

## Care Quality Commission Report – March 2018 Inspection

### 1. Introduction

The Care Quality Commission (CQC) published reports in June 2018 following an inspection of East Sussex Healthcare NHS Trust (ESHT) in March 2018. The CQC commended the Trust on its notable improvements and the good, outstanding and innovative practice observed during the inspection. The CQC recommended to NHS Improvement (NHSI) that the Trust no longer met the criteria to be in Special Measures for Quality and NHSI accepted this recommendation. The Trust remains in Special Measures for Finance.

### 2. Findings

The CQC inspected both acute sites, Eastbourne District General Hospital (DGH) and Conquest Hospital, in March 2018 and reviewed services against the five domains of safe, effective, caring, responsive and well-led. Services inspected included:

- Urgent and emergency care – Eastbourne DGH and Conquest.
- Medical care (including older person's care) – Eastbourne DGH and Conquest.
- Surgery – Conquest.
- Maternity – Conquest.
- Outpatients – Eastbourne DGH
- Well led inspection - Trustwide

The inspection did not review paediatrics, surgery at Eastbourne DGH, the midwifery led unit at Eastbourne DGH, outpatients at Conquest, critical care, community services or End of Life Care (EOLC). The ratings for these services were therefore carried forward from when they were last inspected by the CQC.

In the areas inspected by the CQC, all domains were rated as 'good' or 'outstanding' apart from the Emergency Department at Eastbourne DGH which was rated as 'requires improvement' but 'good' for well led and caring. For the first time 'outstanding' ratings were given in three categories. Further detail of the ratings is attached as Annex 1.

The CQC acknowledged that on the basis of the inspection in March, the Trust's rating would have been 'Good' however the Trust's overall rating remains as 'Requires Improvement' because, as outlined above, not all services were inspected. This is

explained in the CQC report: “Whilst the aggregated rating for the core services inspected at this inspection visit would have brought the Trust to good overall, the impact of the cores services we did not re-inspect leaves it as requires improvement overall.”

## **2.1 Areas highlighted by the CQC**

### Urgent and emergency care:

- There was parity in the care given to patients that were acutely ill and those with mental ill health.
- Sustained improvements to A&E waiting times.
- There was improved performance in sepsis management

### Medical care:

- There was a strong emphasis on multidisciplinary team work.
- The introduction of matron’s assistants to free up their time.

### Surgery:

- Cancellation rates for elective surgery were exceptionally low at the peak of the winter pressures.
- Patients commented that the care was “excellent from the point of referral to post surgery”, “outstanding” and “could not recommend the service enough”.

### Maternity:

- Evidence of good multidisciplinary working relations between midwives, midwifery support workers, doctors in the maternity day unit, and other staff.
- There was a clear commitment to drive innovation from all staff.

### Outpatients:

- Services were planned and developed to meet the needs of the patients.
- Follow up appointments were booked directly with the patients either by phone or immediately after their appointment.

### Trustwide:

- Staff treated patients with compassion, dignity and respect. Staff involved patients and carers in decisions about their care and treatment.
- There was much improved cross site working and relationships

- There had been a significant improvement in organisational culture.

## **2.2 Areas for Improvement**

In addition to the improvements identified above, the report highlighted one 'must do' and twenty one 'should do' actions that require addressing across the organisation. The 'must do' was for the Trust to urgently review the workload of the urgent care administration and clerical team and implement a strategy to review staffing levels and the impact on team wellbeing. This concerned administrative staff working night shifts and is being reviewed.

12 of the should do actions relate to Urgent Care, mainly at the Eastbourne site, 3 to maternity, 2 for outpatients, 1 for surgery, 1 for medicine and 2 Trustwide. These actions include strengthening the application of policies and processes, ensuring consistency of record keeping, improving mandatory training in some areas, improvements to the estate and reducing the number of outlying patients. An action plan is being developed to address the concerns raised and build on our improvements, as well as sharing learning and best practice. We will share this plan with HOSC once finalised.

