

Report to: **East Sussex Health Overview and Scrutiny Committee (HOSC)**

Date: **16th June 2011**

By: **Director of Governance and Community Services**

Title of report: **East Sussex Healthcare NHS Trust – Care Quality Commission Inspection**

Purpose of report: **To enable HOSC to consider the Trust's response to the inspection**

RECOMMENDATIONS

HOSC is recommended:

- 1. To consider and comment on the Trust's response to the inspection reports.**
 - 2. To liaise with CQC in order to track progress in delivering the required actions.**
 - 3. To identify any specific areas where the Committee requires further information.**
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1. Background

1.1 East Sussex Healthcare NHS Trust (ESHT) is a major provider of health services for the residents of East Sussex. It is the main provider of acute hospital care for the county, including the two main hospital sites in Eastbourne and Hastings. From April 2011 the community health services previously managed by the East Sussex Primary Care Trusts (PCTs) transferred to the Trust. These include services such as health visiting, district nursing, community rehabilitation and community hospitals.

1.2 The Trust, which had previously been called East Sussex Hospitals NHS Trust, was renamed in April 2011 to reflect the wider range of services it now provides across over 110 sites in the county.

1.3 The Care Quality Commission (CQC) is the regulator of providers of health and social care services. All providers must register with the Commission in order to be able to provide care and they must demonstrate how they are meeting a set of essential standards of quality and safety. These standards are based around outcomes for patients, for example Outcome 4: Care and welfare of people who use services states that '*people who use services should experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights*'. Each outcome is broken down into more specific components.

1.4 Should CQC find that a provider is not meeting all of the required standards the Commission is able to take a range of actions ranging from requiring the provider to put in place improvement plans to requiring that immediate actions are taken to ensure that standards are met. Ultimately CQC could stop a service being provided, although this would be a last resort.

2. Care Quality Commission inspection

2.1 In February 2011 CQC undertook visits to the Trust (then East Sussex Hospitals NHS Trust) as part of an inspection of the Trust's services. The visits were part of CQC's planned inspection programme which covers all trusts, but were 'unannounced', i.e. the Trust did not know when CQC inspectors were planning to visit. CQC's inspection process includes the site visits, interviews with key staff and review of a range of documentation before, during and after the visits.

2.2 The inspection focused on the acute services provided by the Trust and involved visits to five Trust sites:

- Eastbourne District General Hospital (DGH): focusing on A&E, maternity and two wards

- Conquest Hospital: focusing on A&E, maternity and two wards
- Bexhill Hospital: focusing on the outpatient day surgery unit
- Uckfield Hospital: focusing on the outpatient day surgery unit
- The Birthing Unit at Crowborough Hospital

2.3 The inspectors focused their work on a selection of the outcomes set out in the national essential standards of quality and safety.

2.4 On 17th May 2011, CQC published reports detailing the findings of their inspection. There are five reports, one for each site visited. These reports have previously been circulated to HOSC Members and are available on the CQC website www.cqc.org.uk.

2.5 The reports highlighted a number of areas where required standards were not being met and where the Trust is required to take action to achieve compliance. In some cases immediate action was required; in others, actions will require a longer timescale. A summary of the main issues raised is included in the CQC press release attached at appendix 1.

2.6 Since the original visits in February, CQC inspectors have undertaken a follow-up visit to the Trust in April 2011 to assess progress. The report of this visit is not yet available. HOSC should also note that CQC undertook a further visit to the Trust in May 2011 as part of a separate national study being undertaken by the Commission into dignity and nutritional care for older people. The report of this visit is also not yet available.

3. Trust response

3.1 Darren Grayson, Chief Executive, Amanda Harrison, Director of Strategy and Shotham Kamath, Deputy Chief Nurse will attend the HOSC meeting to discuss the actions which have already been taken, and which will be taken, by the Trust in response to the CQC inspection.

3.2 A summary of actions taken by the Trust is attached at appendix 2. More detailed action plans are currently being finalised and will be circulated to HOSC for information when complete.

