

CLINICAL QUALITY AND SAFETY
REPORT

2018



JOSÉ DE MELLO · SAÚDE

INDEX

CLINICAL QUALITY AND SAFETY REPORT

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1. CONTEXT

José de Mello Saúde ensures that the healthcare it provides are suitable, effective, safe, based on evidence and on the highest standards of good practice.

To strengthen that purpose, José de Mello Saúde has created and presently develops the quality and safety programme. This programme describes the process through which it becomes possible to obtain the organised and persistent improvement of the company's structure, processes and results, in order to create value for patients, employees and other stakeholders.

This programme manifests a structure that supports and brings continuity to the planning activities, culture, leadership and involvement of the professionals in the continuous improvement of the quality of patient care and safety.

An essential part of this programme and of the process for quality improvement consists in the definition of the units of measure – the indicators – in order to collect and analyse data then used to identify opportunities for improvement, to establish and develop benchmarking, by comparing figures within José de Mello Saúde's units and outside it.

Consequently, this programme also translates the effort to integrate the quality improvement actions, given that it enables the materialisation of the improvement objectives in the provision of healthcare.

Objectives

- Supporting the mission, vision, values and strategic plan of José de Mello Saúde's units.
- Building a system for the improvement of quality and safety;
- Meeting the needs and expectations of the patients and of other interested parties, such as relatives, caretakers and community;
- Developing quality and safety indicators.

Principles

Patient-Focused Care

The improvement of quality in José de Mello Saúde is focused on the patient. The patient comes first in the processes and in the attention of the professionals, respecting the patients in all of their dimensions: physical, psychological, emotional, religious, social, economic and familial. José de Mello Saúde's units exist because of the patients and for the patients.

Continuous Improvement

José de Mello Saúde's units have the structure required to ensure continuous improvement and to identify the improvement needs through a systematic methodology, analysis of problems, promotion of solutions and guarantee of continuation of results.



Transparency Culture

José de Mello Saúde encourages and promotes a culture of transparency based on the disclosure of the results obtained and on the disclosure of information that enables the customers to make an informed choice regarding the options of their therapeutic path.

Transparency is also fed by the implementation of a culture of reporting and acceptance of the error.

Other forms of commitment to transparency are the adopting of voluntary external evaluation systems such as the ISO 9001 certification or the international JCI accreditation at José de Mello Saúde's units.

Involvement of the people

José de Mello Saúde promotes the participation of all who make up the organisation in its continuous improvement effort, whenever possible, based on cooperation and teamwork. Working as a team increases commitment, communication, mutual learning and improves the work.

Leadership by example

Support from top management includes the public commitment to quality, translating it into a positive and motivating attitude via support for change, active participation, supply of resources, review and follow-up of progress and recognition of the work carried out and of the results obtained.

Value Creation

Guided by the tenets of Value-Based Healthcare (VBH), José de Mello Saúde sees in the motto "measure to improve" the formula to obtain better outcomes. From that starting point, seek the company seeks the best quality-cost relationship for each pathology and corresponding clinical path, giving rise to the highest creation of value for the patient, also relying on the patient as a source of information for this intent, by collecting PROMs – Patient Reported Outcomes Measures and PREMs – Patient Reported Experience Measures.



2. QUALITY POLICY

As a leading provider of quality healthcare services in Portugal, José de Mello Saúde is committed to the guiding principles of sustainable development.

Respect for these principles translates into the commitment to ensure, at every moment, the creation of value and, with it, the satisfaction of customers, employees, shareholders and other entities with whom José de Mello Saúde cooperates in the exercise of its activity.

With this in mind, José de Mello Saúde is developing an integrated management model that defines:

Provision of healthcare

José de Mello Saúde's provision of healthcare is in line with the best practices in technological excellence and with the most recent and proven scientific evolution. The prevention, diagnosis and clinical treatment of illness, sustained by the achievement of clinical results, periodically monitored and reassessed in light of the goals and targets set. A model of healthcare provision based on the continuous search for solutions that will provide a response to customers' needs.

Patient safety

Maintaining a transversal programme for clinical and non-clinical risk management that establishes and prioritises actions to identify potential risks and prevent their occurrence, enhanced by the implementation of recommended best practices in order to eliminate unnecessary damages arising from the provision of its healthcare provision.

Security of information

The protection of information, as a support for the efficiency of the service rendered to the customers, based on the integrity and availability of the information systems and infrastructures, and on the confidentiality of the data.

Environmental efficiency

Identification of environmental issues arising from healthcare provision, making it possible to assess impacts and prioritise action aimed at minimising and controlling them. The promotion of sustainable use of natural resources including energy and water, pollution prevention and reduction, reuse and recycling of waste generated.

Health and safety at work

Identification of hazards to which professionals are exposed under health and safety at work, with a view to risk assessment and prioritisation of actions, ensuring that they are minimised and controlled. Prevention of occurrence of injuries, incidents, accidents and occupational diseases.

Legal requirements

Compliance with applicable legal requirements and other requirements that are endorsed.

Continuous improvement

The establishment of a culture of continuous improvement that consolidates the management of processes and promotes the efficiency of the integrated management model.

3. ABOUT JOSÉ DE MELLO SAÚDE

Who we are

Originating in CUF Hospital, founded in 1945, José de Mello Saúde operates in the provision of healthcare in Portugal.

Vision

To be the leading healthcare provider with distinctive quality supported by an integrated network of high-performance units, both in the private and public sectors, and presenting growth options in select markets.

Mission

To promote the provision of healthcare services with the highest level of knowledge, respecting the primacy of life and the environment, through the development of the intellectual capital of the organizations, in a permanent search for excellence.

Values

- Respect for human dignity and well-being
- Human development
- Competence
- Innovation

Ethics

Business ethics is a fundamental value of José de Mello Saúde, both due to the area in which it operates and due to the topic's relevance for JMS. As an entity that provides healthcare, governed by principles of good management and transparency, striving for respect for customers, partners, shareholders and employees, José de Mello Saúde poses ethical issues at the centre of its activity. Governing its conduct by values such as the respect for human dignity and for the well-being of the individual, José de Mello Saúde decided to create a code of ethics for all CUF units. An Ethics Council, a consulting body of José de Mello Saúde's Executive Committee, was also established.

Along with the Ethics Council, the larger healthcare units have their own Ethics Committee, as required by law. This Committee is composed of internal staff, alongside external individuals with deep knowledge of ethical matters.

Organization

José de Mello Saúde develops its activity through a network of CUF private healthcare and hospital units integrated in the Portuguese National Health Service (Serviço Nacional de Saúde — SNS), operated under public-private partnership (PPP).

In 2018, José de Mello Saúde reinforced its aspirations to consolidate the CUF network, inaugurating CUF Coimbra Hospital, CUF Descobertas 2 Hospital and CUF Nova SBE Clinic. The reinforcement of the growth strategy was also materialized in the building of the future hospitals CUF Tejo and CUF Sintra, as well as in the expansion of CUF Torres Vedras Hospital and of CUF Almada Clinic.

José de Mello Saúde also ensures, via public-private partnerships (PPP), the management of Braga Hospital and Vila Franca de Xira Hospital, both part of the Portuguese National Health Service.

From an organizational perspective, the hospital and outpatient units were grouped into two Coordinating Committees — CUF and PPP. The CUF network is broken down into three geographical clusters — Descobertas, Tejo and Norte — in a rationale of coordination around three large CUF hospitals: CUF Infante Santo Hospital, CUF Descobertas Hospital and CUF Porto Hospital.

BUSINESS MODEL

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INPUTS ▶

Financial capital

- Manages the activity seeking to optimize efficiency in the management of financing and results.

Human capital

- Ensures the promotion and recognition of its 8,919 employees, encouraging collaboration, competence and rigour.

Intellectual capital

- Develops education and training programmes with the goal of permanently updating its professionals and the scientific and medical community;
- Uses management practices that generate efficiency, such as standardization in the use of consumables across healthcare units and the optimization of a billing alarm system.

Technological and manufactured capital

- Uses tangible and intangible technological resources to implement its activities, supported on its own real estate which includes 20 healthcare units, 1,242 consultation rooms, 103 operating theatres and 1,570 inpatient beds.

Social and relational capital

- Works with elements of the scientific and innovation ecosystems (start-ups and others), boosting its research, development and innovation activities to identify opportunities for differentiation.

Natural capital

- Promotes the sustainable use of natural resources, namely energy and water, preventing pollution and promoting proper waste management.

Shareholders	Financier	Payers	Providers	Contributors

As a leader healthcare provider in Portugal, José de Mello Saúde is organized around major hospitals (with subspecialties in reference areas) and a local network of clinics and hospitals (which provide convenience services), and is capable of responding quickly and effectively to external changes that impact its sector or the organization.

José de Mello Saúde's business model is supported by five strategic pillars and by a set of resources that guarantee the creation of value for all stakeholders.

Strategic Pillars



Clinical
Differentiator
Project



Experience
Irreprehensible
Customer



Consistent
and Efficient
Operation



Generating
Growth Agenda
of value



Bet on
Talent
Human

VISION

Be a leader in delivering distinctive quality health care supported in an integrated network of high performance units in both the private and public sectors and featuring growth options in select international markets.

VALUES

The performance of José de Mello Saúde is governed by values such as Respect for the Dignity and Well-Being of the Person, Human Development, Competence and Innovation.

Entity Regulatory of health	Regional Associations of health	Building Construction of the Sector	Academic and Scientific Community	About us places

OUTPUTS ▶

Generation of shareholder value

- The capture of synergies and a strong focus on an efficient management enabled to achieve dividends of €17.7M.

Promotion and training of professionals

- The remuneration of professionals reached €225M;
- 125,079 hours of training, an average of 14,03 hours per employee, were carried out.

Contribution to knowledge generation

- A total of 127 clinical trials were carried out, and PhD scholarships in medicine amounting to 100,000 euros were awarded;
- €3.7M were invested in Research, Development and Innovation;
- 681 Doctors had their medical internship in José de Mello Saúde's units;
- The consortium with Universidade Nova de Lisboa, which reconciles hospital practice with teaching and research, matured.

