



Our CQC Report

**Presentation to HOSC
8 October 2019**

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Chief Executive**



Today

- Our latest CQC Report
- **Next Steps**
- **Clinical Service Strategy**



CQC Inspection 2019 Timeline & Activities

19th Feb-12th March
Routine Provide
Information
Request

WAHT provided an overview of our services, performance, activities and general assurance

14th May-11th June
Core Service
Inspections &
Interviews

- Children & Young Peoples Services
- Diagnostics
- Medical Care
- Outpatients
- Surgery
- Urgent & Emergency Care

19th-21st June
Well Led
Reviews

35 Interviews conducted with Execs, NEDS, Staff Side, corporate leads & public representatives

9th-23rd August
Draft Report
Factual Accuracy

Over 1000 pages of information carefully checked by Divisions and corporate teams for accuracy.

408 Data Requests responded to

CQC Report

- Latest CQC Report published 20 September
- Our overall rating up to **requires improvement**
- Recommended removal from Special Measures (with system-wide support in place)

- Improvements across 41 of the 79 domains rated across 6 core services, with 9 of these going up two ratings. Maintained previous ratings in 35 domains.
- Surgery and outpatients received double ratings uplift in ‘well-led’
- Every single service across all hospitals now rated at least **Good** for caring.
- At the Alexandra Hospital, an overall rating of **Good** for outpatient services (up from Inadequate in 2017) and the highest rating – **Outstanding** in the caring category for diagnostic imaging (up from Good in 2017)
- At Kidderminster Hospital, an overall rating of **Good** (up from ‘Inadequate’ in 2017)
- At Worcestershire Royal Hospital an overall rating of **Good** for services for children and young people (up from ‘Requires Improvement’ in 2017)

Improvement examples - 1

Children and Young People

- Mandatory training provided to all staff and the majority of staff had completed
- Enough nursing and medical staff with the right qualifications, skills, training and experience to keep people safe from avoidable harm and to provide the right care and treatment
- Managed patient safety incidents well.



Diagnostics

- Diagnostic and imaging equipment was tested and serviced regularly to ensure it was safe to use (KTC)
- Staff cared for patients with compassion. Feedback from patients confirmed that staff treated them well and with kindness (WRH)
- Staff delivered care to a very high standard and routinely went above and beyond their duties to provide an individualised service (ALX)



Medical care (incl. older people's care)

- Documented vision and strategy for what staff wanted to achieve, in line with trust's quality improvement strategy (KTC)
- Staff supported patients to make informed decisions about their care and treatment (WRH)
- An open culture where patients, their families and staff could raise concerns without fear (AGH)



Outpatients

- Controlled infection risk well (KTC)
- Treated concerns and complaints seriously, investigated them and shared lessons learned with all staff (WRH)
- Staff completed and updated risk assessments for each patient and removed or minimised risks. Records were clear, up-to-date, stored securely and easily available to all staff providing care (ALX)



Surgery

- Safe systems and processes were in place for the management of patients' medicines (ECH)
- The service took account of patients' individual needs (KTC)
- Clearly defined governance structure in place (WRH)
- Staff supported patients to make informed decisions about their care and treatment (ALX)



Urgent and Emergency Care

- Improvements made in all core services inspected to address most concerns from last inspection (KTC)
- Managed patient safety incidents well (WRH)
- Staff cared for patients with compassion and kindness (ALX)





Further improvements recognised

- Medicines management
- Infection control
- Incident reporting and sharing learning across the Trust
- Staff engagement with the Trust's improvement journey
- Local and divisional leadership



Are our services well-led?

- Leadership team focused on driving improvements
- Clear strategy, vision and values underpinning a culture that is patient centred
- The Trust collected, analysed, managed and used information to support its activities
- Understanding of financial challenges and evidence of ownership of cost improvement schemes
- Staff recognised incidents and reported them
- Investigations carried out to time and evidence of shared learning cascaded





Alexandra Hospital 2017 v 2019



2017

Worcestershire Acute Hospitals NHS Trust Alexandra Hospital



	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and Emergency Care	Inadequate	Requires Improvement	Good	Requires Improvement	Inadequate	Inadequate
Medical Care (including older people's care)	Inadequate	Requires Improvement	Good	Requires Improvement	Inadequate	Inadequate
Surgery	Inadequate	Requires Improvement	Good	Requires Improvement	Inadequate	Inadequate
Outpatients	Inadequate	N/A	Good	Inadequate	Inadequate	Inadequate
Diagnostics	Inadequate	N/A	Good	Inadequate	Inadequate	Inadequate
Overall	Inadequate	Requires Improvement	Good	Requires Improvement	Inadequate	Inadequate



