



Quality Accounts

2022/2023

Definition and Purpose of Quality Account

The Healthcare Act 2008 requires providers of NHS healthcare services to produce an annual quality account in relation to the quality of services they deliver. Quality of services is measured by looking at patient safety, the effectiveness of the treatments that patients receive, and patient feedback on the care provided.

Our vision is to provide first-class diagnostic imaging that exceeds our service commitments and customer expectations. This quality report demonstrates our achievements in the past year in support of our vision as well as our commitment to evidence-based quality improvement that makes a positive difference to our patients.



Introduction and Statement on Quality from the Chief Executive Officer

I am pleased to present our Quality Account for 2022/23. This report presents the opportunity to provide a clear account of our work over the past 12 months.

We pride ourselves on delivering excellent diagnostic care. Providing high-quality and safe services is paramount to us, and we always look at finding new ways to develop and improve our patients' care.

In the last year, we have expanded our services to new community sites, bringing imaging closer to home as part of the community diagnostic centers (CDCs) programme and direct access provision for GPs. We have invested in new equipment and technology to respond to NHS demand and provide safe and responsive care.

In line with the expansion of our services, we have restructured our Governance team and appointed a Chief Quality and Risk Officer to improve our services and ability to measure service outcomes and provide a continuous cycle of feedback and learning across the company.

We always aim to improve our patient's experience by asking for feedback and developing our services to meet their needs better. It is what helps us grow, improve, and develop our services. We have increased the number of patient feedback responses significantly and maintained a very high satisfaction of over 97%.

We work to ensure all staff feels valued and able to contribute to improving our services and the quality of patient care. We are committed to providing a high standard of diagnostic services and patient care by creating a culture of ongoing quality improvement amongst our staff teams.

In the last 12 months, we have restructured our people department and appointed an experienced Chief People Officer alongside a dedicated recruitment, training, and development team supporting this objective. We have increased our workforce significantly by offering new career opportunities, staff development, and a supportive workplace. Our latest staff pulse survey shows that over 95% of staff agreed that the company's vision and values aligned with their personal values, over 90% feel that they are always treated with respect by their line manager and work colleagues, and 97% agreed that equality and diversity are valued at Diagnostic Healthcare.

Pleasingly, our ISO 9001:2015 accreditation was maintained throughout the year. An in-person inspection was undertaken in December 2022. The audit team's conclusion, based on the results of this external audit, was that the organisation continued to fulfill the required standards with the management system continuing to achieve its intended outcomes. No new non-conformities were raised.

At the beginning of 2023, we had a full CQC inspection of our Sharston registration, which covers the head office functions and the mobile and static diagnostic services we provide. We achieved an overall rating of 'Good' across all 5 areas, which shows remarkable consistency in all aspects of the business.

The high quality of care we provide is testimony to our staff. I am immensely proud of the commitment, compassion, and flexibility demonstrated by our people in continuing to deliver clinical excellence and ensuring that the patient remains at the centre of everything we do.

I am pleased to confirm that the Board of Directors reviewed the content of this Quality Accounts, and, to the best of my knowledge, the content is an accurate reflection of our performance.



Liat Karni, CEO

Our Vision, Mission, and Values

2022-23 saw the continuation of the delivery of services against the DHC vision and values. Throughout the year, the values were a core focus for all colleagues across the business and are reflected in performance business-wide.

Our Vision

To deliver outstanding healthcare services as a technology focussed leading provider.

Our Mission

To provide first class patient care on every occasion with a world class workforce.

Our Values

Care: We work as a team to provide the highest standard of care in a welcoming environment. We are committed to ensuring that every patient and employee feels safe and valued. We listen to those we serve and work alongside; we learn from feedback and constantly make improvements.

Professional: Our employees work to deliver the best possible experience for each patient. A culture of innovation and continuous improvement ensures that we are providing the best possible service.

Respect: we treat colleagues and patients the way that we would like to be treated, encouraging each other to grow and develop in the workplace. We treat people as individuals and understand that strength comes from our diverse workforce.

Excellence: We deliver our services using the most innovative and advanced equipment, enabling us to excel in everything that we do. We strive for continuous improvement as leaders in our profession.

Safe: The safety of our patients and colleagues is at the centre of everything we do. We hold each other accountable and work together to create an environment where both patients and colleagues feel secure and valued.