Excellence of clinical services

- Maintenance of the Certification from SGS regarding the overall healthcare provision in the JMS units, according to ISO standard 9001:2015;
- Renewal of the CHKS Accreditation at Braga Hospital;
- Accreditation by the Joint Commission International (JCI) of CUF Porto Hospital;
- Renewal of EUSOMA's certification for the Integrated Breast Diagnostic and Treatment Unit of CUF Descobertas and CUF Infante Santo hospitals;
- ESMO Certification of the Palliative Care in CUF Infante Santo and CUF Porto hospitals.

Outstanding quality of service

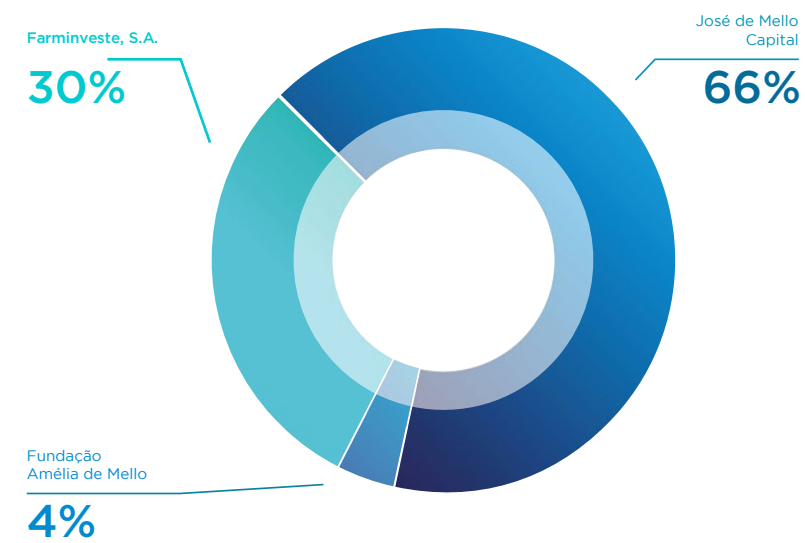
- "Consumer Choice" award in the Health & Well-being category;
- "Most Trusted Portuguese Brand" award;
- "Five-Star Award" in the Private Hospitals category.

Benchmark environmental performance

- Renewal, by SGS, of the ISO 14001:2015 Environmental Certification in Braga and Vila Franca de Xira Hospitals;
- Signing of a contract for the supply of electricity from 100% renewable sources. Through this supply, a drastic reduction in the CO2 and NOx emissions was ensured, in parallel with a more efficient consumption of electricity and gas.



JOSÉ DE MELLO SAÚDE	OPERATING INCOME



683,1 M€
EBITDA
71,2 M€
CONSOLIDATED INVESTMENT
81,2 M€

A YEAR IN NUMBERS

3 MILLION	463 THOUSAND
CALLS ANSWERED BY THE CONTACT CENTRE	ACCOUNTS APP MYCUF

360 THOUSAND
SCHEDULED CONSULTATIONS TROUGH MY CUF APP

1.2 MILLION	690 THOUSAND
CUSTOMERS	EMERGENCIES

2.6 MILLION	676 THOUSAND
CONSULTATIONS	TESTS IMAGING

8.607	26 THOUSAND
BIRTHS	SESSIONS CHEMOTHERAPY

58 THOUSAND
SESSIONS RADIOTHERAPY

0,78	0,75	0,78
RACI (RISK ADJUSTED COMPLICATION INDEX)	RAMI (RISK ADJUSTED MORTALITY INDEX)	RARI (RISK ADJUSTED READMISSION INDEX)

MAIN INDICATORS 2018

OPERATING INCOME

683,1 M€

EBITDA

71,2 M€€

INVESTMENT IN R&D+I

3,7 M€€

DOCTORS IN MEDICAL INTERNSHIP

681

ENERGY INTENSITY

282,9 kWh

HOURS OF TRAINING

125.079

NUMBER OF VOLUNTEERS

163

FINANCIAL CAPITAL (M€)

	2016	2017	2018
Operating income	586,3	637,4	683,1
EBITDA	68,4	72	71,2
EBIT	41,5	42,6	31,2
Net profit	23,9	22,8	15,6

INTELLECTUAL CAPITAL

	2016	2017	2018
Investment in R&D+I (M€)	3	1,7	3,7
Medical Internship at JMS (no. Doctors)	785	485	681
Clinical Trials at JMS (no. Trials)	104	97	127

NATURAL CAPITAL

	2016	2017	2018
Electricity Consumption (kwh)	48.120	50.185	52.259
Energy Intensity (kwh)	49 *	45 *	282,9
Water Consumption (m³)	349,342	363,927	371,196
Natural Gas Consumption (kwh)	25,757	22,873	29,964
CO ₂ emissions (tCO ₂)	21,108	25,838	25,834
Hazardous waste accumulated (ton)	1,113	1,252	941

* In 2016 and 2017 the energy intensity was presented in Kgep/m2

HUMAN CAPITAL

	2016	2017	2018
HR INDICATORS			
No. of Employees	7.469	8.058	8.919
Women	5.899	6.375	7.039
Men	1.570	1.683	1.880
No. of Hires	1.360	1.797	2.335
No. of Departures	945	1.205	1.517
TRAINING INDICATORS			
No. of Hours of Training	121.748	133.314	125.079
Average hours per employee	16,3	16,54	14,03

SHARE CAPITAL

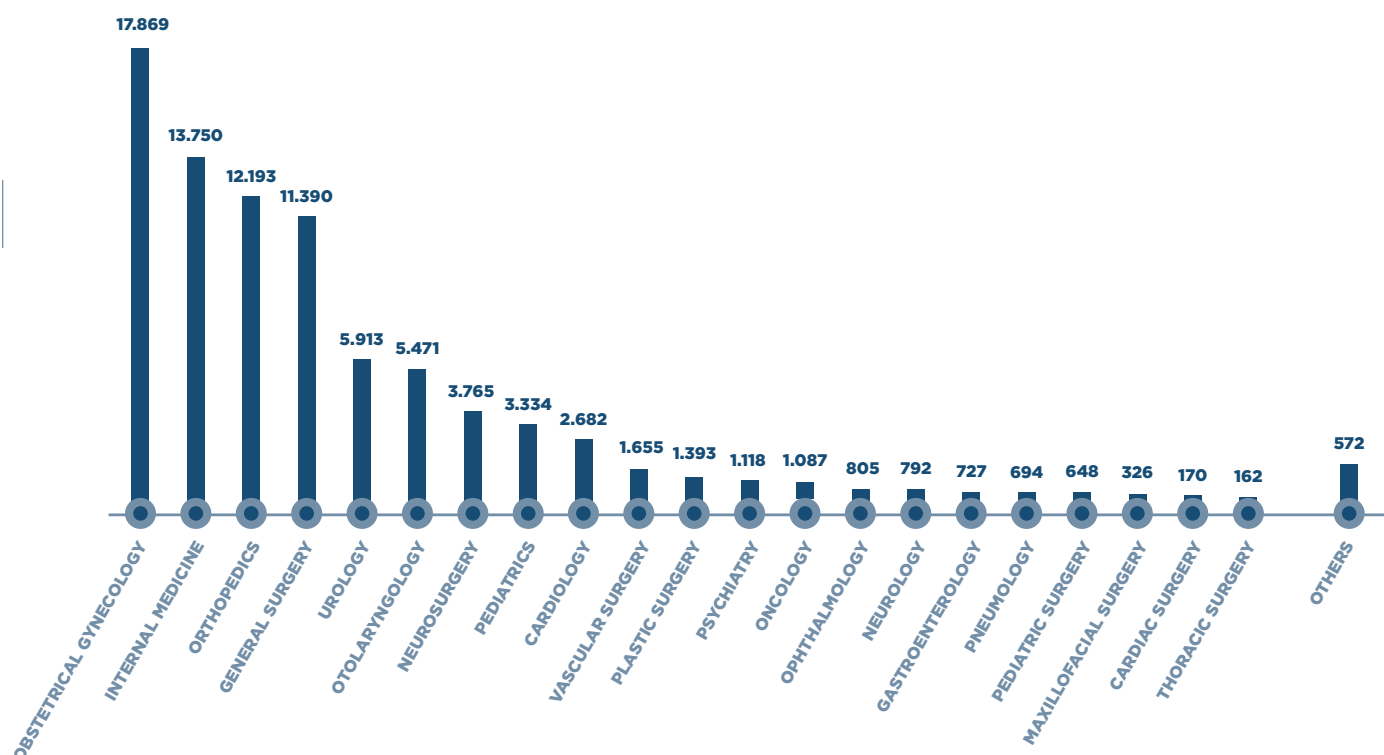
	2016	2017	2018
Donations	218.537	286.746	185.050€
No. of Volunteers	50	65	163



4. CLINICAL PERFORMANCE

José de Mello Saúde's units ensure a broad offering of healthcare provision, in both surgical and medical areas. This offering takes place both in CUF units and in the units in public-private partnership (PPP) and its global activity is summarized in the following specialties and corresponding discharged patients.

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The clinical performance can also be evaluated according to the homogeneous diagnostic groups (HDGs) as a result of clinical coding. The clinical coding in the private facilities reflects discharges of both patients in inpatient care and of patients who underwent outpatient surgery, and forms the basis for the governance of the clinical information, as well as of information used for monitoring, managing and controlling the quality, efficiency and process indicators. In the units managed under PPP, the coding reflects the inpatient care, the outpatient surgery and the medical outpatient care, also supporting funding and clinical governance.

