clinic York can take privately insured patients and self-pay patients as inpatients, day care and outpatient services.

Schoen Clinic Chelsea does not provide NHS services, but for completeness of the report and to present the whole Schoen Clinic portfolio, we have included Chelsea in our group Quality Account.

Schoen Clinic Newbridge and Schoen Clinic York have reviewed all the data available to them on the quality of care in all of these NHS services.



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I am delighted to present to you Schoen Clinic's first joint UK Group Quality Account, reflecting on the past year (April 2021 – March 2022). This includes our four sites across the UK which are in London (Marylebone and Chelsea), Birmingham and York. Schoen Clinic's UK structure has two divisions: Mental Health and Orthopaedics and Spine, each with their own Medical Director and governance structure.

Our uncompromising focus on quality and data driven clinical outcome measurement ensures that each and every patient receives super-specialised care and an excellent clinical outcome. Our multi award winning prestigious group is comprised of world-class employed Consultants and clinical professionals, working together as one Multidisciplinary Team (MDT): a unique model which defines our approach to providing exceptional, high quality care.

An important strategic initiative for the Executive Board was to create a framework for the group to operate within, whilst at the same time recognising that our mental health and orthopaedic and spine divisions operate with a degree of independence to cater for the specialist needs of our service users. We created five strategic pillars for the group and in alignment with these, set and published 15 group objectives. These have been shared with all Schoen Clinic colleagues, so that everybody is fully engaged with our annual objectives. Progress against these objectives is shared with the group on a quarterly basis. The strategic pillars are then used for facility objective setting and in the next reporting cycle, a new

appraisal framework will be launched and aligned to these strategic pillars.

Our portfolio is a combination of both new build and acquisition; as a result, a number of different systems have been in use across the group. The Board is committed to harmonising systems between the two divisions where possible and as such. have invested in a new cloud based Datix platform, NetConsent's policy library and Gatekeeper, a contract management database. Our further commitment to this harmonisation saw us create and appoint new senior leadership roles into the team, including Head of IT, Head of Facilities Management and set up and establish a group PMO structure to support delivery of the objectives that we have set ourselves. We believe that investing in the synchronisation of our systems and enhancing the leadership capability, delivers sustainable improvements in safety standards, greater colleague satisfaction through refined processes and an optimised patient experience.

Over the last 12 months, we have embarked on a significant planning exercise in relation to our IT estate, with the aim of improving the quality of our IT systems and services. These new plans revolve around 5 key principles for all new IT infrastructure projects:
Secure, Technically Fit For Purpose,
Value For Money, Proactively Managed,
Resilient. Using these key principles, the
IT department seeks to assist the wider
business in achieving all of its corporate
goals whilst providing stable and reliable
IT platforms.

Ensuring our facilities are safe, for both our patients and colleagues, is of the utmost importance. During this reporting period, a programme of internal Health and Safety communications was launched including safety alerts, bulletins, and a quarterly newsletter with the purpose of raising Health, Safety and Wellbeing (HSW) awareness and upskilling managers and departmental leads. This launch coincided with the first Group Health and Safety Committee meeting, and subsequently, local Health and Safety Working Groups, which were re-established to offer support to each facility's colleagues and senior leadership teams. A comprehensive training programme was created ensuring that competency at all levels, including the Executive Board is achieved and maintained.

Furthermore, we commenced a programme of inspections, audits and safety tours, allowing observations and improvements to be continually made, and empowering all colleagues to contribute to the management of Health, Safety and Wellbeing.

We believe strong leadership directly correlates with the quality of care at our sites, and having Well Led hospitals is one of our priorities. Our ambition is to have all sites rated Good or Outstanding by the CQC, with minimum rating of Good in the Well Led and Safe domains.

Our progress reported in this Quality
Account has only been made possible
because of the commitment and
determination of our colleagues to provide
the best quality care to our patients. I am
proud and humbled by all I have seen in
Schoen Clinic over the last year and it
gives me great pleasure to thank every
one of our dedicated colleagues who have
supported our patients.

To the best of my knowledge, the information included is an accurate and fair account of our activities over the reporting period. I trust that this Quality Account provides the reader with an accurate representation of our quality improvement initiatives, which are aligned to our ethos of continually improving patient safety and patient experience.

ADOQ

Andy Davey UK Managing Director



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02.

Indicators of quality reporting against core indicators



premature death?

Independent Sector Providers are currently not eligible to submit to NHS Summary Hospital-level Mortality Indicator (SHMI). There have been no deaths across either Division during the reporting period.

Within the mental health division, all inpatients are subject to the Care Programme Approach (CPA) as part of their Schoen Clinic stay. At the start of their treatment, our clinical team are actively encouraged to engage with NHS community teams. Care and treatment is reviewed every six to eight weeks, ensuring that their care plan is appropriate for the stage of their inpatient journey. The NHS community teams are responsible for continuing patient care on discharge, and for providing the seven day follow up, which are booked during the discharge CPA. 100% of our patients have their meeting scheduled with the responsible community team.

Neither the Mental Health or Acute Divisions of Schoen Clinic UK meet the requirements to report information regarding enhancing quality of life for people with long-term conditions.

How do we prevent How do we help people to recover from episodes of ill health or following injury?

Schoen Clinic Chelsea

At Schoen Clinic Chelsea, we have three treatment pathways: adults with anxiety and mood disorders, adults with eating disorders, and children and young people with eating disorders. We collect and report on routine outcome measures for each of these pathways.

The data below shows treatment effectiveness in improving general mental health and eating disorder symptoms by attending our individual and group outpatient treatments at Schoen Clinic Chelsea.

Adult anxiety and mood treatment pathways

Intensive group treatment programme

- Depression symptoms improved from admission into the programme to discharge
- Anxiety symptoms improved from admission into the programme to discharge
- Functioning improved from admission into the programme to discharge

Outpatient services

- Depression symptoms improved from beginning of treatment to discharge
- Anxiety symptoms improved from beginning of treatment to discharge

Adult eating disorder treatment pathway

• Eating disorder and depressive symptoms improved from the beginning of treatment to midway follow-up during treatment (most outpatients are still in treatment and not discharged at the time of writing this account).

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Children and young people eating disorder treatment pathway

Intensive group treatment programme

- Eating disorder symptoms improved from admission into the programme to discharge
- Readiness to change improved from into the programme admission to discharge
- Patients reported they were closer to reaching their goals at discharge, compared to admission
- Emotion regulation skills improved from admission into the programme to discharge
- Eating flexibility improved from admission to the programme to discharge
- Patient anxiety and depression symptoms (as reported by parents) improved from admission into the programme to discharge
- Parental self-efficacy improved from admission into the programme to discharge

However, patient anxiety and depression symptoms worsened from admission to discharge. Possible explanations for this include:

- Experiencing emotions more intensely, which is a common effect seen with improved nutritional status which we will continue to explore further
- Anxiety and worries around discharge, e.g. having less support
- Mental health comorbidities pre-dating the eating disorder become more apparent.

As a result of the issues that were highlighted, we have launched a follow-up outpatient programme to continue to offer support in a controlled way with a phased reduction in treatment. This programme is available if it is suitable for the family or if our evaluation is that it will add benefit to the young person, in which case we will make a recommendation.

Schoen Clinic Newbridge

At Schoen Clinic Newbridge, we provide inpatient treatment for children and young people with eating disorders. We collect and report on routine outcome measures for our treatment programme.