Statement of Assurance

As a provider of key NHS services, Diagnostic Healthcare is required to monitor and report on key standards, measuring performance and implementing quality improvement initiatives where required.

Throughout 2022-23, Diagnostic Healthcare has continued to provide a range of diagnostic imaging services to the NHS.

Diagnostic Healthcare monitors the quality of care delivered through information collected from patients, referrers, and staff via surveys. In addition, key performance indicators, service reviews, and clinical audits provide detailed feedback on the quality of services delivered.

Clinical Audits are undertaken within each imaging modality, reviewing imaging quality and reports. The audit process follows recommendations from the Royal College of Radiologists.

Diagnostic Healthcare has 4 registered locations with the Care Quality Commission (CQC). All 4 locations are registered to provide Diagnostic and Screening Procedures, and one site is also registered for the Treatment of Disease Disorders and Injuries. Each location has at least 1 registered manager in accordance with the required CQC standards.

ISO accreditations against standards 9001 and 14001 underwent re-certification in November and December 2022, respectively.

The NHS Digital Data Security and Protection Toolkit was completed in June 2022, and the required standards were met. Diagnostic Healthcare also achieved the Cyber Essentials standards in March 2023.



Diagnostic Healthcare Assurance Methodology

The Care Quality Commission regulates Diagnostic Healthcare (DHC), and therefore, the Quality Accounts are published to align with the 5 key questions that the CQC assesses.

Safe

External Assurance

DHC delivers services within a highly regulated environment, working with multiple external bodies that provide assurance on all the services provided, both clinical and non-clinical.

DHC is registered with the Care Quality Commission (CQC) as required by the Health and Social Care Act 2010. We have 4 registered locations with satellite clinics functioning under each of the 4 locations. The provision of a mobile fleet of MRI, CT, and DEXA services is covered by the Sharston registration.

The start of 2023 saw a full CQC inspection of our registration that covers our head office functions and mobile and static imaging services (Sharston). At the conclusion of the inspection, we received a 'Good' rating. All four registered locations are rated as Good.

As an independent healthcare provider, DHC is required to be licensed by NHS Improvement. DHC submitted its return to NHS Improvement in 2022-23, and no reviews or inspections were undertaken during this period.

In order to enhance our external assurance model, DHC has accreditation for ISO9001 and ISO14001. Both programmes were audited in 2022, and no major nonconformities were identified. A small number of suggestions for improvement were identified, and we are working towards achieving these prior to the 2023 audit at the end of the calendar year.