The homogeneous diagnostic groups consists of a classification system used for inpatients, grouping them into clinically coherent and similar clusters from the consumption of resources point of view. The information regarding each of the hospitalisation and outpatient events is codified according to the ICD-10-CM/PCS reference, which is then grouped into homogeneous diagnostic groups. This way, it enables the possibility of an analytical visualization of the hospital's production and getting to know each unit's clinical complexity:

CODE	DESCRIPTION	TOTAL
Main Homogeneous Diagnostic Groups (HDGs) (Note: Refers only to CUF units)		
73	Procedures in the eye except socket	20.421
468	Other diagnoses, signs and/or symptoms in the kidney and/or urinary tract	10.302
640	New-born, weight at birth > 2499 g, normal or with other problems	7.812
952	Non-extensive procedures, not related to the main diagnosis	4.682
560	Vaginal childbirth	4.646
540	Delivery by caesarean section	3.661
313	Knee and/or leg procedures, except in the foot	3.148
98	Other procedures in the ear, nose, mouth and/or throat	3.071
97	Procedures on the tonsils and adenoids	2.967
228	Procedures for inguinal, femoral and/or umbilical hernia	2.366
Top Main diagnoses (ICD-10-CM)		
H3581	Retinal edema	5.845
Z3800	Single liveborn infant, delivered vaginally	4.793
H269	Unspecified cataract	3.979
Z3801	Single liveborn infant, delivered by cesarean	3.491
H259	Unspecified age-related cataract	2.469
J189	Pneumonia, unspecified organism	1.659
J342	Deviated nasal septum	1.500
O480	Post-term pregnancy	1.474
O4202	Full-term premature rupture of membranes, onset of labor within 24 hours of rupture	1.414
K4090	Unilateral inguinal hernia, without obstruction or gangrene, not specified as recurrent	1.365
Top procedures (ICD-10-PCS)		
08RJ3JZ 08RK3JZ	Replacement of Right/Left Lens with Synthetic Substitute, Percutaneous Approach	4864+4635
10D00Z1	Extraction of Products of Conception, Low Cervical, Open Approach	3.604
10E0XZZ	Delivery of Products of Conception, External Approach	3.251
0FT44ZZ	Resection of Gallbladder, Percutaneous Endoscopic Approach	1.679
09SM0ZZ	Reposition Nasal Septum, Open Approach	1.368
01N50ZZ	Release Median Nerve, Open Approach	1.098
0CTPXZZ	Resection of Tonsils, External Approach	1.016
06DP0ZZ	Extraction of Right Greater Saphenous Vein, Open Approach	962
10D07Z6	Extraction of Products of Conception, Vacuum, Via Natural or Artificial Opening	959
0UB98ZZ	Excision of Uterus, Via Natural or Artificial Opening Endoscopic	945

Note: Top of ICD-10-CM / PCS referring to the clinical activity of hospitalization (medical and surgical) and ambulatory surgery. Aggregate information of CUF and PPP units

5. CLINICAL QUALITY AND SAFETY

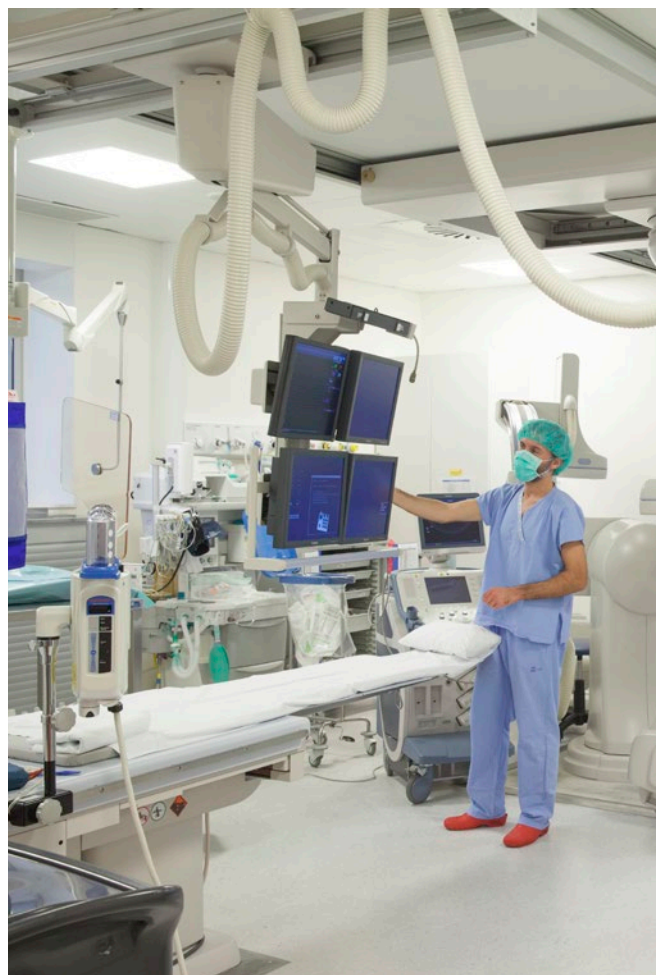
As a healthcare provider, José de Mello Saúde maintains its commitment to sustainable growth based on one of the organization's differentiating strategic pillars: the differentiating clinical project. This strategic position, present in all hospital units, has the creation of value for the customer as its main goal. This is reflected in the differentiation of the offering and on the organization of the healthcare, in its consistency among the different doctors, specialties and hospitals and in the clinical excellence attested by the implementation of quality management systems and benchmarking programmes with other providers, both nationally and internationally.

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5.1 | QUALITY MANAGEMENT

In 2018, José de Mello Saúde committed to its continuous improvement cycle, continuing its quality management system's models within the scope of its healthcare provision processes and of the quality and safety management methodologies. Subsequently, CUF hospitals successfully renewed the certification of their quality management systems according to ISO 9001:2015, maintaining the continuous development of the culture and practice of the values inherent to José de Mello Saúde.

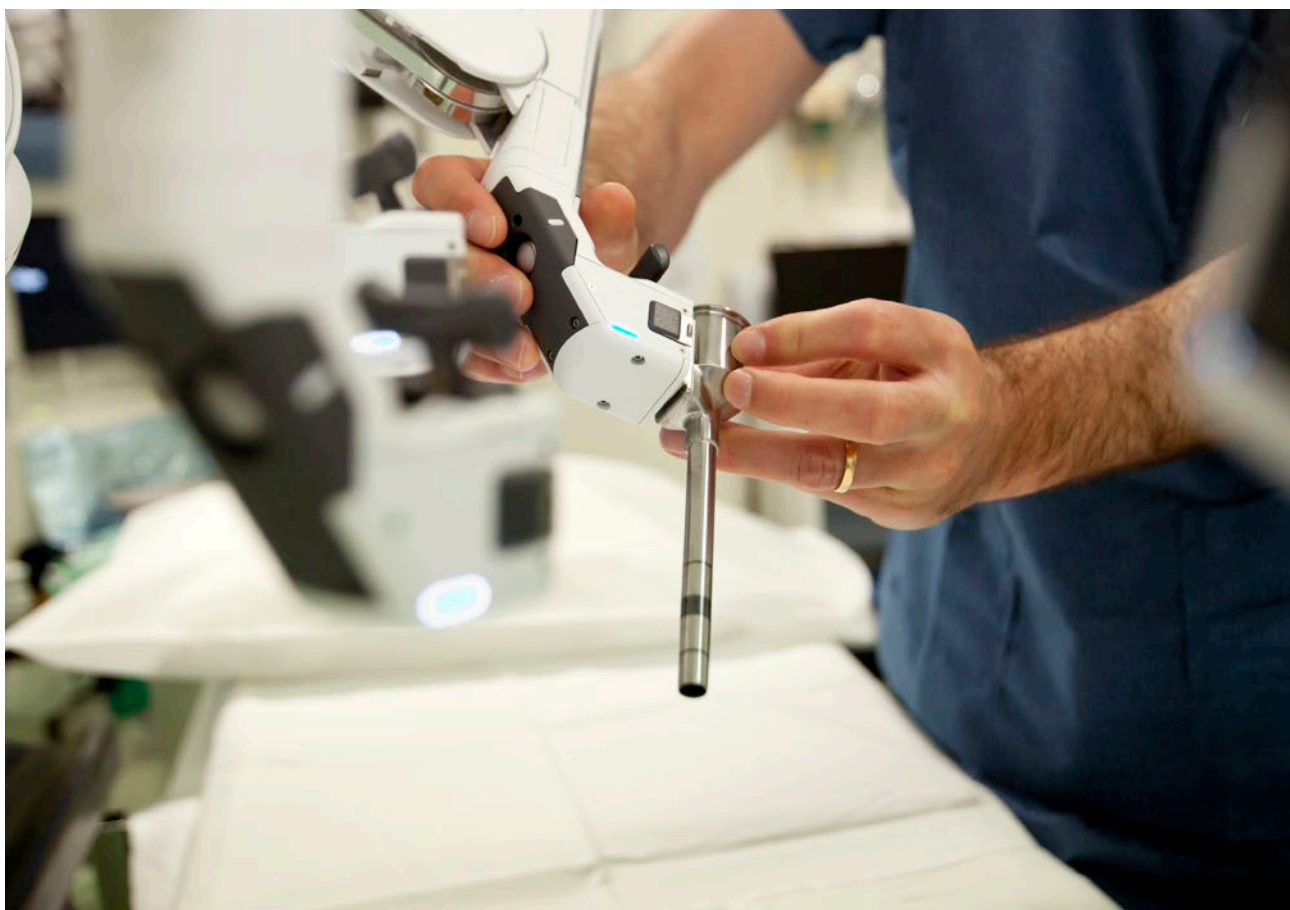
CUF Porto Hospital obtained the accreditation by the Joint Commission International (JCI), after a demanding preparation and audit process. Having been the first unit in CUF's network to receive this seal of quality, CUF Porto Hospital strengthens its commitment as a healthcare provider of excellence, also representing the beginning of the process in CUF's units.



In 2018, Braga Hospital was again accredited and certified ISO 9001:2015 in seven support services by the accreditation entity, Casper Healthcare Knowledge System (CHKS). It also maintained its environmental certification through application of the ISO 14001:2015 standard, as well as the organisational health and safety certification according to OHSAS 18001:2007, both from the Société Générale de Surveillance (SGS).

The unit also received the Certification of the General Surgery Service (as an adult oncology reference centre in the adult oncology area – colorectal cancer, good level) by the Certification Committee of the Quality in Healthcare Department, according to the ACSA (Agencia de Calidad Sanitaria de Andalucía) framework, with the decision being announced on 11 January.

Vila Franca de Xira Hospital, after an annual reassessment, had its accreditation by the Joint Commission International (JCI) renewed. The Environmental Certification, according to the ISO 14001:2015 standard, the Certification of the Organisational Health and Safety System according to the OHSAS 18001:2007 standard and the certification of the Quality Management System in clinical and support services, according to ISO 9001:2015, were also confirmed.



5.2 | PATIENT SAFETY

Patient safety is a strategic priority for José de Mello Saúde, and the company has consolidated the commitment of a differentiating clinical project, which materialized in clinical excellence and on a customer-focused response.