4. Issues for HOSC to consider

4.1 HOSC is invited to consider whether the Trust is taking all appropriate action in response to the CQC inspection.

4.2 CQC will monitor the Trust's progress in implementing the actions required by the Commission to achieve compliance with the required standards. Rather than duplicate this work by undertaking additional monitoring, HOSC is recommended to liaise with CQC to track progress through the Commission's own monitoring mechanisms.

4.3 The inspection reports and the Trust response may prompt HOSC to identify specific issues where the Committee requires further information. HOSC is invited to highlight any such areas now or as future updates are received. It should be noted that HOSC is already receiving regular updates on the development of the Trust's clinical strategy (including later on this agenda) and some issues highlighted by CQC will be taken forward through this work in the medium-longer term.

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Press release from the Care Quality Commission**Care Quality Commission finds East Sussex Hospitals NHS Trust failed to protect the safety and welfare of people who use its services**

17 May 2011

Care Quality Commission (CQC) inspectors have found that East Sussex Hospitals NHS Trust is failing to meet a number of essential standards of care for patients.

CQC carried out a review of all five hospitals which make up the East Sussex Hospitals NHS Trust in February this year as part of our routine schedule of planned reviews of NHS organisations.

CQC inspectors reviewed all the information we hold about this provider, carried out visits in February 2011, observed how people were being cared for, talked to people who use services, talked to staff, and checked the provider's records.

As a result, CQC raised immediate concerns with the trust's chief executive, demanding that the trust address problems identified in A&E, the maternity unit and the wards at Eastbourne District General Hospital and Conquest Hospital in Hastings. Inspectors required the chief executive to provide plans showing how the trust would improve to meet the essential standards.

Inspectors also identified that there were insufficient numbers of staff available to support proper patient care in some areas, that care plans and risk assessments were not completed or were inaccurate, that patient dignity was compromised by facilities and staff attitudes and that patient rights were not adequately respected.

At Eastbourne District General Hospital there were major concerns with five essential standards:

Care and welfare of people who use services: Comprehensive assessments of need were not always carried out and appropriately recorded for those patients tracked. Staff could not demonstrate through their nursing records that individual welfare and safety needs were met.

Safeguarding people who use services from abuse: CQC was concerned that staff did not understand adult safeguarding processes and did not recognise signs of abuse and how to raise them with the right person and in a timely fashion. The culture of care and the delivery of treatment in A&E and the wards lacked a personalised approach.

Staffing: There were long and short term staff shortages across the Trust and at all levels including consultants, middle grade doctors, qualified and unqualified nursing and midwifery staff. There was heavy reliance on locums and bank staff. There was clear evidence that this impacting negatively on the quality and safety of the service in the areas that we visited.

Supporting workers: There were inadequate arrangements in place to support staff with annual appraisals and supervision. Staff were not always able to meet the requirements laid down by their respective professional bodies. Not all staff had met their mandatory training needs. Staff reported low morale and not feeling valued by the trust.

Assessing and monitoring the quality of service provision: As a result of the issues identified we were significantly concerned about the effectiveness and efficiency of monitoring and audit arrangements at the trust, and the trust's ability to accurately assess and monitor the quality of the services being provided.

At the Conquest Hospital in Hastings there were major concerns about meeting seven essential standards:

Respecting and involving people who use services: People using the service were not treated in a way that promotes privacy and dignity. Inspectors observed and noted that involvement of people in care and treatment decisions were not routinely embedded in practice and that there were inadequacies in the amount of information provided to people to inform their choices.

Consent to care and treatment: Not all junior doctors were sufficiently trained or prepared to be able to obtain informed consent from patients. Low numbers of staff were trained in the safeguarding of vulnerable adults, and in the Deprivation of Liberty and Mental Capacity Act. Inspectors heard and observed that care and treatment decisions were routinely imposed upon patients, rather than informed consent being sought.