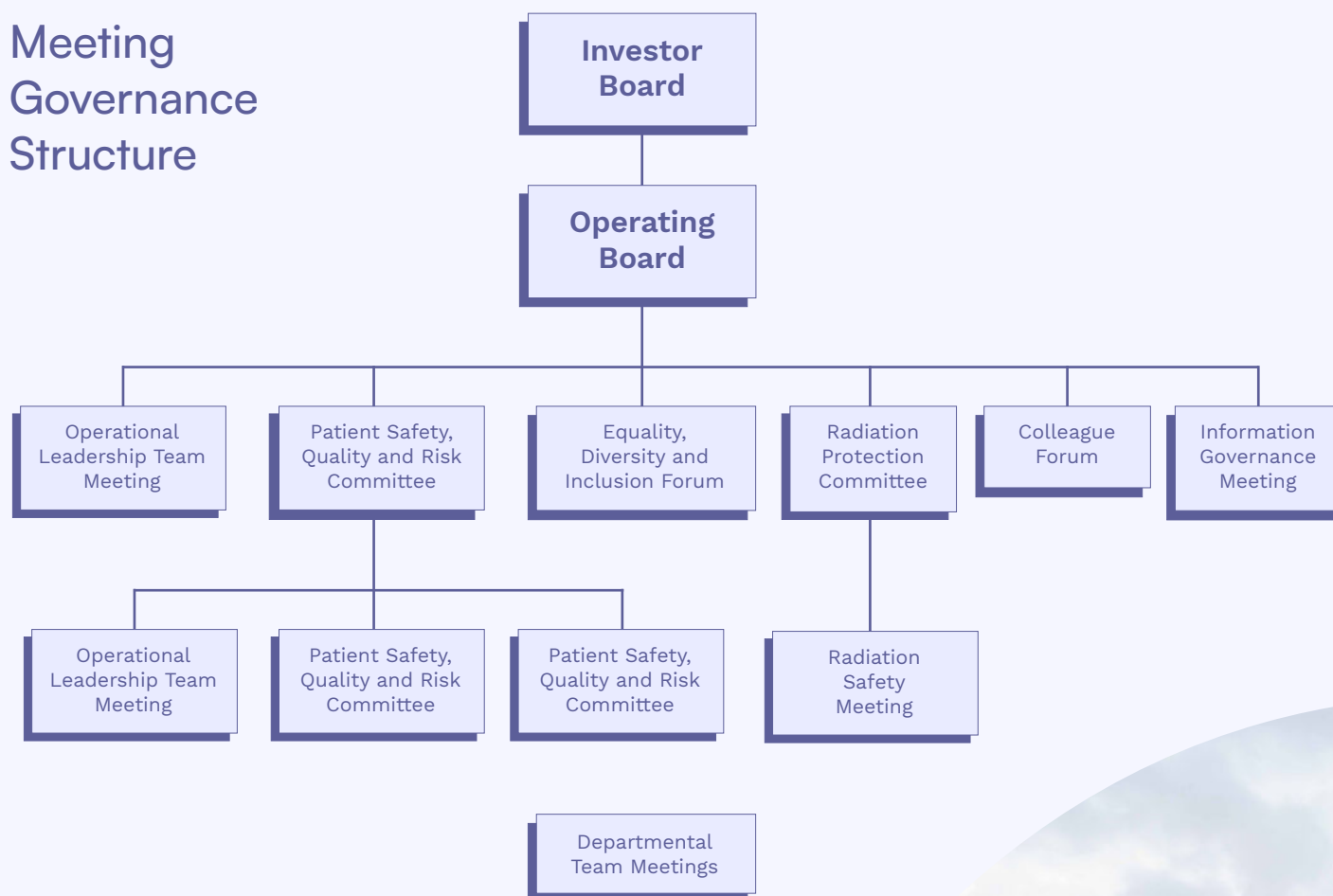
DHC is required to carry out an annual self-assessment in relation to our compliance with the Department of Health information governance policy and standards. This is achieved by completing the Data Security and Protection Toolkit. Our submission was completed, and the required standards have been achieved. In addition, DHC has completed and was re-accredited with Cyber Essentials in March 2023.

Internal Assurance

During the past 12 months, DHC has revised the internal meeting structure to further enhance its internal assurance processes for the safe running of services. The structure outlined below ensures the provision of safe and effective services with the ability to measure service outcomes and provide a continuous cycle of feedback and learning across the business.

A clear flow of information is enabled from team meetings in the field up to the Investor Board and, in return, from the Investor Board to our clinicians providing direct patient care.

Meeting Governance Structure



Health and Safety

DHC is committed to taking all reasonable measures to protect the health and safety of our patients, colleagues, and any third parties we work with. A Health and Safety framework is in place, which includes a policy, training, guidance, audit, and risk assessments which are managed and reviewed at our quarterly Health and Safety Committee.

One RIDDOR reportable incident occurred in 2022-23. The incident was fully investigated, and actions were taken in response to prevent a recurrence. The incident was also reported to the CQC, who were satisfied with the investigation and actions are taken.

An example of measures that have been taken to improve health and safety in the last 12 months include:

- The fitting of finger guards across the hinges on all mobile scanning units. This was following a patient sustaining an injury due to trapping their fingers in a hinge on one of our mobile units.