The safety and clinical risk management programme, common to all of the units, operates in coordination with the Medical Council and with the Nursing Council to establish common policies and courses of action, ensuring compliance with the recommended best practices and the implementation of a continuous improvement cycle, strengthening the single-operator model.

The 2015–2020 National Plan for Patient Safety, created by Decree No. 1400-A/2015, of 10 February 2015, frames the activities developed by José de Mello Saúde within the scope of the Safety and Clinical Risk Management programme, materialized in the hospital units by the clinical risk management committees and by the local coordination groups of the Antimicrobial Resistance Prevention programme and seeks to meet the following objectives:

- Increase the internal environment's safety culture;
- Increase safety in communication;
- Increase surgical safety;
- Increase safety in the use of medication;
- Ensure unambiguous identification of the patients;
- Prevent the occurrence of falls;
- Prevent the occurrence of pressure ulcers;
- Ensure the systematic practice of notification, analysis and prevention of incidents;
- Prevent and control infections and antimicrobial resistance.

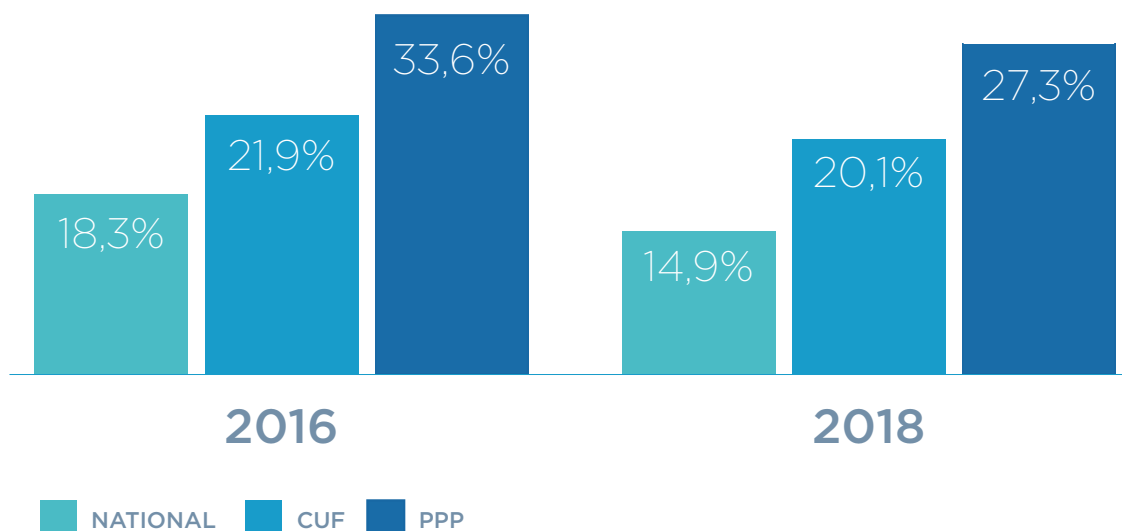


5.2.1 | SAFETY CULTURE

On the recommendation of the World Health Organisation and of the Council of the European Union, the healthcare professionals' understanding regarding the safety culture of the institution where they work is an essential condition for the introduction of changes in their behaviours. This will also be crucial to achieving better levels of safety and quality in the care provided to patients.

In compliance with standard 025/2013 of 24 December, which defines the "Evaluation of the Patient Safety Culture in Hospitals", and the first objective of the 2015–2020 National Plan for Patient Safety, all of José de Mello Saúde's hospital units joined, in 2018, the responsibility questionnaire of the Directorate-General of Health, not following the trend of reduction in the national participation rate, translating the employees' commitment in this area.

PARTICIPATION RATE

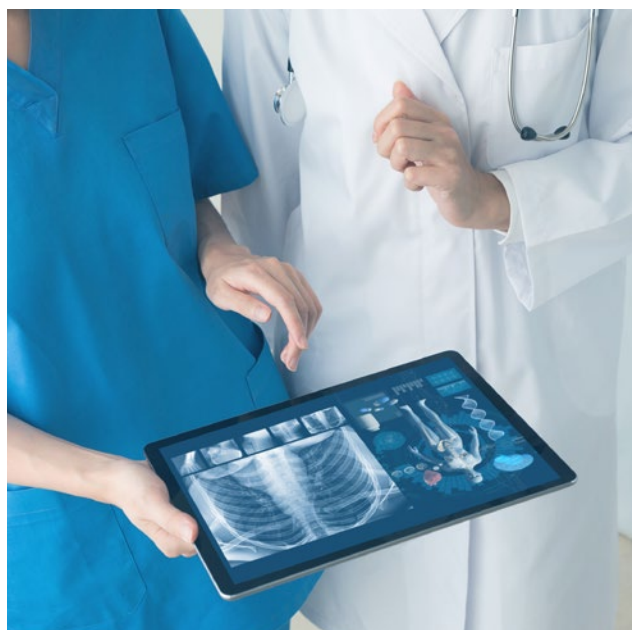


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5.2.2 | SAFETY IN COMMUNICATION

Communication is a fundamental pillar for patient safety, namely when the transfer of responsibility takes place, for the healthcare provision services. In 2018, José de Mello Saúde strengthened a set of measures to ensure precise and timely communication of information between healthcare professionals. The goal is to avoid communication gaps that may lead to serious breaks in the continuity of care and in adequate treatment that allow for incidents to take place that bring negative consequences to the patient:

- ISBAR methodology (*identificação; situação atual; antecedentes; avaliação; recomendações* – identification; current situation; priors, evaluation; recommendations) for transition of care;
- Read-back in verbal indications;
- Traceable communication of critical results.



5.2.3 | SURGICAL SAFETY

With a significant surgical activity, in 2018, José de Mello Saúde maintained its focus on the safety of the surgical patient's path, with the "Safe Surgery Saves Lives" project's overarching monitoring, being that the project encompasses the following dimensions:

- Pre-anaesthetic evaluation;
- Anaesthetic consent;
- Pre-surgical evaluation;
- Surgical consent;
- Surgical safety checklist;
- Surgical Apgar index;
- Surgical follow-up.

In line with the National Plan for Patient Safety 2015-2020, José de Mello Saúde, in safe surgery, seeks to:

- Use the surgical safety checklist;
- Reduce the rate of non-compliance in the use of the surgical safety checklist;
- Mitigate the risk of unacceptable surgical incidents.



Surgical Safety Checklist Usage Rate (SSC)

	CUF	PPP
2016 SSC Rate ¹	93%	97%
2017 SSC Rate ¹	97%	84%
2018 SSC Rate ¹	98%	92%

¹ Number of Completed Surgical Safety Checklists/no. of surgeries carried out in the central surgery block

5.2.4 | SAFETY IN THE USE OF MEDICATION

Medications that have a high risk of causing significant damage to the patient as a result of failures in their usage process are categorised as maximum-alert or maximum-risk medications. Though these errors are infrequent, their consequences tend to be more severe.

José de Mello Saúde complies with the National Plan for Patient Safety 2015-2020 within the scope of the use of medication, having developed and implemented:

- Rules on safe medication practices;
- Definition and disclosure of maximum-alert medication lists;
- Definition and disclosure of lists of medications having names with similar spelling, that sound similar or have similar appearance;
- Assignment of specific signs for medicines with similar spelling that sound similar or have similar appearance.



5.2.5 | FALLS

In 2018, José de Mello Saúde maintained its focus on the prevention of falls in hospital settings. The risk of falling depends on various factors and can have a significant impact on patient mobility and quality of life, as well as contributing to the rising cost of healthcare. José de Mello Saúde monitors the patient falls indicator in order to remain fully abreast of the extent and characterisation of the problem. The fall prevention strategy consists of:

- Assessment of the risk of falling in adult patients using the Morse Fall Scale;
- Assessment of the risk of falling in paediatric patients using the Humpty Dumpty Scale;
- Implementation of preventative measures in accordance with the risk of falling;
- Identification of patients with a high risk of falling;
- Involvement of the patient/carer in fall prevention;
- Notification in the event of a fall.

Patient falls during hospitalisation in 2018

	CUF	HB	HVFX
¹ Patient falls (%)	0,07	—	—
² IB17 indicator: "Falls during hospitalisation" (%)	—	0,12	0,11

¹ Number of patient falls reported for inpatients on the HER+ platform per 100 days of hospitalisation.

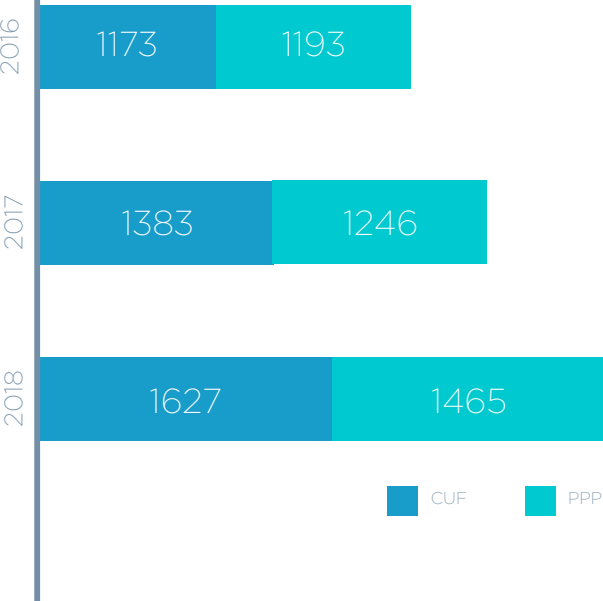
² Management Contract, "B17 – Falls during hospitalisation" indicator. [Number of patient falls during the period of hospitalisation, with discharge from hospital during the period under analysis / Total number of days of hospitalisation generated by patients discharged from hospital during the period under analysis]. HB reference rate = 0.15% | HVFX reference rate = 0.11%

5.2.6 | NOTIFICATION SYSTEM FOR ADVERSE EVENTS

The consolidation of the notification, analysis and prevention of incidents system now represents a cross-sectional and crucial tool to the development of the patient safety culture, thus strengthening the purpose of the organizational learning, reinforcing a non-punitive culture.