The CQC has advised they will return to inspect further core services and the well led domain at trust level in the 2019/20 inspection year. The core service inspections will be unannounced and the well led announced.

## **3. Conclusion**

We are very proud of the achievements recognised by the CQC and particularly the recognition that we put our patients at the heart of everything we do. The acknowledgment that the Trust no longer needs to be in special measures for quality represents the hard work and commitment of every member of staff. There is still more to do and are we are committed to tackling our financial challenges, whilst sustaining quality and safety to achieve the Trust's ambition of being "Outstanding" by 2020

## CONQUEST HOSPITAL CQC RATINGS – MARCH 2018

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and emergency services	Good ↑↑ Jun 2018	Good ↑ Jun 2018	Good →← Jun 2018	Good ↑ Jun 2018	Outstanding ↑↑ Jun 2018	Good ↑ Jun 2018
Medical care (including older people's care)	Good ↑ Jun 2018	Good →← Jun 2018	Outstanding ↑ Jun 2018	Good →← Jun 2018	Good ↑ Jun 2018	Good ↑ Jun 2018
Surgery	Good →← Jun 2018	Good →← Jun 2018	Good →← Jun 2018	Good ↑ Jun 2018	Outstanding ↑ Jun 2018	Good →← Jun 2018
Critical care	Good Mar 2015	Good Mar 2015	Good Mar 2015	Good Mar 2015	Good Mar 2015	Good Mar 2015
Maternity	Good ↑ Jun 2018	Good →← Jun 2018	Good →← Jun 2018	Good ↑ Jun 2018	Good →← Jun 2018	Good →← Jun 2018
Services for children and young people	Requires improvement Oct 2016	Good Oct 2016	Good Oct 2016	Requires improvement Oct 2016	Good Oct 2016	Requires improvement Oct 2016
End of life care	Good Oct 2016	Requires improvement Oct 2016	Good Oct 2016	Good Oct 2016	Requires improvement Sept 2016	Requires improvement Oct 2016
Outpatients	Requires improvement Oct 2016	N/A	Good Oct 2016	Requires improvement Oct 2016	Requires improvement Oct 2016	Requires improvement Oct 2016
<b>Overall*</b>	Requires improvement →← Jun 2018	Good ↑ Jun 2018	Good →← Jun 2018	Requires improvement →← Jun 2018	Requires improvement →← Jun 2018	Requires improvement →← Jun 2018

# EASTBOURNE DGH CQC RATINGS – MARCH 2018

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and emergency services	Requires improvement ↑ Jun 2018	Requires improvement →← Jun 2018	Good →← Jun 2018	Requires improvement →← Jun 2018	Good ↑ Jun 2018	Requires improvement →← Jun 2018
Medical care (including older people's care)	Good ↑ Jun 2018	Good →← Jun 2018	Good →← Jun 2018	Good ↑ Jun 2018	Good →← Jun 2018	Good ↑ Jun 2018
Surgery	Good Oct 2016	Good Sept 2016	Good Oct 2016	Requires improvement Oct 2016	Good Oct 2016	Good Oct 2016
Critical care	Good Oct 2016	Good Oct 2016	Good Oct 2016	Requires improvement Oct 2016	Good Oct 2016	Good Oct 2016
Services for children and young people	Requires improvement Oct 2016	Good Oct 2016	Good Oct 2016	Requires improvement Oct 2016	Good Oct 2016	Requires improvement Oct 2016
End of life care	Good Oct 2016	Requires improvement Oct 2016	Good Oct 2016	Requires improvement Oct 2016	Requires improvement Sept 2016	Requires improvement Oct 2016
Outpatients	Good ↑ Jun 2018	N/A	Good →← Jun 2018	Good ↑ Jun 2018	Good ↑ Jun 2018	Good ↑ Jun 2017
<b>Overall*</b>	Requires improvement →← Jun 2018	Requires improvement →← Jun 2018	Good →← Jun 2018	Requires improvement →← Jun 2018	Good ↑ Jun 2018	Requires improvement →← Jun 2018