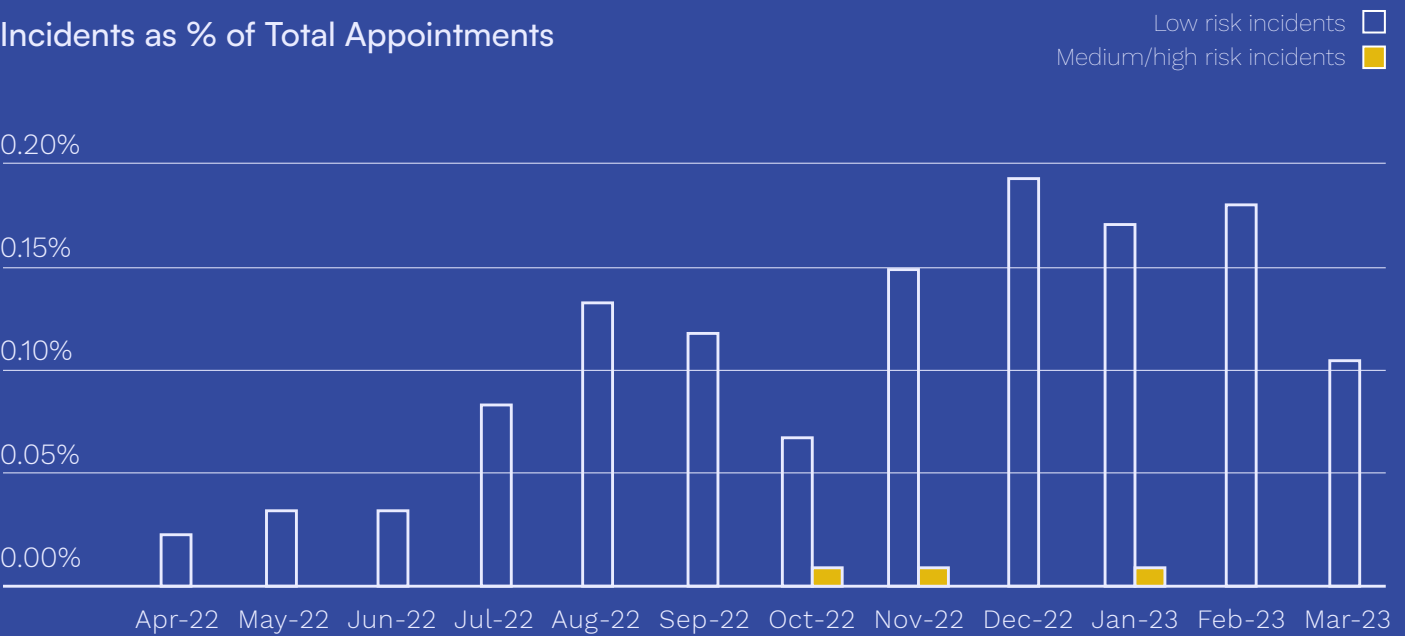
Incidents and Investigations

Incident and near-miss reporting at DHC is fundamental in allowing us to learn and implement change. DHC supports a just culture for the reporting and management of incidents. Leaders across the business have been trained in incident investigation, and key colleagues have completed Root Cause Analysis training, which drives the incident investigation methodology.

Live incidents are reviewed on a weekly basis, and the quality and risk team conducts a full review of all incidents reported at the end of each month, ensuring the accuracy of reporting and the appropriate sharing of learning. Human factors and just culture are key in the investigation processes used within DHC.

Learning from incidents and near misses is shared in our quarterly governance newsletter and at monthly modality-specific team meetings. DHC implemented a campaign across all areas of the business in November 2022 to improve the reporting culture of low and no-harm incidents and near misses. This saw an increase in reporting, allowing for quality improvements to be implemented.

Incidents as % of Total Appointments



Infection Prevention and Control

DHC has continued to implement the national guidance for infection prevention and control (IPC) in relation to the COVID-19 response and seasonal respiratory infections. All clinical settings implement infection control principles. Monthly local spot-check audits are undertaken and recorded electronically to provide assurance that appropriate guidelines and practices are being undertaken.

Infection control forums have been established to function as a resource of knowledge and information sharing for colleagues across the business. 2023-24 will see further development of this forum and further enhancement of IPC audit and education across DHC.

Ionising Radiation

DHC delivers CT, DEXA, CBCT, and X-ray imaging services, which are delivered in accordance with the Ionising Radiation Regulations 2017, IR(ME)R 2017.

All ionising radiation modalities have appropriately trained Radiation Protection Supervisors. In addition, DHC contracts the services of an Independent Radiation Protection Advisor and Medical Physics Experts.

One incident was reported to the Care Quality Commission in compliance with the Ionising Radiation (Medical Exposure) Regulations 2017. The case was thoroughly investigated, and learning was shared with all parties involved. This case is now closed with the CQC following satisfactory outcomes.

Medicines Management

DHC's use of medicines is limited to the use of drugs via approved Patient Group Directions (PGDs) for the administration of contrast agents or the use of medicines in the management of an emergency situation. Additional mandatory training was implemented this year to provide additional assurance regarding the safe use of PGDs across all sites.

Mandatory Training

All colleagues at DHC complete a defined suite of mandatory training that aligns with the regulatory environment in which DHC operates. Mandatory training is assigned to individuals associated with their role. Training is delivered predominantly via an e-learning platform, with practical face-to-face delivery on key modules.

