

Health Overview and Scrutiny Committee

29 September 2016

Brighton and Sussex University Hospitals (BSUH) NHS Trust Care Quality Commission (CQC) Inspection Report

Report by Lois Howell, Director of Clinical Governance, BSUH

1. Background

- 1.1. Brighton & Sussex University Hospitals NHS Trust (BSUH) delivers the majority of the services provided at the Princess Royal Hospital in Haywards Heath. The bulk of the services the Trust delivers are provided at the Royal Sussex County Hospital in Brighton, although there are also outposts of Trust services in Hove at the Polyclinic and at clinics in other hospitals across Sussex.
- 1.2. The Trust and its two principal locations were inspected by the Care Quality Commission (CQC) in April 2016. The inspection was conducted in accordance with the CQC's "new" inspection methodology, which concentrates on five key questions:
 - Are services safe?
 - Are services responsive?
 - Are services caring?
 - Are services effective?
 - Are services well-led?
- 1.3. The outputs of the inspection were three reports; one covering the Trust as a whole (the Provider Report) and one of each of the key locations: Royal Sussex County Hospital (RSCH) in Brighton and the Princess Royal Hospital (PRH) in Haywards Heath. The reports were published on 17 August 2016 and are in the public domain on the CQC's website.
- 1.4. The CQC has a complex metric which calculates Trust-wide overall ratings based on service ratings. As a result of the various findings of "inadequate" in specific services, the Trust has been given an overall rating of inadequate.
- 1.5. NHS Improvement (NHSI) is a further regulatory body, responsible for overseeing foundation trusts and NHS trusts, as well as independent providers that provide NHS-funded care. NHSI holds providers to account for the delivery of care which is consistently safe, high quality and compassionate, within local health systems that are financially sustainable.
- 1.6. NHSI operates a "special measures" regime for providers of particular concern. A key trigger for trusts to enter the special measures regime is a finding by the CQC that they are inadequate in respect of the safe / responsive / caring / effective / well-led tests.
- 1.7. As a result of the CQC's rating of BSUH as inadequate, NHSI has placed the Trust in Special Measures. This means, amongst other things, that the Trust

will remain under the regular and detailed scrutiny of both NHSI and the CQC to ensure that improvements are made to the quality of the Trust's services in those areas. The Trust will need to satisfy the CQC that services have improved in order for NHSI to consider removal of the Trust from the Special Measures regime. However, NHSI will also need to see certain improvements in respect of the Trust's financial position before the Trust can exit the Special Measures regime.

- 1.8. The Trust has therefore produced a detailed plan for improvement against each of the CQC's requirements for improvement (listed in the reports as "actions the organisation must take" and "actions the organisation should take"). The action plan was submitted to the CQC on 16 September 2016.
- 1.9. The CQC had previously alerted the Trust to a number of urgent concerns, raised with the Trust at the time of the inspection in April. This led to the issue to the Trust of a "Warning Notice" issued under section 29 of the Health & Social Care Act 2012. The Trust has been working to an action plan created in the response to the Warning Notice since April 2016. Many of the issues identified in the report are already well on the way to resolution. A summary of the actions already taken is attached as **Annex 1**. The CQC reviewed the Trust's achievements against the Warning Notice Action Plan at a meeting with the Trust on 19 September.
- 1.10. The Trust will be required to produce regular (probably monthly) updates on progress towards delivery of the required improvements to both NHSI and the CQC, and to make a summary of those updates publically available via the NHS Choices website.

Lois Howell
Director of Clinical Governance, BSUH

Annex 1

Improvement Actions since April 2016 CQC Report

Since the Care Quality Commission carried out their inspection of the Trust in April, significant improvements have already been made. These include:

Emergency Department redesign

A redesign of the assessment area in the Emergency Department at the Royal Sussex County Hospital (RSCH) has been completed. This has created a new area with more assessment cubicles to speed up the assessment process for patients arriving by ambulance. Further more widespread redesign is in the planning stage.

This work supports patients across Kent and Sussex who need the services of the Major Trauma Centre based at RSCH. Effective flow of patients at the RSCH also helps to reduce the need for occasional diversion of ambulances to the Emergency Department (ED) at the Princess Royal Hospital, which can cause surges in demand there.

Better management of emergency patients

Escalation processes have been changed to better manage emergency patients at the Royal Sussex County and Princess Royal Hospitals during periods of high demand.

Quality and Safety checklists

Patient quality and safety checklists have been implemented in the Emergency Department, incorporating 'comfort rounds' for patients awaiting a cubicle who have been brought in by ambulance.

Critical Care staffing

Critical care nurse staffing numbers have been increased with specialist neurosurgical critical care expertise.

BSUH Improvement Academy

A quality improvement programme has been launched called the 'BSUH Improvement Academy' which trains staff to identify where positive changes can be made in their area.

Hand Hygiene

The Trust has launched the campaign "Clean Hands Save Lives" to help ensure staff, patients and visitors regularly wash their hands in all its hospitals. Immediate action has also been taken on the Trust's hand hygiene policy with clinical areas being regularly audited. There has been a significant shift in compliance as a result.

Outpatient prescriptions

The processes for managing outpatient prescriptions at all sites have been revised to ensure they are in line with national standards.

Corporate Governance

New corporate governance structures and arrangements are being put in place to ensure the Trust Board, Executives and Directors have better oversight of safety and quality of care and that issues that need to be addressed can be identified more thoroughly. We are working to develop a culture of equality, fairness and accountability, with sustainable effective leadership, where patients are cared for in an appropriate environment.

Clinical Governance

The clinical governance throughout the Trust is being redesigned from 'Floor to Board' to ensure issues can be better identified and processes are improved to ensure high levels of patient care.

Programme Management Office

A Programme Management Office (PMO) has been created to manage the Trust-wide programmes to improve the quality and safety of care at all Trust sites.

Fire Safety

Fire risk assessments have been carried out and brought up-to-date across the Trust's sites to ensure patients are being treated in a safe environment.

Staffing Levels

Staffing levels have been reviewed to ensure there are numbers of staff in place across the Trust at all sites to ensure safe patient care.

Appointments

We have made a number of new senior appointments, including a Director of Strategy, Director of Performance and Director of Clinical Governance. These appointments have been supplemented by the appointment of a Turnaround Director and Improvement Director.

Monitoring and assurance

The Trust has first drafts of all metrics in integrated dashboard for 'Floor to Board' assurance on key Trust-wide and local service issues.

Medicine safety

Medicine safety has been improved throughout the Trust by improving the process for advanced nurse practitioners prescribing drugs.

'Repatriation' of out-of-area Patients

Agreement has been secured with all referring hospitals that patients are to be repatriated to their local hospital within 48 hours of completing treatment at the Trust. This means they will be closer to their families and friends and frees beds in the Trust for more acutely ill patients. This means that beds at the Princess Royal Hospital are more readily available when they are needed for both urgent and planned care.