Schoen Clinic Newbridge's treatment programme continues to ensure patients are increasing weight in hospital, whilst receiving the psychological support they need to return to the community setting and continue their recovery journey.

Inpatient treatment for young people with eating disorders

- The average length of stay was 151.4 days, 21.6 weeks. 5 months.
- Average %mBMI (percentage median BMI) on admission was 73.8% and average discharge %mBMI was 96.8% (meaning on average most young people got to a minimum health weight as part of inpatient treatment).
- The 2021 data shows a decrease in all subscales of the Eating Disorder Examination Questionnaire (*EDE-Q) and the global score indicating an improvement in eating disorder symptoms between admission and discharge. The differences in paired scores at admission and discharge for all subscales and global score were statistically significant (<0.05).

Schoen Clinic York

In 2021, the service being provided at Schoen Clinic York was redesigned to align with the rest of the mental health division. The aim of this service redesign was to improve patient quality experience and to reduce length of stay. The service was redesigned from a therapeutic community approach to align with the NHSE service specification for adult eating disorders. EDE-Q* is an example of one of the PROMS that we collected. The EDE-Q scores demonstrate that the clinical team need to ensure treatments are tackling eating disorder psychopathy, to ensure treatment effectiveness.

Inpatient treatment for adults with eating disorders

- The 2021 average length of stay was 136 days, 19.42 weeks. In 2020 the length of stay was 146 days.
 This demonstrates the service is meeting targets to reduce the average length of stay.
- The average BMI at admission for all patients was 14.99 kg/m² ('underweight' range)
- The data shows that the overall *Eating Disorder Examination Questionnaire (EDE-Q) score reduced from admission to discharge for 17 out of 33 clients (51.51%).



*Understanding the EDE-Q

The Eating Disorder Examination Questionnaire (EDE-Q) is a 28-item self-reported questionnaire. It is designed to assess a number of different thoughts, feelings and behaviours that are associated with eating disorders and the severity of these. It has 4 subscales (Restraint, Eating Concern, Shape Concern and Weight Concern) as well as a global (total) score.

- The Restraint subscale explores the level of food restriction and dietary rules.
- The Eating Concern subscale looks at the preoccupation one may have around food/eating and the difficult feelings around this.
- The Shape Concern subscale looks at body dissatisfaction and preoccupation with shape and weight.
- Finally, the Weight Concern subscale explores difficult thoughts and feelings around one's weight.

Higher scores on the EDE-Q indicate greater difficulties with eating attitudes and behaviours.

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Schoen Clinic London Patient Reported Outcome Measures (PROMs)

Market leaders in outcome data gathering, Schoen Clinic London collects detailed patient reported outcome information across 37 different clinical pathways. We invest a significant resource into ensuring our data is accurate as this information is central to our philosophy that the care we deliver should be highly personalised and driven by evidence. Most pathways submit information into a relevant national registry such as the British Spine

Registry or the National Joint Registry. This ensures that we make a significant contribution to both national and international understandings of patient outcomes.

The table below details each of these 37 pathways, noting the registries they are linked to, the questionnaires they are utilised in, and the frequency of the measurements.

Specialty	Pathways	Registry	Clinical information	Questionnaires	Frequency
Trauma & Orthopaedics	Baseline T&O Pathway		Indications Complexity Factors Injection Complications Future task	EQ-5D VAS Pain NDI VAS (Neck&Arm) QuickDash ODI VAS (Back&Leg) Oxford Shoulder / Hip / Elbow / Instability / Knee Score MOxFQ NAHS OXAFQ-C/OXAFQ-P	Baseline 6 months 1 year 2 years Optional (injection procedure form selected): 2,4,6,8,12 weeks
Spine	Generic Spinal Pathway		Indications Complexity Factors Treatment/Intervention Complications Future task	EQ-5D ODI NDI VAS (Neck & Arm) VAS (Back & Leg)	Baseline 3 months
Spine	Spinal - Cervicothoracic Degenerative Pathway	BSR	Initial Assessment Operations Outcome Scores Follow up Other	EQ-5D NDI VAS (Neck & Arm) FFT	Pre-op 6 weeks 6 months 1 year 2 years
Spine	Spinal - Deformity Pathway	BSR	Initial Assessment Operations IOM Follow up Other	EQ-5D ODI SRS 22 VAS (Neck & Arm) FFT	Pre-op 6 weeks 6 months 1 year 2 years
Spine	Spinal - Infection Pathway	BSR	Initial Assessment Operations Outcome Follow up Other	EQ-5D ODI VAS (Back & Leg) FFT	Pre-op 6 weeks 6 months 1 year
Spine	Spinal - Intradural Pathway	BSR	Initial Assessment Operations Outcome Follow up Other	EQ-5D ODI VAS (Back & Leg) FFT	Pre-op 6 weeks 6 months 1 year

Specialty	Pathways	Registry	Clinical information	Questionnaires	Frequency
Spine	Spinal - Lumbar Degenerative Pathway	BSR	Initial Assessment Operations Outcome Follow up Other	EQ-5D ODI VAS (Back & Leg) FFT	Pre-op 6 weeks 6 months 1 year 2 years
Spine	Spinal - Trauma Pathway	BSR	Initial Assessment Operations Outcome Follow up Other	EQ-5D ODI VAS (Back & Leg) FFT	Pre-op 6 weeks 6 months 1 year
Spine	Spinal (Early Onset Scoliosis) Pathway		Initial Assessment BMI Operations IOM Magec Rods Outcome Follow up	EOSQ FFT	Pre-op and then either every 3 or 6 months for 10 years
Нір	Hip Non- Arthroplasty Pathway	NAHR	Diagnosis Complexity Factors Procedure details End point	UCLA Activity Modified Harris Hip Scores NAH Score HOOS Hip Survey Patient Satisfaction iHOT-12 EQ-5D	Pre-op 6 months 1 year
Нір	Hip Primary Arthroplasty	NJR	Diagnosis Complexity Factors Primary procedure details incl. NJR dataset Treatment / Intervention Complications	EQ-5D VAS Pain Oxford Hip Patient Complications FFT UCLA Activity Modified Harris Hip Scores Hoos Hip Survey	Pre-op 6 months 1 year 2 years 5 years 7.5 years 10 years
Нір	Hip Revision Arthroplasty	NJR	Diagnosis Complexity Factors Revision procedure details incl. NJR dataset Treatment / Intervention Complications	EQ-5D VAS Pain Oxford Hip Patient Complications FFT UCLA Activity Modified Harris Hip Scores Hoos Hip Survey	Pre-op 6 months 1 year 2 years 5 years 7,5 years 10 years
Hip	Pain Management Pathway (Hip)		Diagnosis/Indications Complexity Factors Treatment/Intervention Complications Future task	EQ-5D VAS Pain Non Arthritic Hip Score (NAHS) Oxford Hip Score	Baseline 6 months 1 year 2 years Optional (injection procedure form selected): 2,4,6,8,12 weeks
Hip	Generic Hip Pathway	NJR	Diagnosis Complexity Factors (i.e. comorbidities) Procedure details incl. NJR dataset Complications	EQ-5D Oxford Hip Score VAS Pain Non Arthritis Hip Score (NAHS) Patient Complications FFT	Pre-op 6 months 1 year 2 years Optional (injection procedure form selected): 2,4,6,8,12 weeks