The business has a target of 85% compliance across all modules at any one time, and this has been maintained across the last 12 months.

Safe Recruitment and Safe Staffing

DHC prides itself on maintaining high standards of care by only recruiting people who have the skills, qualifications, and experience required for the job. In line with legislation, government guidance, and NHS Employers standards, we implement robust recruitment and pre-employment processes. This includes:

- Identity check
- Right to work in the UK
- Employment history
- References
- Qualifications and diploma
- Professional registration
- Disclosure and Barring Service check
- Clinical assessment (when relevant)
- Occupational Health assessment

DHC has defined workforce planning processes undertaking analysis of the specific workforce requirements for all services delivered. This year has seen an increase in overseas workforce recruitment. New colleagues joining DHC from overseas complete comprehensive induction and training, including support in adjusting the working in the UK. DHC has seen an increase in its contracted workforce over the last year, which has improved the continuity of service delivery and overall engagement across the DHC workforce.

Staff Experience

DHC completed its annual staff survey in autumn, which showed improvements in key areas. Work has been undertaken to develop a colleague forum, and we look forward to seeing the work achieved by this group in the next year.

Staff Survey	2019	2021	2022
Total rate of staff who agreed with the below statements	Agreed Rate	Agreed Rate	Agreed Rate
I am clear about DHC's current goals and objectives	81.20%	92.47%	88.00%
DHC has a strong Management Team	80.34%	84.94%	82.76%
I see my manager as a positive role model	83.04%	82.79%	82.95%
I feel supported by my team members	84.83%	87.10%	90.80%

Early in the calendar year of 2023, DHC undertook a staff pulse survey related to the implementation of the business's vision and values. The vision and values had been implemented in the previous year. The following results are the total rate of staff agreeing with the pulse survey statements:

- I am familiar with Diagnostic Healthcare's values: **94%**
- The company's vision and values align with my personal values: **95%**
- I always strive to be excellent in everything I do: **97%**

Effective

Clinical Audit and Improvement Cycle

DHC has undertaken its annual audit programme, including any required regulatory audits. Audit of imaging quality and reporting is also completed across all modalities, and outcomes are shared with all clinical staff via our quarterly governance newsletter and team meetings. Further local clinical audit is also undertaken, with outcomes reported and reviewed at the Patient Safety Quality and Risk Committee.

Policies and Procedures

DHC has a planned review cycle for all policies and procedures within the business. In addition, if changes are required outside of the cycle, then these are completed as soon as necessary.

All documents are stored on the company's electronic quality and compliance system, which is available to all colleagues. All documents have an assigned author who is a subject matter expert in the document content. Policies are approved at the most appropriate committee within the governance meeting structure. Key changes are shared with colleagues on a monthly basis.



