Report to:	RESILENT COMMUNITIES SCRUTINY COMMITTEE
Relevant Officer:	Marie Thompson, Director of Nursing, Blackpool Teaching
	Hospitals Trust
Date of Meeting	17 March 2016

BLACKPOOL TEACHING HOSPITALS FOUNDATION TRUST: CQC INSPECTION

1.0 Purpose of the report:

1.1 To brief the Committee on the Care Quality Commission (CQC) follow up inspection to Maternity Services and Accident and Emergency Services on 21st and 22nd September 2015 to allow effective scrutiny of the Trust.

The final report was published by the CQC on 29th January 2016.

2.0 Recommendations:

The Committee is asked to scrutinise the content of the report and ask any questions pertaining to the outcome of the inspection.

The Committee is requested to note the improvement in the Maternity Services rating from 'inadequate' to 'good'.

3.0 Reasons for recommendation:

- To ensure the Committee has the opportunity to consider the findings of the CQC follow-up investigation.
- 3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council?
- 3.2b Is the recommendation in accordance with the Council's approved N/A budget?
- 3.3 Other alternative options to be considered:

None

4.0 Council Priority:

4.1 The relevant Council Priority is "Communities: Creating stronger communities and increasing resilience."

5.0 Background Information

In January 2014, the CQC carried out a comprehensive inspection of Blackpool Teaching Hospitals Foundation NHS Trust using the new inspection framework and CQC standards. Overall the Trust was rated as Requires Improvement. Maternity Services was rated as Inadequate due to concerns with clinical effectiveness in respect to the number of post-partum haemorrhage cases with subsequent hysterectomy (5 cases in 12 months) and the utilisation of maternity staff.

At the Quality Summit in March 2014, in response to the concerns raised by the Trust and Stakeholders about the rating of inadequate and track record of overall good performance within the service, it was agreed that an early re-inspection would take place.

The CQC uses 5 domains to structure their inspections –

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs
- Is it well led?

5.2 Maternity Services

The report notes that improvements have been made since the last inspection. One area of Trust wide compliance following the January 2014 inspection was to improve rates of incident reporting and the report confirms improvement in this area. Improvements were also noted in the number of post-partum haemorrhages, which were in line with expected performance. The work undertaken by the team on changing the midwifery staffing model was also viewed positively by the inspectors. Patient experience was positive and outcomes for patients being in line with the England average on most of the compared measures.

Outstanding practice was noted in the work undertaken to support breast feeding via the star buddy's model.

Some concerns were raised about infection control and maintenance of equipment in some areas of the maternity unit and these areas have been actioned since the inspection.

The individual rating for the five domains were – Good in the areas of effective, caring, responsive, and well led and requires improvement for safe. Overall rating of good.

5.3 Urgent and emergency services

The inspection report notes that some areas had improved since the last inspection. The service was rated good for being safe, caring and responsive and requires improvement for effective and well led. However at the last inspection (January 2014) the CQC had not fully developed the inspection methodology for the Effectiveness domain and so had not rated this element at that time. Under the domain of effectiveness the CQC looked at the national College of Emergency Medicine Audits which showed that the Trust was in the bottom 25% of participating Trusts. The report notes that the Accident and Emergency Department had action plans in place to address this. However, the time to mental health assessment was noted as a concern but it was recognised that the Trust was already cited on this and is working with external partners to address this.

Checking of essential equipment was raised at the last inspection and found to still require improvement with some shortage of basic equipment items at the time of the visit e.g. thermometers.

The report comments on the layout of the department hindering patient flow but acknowledges that processes were in place to manage periods of surge. The Paediatric Accident and Emergency area was viewed positively. Improvements in medical and nurse staffing and use of temporary staffing was recognised and good standards of care and Multi-Disciplinary Team working observed. Evidence was seen of risks, incidents and complaints being managed well and patient experience was positive.

There is one action that the CQC requires the Trust to take in regards to Regulation 9 HSCA (RA) Regulations 2014 Person Centred Care.

Performance regarding the number of patients waiting for mental health assessment for over four hours did not always meet the needs of the patient. Regulation 9(2).

The Trust was already responding to this issue and had raised the matter with the relevant Commissioners. A monthly meeting has been established between the Commissioners, Lancashire Care Foundation NHS Trust and Blackpool Teaching

Hospitals NHS Foundation Trust to work on improvements to this particular group of patient's experience. The Accident and Emergency team have good input from the CRISIS Mental Health Team and further analysis of the patients presenting to Accident and Emergency, age group, waiting times etc. is currently being undertaken to establish the main themes for improvement.

The Trust will be required to provide a report to the CQC and to provide regular updates on progress.

Does the information submitted include any exempt information?

No

The full inspection report can be found at the following link: http://www.cqc.org.uk/sites/default/files/new reports/AAAE3922.pdf

6.0	Legal considerations:
6.1	N/A
7.0	Human Resources considerations:
7.1	N/A
8.0	Equalities considerations:
8.1	N/A
9.0	Financial considerations:
9.1	N/A
10.0	Risk management considerations:
	Nisk management considerations.
10.1	N/A
10.1	N/A
10.1 11.0	N/A Ethical considerations:
10.1 11.0 11.1	N/A Ethical considerations: N/A
10.1 11.0 11.1 12.0	N/A Ethical considerations: N/A Internal/ External Consultation undertaken: