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| HEALTH SCRUTINY COMMITTEE | AGENDA ITEM No. 5 |
| 21 JANUARY 2019 | PUBLIC REPORT |

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| Report of: | North West Anglia NHS Foundation Trust | |
| Contact Officer(s): | Jo Bennis, Chief Nurse | Tel. 01733 677991 |

NORTH WEST ANGLIA NHS FOUNDATION TRUST – CQC INSPECTION OUTCOME ACTION PLAN

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| R E C O M M E N D A T I O N S |
| <p>It is recommended that the Health Scrutiny Committee:</p> <p>1. Note the content of this update report</p> |

1. ORIGIN OF REPORT

1.1 This report is submitted upon a request from the Healthy Scrutiny Committee

2. PURPOSE AND REASON FOR REPORT

- 2.1
- To provide an update to the Committee on the actions put in place at Peterborough City Hospital following the publications of its CQC inspection report in October 2018 which rated the North West Anglia NHS Foundation Trust overall as ‘Requires Improvement’.
 - This report focuses in particular on the activity at Peterborough City Hospital – as per the request of the committee.

2.2 This report is for the Health Scrutiny Committee to consider under its Terms of Reference Part 3, Section 4 - Overview and Scrutiny Functions, paragraph No. 2.1 Functions determined by Council - Public Health and Scrutiny of the NHS and NHS providers.

3. BACKGROUND AND KEY ISSUES

3.1 Background

North West Anglia NHS Foundation Trust, which runs Peterborough City, Hinchingsbrooke and Stamford and Rutland Hospitals, was inspected by the Care Quality Commission over a period of five days in June and July 2018.

The Trust also runs Outpatient and Radiology Services at Doddington Hospital and the Princess of Wales Hospital, Ely. The Trust took on the running of these services in September 2017 and they were not included as part of the inspection regime.

This was the first inspection of the Trust since it was formed on 1 April 2017, as a result of the merger of Peterborough and Stamford Hospitals NHS Foundation Trust with Hinchingsbrooke Health Care NHS Trust.

Inspectors reviewed our services to ensure they are Safe, Effective, Caring, Responsive and Well-Led (which are the CQC’s five key lines of enquiry).

Prior to the merger, Peterborough and Stamford Hospitals was inspected in 2014 and was rated

as 'Good', Hinchingsbrooke Health Care NHS Trust was also rated 'Good' when it was re-inspected in 2016.

Inspectors reviewed the following core services at the Peterborough and Hinchingsbrooke sites (Stamford Hospital was not inspected):

| Hinchingsbrooke Hospital | Peterborough City Hospital |
|--|---|
| Urgent and Emergency Care Medical Care Surgery Critical Care Maternity Services End of Life Care Outpatients | Urgent and Emergency Care Medical Care |

All core services at Hinchingsbrooke Hospital were inspected because its previous ratings were dissolved at the point of the merger. This meant that Hinchingsbrooke Hospital did not have a rating for any of its core services prior to the inspection taking place.

In addition, inspectors carried out a Well-Led inspection to test the link between the overall management of the Trust and the quality of its services, and a Use of Resources inspection which was led by our regulator, NHS Improvement – these are new components to the inspection regime, which were introduced in 2017.

Inspectors provided high level verbal and written feedback at the time of the inspection, which enabled us to implement immediate actions, where necessary, plus develop, and subsequently work to, an action plan ahead of the report publication.

Following the inspection, in September, the Trust received a draft report for the purpose of factual accuracy checking prior to publication. We responded with more than 100 pages of factual accuracy amendments, but were disappointed to see that many of these inaccuracies were still published in the final report.

Inspection outcome

The CQC published its report on our Trust inspection in October 2018. The CQC gave the Trust the overall rating of 'Requires Improvement'. The Trust did not receive a rating for its Use of Resources inspection.