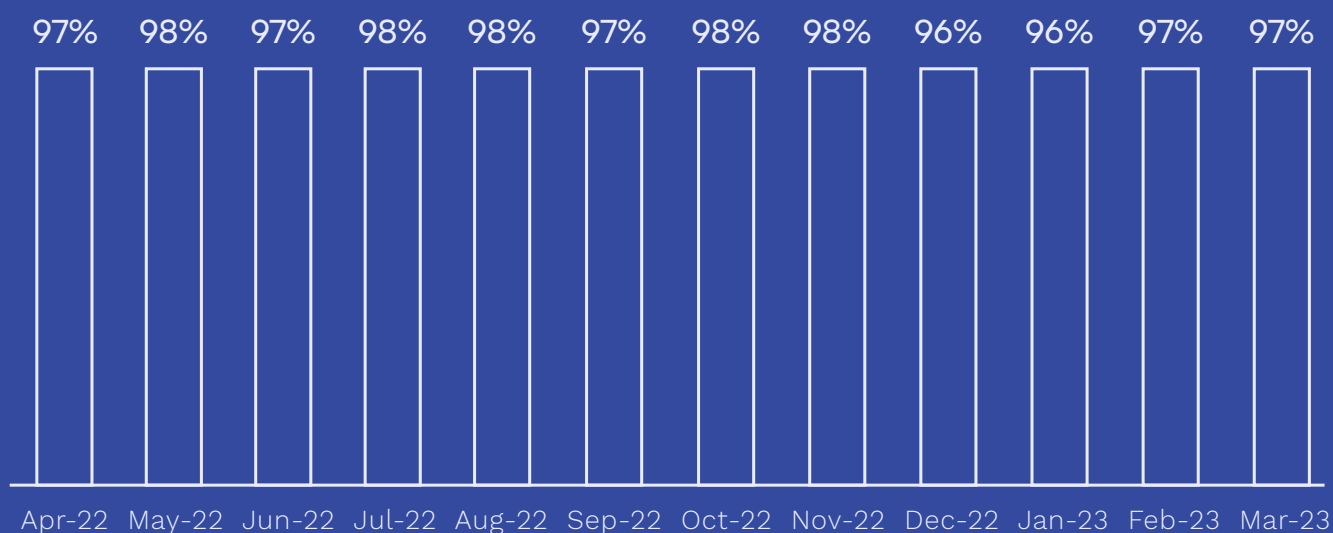
Caring

Patient Experience

All patients are offered the opportunity to provide feedback on their care experiences at Diagnostic Healthcare. Satisfaction scores overall remain high. Monthly analysis of the data enables feedback to be provided to our teams and improvements to be made.

Below is a summary of the Friends and Family satisfaction scores and some patient quotes about the care received.

Friend & Family Test



'I have a needle phobia and I couldn't have asked for better care and consideration. Absolutely lovely staff who were so kind and caring. 10 out of 10'.

'The sonographer and other lady were extremely nice and welcoming. I felt instantly relaxed in their presence'.

'The Radiographer explained everything very clearly and really put my mind at ease. I felt reassured from the moment I arrived at the unit and being greeted with a warm smile. What caring wonderful people. Thank you so very much'.

'Well ran and super efficient cannot believe my GP had the report back same day, truly remarkable. Friendly staff put me at ease. Thank you'.

'Very friendly and efficient staff made sure that I was comfortable and informed during the scan'.

'The radiographer on duty put me at ease due to extreme anxiety and made me feel calmer and talked me through the whole process'.

'Staff extremely polite and friendly Great communication and explanation'.

'Everyone I saw were all very nice. It was a pleasure to be in their capable hands'.

'The personnel were all marvellous. Bright, welcoming, engaging, and perfect in every way. Many thanks'.

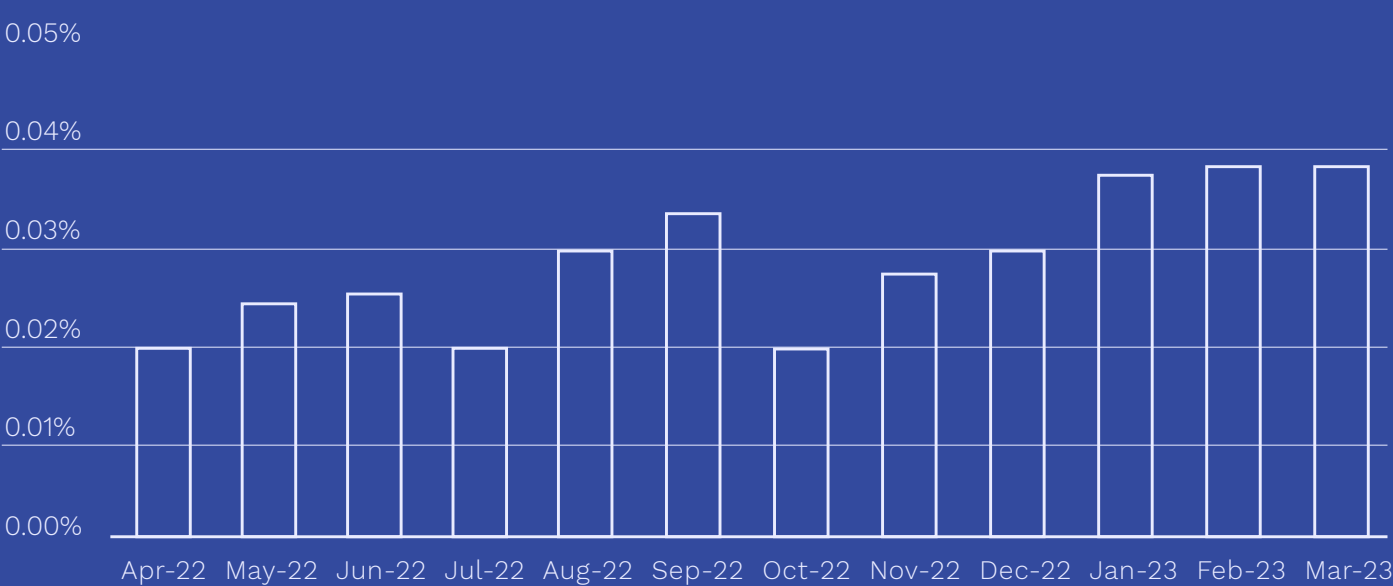
Complaints

Complaints and concerns raised by our patients and partner organisations provide valuable information to ensure that we can develop and maintain services of the highest standards.