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Specialty	Pathways	Registry	Clinical information	Questionnaires	Frequency
Knee	Knee Primary Arthroplasty	NJR	Diagnosis Complexity Factors Primary procedure details incl. NJR dataset Treatment / Intervention Complications	EQ-5D VAS Pain Oxford Knee Patient Complications FFT	Pre-op 6 months 1 year 2 years 3 years 4 years 5 years 6 years 7 years 8 years 9 years 10 years
Knee	Knee Revision Arthroplasty	NJR	Diagnosis Complexity Factors (i.e. comorbidites) Revision procedure details incl. NJR dataset Treatment / Intervention Complications	EQ-5D VAS Pain Oxford Knee Patient Complications FFT	Pre-op 6 months 1 year 2 years 3 years 4 years 5 years 6 years 7 years 8 years 9 years 10 years
Knee	Pain Management Pathway (Knee)		Diagnosis/Indications Complexity Factors (i.e. comorbidities) Treatment/Intervention Complications Future task	EQ-5D Oxford Knee Score VAS Pain FFT	Baseline 6 weeks 6 months
Knee	Generic Knee Pathway		Diagnosis Complexity Factors Procedure details Complications	EQ-5D VAS Pain Oxford Knee Score Patient Complications FFT & ability to record the above outcome measures for injections	Pre-op 6 months 1 year 2 years Optional (injection procedure form selected): 2,4,6,8,12 weeks
Knee	Biopoly Partial Resurfacing Pathway		Initial Pre-op Assessment Procedure Complications	KOOS IKDC KUJALA TEGNER VAS (Knee) Patient Complications	Pre-op 6 months 1 year 2 years 3 years 4 years 5 years
Knee	Knee Osteotomy Pathway	UKKOR NJR	Diagnosis Complexity Factors Primary and Revision Procedure details including the NJR dataset Complications	EQ-5D VAS Pain KOOS Oxford Knee Score FFT	Pre-op 6 months 1 year 2 years 5 years
Knee	Knee - Primary ACL Reconstruction Pathway	NLR	Initial Assessment Procedure Follow up Outcomes	EQ-5D KOOS IKDC TEGNER	Pre-op 6 months (only KOOS) 1 year 2 years 5 years

Specialty	Pathways	Registry	Clinical information	Questionnaires	Frequency
Knee	Knee International Cartilage Reconstruction Pathway	ICRS	Initial Assessment Procedure Follow up Complications	EQ-5D KOOS KUJALA-Score (optional)	Pre-op 6 months (only KOOS) 1 year 2 years 3 years 4 years 5 years 6 years 7 years 8 years 9 years 10 years
Knee	Knee Primary ACL Repair Pathway	NLR	Initial Assessment Procedure Follow up Outcomes	EQ-5D KOOS IKDC TEGNER	Pre-op 6 months (only KOOS) 1 year 2 years 5 years
Knee	Extensor Mechanism Pathway		Diagnosis Complexity Factors Outpatient Appointment record Non-operative Intervention Procedure Complications	EQ-5D VAS Pain KUJALA Score VISA-P Bartlett-Patella Keele MSK Score KOOS LYSHOLM Oxford Knee TEGNER Pre-op TEGNER Post-op LEFS (LEFI) F+F Clinician + Hospital F+F Clinician + Clinic F+F Surgery Type Patient Complications Patient Experience	Pre-op 6 months 1 year 2 years Optional (injection procedure form selected): 2,4,6,8,12 weeks
Shoulder	Pain Management Pathway (Shoulder)		Diagnosis/Indications Complexity Factors Treatment/Intervention Complications Future task	EQ-5D VAS Pain Upper Extremity Functional Scale (UEFS) Oxford Shoulder Score	Baseline 6 months 1 year 2 years Optional (injection procedure form selected): 2,4,6,8,12 weeks
Shoulder	Shoulder Primary Arthroplasty	NJR	Diagnosis Complexity Factors Primary Procedure Details incl. NJR dataset Treatment/Intervention Complications	EQ-5D VAS Pain Oxford Shoulder Score Patient Complications FFT	Pre-op 6 months 1 year 2 years 5 years 7,5 years 10 years
Shoulder	Shoulder Revision Arthroplasty	NJR	Diagnosis Complexity Factors Revision Procedure Details incl. NJR dataset Treatment/Intervention Complications	EQ-5D VAS Pain Oxford Shoulder Score Patient Complications FFT	Pre-op 6 months 1 year 2 years 5 years 7,5 years 10 years

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Specialty	Pathways	Registry	Clinical information	Questionnaires	Frequency
Shoulder	Shoulder Instability		Diagnosis Complexity Factors Procedure Details Complications	EQ-5D VAS Pain Oxford Shoulder Score Oxford Instability Score Patient Complications FFT	Pre-op 6 months 1 year 2 years
Shoulder	Shoulder Pathway		Diagnosis Complexity Factors Procedure Details Complications	EQ-5D VAS Pain Oxford Shoulder Score Patient Complications FFT	Pre-op 6 months 1 year 2 years Optional (injection procedure form selected): 2,4,6,8,12 weeks
Foot & Ankle	Achilles Rupture		Diagnosis Achilles Radiologist Report Achilles Initial Assessment Procedure or Non- Surgical Treatment Review Complexity Factors Achilles Physio Rehabilitation Form	ATRS Achilles Tendon Rupture Score (AS) FFT PEQ Patient Achilles Rupture Complications - 6W & 6M	Pre-op 3 months 6 months 9 months 1 years
Foot & Ankle	Ankle - Primary Arthroplasty	NJR	Diagnosis Complexity Factors Primary Procedure details incl. NJR dataset Complications	EQ-5D MOXFQ VAS Pain FFT Patient Completed Complications	Pre-op 6 months 1 year 2 years 5 years 7.5 years 10 years
Foot & Ankle	Ankle - Revision Arthroplasty	NJR	Diagnosis Complexity Factors Revision Procedure details incl. NJR dataset Complications	EQ-5D MOxFQ VAS Pain FFT Patient Completed Complications	Pre-op 6 months 1 year 2 years 5 years 7.5 years 10 years
Foot & Ankle	Pain Management Pathway (Foot & Ankle)		Diagnosis Complexity Factors Treatment / Intervention Complications Future Task	EQ-5D VAS Pain Lower Extremity Functional Score (LEFS) (LEFI) Victorian Institute of Sport - Achilles (VISA-A) MOxFQ	Baseline 3 months 6 months
Foot & Ankle	Generic Foot & Ankle		Diagnosis Complexity Factors Procedure Details Complications	EQ-5D VAS Pain Lower Extremity Functional Score (LEFS) (LEFI) Victorian Institute of Sport - Achilles (VISA-A) MOxFQ FFT Patient Completed Complications & ability to record the above outcome measures for injections	Pre-op 6 months 1 year 2 years Optional (injection procedure form selected): 2,4,6,8,12 weeks

Specialty	Pathways	Registry	Clinical information	Questionnaires	Frequency
Elbow	Elbow Arthroplasty - Primary Arthroplasty	NJR	Diagnosis Complexity Factors Primary procedure details incl. NJR dataset Treatment / Intervention Complications	EQ-5D VAS Pain Oxford Elbow Score Patient Complications FFT	Pre-op 6 months 1 year 2 years 5 years 7,5 years 10 years
Elbow	Elbow Arthroplasty - Revision Arthroplasty	NJR	Diagnosis Complexity Factors Primary and Revision procedure details incl. NJR dataset Treatment / Intervention Complications	EQ-5D VAS Pain Oxford Elbow Score Patient Complications FFT	Pre-op 6 months 1 year 2 years 5 years 7,5 years 10 years
Elbow	Generic Elbow Pathway		Diagnosis Complexity Factors Procedure details Complications	EQ-5D VAS Pain Oxford Elbow Score Patient Complications FFT	Pre-op 6 months 1 year 2 years Optional (injection procedure form selected): 2,4,6,8,12 weeks

Knee replacement

92%of respondents reported an improvement.