Having had significant participation by the employees of José de Mello Saúde's units, it has contributed in a remarkable way to collect, aggregate and analyse clinical information with a focus on the causes, risks, dangers and vulnerability, as well as total traceability regarding the effectiveness of the implemented improvement measures:

TOTAL REPORTED EVENTS
JMS Evolutionary Analysis



5.3 | INFECTION CONTROL

In 2018, José de Mello Saúde consolidated its active infection-prevention culture in its units through epidemiological surveillance, establishing common policies and courses of action to control infection and antimicrobial resistance across all units. This happens under a clinical coordination structure that brings together the executive structures of all units' local coordination groups.

Seeking to prevent, detect and control infections in hospital settings, there was a reinforcement of the culture of good practices in the main areas, such as epidemiological surveillance and control of healthcare-associated infections, monitoring of infection rates and antimicrobial resistance, awareness campaigns, training actions for professionals and customers as well as plans for internal audits of the practices.

Following the indicators of the management contract for public-private partnership hospitals, the rates of surgical-wound infection, urinary tract infection in patients with catheters, respiratory infection associated with mechanical ventilation and nosocomial infection of the bloodstream in patients who underwent central venous catheterization (CVC) are monitored.

Braga Hospital

Infection Rates - General Indicators	Accumulated 2018	Reference
Rate of Nosocomial Blood Stream Infections in Patients subjected to Central Venous Catheterisation (CVC)	0,09%	0,37%
Rate of Urinary Infections in Inpatients with Urinary Catheters	0,46%	0,46%
Overall Surgical Wound Infection Rate in Planned Surgical Procedures (%)	—	—
Surgical Wound Infection Rate in Planned Surgical Procedures in Patients with Risk Level 0	1,37%	3,80%
Surgical Wound Infection Rate in Planned Surgical Procedures in Patients with Risk Level 1	3,49%	10,00%
Surgical Wound Infection Rate in Planned Surgical Procedures in Patients with Risk Level 2	0,00%	34,00%
Surgical Wound Infection Rate in Planned Surgical Procedures in Patients with Risk Level 3	—	—
Respiratory Infection Rate Associated with Mechanical Ventilation in the ICU	0,20%	1,40%

Vila Franca de Xira Hospital

Infection Rates - General Indicators	Accumulated 2018	Reference
Rate of Nosocomial Blood Stream Infections in Patients subjected to Central Venous Catheterisation (CVC)	0,16%	0,20%
Rate of Urinary Infections in Inpatients with Urinary Catheters	0,34%	0,35%
Overall Surgical Wound Infection Rate in Planned Surgical Procedures (%)	—	—
Surgical Wound Infection Rate in Planned Surgical Procedures in Patients with Risk Level 0	2,27%	2,49%
Surgical Wound Infection Rate in Planned Surgical Procedures in Patients with Risk Level 1	3,14%	3,64%
Surgical Wound Infection Rate in Planned Surgical Procedures in Patients with Risk Level 2	6,67%	10,00%
Surgical Wound Infection Rate in Planned Surgical Procedures in Patients with Risk Level 3	—	—
Respiratory Infection Rate Associated with Mechanical Ventilation in the ICU	0,49%	0,78%

5.3.1 | *LEGIONELLA*: PREVENTION AND CONTROL

Legionella is a pathogenic group of Gram-negative bacteria that includes the *Legionella pneumophila* species, which causes a pneumonia called legionnaires' disease and, more rarely, a flu-like illness called Pontiac fever.

Ubiquitous in natural and artificial aquatic systems, such as building distribution systems, *Legionella* is able to survive in hostile environmental conditions for long periods of time, which contributes to its easy dissemination. This dissemination happens via aerosol-producing sources, namely in hot water from taps and showers.

The prevention and control of *Legionella* requires permanent maintenance of a specific chemical and thermal health barrier.

The fragility of the health barrier, even if isolated and transient, depending on other factors, contributes to the creation of favourable conditions for an outbreak.

In January 2018, an outbreak of legionnaires' disease was declared in CUF Descobertas Hospital, affecting 14 patients, with no associated deaths.

The management of the outbreak, led by the crisis office, included, in addition to the associated clinical interventions, a review and redundancy in the environmental control measures for *Legionella* bacteria. The entire process was guided by and centred on the CUF customer, both in the treatment and early screening of possible disease symptoms and in the optimization of the experience of all to whom CUF rendered healthcare during the outbreak.

Aware, as an organization, that moments of crisis are catalysts for growth processes, the expertise was increased through national and international consulting and training, using a risk-evaluation approach that is materialized in the water safety plan, expanded to the entire José de Mello Saúde unit network.



5.4 | NATIONAL HEALTH EVALUATION SYSTEM

The participation of José de Mello Saúde in the National Health Evaluation System (SINAS) for the hospital sector, regulated by the Portuguese Health Regulatory Authority (ERS), was consolidated in 2018 revealing the good results and the continuous quality improvement of the provided healthcare, thus contributing to the patient's access to adequate and intelligible information, promoting a more informed decision-making.

All of the units were evaluated in the quality dimensions of the first level of evaluation with the highest grade and receiving a star. In the second evaluation level, restricted to the clinical excellence aspect, Braga Hospital and Vila Franca de Xira Hospital stand out. These hospitals are among the country's hospitals with the most areas being assessed with the maximum level of clinical excellence (3+), being that Braga Hospital is the only healthcare institution in the country to have received the highest grade in eight clinical areas. CUF units also received the highest rating of clinical excellence in multiple areas, such as Outpatient Surgery, Orthopaedics (Hip and Knee Replacement) and Intensive Care Unit.

Unit	Clinical Excellence	Patient Safety	Facilities and Comfort	User focus	User Satisfaction
HCD	★	★	★	★	★
HCIS	★	★	★	★	★
HCP	★	★	★	★	★
HCC	★	★	★	★	★
HCTV	★	★	★	★	★
HCS	Dimension not evaluated	★	★	★	★
HCV	Dimension not evaluated	★	★	★	★
HB	★	★	★	★	★
HVFX	★	★	★	★	★

★ Provider meets all required quality parameters

PROFIT	CLINICAL AREA	UNIT
3+	Outpatient surgery	CDH/CPH/CCH/CTVH
3+	Orthopaedics	CDH/CCH
3+	MICU	CISH

SINAS internal monitoring tool

In 2018, effective improvement actions triggered by the on-time monitoring of compliance rates per indicator of detail were implemented according to each area of the clinical excellence dimension. The consolidation of this internal monitoring tool, developed in 2017, represented an important step in the process, both in the management of the information and in the focus of the clinical teams.

5.5 | CLINICAL QUALITY INDICATORS

At the base of the clinical information’s governance and as a way to monitor and learn, José de Mello Saúde fully codifies its activity (based on the ICD-10-CM/PCS reference) and involves its healthcare units with inpatient care and outpatient surgery in clinical benchmarking models that enable evaluating, by comparison, their performances in dimensions such as clinical efficiency and quality.

This evaluation of clinical quality is measured via participation in the IAmetrics, which enables José de Mello Saúde’s units to achieve greater efficiency and quality in the provision of healthcare by monitoring their results, using methodologies that adjust to the cases’ complexity, based on internal and external comparisons with equivalent hospitals in Portugal and Spain. The performance assessment methodology is based on the comparison of performance with standard values (indexed to risk), in which a better performance will have values between 0 and 1.

	CUF UNITS	PPP UNITS
Efficiency indicators		
AAPDI	0,17	1,07
Quality indicators		
RAMI	0,70	0,77
RACI	0,59	0,88
RARI	0,49	0,92

Caption:
Standard = 1.0 | Risk adjustment: Adjusted calculation of the likelihood of a given event occurring based on patient characteristics, type of admission, pathology and Healthcare Unit. Values resulting from the average between units.

AAPDI: Adjusted Average Pre-operative Delay Index Adjusted (programmed + urgent)
RAMI: Risk-adjusted Mortality Index
RACI: Risk-adjusted Complication Index
RARI: Risk-adjusted Readmission Index



6. CROSS-CUTTING AREAS

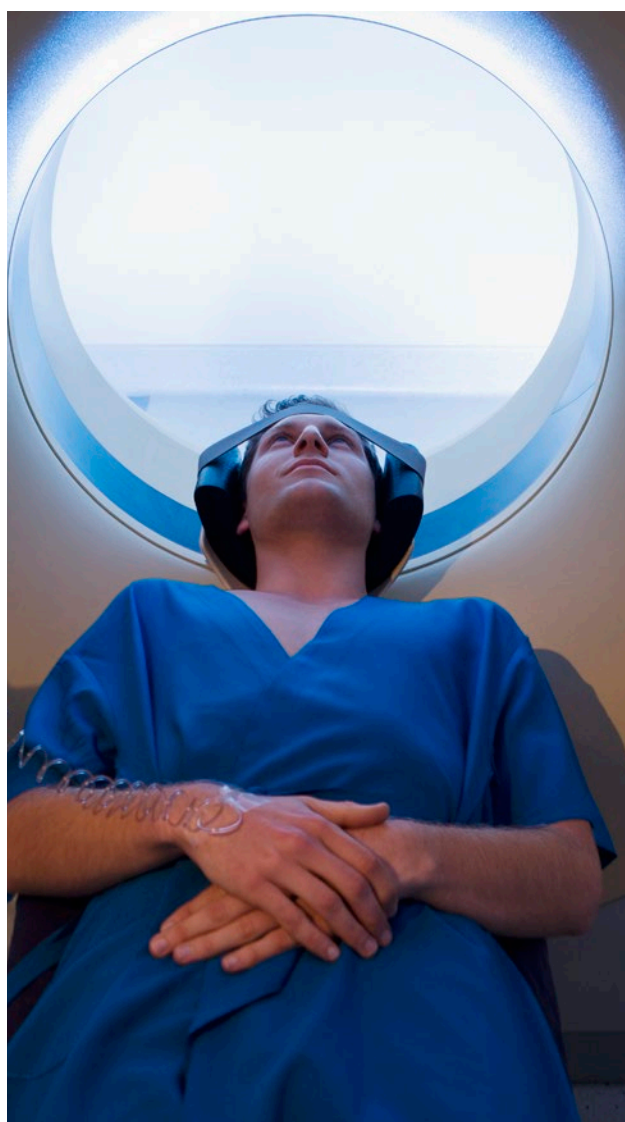
6.1 | CUF ONCOLOGY INSTITUTE

The CUF Oncology Institute articulates all of the network's required resources – professionals, equipment and facilities – in a focused and per-condition care model. Currently, CUF Oncology Institute has a national clinical board composed of four doctors, organized according to 13 per-condition integrated diagnosis and treatment units (IDTU), including the breast, lung, colorectal cancer, prostate, gynaecology, head and neck IDTUs, among others. The IDTUs are responsible for the definition and implementation of the necessary resources, clinical pathways, protocols and indicators of operational performance and clinical quality across the scope of their pathology. CUF Oncology Institute maintains a strong commitment of cooperation with the National Cancer Registry, contributing to the epidemiological study of cancer in Portugal and continuously evaluating and monitoring the survival rates of the patients treated entirely in the CUF network.