Care and welfare of people who use services: Comprehensive assessments of need were not always carried out and appropriately recorded for those patients tracked. Staff could not demonstrate through their nursing records that individual welfare and safety needs were met.

Safeguarding people who use services from abuse: CQC was concerned that staff did not understand adult safeguarding processes and did not recognise signs of abuse and how to raise them with the right person and in a timely fashion. The culture of care and the delivery of treatment in A&E and the wards lacked a personalised approach.

Staffing: There were long and short term staff shortages across the Trust and at all levels including Consultants, middle grade doctors, qualified and unqualified nursing and midwifery staff. There was heavy reliance on locums and bank staff.

Supporting workers: There were inadequate arrangements in place to support staff with annual appraisals and supervision. Staff were not always able to meet the requirements laid down by their respective professional bodies. Not all staff had met their mandatory training needs. Staff reported low morale and not feeling valued by the Trust.

Assessing and monitoring the quality of service provision: As a result of the issues identified both across the Trust and specifically within the Conquest hospital we were significantly concerned about the effectiveness and efficiency of monitoring and audit arrangements at the trust, as well as their usefulness in monitoring and changing the quality of the services being provided.

CQC's inspection team returned to East Sussex NHS Hospitals Trust at the end of April to undertake a further review and confirm that urgent action had been taken to address the major areas of concerns we raised.

By law, providers of care services have a legal responsibility to make sure they are meeting the essential standards of quality and safety. Inspectors will continue to review progress with the trust's plans to address the areas of concern, including making unannounced visits to the hospital. A further report on the Trust's progress will be published shortly.

Roxy Boyce, Regional Director of CQC in the South East, said:

"When we visited East Sussex Hospitals NHS Trust in February, we were so concerned about the quality of care provided to patients in many parts of Eastbourne District General Hospital and Conquest Hospital that we raised immediate concerns with the Trust.

"The essential standards of quality and safety laid down in law are the standards of care people should be able to expect in any hospital. These include respecting the dignity of patients, helping them to make informed choices about their care and treatment, ensuring their care and welfare and protecting them from unsafe practice and abuse. The care at East Sussex Hospitals NHS Trust fell far short of these standards.

"When we returned to the Trust in April to review progress, it was clear that the Trust has made considerable efforts to address the outstanding concerns. However, more needs to be done and the progress already made needs to be accelerated and sustained.

"We will continue to monitor their progress extremely closely and will make further unannounced visits. We have a range of enforcement options open to us, including restriction or closure of services, and we will not hesitate to take further action if we consider it necessary."

East Sussex Healthcare Trust

Response to the CQC Review of Compliance reports

Background

All NHS providers are required to be registered with the CQC. The East Sussex Healthcare Trust is registered with the CQC for the provision of services and regulated activities on 20 sites. Peripatetic services, for example, District Nursing, are not registered at a specific location but through our main Headquarters at the Conquest Hospital site. The CQC has set 16 core standards that all registered providers must comply with.

The CQC carried out a planned review of compliance at the Trust in February 2011. This included an unannounced inspection visit at five sites, Conquest Hospital, Eastbourne District General Hospital, Crowborough Birthing Unit, Bexhill Hospital and Uckfield Hospital. The compliance review was undertaken prior to the merger with East Sussex Community Services and the formation of East Sussex Healthcare Trust.

Since this initial visit the CQC has undertaken a further responsive visit to the two main hospital sites in April and also visited these two sites in May as part of the national review of dignity and nutrition in the care of older people. Further Review of Compliance reports will be issued by the CQC following these visits.

Trust Response

Following the publication of the CQC Reviews of Compliance Darren Grayson issued an immediate apology on behalf of the Trust saying:

"As Chief Executive of this Trust, it was with considerable dismay and concern that I read the CQC's reports on their findings when they visited the Trust in February 2011. I would like to apologise to our patients and the public that the identified areas of care have fallen below the expected standard. Most of our patients tell us that they get good care in our hospitals, but I cannot condone anything other than the highest standards of care and compassion for our patients.

