

# Our CQC report

**Yvonne Blücher** – Managing Director  
**Diane Sarkar** – Chief Nurse  
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# Introduction

- Thank you to everyone who worked so hard both in preparation for the inspection and in addressing the issues raised by the informal feedback
- Staff response was fantastic in reviewing the draft report for factual accuracy
  - 109 lines of factual accuracy changes
  - 79 (72.5%) were amended
  - 11 (10%) partially accepted
  - 19 (17.5%) rejected
- CQC took on board the factual accuracy updates and changed the context of the report positively
- The majority of our individual areas received good ratings and no areas rated inadequate
- The report describes the many positive and outstanding aspects of what we do, as well as the issues and challenges we face

# Our rating – ‘Requires Improvement’

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and emergency services	Good ↑ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018
Medical care (including older people's care)	Requires improvement ↔ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018	Good ↑ Apr 2018	Good ↔ Apr 2018	Good ↑ Apr 2018
Surgery	Good ↑ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018	Requires improvement ↓ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018
Critical care	Requires improvement Aug 2016	Good Aug 2016	Good Aug 2016	Good Aug 2016	Good Aug 2016	Good Aug 2016
Maternity	Requires improvement Aug 2016	Good Aug 2016	Good Aug 2016	Good Aug 2016	Good Aug 2016	Good Aug 2016
Services for children and young people	Good ↑ Apr 2018	Good ↑ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018	Good ↑ Apr 2018	Good ↑ Apr 2018
End of life care	Good ↑ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018	Good ↑ Apr 2018	Good ↑ Apr 2018	Good ↑ Apr 2018
Outpatients	Good Apr 2018	N/A	Good Apr 2018	Requires improvement Apr 2018	Good Apr 2018	Good Apr 2018
<b>Overall*</b>	Requires improvement ↔ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018	Requires improvement ↔ Apr 2018	Good ↑ Apr 2018	Requires improvement ↔ Apr 2018

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# How does that compare to 2016 ratings?

## 2016

- 24 Good
- 14 Requires Improvement
- 1 Outstanding

## 2018

- 34 Good
- 5 Requires Improvement

	Safe	Effective	Caring	Responsive	Well-led
Urgent and emergency services	Good	Good	Good	Good	Outstanding
Medical care (including older people's care)	Requires improvement	Good	Good	Requires improvement	Good
Surgery	Good	Good	Good	Requires improvement	Good
Critical care	Requires improvement	Good	Good	Good	Good
Maternity and gynaecology	Requires improvement	Good	Good	Good	Good
Services for children and young people	Requires improvement	Requires improvement	Good	Good	Requires improvement
End of life care	Requires improvement	Good	Good	Requires improvement	Requires improvement
Outpatients and diagnostic imaging	Requires improvement	Not rated	Good	Requires improvement	Requires improvement

	Safe	Effective	Caring	Responsive	Well-led
Urgent and emergency services	Good ↑ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018
Medical care (including older people's care)	Requires improvement ↔ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018	Good ↑ Apr 2018	Good ↔ Apr 2018
Surgery	Good ↑ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018	Requires improvement ↓ Apr 2018	Good ↔ Apr 2018
Critical care	Requires improvement Aug 2016	Good Aug 2016	Good Aug 2016	Good Aug 2016	Good Aug 2016
Maternity	Requires improvement Aug 2016	Good Aug 2016	Good Aug 2016	Good Aug 2016	Good Aug 2016
Services for children and young people	Good ↑ Apr 2018	Good ↑ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018	Good ↑ Apr 2018
End of life care	Good ↑ Apr 2018	Good ↔ Apr 2018	Good ↔ Apr 2018	Good ↑ Apr 2018	Good ↑ Apr 2018
Outpatients	Good Apr 2018	N/A	Good Apr 2018	Requires improvement Apr 2018	Good Apr 2018

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## Recap – the inspection

- The CQC inspection asked whether our services were **safe, effective, caring, responsive** and **well-led**
- The inspection was undertaken in two parts
  - The ‘safe’, ‘effective’, ‘caring’ and ‘responsive’ domains were inspected in November 2017
  - The new-style ‘well-led’ domain was inspected in December 2017
- Critical Care and Maternity were not inspected as CQC had no immediate concerns
- At the time of the inspection we were responding to significant winter pressures
- There were ongoing challenges around staffing numbers

# Recap – informal feedback themes

- Safe
  - Nurse staffing levels
  - Medical outliers
  - Environmental issues – clutter and cleanliness
  - Implementation of WHO checklist
  - Paediatric ED provision
  - Safeguarding training
  - Mental Health staffing and environment