Hip replacement

98% of respondents reported an improvement.



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^{*}Data drawn from Oct 2018 - Apr 2022

NHS patients treated at Schoen Clinic London were not enrolled on the Schoen Clinic London clinical pathways as partner NHS Trusts wished to keep patients on their own NHS outcome pathways. Due to ongoing resource issues associated with the pandemic, not all NHS Trusts were able to effectively integrate patients treated at Schoen Clinic London on to their own outcome pathways. Those who did have been unable to split out patients treated at Schoen Clinic London from their data. This has prevented Schoen Clinic London from reviewing this outcome data.

Readmission rates

During the reporting period, the mental health division had no readmissions within 30 days of discharge.

The rate of re-admission within 28 days of initial admission and the rate of return to theatre within the same admission remains low at Schoen Clinic London. The rates reported in the table below are for all patients admitted to Schoen Clinic London.

	2018	2019	Q1 2020	Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021	Q4 2021	Q1 2022
Returns to theatre (% of all admitted patients)	0.17%	0.04%	0.00%	1.95%	0.74%	0.12%	0.11%	0.00%	0.00%	0.39%	0.00%
Unexpected readmissions (rate per 100 inpatient discharges)	0.63	0.37	0.32	0.00	0.67	1.84	1.02	2.34	0.39	1.06	1.23

Ensuring people have a positive experience of care

We are very proud of the exceptional patient experience we deliver at Schoen Clinic. All of our team work hard to deliver the highest level of service and excellence in clinical care. This is reflected in the constantly high patient satisfaction scores we receive.

During the reporting period:

95%

of our patients rated us as "very good" when asked about the quality of our service at Schoen Clinic London. 97%

of patients rated the quality of care as "very good" at Schoen Clinic London. 97%

of patients rated the nursing care as "very good" at Schoen Clinic London.

92%

of patients rated the inpatient physiotherapy as "very good" at Schoen Clinic London. 94%

of patients would be "likely" or "extremely likely" to recommend Schoen Clinic Newbridge. 99.8%

of our patients gave the overall impression of their Consultant as "good" or "very good".

97%

of our patients said they would be "likely" or "extremely likely" to recommend our services to family and friends. 94.4%

of patients said their overall impression of our food was "good" or "very good". 85%

of employees would recommend their friends and family to Schoen Clinic if they needed care or treatment.

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Patient comments

"I cannot fault the efficiency of the clinic and the tremendous care I received both whilst in hospital and afterwards."



"State of the art facilities and staff that went beyond as a matter of course: the care ethic is genuine."



"Every aspect of patient treatment was superlative wonderful nursing and care from every member of staff including excellent catering."



"The journey of surgery and pain was a frightening thought, but these guys and the nursing team were all very helpful and professional in overcoming my concerns. Now 2 weeks after surgery I am almost pain free and walking without crutches or sticks!"



"Absolutely every single person from receptionist, porter, catering staff, nurses and were just really helpful, kind and caring people. It was such a pleasure to be treated here."



"From initial assessment and MRI to post-op consultation review, scheduling appointments at Schoen were a breeze. I would highly recommend Schoen Clinic, and will be back for orthopaedic care in the future."



"I would highly recommend this hospital in every way. Well done guys! What incredible service."



"I feel so grateful that I was able to have my hip replacement at the Schoen Clinic. Everyone was so kind and patient. Nothing was too much trouble for anyone. My operation and after care has changed my life. Thanks so much everyone!"



"The staff were absolutely brilliant. Incredibly caring and so professional on all levels. The facilities were clean, modern, and were of a high standard. It was the most comfortable stay given an operation."



Treating and caring for people in a safe environment and protecting them from avoidable harm

Across all Schoen Clinic sites Infection Prevention and Control (IPC) is regarded as everyone's responsibility. In 2021, we embarked on a new relationship with a specialist Infection Prevention and Control provider to help us maintain and improve our excellent IPC record. We also committed to establishing IPC Link Practitioners across all our clinic areas. All of our IPC Link Practitioners will complete the Royal College of Nursing Accredited IPC course.

The IPC Link Practitioners work with both Mental Health and Orthopaedic IPC Nurse Specialists to deliver our programme of IPC audits and associated action plans. Our external IPC Provider conducts in depth annual IPC audits across all our clinical areas in addition to our internal program of audit.

Microbiology support, including guidance on the use of antibiotics, is provided by an eminent Professor of Microbiology thus ensuring our clinical teams receive the highest quality advice.

During the reporting period, the mental health division had three contained outbreaks of COVID-19 amongst patients. None suffered any lasting effects from COVID-19. There were no outbreaks at Schoen Clinic London.

Schoen Clinic London continues to have an excellent track record managing IPC. We have never had to report a case of MRSA. E.Coli or C.diff Healthcare Associated Infections.



Infection Prevention and Control monitoring

	Q1 2021	Q2 2021	Q3 2021	Q4 2021	Q1 2022
MRSA (rate per 100,000 bed days)	0.00	0.00	0.00	0.00	0.00
E.coli (rate per 100,000 bed days)	0.00	0.00	0.00	0.00	0.00
C. diff (rate per 100,000 bed days)	0.00	0.00	0.00	0.00	0.00
Hip SSI (% of hip replacement procedures undertaken)	0.00%	0.00%	0.00%	0.00%	0.00%
Knee SSI (% of knee replacement procedures undertaken)	0.00%	1.23%	0.00%	0.93%	0.83%
Spine SSI (% of spinal surgeries undertaken)	0.00%	0.00%	1.47%	1.49%	1.06%
UTI (% of all admitted patients)	0.00%	0.00%	0.00%	0.00%	0.00%

The safety of our patients and those who work with us is of paramount importance. We are committed to embedding an open, transparent and evidence based culture across all of our sites as we know this promotes and contributes to a safe environment for our patients and those who work with us.

This commitment is evident throughout the organisation from Ward-to-Board. Our reputation is built on this.

To further support this in 2022, we will:

- Appoint a patient safety expert at Schoen Clinic London
- Appoint a Clinical Quality Manager to the Mental Health Division
- Increase the size of our Quality Management teams
- Increase the number of Speak Up Guardians across the organisation
- Schoen Clinic London will establish a combined Outcome, Morbidity and Mortality Committee

At Schoen Clinic London, the care of all patients is overseen 24/7 by a Consultant Intensive Care Physician rather than a Registered Medical Officer (RMO). We believe this ensures the safest care is delivered consistently. Our surgical Consultants belong to departments and work collegiately to support each other. A Department Director oversees each department supported by a Nurse Consultant and Clinical Nurse Specialists.

Each site runs at least weekly multidisciplinary team meetings where the patient's care and clinical plan are reviewed by a broad multidisciplinary team. We audit the decisions of the MDT and the ongoing clinical care delivered to patients to ensure this is as agreed at the multidisciplinary team meeting.

This provides us with assurance that our Consultants and allied healthcare colleagues are working safely and to the expected standards of the department.