Maintaining the investment in the recognition of quality by certification and accreditation systems specific to cancer approach, in 2018, CUF Oncology Institute received the first certification audit to the Portuguese National Reference Centre for the treatment of rectal cancer by the quality benchmark of the ACSA International -- Andalusian Agency for Healthcare Quality. This certification was recently awarded on 5 February 2019 and will remain in effect for five years with the corresponding follow-up visits and with a new recertification process after that. Still last year, the acute palliative care unit of CUF Porto Hospital was recognized as an integrated oncology and palliative care centre by the European Society for Medical Oncology (ESMO), the same award received in 2015 by the palliative care unit of CUF Infante Santo Hospital.

In 2018, the CUF breast unit (integration of CUF Descobertas and CUF Infante Santo hospitals) successfully passed the follow-up audit of the EUSOMA – European Society of Breast Cancer Specialists clinical quality benchmark certification. This is one of the most prestigious international organizations in the area of breast-cancer clinical quality evaluation.

This certification confirms that the Lisbon breast unit of CUF Oncology Institute fully meets rigorous guidelines in the services provided to the patients, in the overarching organization and in the structuring of multidisciplinary teams, components which ensure clinical excellence and safety in the patients' treatment and diagnosis.



6.2 | INTEGRATED BREAST DIAGNOSTIC AND TREATMENT UNIT

Created over ten years ago, the Lisbon breast IDTU was the first private unit dedicated to the mammary pathology in Portugal, already having published data. This IDTU has a multidisciplinary team dedicated to and specialised in the diagnosis and treatment of breast cancer, with extensive experience in the early detection and in the approach to cancer in young women (<45 years of age). With highly qualified human resources and using innovative technology, the breast IDTU provides a timely response to the needs of those seeking its services, namely providing a differentiated breast cancer diagnosis in 48 hours. Combining all the necessary skills, the breast unit has the mission of:

- Providing excellent clinical care in the field of breast pathologies, particularly in breast cancer, permanently ensuring a suitable and innovative offering, considering all the needs of the patients and their care providers;
- Promoting health, preventing and combating breast cancer through awareness-raising and educational actions regarding the adoption of healthy habits and of early diagnosis;
- Cooperating in teaching and scientific research in the field of oncological disease. A member of SOLTI, the Breast Unit collaborates with the NMS/CEDOC and FML/Instituto de Medicina Molecular (Institute of Molecular Medicine).

In EUSOMA certification's first follow-up audit, the breast Unit fully met all clinical quality goals present in the benchmark, with an emphasis on:

INDICATOR	GOAL	EVALUATION
I3. Preoperative Diagnosis	80%	84%
I4. Complete characterisation of predictive and prognosis factors	90%	91%
I5. Time to wait between the first observation and the first treatment under six weeks	75%	62%
I7. Cases referred for genetic counselling	5%	5%
I8. Discussion in multidisciplinary meeting	90%	100%
I9. Percentage of patients with a single breast surgery	80%	97%
I10. Patients with surgery to preserve the breast who receive Radiotherapy	90%	100%
I12. Suitable treatment with hormone therapy	80%	89%

7. VALUE IN HEALTHCARE

7.1 | VALUE-BASED HEALTHCARE PROGRAMME

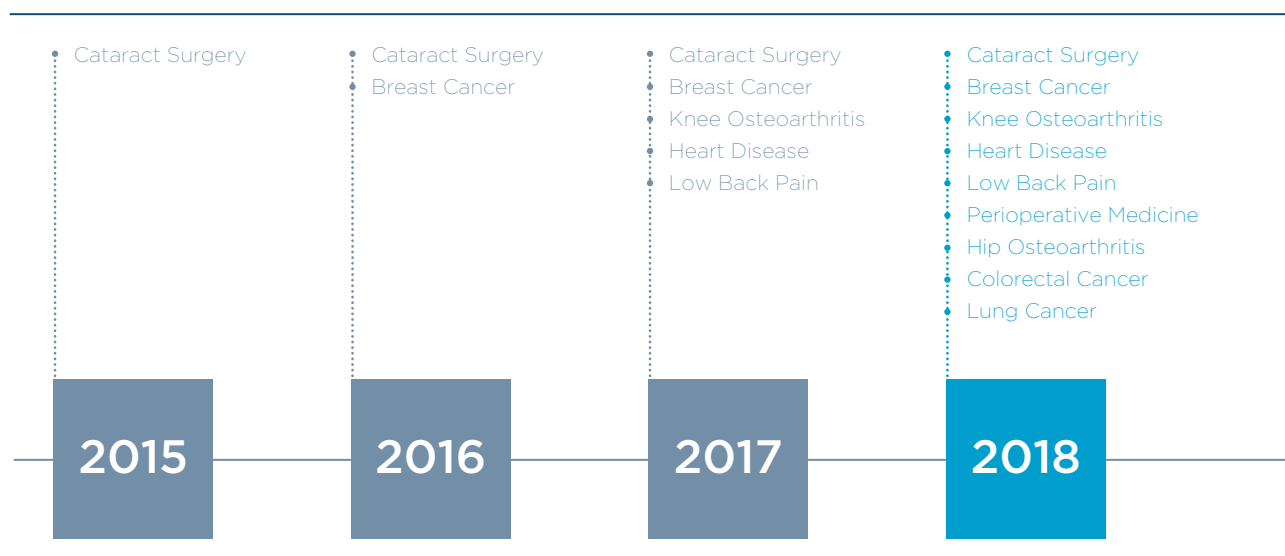
Consolidating the investment in a culture of quality and in a provision of healthcare focused on the patient, José de Mello Saúde, in line with the strategic development initiatives of the Differentiating Clinical Project, takes a value-creating position by exploiting the evaluation of results in health that are relevant to the patient, with a focus on the continuous improvement of the provision of healthcare.



Given its strategic vision for the organization, in 2018, José de Mello Saúde strengthened the Value-Based Healthcare programme. This strategic positioning is supported by the clinical Advisory, which operates as a driver to measure Value-Based Healthcare, identifying which diseases are clinically and strategically appropriate to handle within the scope of the implemented programme. Additionally, José de Mello Saúde will rely on this working group for debate, critical analysis and bolster significant subjects for the organization and for the national and international markets. It is also important to highlight that the success of the implementation depends on the commitment of the clinical leads that make the cause operational, with some of the elements of the clinical Advisory implementing such practices in their medical areas and hospital units.

Currently, this positioning keeps the focus on two complementary aspects, on the one hand to measure the results that are clearly significant for the patient and, on the other, to analyse the information to adopt solutions and improve practices seeking to also improve the quality of the provided services, striving toward its main priority, the creation of value for the patient.

In 2018, and in partnership with The International Consortium for Health Outcomes Measurement (ICHOM), José de Mello Saúde consolidated the processes to monitor value in healthcare in a wide range of diseases.



7.2 | MEASUREMENT OF CLINICAL OUTCOMES

The measurement of outcomes is performed by means of internal validation as well as an international application for the evaluation of the results obtained upon integration in the GLOBE benchmarking for what refers to cataract surgery - a programme which, in 2017, published the first preliminary reports for results adjusted to risk and which differentiates the multiple providers in terms of results and quality.

The goal of the network vision, ambition, and consistency becomes the measurement of clinical outcomes across all José de Mello Saúde units, including CUF hospitals and public-private partnerships. Currently, the programme has reached six of the ten hospitals, with a range from Lisbon to Braga. The commitment and dedication to the Value-Based Healthcare Programme is represented by the following figures:

In a perspective of future strategy and alignment with the clinical project, it is expected that the measurement of value per pathology be expandable to new pathologies and to other hospitals of José de Mello Saúde. It will also be important to ensure a constant validation of the information needed for use in internal management, inclusion in studies and evidence of clinical excellence. To that effect, José de Mello Saúde strengthened, in addition to the internal teams, the external relations, given that several strategic partnerships are ongoing, such as:

- Health Cluster Portugal, with the cataract surgery project
- NOVA Institute for Value Improvement in Health and Care - NOVA Saúde;
- Value4Health Collaborative Laboratory (FCT - JMS / NOVA / Vodafone / Fraunhofer consortium)





8. UNITS FACT SHEETS

CUF INFANTE SANTO HOSPITAL

CUF Infante Santo Hospital opened in 1945, was the founding facility of José de Mello Saúde, and was named CUF Hospital at that time. Currently, this is a reference unit in the country in terms of healthcare provision, with an encompassing and complete hospital service offering. Given its complex hospital profile, it responds with remarkable clinical performance which is evident from the clinical quality and safety results on which it is evaluated. In 2018, it consolidated its investment in the creation of value by implementing two other pathologies in the scope of the Value-Based Healthcare programme, now measuring clinical outcomes for the cataract disease, back pain and breast cancer.

With regard to the development of teaching and research activities, it is one of the best examples of the successful association between José de Mello Saúde and the Medical School at the Universidade Nova de Lisboa.