Ratings for the whole trust

| Safe | Effective | Caring | Responsive | Well-led | Overall |
|--|--|------------------------|------------------------|--|--|
| Requires improvement ↓ Sept 2018 | Requires improvement ↓ Sept 2018 | Good ↔ Sept 2018 | Good ↔ Sept 2018 | Requires improvement ↓ Sept 2018 | Requires improvement ↓ Sept 2018 |

Rating for acute services/acute trust

| | Safe | Effective | Caring | Responsive | Well-led | Overall |
|-------------------------------|--|--|------------------------|------------------------|--|--|
| Hinchingsbrooke Hospital | Requires improvement ↓ Sept 2018 | Requires improvement ↓ Sept 2018 | Good ↔ Sept 2018 | Good ↔ Sept 2018 | Requires improvement ↓ Sept 2018 | Requires improvement ↓ Sept 2018 |
| Stamford and Rutland Hospital | Good ↔ May 2014 | Good ↔ May 2014 | Good ↔ May 2014 | Good ↔ May 2014 | Good ↔ May 2014 | Good ↔ May 2014 |
| Peterborough City Hospital | Good ↔ Sept 2018 | Good ↔ Sept 2018 | Good ↔ Sept 2018 | Good ↔ Sept 2018 | Good ↔ Sept 2018 | Good ↔ Sept 2018 |
| Overall trust | Requires improvement ↓ Sept 2018 | Requires improvement ↔ Sept 2018 | Good ↔ Sept 2018 | Good ↔ Sept 2018 | Requires improvement ↓ Sept 2018 | Requires improvement ↓ Sept 2018 |

The summary of ratings for each of our two main hospital sites showed Peterborough City Hospital was rated overall as 'Good' although it identified four of the five key lines of enquiry for our Urgent and Emergency Care Service 'Required Improvement'.

Hinchingbrooke Hospital received the overall rating of 'Requires Improvement' – although it also achieved an 'Outstanding' for the Caring aspect of the End of Life Care service provided to patients.

See the table below for the ratings for each core service at each site:

Peterborough City Hospital

| | Safe | Effective | Caring | Responsive | Well-led | Overall |
|--|--|--|------------------------|--|--|--|
| Urgent and emergency services | Requires improvement ↓ Sept 2018 | Requires improvement ↓ Sept 2018 | Good ↔ Sept 2018 | Requires improvement ↓ Sept 2018 | Requires improvement ↓ Sept 2018 | Requires improvement ↓ Sept 2018 |
| Medical care (including older people's care) | Good ↑ Sept 2018 | Good ↑ Sept 2018 | Good ↑ Sept 2018 | Good ↔ Sept 2018 | Good ↑ Sept 2018 | Good ↑ Sept 2018 |
| Surgery | Good May 2014 | Good May 2014 | Good May 2014 | Good May 2014 | Good May 2014 | Good May 2014 |
| Critical care | Good May 2014 | Good May 2014 | Good May 2014 | Good May 2014 | Good May 2014 | Good May 2014 |
| Maternity | Good May 2014 | Good May 2014 | Good May 2014 | Good May 2014 | Good May 2014 | Good May 2014 |
| Services for children and young people | Good May 2014 | Good May 2014 | Good May 2014 | Good Jul | Good May 2014 | Good May 2014 |
| End of life care | Good May 2014 | Good Jul 2015 | Good May 2014 | Good May 2014 | Good May 2014 | Good May 2014 |
| Outpatients | Good May 2014 | N/A | Good May 2014 | Good May 2014 | Good May 2014 | Good May 2014 |
| Overall* | Good ↔ Sept 2018 | Good ↔ Sept 2018 | Good ↔ Sept 2018 | Good ↔ Sept 2018 | Good ↔ Sept 2018 | Good ↔ Sept 2018 |

Hinchingbrooke Hospital

| | Safe | Effective | Caring | Responsive | Well-led | Overall |
|--|-----------------------------------|-----------------------------------|--------------------------|-----------------------------------|-----------------------------------|-----------------------------------|
| Urgent and emergency services | Requires improvement Sept 2018 | Requires improvement Sept 2018 | Good Sept 2018 | Requires improvement Sept 2018 | Requires improvement Sept 2018 | Requires improvement Sept 2018 |
| Medical care (including older people's care) | Requires improvement Sept 2018 | Good Sept 2018 | Good Sept 2018 | Good Sept 2018 | Good Sept 2018 | Good Sept 2018 |
| Surgery | Requires improvement Sept 2018 | Good Sept 2018 | Good Sept 2018 | Good Sept 2018 | Good Sept 2018 | Good Sept 2018 |
| Critical care | Requires improvement Sept 2018 | Good Sept 2018 | Good Sept 2018 | Good Sept 2018 | Requires improvement Sept 2018 | Requires improvement Aug 2018 |
| Maternity | Requires improvement Sept 2018 | Good Sept 2018 | Good Sept 2018 | Good Sept 2018 | Requires improvement Sept 2018 | Requires improvement Sept 2018 |
| End of life care | Good Sept 2018 | Requires improvement Sept 2018 | Outstanding Sept 2018 | Good Sept 2018 | Good Sept 2018 | Good Sept 2018 |
| Outpatients | Good Sept 2018 | N/A | Good Sept 2018 | Good Sept 2018 | Good Sept 2018 | Good Sept 2018 |
| Overall* | Requires improvement Sept 2018 | Requires improvement Sept 2018 | Good Sept 2018 | Good Sept 2018 | Requires improvement Sept 2018 | Requires improvement Sept 2018 |