Across the organisation we utilise the Datix governance system to manage incidents and near miss reporting. Our colleagues and those who work with us are able to anonymously report incidents they are concerned about through Datix.

Datix reports are reviewed weekly to ensure that any trends or themes are identified early and investigations appropriately managed. This review process enables us to identify opportunities for learning and improvement which are shared via a variety of channels such as department meetings, webinars, "learning from" meetings and "Big Four" circulars.

The table opposite shows the zero mortality rate across both the Mental Health Division and Schoen Clinic London. The number of incidents causing ratings at moderate and above remains very low.

Venous Thromboembolism (VTE) can be a significant patient issue for those having surgery or medical care. VTE is not such as significant an issue in Mental Health. We closely monitor rates at Schoen Clinic London, which has maintained very high rates of patient assessment for risk of VTE as demonstrated in the table below. Our actual acquired VTE rate has also remained very low. We undertook a project to improve our risk assessment and awareness of VTE in 2019 which contributed to improved risk assessment and reporting.

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Mortality and incidents scored as moderate above

	Q1 2021	Q2 2021	Q3 2021	Q4 2021	Q1 2022
Mortality SCL	0	0	0	0	0
Mortality Mental Health	0	0	0	0	0
Incidents causing death SCL	0	0	0	0	0
Incidents causing death Mental Health	0	0	0	0	0
Incidents causing harm – moderate & above SCL (% of all admitted patients)	0.32%	0.27%	0.14%	0.64%	0.64%

VTE Risk assessment and monitoring Schoen Clinic London

	Q1 2021	Q2 2021	Q3 2021	Q4 2021	Q1 2022
Acquired VTE (% of all admitted patients)	0.00%	0.00%	0.00%	0.26%	0.26%
Day case VTE Risk Assessment Rate	98.3%	98.3%	100%	100%	100%
Inpatient VTE Risk Assessment Rate	100%	98.3%	100%	100%	100%
Overall VTE Risk Assessment Rate	99.0%	98.3%	100%	100%	100%

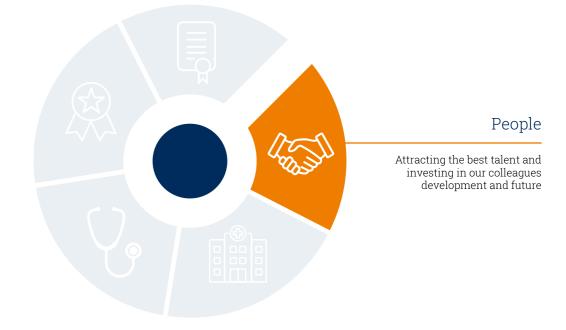
O3. Deciding on areas of improvement



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At the start of 2022, the UK Board rolled out five strategic pillars and 15 accompanying objectives, which have been shared with every Schoen Clinic employee, as are regular progress updates, to ensure complete transparency from Ward to Board. Our top three areas of improvement align with three of our strategic pillars.

We believe that focusing on these key priorities not only improves patient safety, but patient experience and outcomes.





People

Investing in our colleagues

The UK Board are committed to investing in our workforce and as such, plan to undertake a review of our current employee benefits to ensure we are always providing the most rewarding offering to our colleagues. Furthermore, we aim to launch a Healthcare Hero recognition scheme to say thank you to our colleagues who have gone the extra mile and encourage others to do the same.

We recognise the importance of our people and will be rolling out our Future Leaders Academy to develop our talent. This is crucial to staying ahead and supporting our employees career progression.

Recruitment and retention

We understand the importance of recruiting and retaining highly skilled, passionate and caring people, and the effect this has on Schoen Clinic's Quality Outcomes. Our HR team and managers will regularly attend recruitment events across the UK to attract new talent into the business. We aim to conduct a review of our nursing apprenticeship opportunities and our group induction, to ensure that when welcome new joiners, they feel it's a great place to work.

2022 will also see the introduction of pay banding and a long service awards scheme within Schoen Clinic to remain competitive on the market and recognise commitment, pay scales and career progression. Furthermore, our new appraisal framework and platform will be launched in readiness for annual performance related pay increases in 2023.

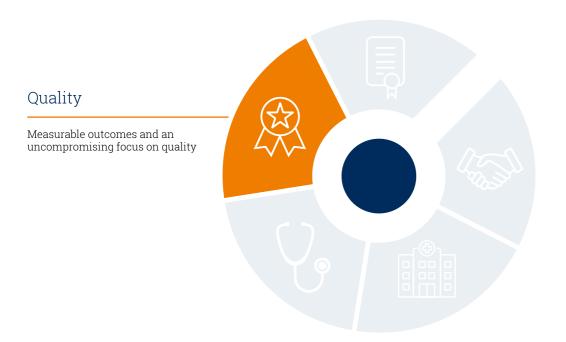
Engaging and listening

Schoen Clinic promotes an open culture and encourages employees to speak up. Our National Freedom to Speak Up Guardian will be running quarterly meetings with local Freedom to Speak Up Guardians to further establish this department of Schoen Clinic. Additionally, we will be launching a colleague forum at each facility, followed by an annual group colleague forum, where our team can openly discuss any concerns with their Senior Leadership Teams and the UK Executive Board.

Our Colleague Handbook will also be refreshed and updated.

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Standardisation opportunities and compliance with all regulations upholding our brand



Quality

Systems and processes

At Schoen Clinic, we are regularly reviewing our current systems and processes to ensure we have the most effective processes in place. As part of our commitment to improving our quality, we will be conducting a review of systems such as our phone software, patient pathways and how we capture patient feedback to enable us to make positive adaptations and timely actions.

Oversight Framework

We recognise that our governance framework is the core of our structure and in 2022, we aim to roll out our new governance framework for both the mental health and orthopaedic divisions, which aligns with our ward-to-board ethos. Part of this process involves ensuring our staff have a full understanding of how this works. We will establish new committees such as Environmental, Social and Governance (ESG), to drive our goal of being carbon neutral by 2035 and carbon neutral in our supply chain in 2045.

Our Medical Handbook will be refreshed and launched into both divisions, ensuring there is clarity on how we work with and support our doctors.

We have committed to investing in the latest Datix cloud based platform, which will harmonise both divisions for enhanced governance and Board oversight. Furthermore, to support our diverse portfolio, we will bring together all policy document storage into one user friendly interface called NetConsent.

Compliance

Well Led

At Schoen Clinic, strong leadership is paramount in the success of our business, and we are proud of all of our leaders and managers. We will conduct annual Fit and Proper Person checks for all senior leaders in the business to ensure compliance with CQC Well Led requirements and ensure we have the right people in the right roles.

To promote our open, transparent culture, we will be launching our Code of Conduct, ensuring every employee is clear on expectations and the high standards that are set for our teams, which align to our values and purpose.

Schoen Clinic UK believe that the swift identification and response to any and all IT risks that could pose a threat to the security of its cyber estate, is of the highest importance. We will be conducting an IT review to ensure our systems are user friendly and fit for purpose. This will allow us to cleanse the systems we use across both divisions of the business, and possibly reduce the quantity, allowing us to pull and compare reports from each of our facilities for analysis.

At Schoen Clinic, we are committed to research and providing educational reports based on our findings. We aim to review and refresh our current Research and Ethics committee to support this commitment.

Regulation

Schoen Clinic UK believes that providing and maintaining high property standards is a key component in the delivery of first class services. This is underpinned by our Estates and Facilities Management strategy, which ensures all statutory, regulatory and building requirements are maintained at all times. It is the responsibility of all persons or companies tasked in maintaining and improving our facilities to adopt the high standards set, to ensure that staff, patients and visitors can use any facility without limit or risk.