CUF Infante Santo Hospital

Structure		
Inpatient beds (total)	149	
Operating theatres	8	
Consultation rooms	71	
SINAS	1st level of evaluation	2nd level of evaluation
Clinical excellence	★	Intensive Care Unit: 3+
Patient safety	★	3+
Comfort of facilities	★	3+
User focus	★	3+
User satisfaction	★	Starting evaluation
Quality indicators	Indicator	
RAMI	0,78	
RACI	0,56	
RARI	0,53	
Performance assessment methodology based on the comparison of performance with standard values, in which a better performance will have values between 0 and 1. RAMI: Risk-adjusted Mortality Index RACI: Risk-adjusted Complication Index RARI: Risk-adjusted Readmission Index		
Complexity	Overall	
Case mix index	0,94	
Patient safety		
Type of incident (%): (Medication/Intravenous fluids)	20%	Medication/Intravenous fluids, most common type of incident
Patient falls (%)	0,05%	Number of patient falls per 100 days of hospitalisation
Safe surgery (%)	94,7%	Completed surgical safety checklists rate
Overall rate of hand sanitising*	67%	WHO/DGS rating: Satisfactory



CUF DESCOBERTAS HOSPITAL

Inaugurated in 2001, CUF Descobertas Hospital is one of the most modern hospital units of the country, with a wide range of services which include a strong orthopaedic unit that welcomes specialized clinical centres, with internationally renowned reputation. In 2018, it reinforced its service offering with the opening of Building 2 in CUF Descobertas Hospital. This unit practises most medical and surgical specialties, having a case mix index explained by the profile of some specialties, such as obstetrics, paediatrics and ophthalmology.

In 2018, it presented excellent quality and clinical safety results expressed, which are expressed in the multiple evaluation indicators, namely the classification of 3+ in outpatient surgery and orthopaedics (hip and knee replacement), in the dimension of clinical excellence of the SINAS evaluation. In 2018, it consolidated the measuring of clinical outcomes for cataract diseases, breast cancer and knee osteoarthritis, and more recently for hip osteoarthritis.

CUF Descobertas Hospital

Structure		
Inpatient beds (total)	170	
Operating theatres	12	
Consultation rooms	114	
SINALS	1st level of evaluation	2nd level of evaluation
Clinical excellence	★	Outpatient Surgery: 3+ Hip and Knee Replacement: 3+
Patient safety	★	3+
Comfort of facilities	★	3+
User focus	★	3+
User satisfaction	★	Starting evaluation
Quality indicators	Indicator	
RAMI	0,56	
RACI	0,62	
RARI	0,62	
Performance assessment methodology based on the comparison of performance with standard values, in which a better performance will have values between 0 and 1. RAMI: Risk-adjusted Mortality Index RACI: Risk-adjusted Complication Index RARI: Risk-adjusted Readmission Index		
Complexity	Global	
Índice de Case-Mix	0,64	
Patient safety		
Type of incident (%): (Medication/Intravenous fluids)	20%	Medication/Intravenous fluids, most common type of incident
Patient falls (%)	0,07%	Number of patient falls per 100 days of hospitalisation
Safe surgery (%)	98,6%	Completed surgical safety checklists rate
Overall rate of hand sanitising*	72,7%	WHO/DGS rating: Satisfactory



CUF PORTO HOSPITAL

CUF Porto Hospital opened in June 2010, marking an important milestone in private healthcare in the North of the country, providing a broad offer of medical and surgical specialties and of permanent adult and paediatric care. This unit stands out for its performance in all areas of assessment of quality and patient safety, especially by the 3+ rating in the area of outpatient surgery, in the dimension of clinical excellence of the SINAS evaluation.

In line with the Value-Based Healthcare programme, it began defining the processes for the measurement of clinical outcomes for the lung cancer, cataracts and knee osteoarthritis pathologies.

CUF Porto Hospital

Structure

Inpatient beds (total)	154
Operating theatres	12
Consultation rooms	73

SINAS

1st level of evaluation

2nd level of evaluation

Clinical excellence	★	Outpatient Surgery: 3+
Patient safety	★	3+
Comfort of facilities	★	3+
User focus	★	3+
User satisfaction	★	Starting evaluation

Quality indicators

Indicator

RAMI	0,76
RACI	0,58
RARI	0,45

Performance assessment methodology based on the comparison of performance with standard values, in which a better performance will have values between 0 and 1.
RAMI: Risk-adjusted Mortality Index | RACI: Risk-adjusted Complication Index | RARI: Risk-adjusted Readmission Index

Complexity

Global

Case mix index	0,71

Patient safety

Type of incident (%): (Medication/Intravenous fluids)	17%	Medication/Intravenous fluids, most common type of incident
Patient falls (%)	0,11%	Number of patient falls per 100 days of hospitalisation
Safe surgery (%)	95,4%	Completed surgical safety checklists rate
Overall rate of hand sanitising*	75%	WHO/DGS rating: Satisfactory



CUF CASCAIS HOSPITAL

CUF Cascais Hospital, running since 2008, offers inpatient care, a versatile intermediate care unit, permanent adults and paediatric care and a wide range of diagnostics solutions. The positive results in the various areas of clinical quality and safety in 2018 should also be highlighted. Once again, the rating of 3+ in the area of outpatient surgery and orthopaedics (hip and knee replacement), in the clinical excellence dimension of the SINAS evaluation should be noted. In 2018, the entire process for the measurement of clinical outcomes for cataract disease was consolidated.

CUF Cascais Hospital

Structure

Inpatient beds (total)	31
Operating theatres	3
Consultation rooms	44

SINAS	1st level of evaluation	2nd level of evaluation
Clinical excellence	★	Outpatient Surgery: 3+ Hip and Knee Replacement: 3+
Patient safety	★	3+
Comfort of facilities	★	3+
User focus	★	3+
User satisfaction	★	Starting evaluation

Quality indicators	Indicator
RAMI	0,97
RACI	0,59
RARI	0,37

Performance assessment methodology based on the comparison of performance with standard values, in which a better performance will have values between 0 and 1.
RAMI: Risk-adjusted Mortality Index | RACI: Risk-adjusted Complication Index | RARI: Risk-adjusted Readmission Index

Complexity	Overall
Case mix index	0,77

Patient safety		
Type of incident (%): (Clinical process/procedure)	24%	Clinical Process/Procedure; most common type of incident.
Patient falls (%)	0,10%	Number of patient falls per 100 days of hospitalisation
Safe surgery (%)	99,1%	Completed surgical safety checklists rate
Overall rate of hand sanitising*	76,5%	WHO/DGS rating: Very satisfactory



CUF TORRES VEDRAS HOSPITAL

CUF Torres Vedras Hospital, which started its activity in 2008, provides inpatient care and permanent adult and paediatric care. It offers a wide range of specialties, and the key specialties are orthopaedics and general surgery. It also offers good clinical performances in the areas of quality and patient safety. The rating of 3+ in the area of outpatient surgery in the clinical excellence dimension of the SINAS evaluation is noteworthy.

CUF Torres Vedras Hospital

Structure		
Inpatient beds (total)	16	
Operating theatres	3	
Consultation rooms	28	
SINAS	1st level of evaluation	2nd level of evaluation
Clinical excellence	★	Outpatient Surgery: 3+
Patient safety	★	3+
Comfort of facilities	★	2+
User focus	★	3+
User satisfaction	★	Starting evaluation
Quality indicators	Indicator	
IMAR	0,51	
ICAR	0,44	
IRAR	0,16	
Performance assessment methodology based on the comparison of performance with standard values, in which a better performance will have values between 0 and 1. RAMI: Risk-adjusted Mortality Index RACI: Risk-adjusted Complication Index RARI: Risk-adjusted Readmission Index		
Complexity	Overall	
Índice de Case-Mix	0,79	
Patient safety		
Type of incident (%): (Management of the patient journey)	28%	Management of the Patient Journey; most common type of incident.
Patient falls (%)	0,04%	Number of patient falls per 100 days of hospitalisation
Safe surgery (%)	99,9%	Completed surgical safety checklists rate
Overall rate of hand sanitising*	72%	WHO/DGS rating: Satisfactory



CUF SANTARÉM HOSPITAL

CUF Santarém Hospital was inaugurated in 2015, framed in the strategy of growth and geographic expansion of José de Mello Saúde, featuring a broad offer of medical and surgical specialties from the start. In 2018, it reinforced its culture of quality and patient safety via the external evaluation by the Portuguese Healthcare Regulation Authority (Entidade Reguladora da Saúde - ERS) in certain SINAS areas, and by participating in the IAmetrics's clinical indicators benchmarking programme, thus proposing an evaluation of its performances by comparison, in the dimensions of clinical efficiency and quality, and in which it obtained results with positive contributions and which reflect its good performance.

Within the scope of the Value-Based Healthcare programme, and extrapolating the ICHOM measurement guidelines, it implemented and applied methodologies for the evaluation of results in perioperative medicine.

CUF Santarém Hospital

Structure		
Inpatient beds (total)	26	
Operating theatres	3	
Consultation rooms	22	
SINAS	1st level of evaluation	2nd level of evaluation
Clinical excellence	—	—
Patient safety	★	3+
Comfort of facilities	★	2+
User focus	★	3+
User satisfaction	★	Starting evaluation
Quality indicators	Indicator	
RAMI	0,42	
RACI	0,60	
RARI	0,24	
Performance assessment methodology based on the comparison of performance with standard values, in which a better performance will have values between 0 and 1. RAMI: Risk-adjusted Mortality Index RACI: Risk-adjusted Complication Index RARI: Risk-adjusted Readmission Index		
Complexity	Overall	
Índice de Case-Mix	0,84	
Patient safety		
Type of incident (%): (Management of the patient journey)	22%	Management of the Patient Journey; most common type of incident.
Patient falls (%)	0,05%	Number of patient falls per 100 days of hospitalisation
Safe surgery (%)	99,0%	Completed surgical safety checklists rate
Overall rate of hand sanitising*	65%	WHO/DGS rating: Satisfactory



CUF VISEU HOSPITAL

CUF Viseu Hospital was inaugurated in 2016, and has a broad offering of medical and surgical specialties, complementary means of diagnosis and specialty examinations, thus contributing to the improvement of access to healthcare in the region. It immediately followed the culture of quality and patient safety inherent to all of José de Mello Saúde's network of units.

In 2018, it reinforced its culture of clinical quality and safety via the external evaluation by the Portuguese Healthcare Regulation Authority (Entidade Reguladora da Saúde – ERS) in certain SINAS areas. It strengthened the monitoring and evaluation processes of its clinical performance, by comparison, via the IAmetrics clinical benchmarking programme, of a set of indicators in which it presents a positive and consolidated performance.