The inspection report detailed specific areas where each of the core services inspected must improve. The following improvements were listed for Urgent and Emergency Care at Peterborough City Hospital:

- The Trust must ensure that mandatory training attendance improves to ensure that all staff are aware of current practices
- The Trust must ensure that systems are put in place to ensure the oversight of checking equipment
- The Trust must ensure patient records are complete, contemporaneous and inclusive of completed risk assessments relevant to patient care
- The Trust must ensure fridge temperatures and the temperature of the room where medicines are stored are routinely monitored and action taken to minimise any risks to patients
- The Trust must ensure that effective systems and processes are in place to safeguard patients from abuse and improper treatment.

In addition, the inspection report listed 27 ‘must improve’ items for the seven core services at Hinchingbrooke Hospital. See appendix 1 for the full details of these items.

The report also listed areas where it recommended the Trust should make improvements. This included the following for the Urgent and Emergency Care service at the Peterborough City Hospital site:

- The Trust should ensure that paediatric waiting areas are audio and visually separated from adult waiting areas
- The Trust should ensure they complete, monitor and update action plans in relation to the Royal College of Emergency Medicine audits
- The Trust should ensure that reception staff are trained and competent in recognition of red flag signs and symptoms, to allow for timely escalation of critically unwell or injured patients who self-present to the emergency department.

The report also listed 28 ‘should improve’ items for the seven core services at Hinchingbrooke Hospital. See appendix 1 for the full details of these items.

Post report actions

Since the publication of the inspection report, we have been able to resolve most of the ‘must improve’ actions. The lessons learned from the recommendations can be applied across all our sites and we are using this approach to ensure we make positive improvements consistently across all our core service areas.

We continue to work to a detailed action plan of remaining improvements. Progress against this plan is reviewed at our monthly CQC Steering Group meetings, which are chaired by our Chief Executive. Our plan was submitted to the CQC on 3 December 2018 to show our compliance against key areas highlighted in the report.

The Trust is continuing with its own CQC-style internal inspections of ward areas (CREWS) across all three hospital sites to maintain assurance that services are consistently run to high standards of care. In addition, our Chief Nurse, Jo Bennis, leads senior-level walkabouts across our hospitals to see first-hand the improvements in action. Plus, we regularly welcome colleagues from other external organisations to conduct their own assurance visits.

The Trust has since fed back to the CQC on aspects of the inspection that caused concern among our senior management team. These aspects included:

- We submitted more than 100 pages of feedback on the draft report with factual accuracies, most of which were not corrected before the report was published
- Inspectors did not acknowledge the work still in progress as a result of our merger or that we are still in the early days of progressing on integration and our clinical strategy – in fact there were no inspectors on the inspection team that had previous experience of reviewing recently-merged trusts, which was a request made by the Trust ahead of the inspection
- Looking at the areas of good within the report, it is hard to see how the overall aggregated rating of ‘Requires Improvement’ for the Trust was made.

The CQC has taken our feedback on board and we hope to receive some formal feedback.

4. CONSULTATION

4.1 N/A

5. ANTICIPATED OUTCOMES OR IMPACT

5.1 The Committee may be satisfied with the actions being taken to improve the rating or require further reports to monitor progress.

6. REASON FOR THE RECOMMENDATION

6.1 The Health Scrutiny Committee had requested an update on the actions being taken following the CQC Inspection report and overall rating of 'requires improvement'.

7. IMPLICATIONS

Financial Implications

7.1 The Trust may bear some additional financial costs in delivering the action plan of required improvements. It is not possible to predict the level of additional costs, but these are likely to relate to staff training for the most part.

Legal Implications

8.2 N/A

Equalities Implications

8.3 N/A

9. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

9.1 The Peterborough City Hospital CQC inspection report from June/July 2018 can be viewed here: <https://www.cqc.org.uk/location/RGN80>

10. APPENDICES

10.1 Appendix 1 – CQC Inspection Outcome

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