Simultaneously, our new Health and Safety strategy will be rolled out, with the aim of continually improving the health, safety and wellbeing standards in respect of patients, colleagues, contractors and visitors. Our dashboards will cover all of the main aspects of compliance and an annual review to evaluate effectiveness. We will be completing all remaining actions from our Fire Risk Assessments and Health and Safety audits to ensure all of our employees, patients and visitors are safe.

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04.

Taking part in local and clinical audits



Audits at Schoen Clinic London

During the reporting period April 2021 – March 2022 the NAP7 (National Audit Program):
Perioperative Cardiac Arrest was the only national audit which Schoen Clinic London was able to contribute to. Schoen Clinic London did not make any submissions to the audit as none of the patients treated met the criteria for submission.

There were no national confidential enquiries covering NHS services that Schoen Clinic London provided during this period. Schoen Clinic London reports to a number of national clinical registries. These are detailed in the table below.

Schoen Clinic London, national clinical registry and audit participation.

National Requirements Reported Centrally	Which organisation do we report to	What data do we send	How often do we send this
Annex D: Annual Board Report and Statement of Compliance (Designated Body annual compliance report)	NHS England	High level appraisal data, summary of appraisal structure, summary of state of medical governance, statement of compliance	Annually
CMA mandate to submit private healthcare data to PHIN	Private Healthcare Information Network (PHIN)	Admitted Patient Care data, Adverse Events data and Data Completeness.	0
Patient Satisfaction and PROMs data submissions currently in development.	Monthly	0	0
Mandatory registry submission	National Joint Registry (NJR)	Procedure and implant details for joint replacement surgery.	0
Data quality audit verification spreadsheet.	Monthly	0	0
Participation in National PROMs collection	NHS Digital	PROMs data for eligible Hip and Knee replacement procedures	Monthly
National Audit Project 7: Perioperative Cardiac Arrest	National Institute of Academic Anaesthesia (NIAA)	Anonymised clinical information on patients suffering perioperative cardiac arrest	Case by case submission
Voluntary registry submissions	BSR BSSH BOFAS NAHR NLR	Procedure detail and PROMs data for eligible procedures	Automatically on completion of relevant forms

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For the year 2020-2021, the National Joint Registry (NJR) again awarded Schoen Clinic London it's prestigious Data Quality Provider award.

The NJR monitors the performance of hip, knee, ankle, elbow and shoulder joint replacement operations to improve clinical outcomes primarily for the benefit of patients, but also to support orthopaedic clinicians and industry manufacturers. The registry collects high quality orthopaedic data in order to provide evidence to support patient safety, standards in quality of care, and overall cost-effectiveness in joint replacement surgery. The 'NJR Quality Data Provider' certificate scheme was introduced to offer hospitals a blueprint for reaching high quality standards relating to patient safety and to reward those who have met registry targets.

In order to achieve the award, Schoen Clinic London met a series of six ambitious targets during the audit period 2020/2021. One of the targets which hospitals are required to complete is compliance with the NJR's mandatory national audit aimed at assessing data completeness and quality within the registry.

The NJR Data Quality Audit investigates the accurate number of joint replacement procedures submitted to the registry compared to the number carried out and recorded in the local hospital Patient Administration System. The audit ensures that the NJR is collecting

and reporting upon the most complete, accurate data possible across all hospitals performing joint replacement operations, including Schoen Clinic London.

NJR targets also include having a high level of patients consenting for their details to be included in the registry and for hospitals to demonstrate timely responses to any alerts issued by the NJR in relation to potential patient safety concerns.

In addition to the national registries and audits that Schoen Clinic London contributes to, there is a comprehensive local schedule of both clinical and non-clinical audits. These include: Infection Prevention and Control, documentation, environment, waste management and Multidisciplinary team meeting outcome.

Our audits assure us of the effectiveness of our practice and procedures whilst also helping us to identify areas for further improvement. A dedicated Quality Management team supports our clinical and non-clinical staff in the gathering and review of all audits, action plans, outcome pathways and submissions to national registries.



Audits across the Mental Health Division

During the reporting period April 2021 – March 2022, there were no National Audits that the Mental Health Division was eligible to submit to.

There were no national confidential enquiries covering NHS services that the Mental Health Division provided during this period. However, the mental health division have a schedule of clinical audits planned throughout the year, an example of which is below:

Rationale for inclusion key:

- 1 CQC Fundamental Standards/Regulations
- 2 CQC Inspection Action/CQC Provider Information Return Requirement
- National Audit/CQUIN
- 4 NICE Guidance
- 5 Quality Account
- 6 Re-audit (to monitor ongoing effectiveness in a key area)
- 7a Local Priority (a) Risk Register/Safety Issue
- Local Priority (b) Quality Improvement Plan (QIP) Action
- 7c Local Priority (c) Policy requirement
- 8 NHS England Contractual Requirement
- Mental Health Act Code of Practice (issued by the Department of Health)
- Positive and Proactive Care: reducing the need for restrictive interventions (issued by the Department of Health)
- 11 Mental Capacity Act Code of Practice

Month (Number of Audits):	Clinical Audit:	Rationale for inclusion:
	Care Plans;	1,2,4,5,6,7c,8,9,10
April	Medicines Management;	1,2,4,5,6,7c
(4)	Defensible Documentation;	1,2,5,6,7b,7c,9
	Hand Hygiene.	1,2,5,6,7c
	Care Plans;	1,2,4,5,6,7c,8,9,10
	Medicines Management;	1,2,4,5,6,7c
May (5)	Controlled Drugs;	1,2,4,5,6,7c
(-)	Personal Details;	1,2,5,6,7b,7c,9
	High Dose Anti-Psychotics.	1,2,5,6,7a
	Care Plans;	1,2,4,5,6,7c,8,9,10
June	Medicines Management;	1,2,4,5,6,7c
(4)	Rapid Tranquilisation;	1,2,4,5,6,7c
	Physical Health Monitoring.	1,2,5,7c

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Month (Number of Audits):	Clinical Audit:	Rationale for inclusion:
July (5)	Care Plans;	1,2,4,5,6,7c,8,9,10
	Medicines Management;	1,2,4,5,6,7c
	Defensible Documentation;	1,2,5,6,7b,7c,9
	Section 17 Leave Forms;	1,2,5,6,7c,9
	Assessing Competency for Medicines Administration.	1,2,4,5,6,7c
August (4)	Care Plans;	1,2,4,5,6,7c,8,9,10
	Medicines Management;	1,2,4,5,6,7c
	Controlled Drugs;	1,2,4,5,6,7c
	Re-Feeding Protocol.	1,2,4,5,6
	Care Plans;	1,2,4,5,6,7c,8,9,10
	Medicines Management;	1,2,4,5,6,7c
September	Infection Control;	1,2,5,7c
(5)	Baseline assessment tool for eating disorders: recognition and treatment (NICE clinical guideline NG69)	1,2,4,5
	Section 132 Patients' Rights.	1,2,5,6,7c,9
	Care Plans;	1,2,4,5,6,7c,8,9,10
	Medicines Management;	1,2,4,5,6,7c
October (5)	Defensible Documentation;	1,2,5,6,7b,7c,9
(0)	T2/T3 Forms;	1,2,5,6,7c,9
	NICE Quality Standard (QS 175) - Eating Disorders.	1,2,4,5
	Care Plans;	1,2,4,5,6,7c,8,9,10
	Medicines Management;	1,2,4,5,6,7c
November (5)	High Dose Anti-Psychotics;	1,2,5,6,7a
(5)	Controlled Drugs;	1,2,4,6,7c
	Personal Details.	1,2,5,6,7b,7c,9
	Care Plans;	1,2,4,5,6,7c,8,9,10
	Medicines Management;	1,2,4,5,6,7c
December (5)	Rapid Tranquilisation;	1,2,4,5,6,7c
	Hand Hygiene;	1,2,5,6,7c
	Assessing Competency for Medicines Administration.	1,2,4,5,6,7c