CUF Viseu Hospital

Structure

Inpatient beds (total)	32
Operating theatres	5
Consultation rooms	34

SINAS

1st level of evaluation

2nd level of evaluation

Clinical excellence	—	—
Patient safety	★	3+
Comfort of facilities	★	3+
User focus	★	3+
User satisfaction	★	Starting evaluation

Quality indicators

Indicator

RAMI	0,48
RACI	0,78
RARI	0,25

Performance assessment methodology based on the comparison of performance with standard values, in which a better performance will have values between 0 and 1.
RAMI: Risk-adjusted Mortality Index | RACI: Risk-adjusted Complication Index | RARI: Risk-adjusted Readmission Index

Complexity

Overall

Case mix index	0,81

Patient safety

Type of incident (%): (Medical device / equipment)	24%	Medical device / equipment, most common type of incident.
Patient falls (%)	0,09%	Number of patient falls per 100 days of hospitalisation
Safe surgery (%)	99,2%	Completed surgical safety checklists rate
Overall rate of hand sanitising*	76%	WHO/DGS rating: Very satisfactory



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CUF COIMBRA HOSPITAL

In 2018, CUF Coimbra Hospital became part of the CUF hospital network. Since then, CUF Coimbra Hospital reorganized its activity, incorporating methodologies and processes used in the remaining units of the CUF network, from implementing a new version of the IT system, to altering the infrastructure to improve accessibility and comfort for the customers, and increasing the offering, adding features such as the oncological outpatient hospital, paediatric consultation and a collection site for the execution of clinical pathology examinations in the unit.

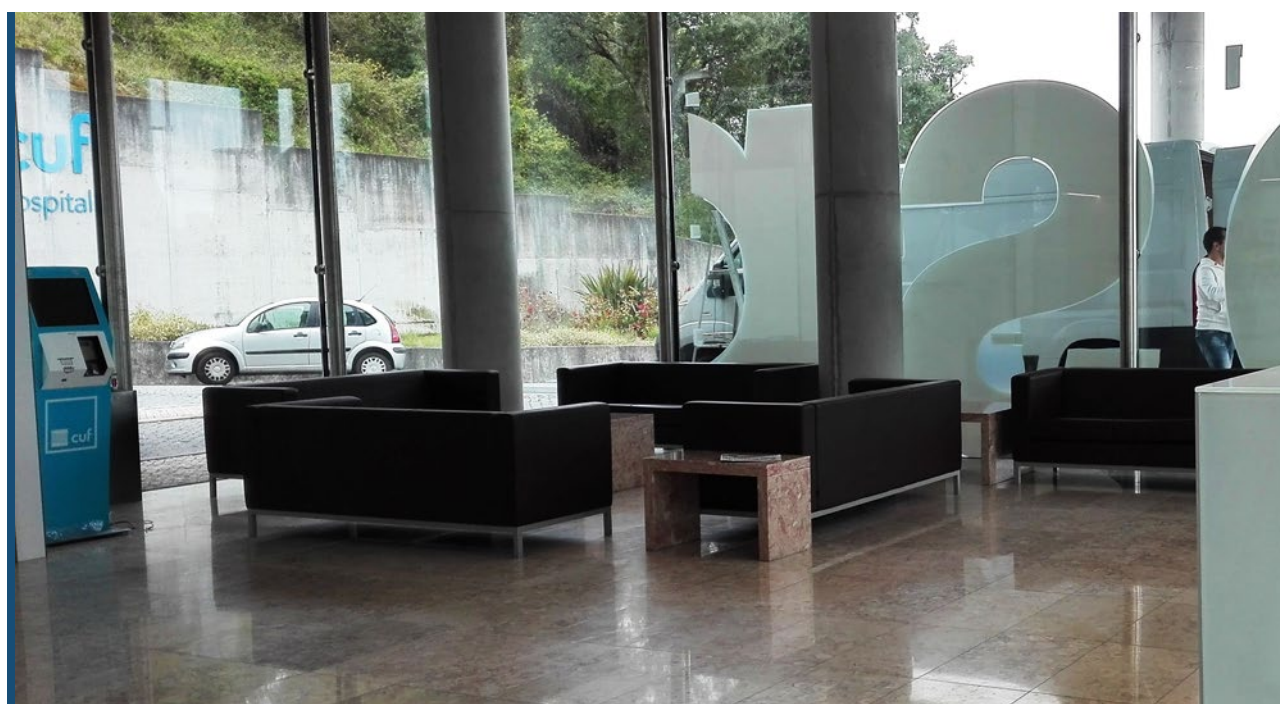
CUF Coimbra Hospital currently has a broad offering, organized into 24 consultation offices, 21 inpatient beds, four surgical block rooms, one room for minor surgery and a team of professionals of excellence.

CUF Coimbra Hospital reinforces José de Mello Saúde's position of leadership in the Portuguese market and is part of the strategy for expansion in the country through a value-generating growth agenda and complementing the culture of quality and safety for the patient, inherent to all units of the CUF network.

CUF Coimbra Hospital

Structure		
Inpatient beds (total)	21	
Operating theatres	5	
Consultation rooms	24	
Complexity		Overall
Case mix index	0,77	—

Case mix index for the last quarter of 2018, being the reason why the unit began the process of coding inpatient care (medical and surgical) and outpatient surgery events.



BRAGA HOSPITAL

Braga Hospital is a Portuguese National Health Service facility which has been managed by José de Mello Saúde, under a public-private partnership, since 2009. This is a teaching hospital with a strong undergraduate medical training activity, strongly defined by the partnership with the School of Health Sciences of the University of Minho, also dedicated to teaching and clinical research. It offers most medical and surgical specialties, obtaining good performance results in the different areas of clinical quality according to the goals and objectives to meet. Braga Hospital was the best ranked in the SINAS evaluation by having been awarded the highest level of clinical excellence (+3) in eight specialties: cardiology – acute myocardial infarction; outpatient surgery; intensive care – ICU; cross-cutting care: venous thromboembolism during hospitalisation; neurology – cerebrovascular accident (CVA); obstetrics – births and prenatal care; orthopaedics – surgical correction of proximal fracture of the femur; and paediatrics – neonatal care.

Braga Hospital

Structure		
Inpatient beds (total)	658	
Operating theatres	26	
Consultation rooms	128	
SINAS	1st level of evaluation	2nd level of evaluation
Clinical excellence	★	8 Specialties with rating of: 3+
Patient safety	★	3+
Comfort of facilities	★	3+
User focus	★	3+
User satisfaction	★	Starting evaluation
Quality indicators	Indicator	
RAMI	0,70	
RACI	0,91	
RARI	0,91	
Performance assessment methodology based on the comparison of performance with standard values, in which a better performance will have values between 0 and 1. RAMI: Risk-adjusted Mortality Index RACI: Risk-adjusted Complication Index RARI: Risk-adjusted Readmission Index		
Complexity	Overall	
Case mix index	0,75	
Patient safety		
Type of incident (%): (Patient falls)	33%	Patient falls, most common type of incident.
Patient falls (%)	0,12%	B17 management contract indicator: falls in inpatient care per 100 days
Safe surgery (%)	83,4%	Completed surgical safety checklists rate
Overall rate of hand sanitising	86,3%	WHO/DGS rating: Very satisfactory



VILA FRANCA DE XIRA HOSPITAL

Vila Franca de Xira Hospital is also a unit of the Portuguese National Health Service operated under a public-private partnership by José de Mello Saúde since June 2011, which began its operations in the new facilities in 2014, ensuring the provision of healthcare services under excellent conditions. Similarly, the unit is committed to a culture of quality and safety for the patient and it periodically and systematically tracks evaluation indicators for the different areas, in which it showed good performances. In 2018, Vila Franca de Xira Hospital was awarded the highest level of clinical excellence (3+) in four specialties: outpatient surgery; general surgery – colon surgery; neurology – CVA; and obstetrics – births and prenatal care.

Vila Franca de Xira Hospital

Structure		
Inpatient beds (total)	313	
Operating theatres	16	
Consultation rooms	33	
SINAS	1st level of evaluation	2nd level of evaluation
Clinical excellence	★	4 Specialties with rating of: 3+
Patient safety	★	3+
Comfort of facilities	★	3+
User focus	★	3+
User satisfaction	★	Starting evaluation
Quality indicators	Indicator	
RAMI	0,87	
RACI	0,82	
RARI	0,93	
Performance assessment methodology based on the comparison of performance with standard values, in which a better performance will have values between 0 and 1. RAMI: Risk-adjusted Mortality Index RACI: Risk-adjusted Complication Index RARI: Risk-adjusted Readmission Index		
Complexity	Overall	
Case mix index	0,70	Grouper reference: AP21
Patient safety		
Type of incident (%): (Patient falls)	35%	Patient falls, most common type of incident.
Patient falls (%)	0,11%	B17 management contract indicator: falls in inpatient care per 100 days
Safe surgery (%)	99,97%	Completed surgical safety checklists rate
Overall rate of hand sanitising	78,8%	WHO/DGS rating: Very satisfactory



9. GLOSSARY

CLINICAL CODING (HDGS)

Healthcare provision at all José de Mello Saúde facilities is classified and grouped into homogeneous diagnostic groups (HDGs), a classification system used for inpatients in acute hospitals that groups patients into clinically coherent and similar groups from the point of view of the consumption of resources.

The major diagnostic categories (MDC) correspond to an organic system or aetiology, usually associated with a particular medical specialty, and constitute the first step in grouping episodes of homogeneous diagnostic groups (HDGs) and are carried out according to the main diagnosis.

The HDGs are grouped on the basis of the coding of diagnoses, co-morbidities and procedures identified during treatment. Other factors that may influence HDGs are, for example, the patient's age or, in the case of new-born infants, their weight at birth.

In the PPP facilities (i.e. public-private partnerships) – Braga Hospital and Vila Franca de Xira Hospital – the HDGs form the basis of the contractual relationship. In the private units, the HDGs are the basis for the clinical governance system, ensuring the management and control of quality indicators. At these facilities, the task of clinical coding is carried out by a team of 18 encoding doctors and three auditors.

CASE MIX INDEX

An overall production weighting coefficient which reflects the relativity of any given hospital against others in terms of their greater or lesser proportion of patients with complex pathologies and, consequently, higher consumption of resources.

The index is determined by calculating the ratio between the number of equivalent patients weighted by the relative weights of the respective HDGs and the total number of equivalent patients.

IAMETRICS INDICES

Risk-adjusted mortality, complications and readmissions rate, i.e. the actual recorded rate weighted by the individual probability of each episode happening, taking into account a number of previously established indicators.







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CLINICAL QUALITY
AND SAFETY REPORT

2018