Kidderminster Hospital 2017 v 2019



2017

Worcestershire Acute Hospitals NHS Trust Kidderminster Hospital and Treatment Centre



	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and Emergency Care	Requires Improvement	Inadequate	Good	Good	Inadequate	Inadequate
Medical Care (including older people's care)	Requires Improvement	Requires Improvement	Good	Good	Requires Improvement	Requires Improvement
Surgery	Requires Improvement	Requires Improvement	Good	Requires Improvement	Requires Improvement	Requires Improvement
Outpatients	Inadequate	N/A	Good	Inadequate	Inadequate	Inadequate
Diagnostics	Inadequate	N/A	Good	Inadequate	Inadequate	Inadequate
Overall	Requires Improvement	Requires Improvement	Good	Requires Improvement	Inadequate	Inadequate



Worcestershire Royal 2017 v 2019



2017

Worcestershire Acute Hospitals NHS Trust Worcestershire Royal Hospital



	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and Emergency Care	Inadequate	Good	Good	Inadequate	Inadequate	Inadequate
Medical Care (including older people's care)	Inadequate	Requires Improvement	Good	Requires Improvement	Inadequate	Inadequate
Surgery	Requires Improvement	Requires Improvement	Good	Requires Improvement	Inadequate	Requires Improvement
Children and Young People	Inadequate	Requires Improvement	Good	Requires Improvement	Inadequate	Inadequate
Outpatients	Inadequate	N/A	Good	Inadequate	Inadequate	Inadequate
Diagnostics	Inadequate	N/A	Good	Inadequate	Inadequate	Inadequate
Overall	Inadequate	Requires Improvement	Good	Inadequate	Inadequate	Inadequate



Overall Trust Rating 2017-2019



2017 Worcestershire Acute Hospitals NHS Trust



	Safe	Effective	Caring	Responsive	Well-led	Overall
Ratings for the whole Trust	Inadequate	Requires Improvement	Good	Inadequate	Inadequate	Inadequate

- Staff briefings - Full House
- Public & Partner Response
- Social Media
- Staff Impact



4 Requirement Notices covering 38 Must Do's

Requirement notices

Action we have told the provider to take

The table below shows the legal requirements that the service provider was not meeting. The provider must send CQC a report that says what action it is going to take to meet these requirements. You must re-submit on things the provider must improve, see the table for improvement section above.

Please note: Regulatory action relating to primary medical services and adult social care services are reported against the separate reports on individual services available on our website www.cqc.org.uk

The guidance: Use the GYI (G) and (S) to see how providers and managers can meet the regulations. These include the functional standards. The standards below which care must meet are:

Regulated activity	Regulation
Assessment or medical treatment for persons detained under the Mental Health Act 1983	Regulation 12 (MCA) Regulations 2014 Safe Care and Equipment
Diagnostic and screening procedures	
Surgical procedures	
Treatment of disease, disorder or injury	
Regulated activity	Regulation 18 (MCA) Regulations 2014 Staffing
Assessment or medical treatment for persons detained under the Mental Health Act 1983	
Diagnostic and screening procedures	
Surgical procedures	
Treatment of disease, disorder or injury	
Regulated activity	Regulation 15 (MCA) Regulations 2014 Premises and equipment
Assessment or medical treatment for persons detained under the Mental Health Act 1983	
Treatment of disease, disorder or injury	
Regulated activity	Regulation 17 (MCA) Regulations 2014 Good governance
Assessment or medical treatment for persons detained under the Mental Health Act 1983	
Treatment of disease, disorder or injury	

- Manage patient flow effectively to ensure all patients have access to the right care at the right time
- Not yet fully demonstrable, sustainable improvements in the quality of all patient care and treatment over time.
- Financial management requires consolidation and improvement
- Mandatory Training Compliance
- Safeguarding Training



Next steps

- Develop our detailed action plan
- **Regulated Activity Improvement Tool (RAIT)**
- Quality initiatives (eg Path to Platinum Accreditation Programme)
- **Work on key service/capacity developments (eg HomeFirst Worcestershire)**
- Financial recovery and workforce transformation plans
- **Developing our Clinical Services Strategy and supporting the STP**
- Decision on Special Measures.....?