Patient/Carers Experience Surveys (April - December 2021):

Month (Number of Audits):	Survey:	Rationale for inclusion:
April (1)	Patient Friends and Family Test.	1,2,5,6,8
May (1)	Patient Friends and Family Test.	1,2,5,6,8
June	Patient Friends and Family Test;	1,2,5,6,8
(2)	Patient Survey.	1,2,5,6,8
July (2)	Patient Friends and Family Test;	1,2,5,6,8
	Carers Survey.	1,2,5,6,8
August (1)	Patient Friends and Family Test.	1,2,5,6,8
September (1)	Patient Friends and Family Test.	1,2,5,6,8
October (1)	Patient Friends and Family Test.	1,2,5,6,8
November (2)	Patient Friends and Family Test;	1,2,5,6,8
	Patient Survey.	1,2,5,6,8
December (2)	Patient Friends and Family Test;	1,2,5,6,8
	Carers Survey.	1,2,5,6,8

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05. Taking part in clinical research

In the reporting period April 2021 to March 2022, Schoen Clinic's mental health division conducted a number of research projects, some of which were presented at the International Eating Disorder conference which was held in London. Schoen Clinic London did not participate in any research projects during the reporting period.

The mental health division produces a quarterly Mental Health Research bulletin titled "The Research Informer". This keeps patients, families, colleagues and stakeholders up to date with current and future research topics that we are working on.

In November 2021, representatives from our team presented their research on the Newbridge Prognosis Score (NPS) at the Research Consortium. The NPS is a method we developed to work collaboratively with a patient, to understand their response to treatment and predicting the potential treatment outcome post inpatient admission.

In February/March 2022, Schoen Clinic's mental health colleagues presented at the 15th International Conference on Eating Disorders. This included multiple mediums such as workshops, oral presentations and posters.

Workshop

 A Nurse-Led Clinical Model for the Inpatient Management of Severe Eating Disorders: The Use of Critique, Audit and Special Management Techniques by Multidisciplinary Teams.

Oral Presentations

- A Novel 'Practical Body Image' Therapy for Adolescent Inpatients with Anorexia Nervosa: a Randomised Controlled Trial
- An Evaluation of Efficacy and Acceptability of a Novel Manualised JuniorLEAP Group Programme for Compulsive Exercise, for Adolescents with Anorexia Nervosa
- Self-Esteem as a Catalyst for Change in Adolescents with Anorexia Nervosa: a Randomised Controlled Trial of a New Group Therapy

Poster Presentations

- The Impact of Covid-19 on Adolescents in an Inpatient Eating Disorder Service: An Audit
- Development of an Adolescent Version of the Eating and Meal Preparation Skills Assessment: Preliminary Findings
- Newbridge Eating-Disorder and Activity Treatment (NEAT): Second Generation Therapy for Adolescents – a RCT
- Occupational Therapy Facilitated Meal Preparation and social eating sessions: do they really help young people with anorexia nervosa? (Janet Tighe)
- How to approach evaluating outcomes for a new day-care service for young people with restrictive eating (Lydia Maurel & Milly Clark)

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06. What the CQC say about us

Schoen Clinic London

Schoen Clinic London is required to register with the Care Quality Commission and its current registration status is Good. The Care Quality Commission has not taken enforcement action against Schoen Clinic London during 2021-2022. Schoen Clinic London is not subject to periodic reviews by the CQC. Schoen Clinic London has not participated in any special reviews or investigations by the CQC during the reporting period.

Schoen Clinic Newbridge

Schoen Clinic Newbridge is required to register with the Care Quality Commission and its current registration status is Outstanding. The Care Quality Commission has not taken enforcement action against Schoen Clinic Newbridge during 2021-2022. Schoen Clinic Newbridge is not subject to periodic reviews by the CQC. Schoen Clinic Newbridge has not participated in any special reviews or investigations by the CQC during the reporting period.

Schoen Clinic Chelsea

Schoen Clinic Chelsea is required to register with the Care Quality Commission and its current registration status is pending the first inspection. The Care Quality Commission has not taken enforcement action against Schoen Clinic Chelsea during 2021-2022. Schoen Clinic Chelsea is not subject to periodic reviews by the CQC. Schoen Clinic Chelsea has not participated in any special reviews or investigations by the CQC during the reporting period.

Schoen Clinic York

Schoen Clinic York is required to register with the Care Quality Commission. Schoen Clinic York relocated to a new premises in early 2021 and as such, the CQC designated Schoen Clinic York as unrated. Schoen Clinic York was re-inspected in January 2022 and the Care Quality Commission issued a Section 31 notice to Schoen Clinic York between 2nd February

2022 – 2nd March 2022. Schoen Clinic York made the following progress by 2nd March 2022 and in taking such action, all restrictions relating to the Section 31 notice were removed:

- a) Undertook a review of the environmental risk assessment of ligature risks
- **b)** Prepared an action plan to reduce and remove ligature risks in the care environment
- c) Implemented the identified actions and
- **d)** Established processes to monitor measures in place to sufficiently manage and mitigate the risks to patients from ligature risks.
- e) Reviewed and implemented a policy on patient observation to ensure that patients are checked regularly to ensure they are safe and well.
- f) Undertook a comprehensive review of the risk assessments of all patients, including all the risks posed by and towards each individual patient and containing a clear and detailed risk management plan.
- g) Undertook a review of the incident reporting policy and procedure in place at Schoen Clinic York to ensure that all qualifying incidents are reported.
- **h)** Implemented a weekly compliance check system ensure that all qualifying incidents are reported appropriately.
- i) Conducted a review of patients care plans to ensure that all individual dietary needs and preferences are recorded
- j) Undertook a review of the food provision at Schoen Clinic York to ensure that patient's dietary needs can be consistently met
- **k**) Ensured through weekly monitoring that the food made available is of an acceptable standard of quality.

