

HAMPSHIRE COUNTY COUNCIL

Report

Committee:	Health and Adult Social Services (Overview and Scrutiny) Committee
Date:	20 November 2018
Title:	Update from Hampshire Hospitals NHS Foundation Trust (HHFT) on Care Quality Commission Inspection June 2018
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1. Purpose of Report

This paper updates the Scrutiny Committee on issues being taken forward by Hampshire Hospitals NHS Foundation Trust (HHFT). In relation to the Care Quality Commission (CQC) Inspection of HHFT

2. CQC Action Plan

In June this year, the CQC undertook an Inspection of Surgical care, Medical care (including older peoples' care) and Urgent and Emergency services at the three hospitals operated by HHFT, as well as a 'Well Led' Inspection with the Board and the Executives. The final inspection report was published in September and resulted in an overall rating of Requires Improvement.

In the 5 key domains the CQC rated the Trust as; Good in Caring and Requires Improvement in Safe, Effective, Responsive and Well Led.

Following the inspection visit the Trust was issued with an Urgent notice of decision to impose conditions on the provision of services in the Emergency Departments (ED) at Basingstoke and Winchester (S31), a Warning Notice (S29A) to significantly improve services in other specific areas and a series of Must and Should Do actions from the final inspection report.

Action plans for all three elements have been developed to ensure sustainable change and the implementation of the action plan is overseen by the Trust's Chief Executive at a monthly Executive Oversight meeting and by the Chief Nurse at the weekly action plan meeting. The Commissioners, CQC and NHS Improvement are also invited to this meeting to gain

independent assurance of progress. The Board of Directors receive an update on progress against the Action Plan via its monthly Governance Report and assures itself of compliance via that route.

S31 Emergency Departments

The Trust initiated immediate actions to improve patient safety in the Emergency Departments at HHFT and embed changes. The Operations Director of the division is leading the ED improvement actions with the Clinical Director for both Emergency Departments. The executive lead for the improvement is the Chief Executive.

The immediate actions taken included the development of a paediatric waiting area in Basingstoke, ensuring that there is an appropriately paediatric trained member of staff on every shift and ensuring that there is an effective system in place to monitor the ongoing care and treatment of patients in both EDs. The improvements are monitored regularly with a weekly report submitted to the CQC on the progress made against the actions in addition to the internal reporting mechanism.

The Trust has also been successful in a winter pressure bid to NHS Improvement to a value of £4m. The majority of this money will be used in the redesign of the ED departments to provide a permanent paediatric assessment area at Basingstoke and an improved area at Winchester. The improvements also include the development of Rapid Assessment and Treatment Bays at both sites which will improve the patient flow through the departments

Warning Notice (S29A)

The warning notice identified a number of areas the CQC raised concerns about on the actual inspection and required to see rapid improvements and the Trust submitted an action plan to the CQC on the 17th August. Some specific areas of concern were in relation to:

- Ensuring patients are treated with privacy, dignity and respect
We have eliminated mixed sex lists in endoscopy, designated specific areas on C3 as single sex, improved the environment in Basingstoke ED and implemented 'hourly rounding' in a number of areas
- Risks to the health and safety to patients were not always assessed
We have implemented the National Early Warning System 2 into the Trust which enables the early identification of a deteriorating patient and are ensuring the WHO Safe Surgery Checklist is completed
- The availability appropriately skilled staff to deal with emergencies at Andover

We have reviewed the arrangements at Andover War Memorial Hospital (AWMH) for dealing with emergencies, provided additional training and equipment and ensured that all appropriate staff are confident in their role in an emergency.

- The safety of equipment

We have ensured that there is a robust programme to test and maintain equipment, provided additional resuscitation equipment and ensured that safety checks are carried out and documented

- Medicines management

The Chief Pharmacist has worked with Matrons to ensure that medicines are safely stored and managed. Regular audits are being carried out and staff have been reminded of the Trust Policy on Medicines Management

- Controlling the risk of infection

Our cleaning schedules in a number of areas has been reviewed and enhanced where required, staff have been reminded of the Infection Control Policy where appropriate

Must and Should Dos

The final inspection report was published at the end of September. The overall Inspection report identified a number of “Must Do” and “Should Do” actions for the Trust to implement. The actions in the S31 and the S29A warning notices are reflected in the “Must Do” and “Should Do” requirements as well as additional actions identified as regulatory breaches.

The full report is available at: <https://www.cqc.org.uk/provider/RN5>

All of the actions have been noted and a further action plan has been developed to ensure that they are addressed. The first draft was sent to CQC on 10th October and the plan continues to evolve and mature to ensure that the changes identified are implemented and sustained. This plan is monitored in the same way as the S31 and S29A plans.

In a number of areas the actions taken will build on those identified in the S29A action plan, these include:

Medicines management

In addition to the action taken for S29A the processes to ensure drugs are managed and stored appropriately have been reviewed and compliance is being audited every six months by pharmacy staff to ensure there is evidence of safe storage and management in all areas. This is in addition to the monthly audit carried out by ward staff.

Privacy and Dignity

As noted above the Trust implemented a number of actions to ensure the privacy and dignity of our patients was improved, and the trust will be taking further actions to ensure that the needs of patients with protected characteristics will be met. This includes the identification of 'safe spaces' for vulnerable adults and children in ED as well as on general wards.

HHFT has implemented all of the urgent changes that were required at the time of the visit and has briefed the CQC and commissioners on work undertaken.

Conclusion

The Trust recognises it still has improvements to make to ensure that all the actions identified by the CQC are embedded within the Organisation. We are expecting a follow up CQC visit before the end of the calendar year where we can demonstrate to the CQC the improvements that have already been made.