Our standard is for all complaints to be acknowledged within 2 working days, with a complete response to the complainant within 20 working days. All concerns and complaints are addressed in line with our policy, and escalation of complaints outside of DHC is to the Parliamentary and Health Service Ombudsman. There were no complaints escalated outside of DHC in 2022-23.

The average percentage of complaints for the reported period is 0.03% of total appointments.

Complaints as % of Total Appointments



Responsive

Services offered

During 2022-2023, we continued to invest in new equipment and technology in response to NHS demand. We have expanded our services to new locations, implemented new dynamic quality systems, and invested in the latest scanners, including MRI, CT, Ultrasound, X-ray, and DEXA.

With state-of-the-art equipment and technology, we offer advanced scans in modern facilities, measured and monitored by a dynamic quality IT system.

Well-Led

Leadership Team

During 2022, we continued to build our senior leadership team talent by appointing a Chief People Officer, Chief Quality and Risk Officer, Director of IT, and Group Financial Controller.



Liat Karni
CEO

Chief Executive Officer



David O'Brien
COO

Chief Operating Officer



Paul Casey
CFO

Chief Financial Officer



Sarah Rickels
CQRO

Chief Quality & Risk Officer



Paul Newton
CPO

Chief People Officer



Jonathan Tuck
Medical Director



Louaz Hofton
Director of Development



Kate Matkin
Group Financial
Controller



**Dr Veronique
Sauret-Jackson**
Director of CBCT



Rob Bray
Director of Clinical
Services



Jonathan Rook
Director of I.T.

Risk Registers

DHC has introduced a risk management framework to facilitate appropriate risk management across the business. The corporate risk register owned by the Operating Board and administered by the Chief Quality and Risk Officer, provides a central overview of principal business-wide risks. Beneath this sit the operational risk registers and risk libraries, facilitating the appropriate monitoring and management of local departmental risks.

Employee Well Being

The emotional and physical well-being of our staff is really important to us. We constantly work on improving solutions aimed at supporting our colleagues, including the provision of fully trained Mental Health First Aiders. This is in addition to all staff having access to a 24/7 external and confidential Employee Assistance Programme.

The start of 2023 has seen the development of our Colleague Forum, which will support the business in discussions on key topics and developments, ensuring all areas of the business have a voice in the growth and development of DHC.

Recognition and Reward

We have a large team of exceptional people who are experts in their own fields. Our staff is committed to delivering excellent services, and we like to celebrate their success with them. Our annual recognition and awards programme has 5 categories:

Mentorship | Team Player | Customer Service | Above and Beyond | Excellence

Individuals are nominated by staff with a team judging event followed by an annual awards ceremony and celebration.

Equality

DHC has a firm commitment to equality, diversity, inclusion, and human rights. This commitment will be evidenced by the elimination of unlawful discrimination, promotion of equal opportunity, and fostering of good relations in everything we do; this is also demonstrated in our most recently published WRES (Workforce Race Equality Standards) report.

Our dedicated Equality, Diversity, and Inclusion Forum sets an active programme of communications and educational activities across the year, and our mandatory training via the e-learning modules continues to ensure equality and diversity training is completed.

We are pleased to share that in our staff pulse survey, over 97% of our staff agreed that equality and diversity is valued at Diagnostic Healthcare.

Freedom to Speak Up

DHC actively promotes a healthy speaking-up culture where staff has the knowledge and confidence to highlight potential problems and make suggestions for improvement. Our Whistleblowing policy is in place to support this process and to encourage our staff to raise concerns at an early stage in a safe and supported environment.

Quality and Improvement Goals for 2023-24



Improved provision of medical emergency equipment across all DHC settings.



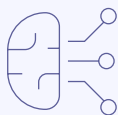
Implementation of Quality Assurance Review for all services.



Review and amend patient safety incident responses to incorporate the NHS England Patient Safety Incident Response Framework.



Embed the Quality Standard for Imaging across all modalities.



Development of a revised moving and handling training model.





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