It was clear to me that, whilst there were a number of very positive things said by our patients about us, we have further work to do to ensure the care we provide meets the highest standards in every case. It is also clear that we have not done ourselves justice as we were not able to demonstrate that we always provide the excellent care that our staff aspire to and that I personally would want for myself and members of my family. "

Since February's inspection the Trust has invested significant additional time and resource in making immediate improvements and in planning and beginning to implement the medium to long term changes required to deliver

sustainable improvements across all areas of concern and achieve compliance. Many of the improvement actions taken were already in train or planned at the time of the inspection and have been accelerated where required.

The Trust recognises that many of the concerns identified are a consequence of cultural and organisational issues that have a long history and will not respond to short term solutions. There have also been considerable changes in the organisation over the last year which have been designed to deliver sustainable improvement and the senior team is determined to turnaround performance in all aspects of the organisation.

Actions taken to date

Since the CQC inspection visit in mid-February, the Trust has taken robust action to address the issues raised. This includes:

- Ensuring staff routinely identify any issues that might compromise a patient's privacy and dignity. We have helped staff to do this by providing them with a tool to audit and improve the way they deliver care.
- An external review of privacy and dignity that is currently underway and will support the identification of good practice and identify any outstanding areas of concern so that these can be addressed.
- Working with the local authority and taking external advice on improving our safeguarding practice and processes. We have taken immediate action where concerns have been raised and involved the CQC and others in reviewing our progress and the completion of these actions.
- Completing the planned building work in both our Emergency Departments which has improved the environment for patients and removed the impact it was having on patients' privacy and dignity
- Continuing to push forward the programme of recruitment we already had in place which means that we have been able to recruit permanent staff into vacant posts. So far we have recruited a total of 70 new nurses, 22 of which are newly qualified and have started in substantive posts yesterday (16th May). Since the CQC inspection in February, six new consultants have started in posts and a further three have accepted posts following interview.
- An external review of maternity staffing levels, which has confirmed that these are safe. Our staffing levels in maternity are one of the best in the NHS South East Coast region. Of a midwifery establishment of 135 posts, 133 are filled and we are recruiting to the two vacant posts. We have also announced a review of our maternity provision to ensure that it remains sustainable in the long term.
- Continuing to ensure rotas are filled on a daily basis in all areas by using bank and agency staff where required.
- Ensuring care planning and risk assessments take place for all patients and that these are appropriately recorded. We are continuing to develop an integrated care record that ensures all clinical staff involved

in every patient's care are fully aware of the plans of care and risks in relation to each patient.

- Improving record keeping so that we can demonstrate that these now support improvements in patient care.
- Senior medical and nursing staff have reinforced the importance of obtaining appropriate consent and supporting all staff to improve communication and to involve patients in their care planning.
- Piloting an extended menu to offer an increased choice of food to patients. Early indications are it is being received well. We are also looking at ways to better support patients during meal times.
- Increasing our investment in cleaning by £520,000 including two teams of additional housekeepers on each site who enable us to respond quickly to any increased demand for cleaning staff.
- Introducing a new appraisal process for staff that supports them to identify their individual training needs to ensure that all our staff are skilled, capable and competent to do their jobs.

Further Action

Following the publication of the reports the Trust was given a time frame within which to submit an action plan to the CQC outlining the actions that would be taken to bring the Trust to full compliance against all standards. The latest version of this plan is currently with the CQC and the Trust is awaiting their comments on it. The action plans build on the actions outlined above and extends these to cover all areas of concern identified in the Review of Compliance reports.

The Trust Board will oversee the implementation of the plans and will ensure that progress is made and reported as required.

The CQC will carry out further assessments of the Trust compliance through unannounced inspections and reviews of evidence and data about Trust performance.

When finalised the action plans and progress reports will be presented at public Trust Board meetings and will be shared with HOSC members.