## Areas of outstanding practice

- ED mobile rapid assessment and treatment team
- ED adoption of Luton & Dunstable triage tool and adaptation for patients with long term respiratory conditions
- Stroke unit 7-day TIA clinic supporting GPs with online triage tools
- Surgery participation in national network to promote best practice in management of sepsis
- Children and young people service participating in East of England HDU forum, establishing HDU admission criteria and using RCN 'time to move on' paper to improve consistency in the region

## Areas of outstanding practice

- End of life service staff going the extra mile for patients and loved ones, facilitating weddings and celebrating birthdays, as well as comfort packs, concessionary parking, family accommodation and mandatory training
- Renal outpatient services working with the local authority to coordinate support for patients with social needs, providing holistic care and improving health outcomes
- Urology percutaneous tibial nerve stimulation service a centre of excellence

# Positive highlights from the formal report

- Safe
  - Services for urgent and emergency care, surgery, children & young people, end of life and outpatient services all improved to a good rating
  - Good incident reporting and demonstrated learning from incidents
  - Improvement to ward based pharmacy service
  - Sepsis training compliance
- Effective
  - Services for children & young people and end of life improved to a good rating
  - Care and treatment based on national guidance and evidence of its effectiveness

# Positive highlights from the formal report

- Staff aware of roles and responsibilities in relation to the Mental Health Act and Mental Capacity Act
- Teams worked together to get the best outcomes for their patients
- Caring
  - Staff demonstrated care with compassion, dignity and respect for patients' needs
  - Involved patients and those close to them with care and treatment decisions and provided emotional support to their patients

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# Positive highlights from the formal report

- Responsive
  - Services for medical care and end of life improved to a good rating
  - Services planned and provided in a way that met the needs of local people and accessible to people who need them
  - Supporting patients with complex needs
  - Clinicians involved in decisions to cancel surgery
- Well-led
  - Services for children & young people and end of life improved to a good rating
  - Good systems in place for recognising and responding to risk
  - Action plans in place to deal with identified risks

# Issues raised in the formal report

- Safe
  - Mandatory and safeguarding training compliance
  - Nursing staffing
  - Mental Health suite and staffing
  - 24/7 Paediatric ED provision
- Effective
  - Annual appraisal rates
- Responsive
  - Referral to Treatment (RTT) compliance against standard
  - Medical outliers
  - Timeliness of response to complaints

# Requirement notices in the formal report

- Received three requirement notices telling us that we are not meeting legal requirements for some of our regulated activity around
  - Mental Health
  - Staffing
  - Complaints
- We must provide an action plan for meeting these standards by Friday 18 May

# Key actions arising from the formal report

- Safe
  - ✓ MUST ensure that mandatory training rates, particularly around safeguarding improves
  - ✓ MUST ensure that nurse staffing levels improve
  - ✓ MUST ensure that plans for improvement to the mortuary continue to progress
  - ✓ MUST ensure that processes are in place to ensure that patients requiring 1-1 care and enhances observations are protected from avoidable harm
  - ✓ MUST ensure that WHO checklist is embedded in areas where minor procedures are conducted

# Key actions arising from the formal report

- Effective
  - MUST ensure that annual appraisal rates improve
- Responsive
  - MUST ensure that complaints are handled in line with Trust policy and in a timely manner to identify areas for improvement and provide feedback to patients and the public
  - ✓ MUST ensure processes and systems to improve performance in referral to treatment (RTT) times continue to be developed, monitor performance and take action to address areas where operational standards are not being met

## What happens next?

- Corporate and directorate areas will be aware of the MUST DO actions required in their areas
- Notices that require evidence must be addressed in an action plan by Friday 18 May 2018
- CQC action plan is being updated and Trust action implemented
- Continue to embed actions already taken arising from informal feedback
- These plans will continue to be monitored by the directorate Governance Boards through weekly 'Maintaining High Standards' meetings, with weekly oversight from the Site Leadership Team and need full engagement and ownership from wards and departments to Board level

## What happens next?

- Check and challenge at monthly Directorate Performance Review meetings and Trust-wide overview via Trust governance arrangements
- Continue to work with partner Trusts and external stakeholders to address issues affecting patient flow and RTT standards
- Prepare for inspection of Critical Care and Maternity services hopefully within the year, and subsequent assessment of overall rating
- Implement internal CQC-style inspections on a rolling programme of two wards per month, which will extend to OPD shortly
- Ambition is extend to peer-review inspections across all three sites.

## Finally...

- Thank you to everyone who worked so hard to prepare for the inspection and spoke to the inspectors during their visit
- Remember that this is a **real improvement**, with ten areas improving from requires improvement to a good rating
- Our patients really benefit from these improvements and we need to sustain them!

# THANK YOU



# Questions and answers

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