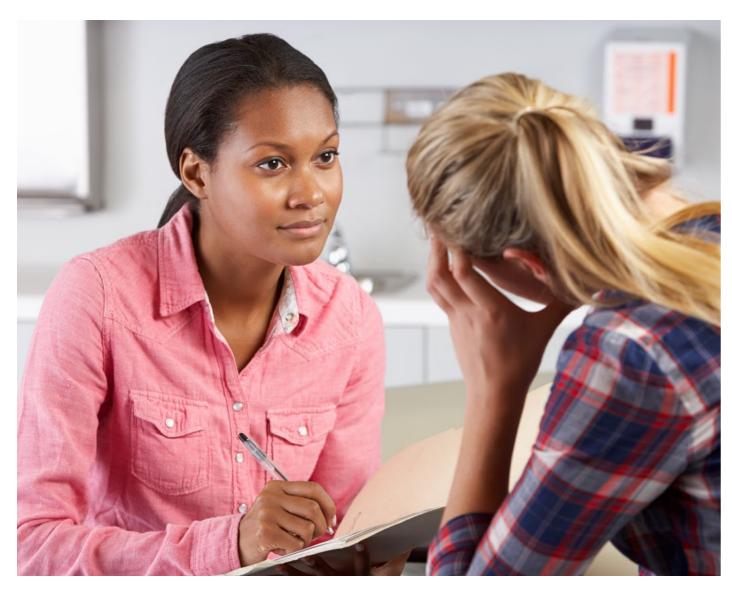
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Schoen Clinic York has the following conditions on registration:

The Registered Provider must provide the Commission with the following documentation by 4pm on a Friday on a fortnightly basis:

- a) Ligature incident and risk audit;
- b) Risk assessment audit;
- c) Incident monitoring audit; and
- d) Weekly food quality monitoring checks

The issues initially raised were quickly addressed with corrective action taken within 4 weeks and we welcome the CQC to return at any time to allow us to demonstrate our ongoing commitment to delivering the highest possible standard of quality patient care. We will closely monitor the ongoing improvements within our York service to ensure our group benchmark of a Good or Outstanding CQC rating is reached at the earliest possible opportunity.



O7. Accuracy of our data



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Both Divisions of Schoen Clinic met the standard for Data Security and Protection Toolkit for 2021-2022. For each Division, 100 items of mandatory evidence were submitted and all 40 assertions were confirmed.

Schoen Clinic London submitted records during the period April 2021 - March 2022 to the Secondary Uses Service (SUS) for inclusion in the Hospital Episode Statistics which are included in the latest published data.

The percentage of records in the published data (which included the patient's valid NHS number was):

98.5% for admitted patient care.

99.8% for outpatient care.

The percentage of records in the published data (which included the patient's vaild General Medical Practice Code was):

0%

for admitted patient care.

0%

for outpatient care.

The mental health division submits records to ACM, SSQD and MHSDS. These are standard NHS reporting requirements for NHS Mental Health work.

ACM – The purpose of the Aggregate Contract Monitoring (ACM) is to enable the interchange, in a uniform format, of monthly aggregate contract monitoring data between commissioners and providers of healthcare. This will ensure that contract monitoring and reporting is consistent and comparable across all commissioning organisations and their footprints.

SSQD – Specialised Services Quality Dashboards (SSQD) are designed to provide assurance on the quality of care by collecting information about outcomes from healthcare providers. SSQDs are a key tool in monitoring the quality of services, enabling comparison between service providers and supporting improvements over time in the outcomes of services commissioned by NHS England.

For each SSQD, there is a list of agreed measures for which data is to be collected. These measures are included in a 'Metric Definition Set'.

Healthcare providers, including NHS Trusts, NHS Foundation Trusts and independent providers, submit data for each of the agreed measures.

Each SSQD is 'refreshed' with up-to-date outcomes submitted from national data sources, and where necessary healthcare providers, on a quarterly basis.

MHSDS – The Mental Health Services Data Set (MHSDS) applies to all service providers and organisations that provide specialist secondary mental health, learning disabilities and autism services. This report shows those providers providing a submission compared to those NHS Digital currently consider to be in scope for the collection, alongside information on the use of the Multiple Submission Window Model.

Schoen Clinic was not subject to the Payment by Results clinical coding audit at any time during the reporting period by the Audit Commission.

However, Schoen Clinic London did undertake an internal clinical coding audit of activity during the reporting period in line with the requirements of NHS Digital's Data Protection and Security Toolkit (DSPT). This achieved the highest level attainable – "Standards Exceeded".

The accuracy score breakdown from this audit are provided below:

Secondary Diagnosis	Primary Diagnosis	Primary Procedure	Secondary Procedure
97.81%	97.00%	99.50%	96.83%

In terms of the "DSPT levels" this is equivalent to the highest level attainable "Standards Exceeded" For information the DSPT attainment levels are defined as follows,

Level	Secondary Diagnosis	Primary Diagnosis	Primary Procedure	Secondary Procedure
Standards Met	90%	80%	90%	80%
Standards Exceeded	95%	90%	95%	90%

Schoen Clinic London undertakes a number of local audits that assess the quality of its clinical notes. Where appropriate, action plans are created to drive improvement in the quality of clinical notes.

Schoen Clinic London recorded 2,981 inpatient and day-case episodes during the period April 2021 – March 2022, 309 of these were NHS patients.



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ONIC / NHS England - Schoen Clinic Newbridge

QNIC visited Schoen Clinic Newbridge in Spring 2022 and whilst they are awaiting their QNIC review report, initial feedback from the day was very positive. The panel stated that they felt welcomed, and concluded that the team were very well prepared and showed great team spirit. It was noted that patients felt safe in the hospital and that they are supported by the staff. The QNIC team were very impressed with the audit process and how proactively the results are reviewed. Our team received fantastic reviews on how we present ourselves and our open and honest team culture, which shines a beacon on how dedicated our staff are to our clinics and our patients wellbeing.

NHS England Quality Review Inspection – Schoen Clinic Newbridge

Schoen Clinic Newbridge was last reviewed by NHS England on 16th December 2021. No concerns were raised from this inspection, and it was confirmed that Schoen Clinic Newbridge continues to provide a high quality service to the young people in its care. The service is valued by its patients and staff alike.

New roles of nurse prescriber and hospital social worker have added further value and demonstrates commitment to expanding our services to fully support our patients.

NHS Foundation Trust - Schoen Clinic London

Using the recommendations of the Enhanced Recovery After Surgery (ERAS®) Society one NHS Foundation Trust conducted a substantial retrospective review of its patients who were treated at Schoen Clinic London comparing their outcome with those treated at their own sites (June to October 2020).

Schoen Clinic London were found to deliver significant improvements across nearly every measure compared to patients treated at the Trust's own facilities. The results of this audit provide evidence that Schoen Clinic London's programme of enhanced recovery is very effective. Schoen Clinic London utilise many innovative approaches to the care delivered to achieve this, ranging from the type of anaesthetic utilised, to early mobilisation of the patient, and wherever possible, two post-operative physio therapy sessions per day.

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Schoen Clinic London Review

	Schoen Clinic	NHS Trust		
	Outc	Outcomes		
Mean LOS	2.274 days	5.59 days		
Median LOS	2 days	4 days		
Time back to ward	1hr 31	3hrs 56		
Time to first seen by physio	8hrs 24	19hrs 1		
Time to first mobilisation	13hrs 16	27hrs 33		
	Frequency of	Frequency of Physiotherapy		
Twice daily	73%	12%		
Less than twice daily	27%	88%		
	Anaes	Anaesthesia		
General only	14%	41%		
Regional only	26%	38%		
	Socioden	Sociodemographic		
Age	55 (± 18.38 S.D, range 18-89 years)	64 (±18.45 S.D, range 20-90 years)		
M	31%	38%		
F	69%	62%		







SCHOEN CLINIC

SCHOEN CLINIC



SCHOEN CLINIC
Centre for Mental Health
Chelsea

treating 300,000 patients every year and the LaingBuisson hospital group
of the year 2020.

Schoen Clinic entered the UK healthcare market in 2018 providing award-winning, expert-led private healthcare in the specialty areas of mental health, eating disorders and orthopaedic and spine surgery. Its accolades include The LaingBuisson Private Hospital Group of the Year 2020. For more information, please visit the website **schoen-clinic.co.uk**







