

## CQC Hospital Inspection 2019– July 2017

### 1. Introduction

CQC inspected the trust between Thursday 15 February and Thursday 8 March 2018. A separate 'well-led' assessment between Tuesday 10 and Thursday 12 April 2018.

Not all services were inspected but all sites were attend those services inspected included:

- urgent and emergency care,
- medical care,
- surgery
- outpatients at Lincoln and Pilgrim.
- Children and young people's services inspected at Pilgrim,
- medical care and surgery at Grantham
- surgery at Louth.

The CQC found the Trust to have improved its overall rating to 'Requires Improvement'. Two of the four locations rated as good overall, one as requires improvement and one as inadequate. Effective, responsive as requires improvement and caring rated as good and Well-led and Safe moved from Inadequate to Requires Improvement.

The CQC report details a mix of positive improvements and current challenges for the Trust many of which were identified within the Trust prior to the inspection and formed part of the 2018/19 Quality and Safety Improvement Plan.

There is a requirement for the trust to return its improvement plan, which addresses issues highlighted within the CQC inspection report, to the CQC by the end of July 2018.

### 2. 2018 CQC ratings

The CQC identified the Trust ratings as following:

Overall rating for the Trust as Requires Improvement

#### Ratings for the whole trust

Safe	Effective	Caring	Responsive	Well-led	Overall
Requires improvement ↑ Jul 2018	Requires improvement ↔ Jul 2018	Good ↔ Jul 2018	Requires improvement ↔ Jul 2018	Requires improvement ↑ Jul 2018	Requires improvement ↑ Jul 2018

The rating for well-led is based on our inspection at trust level, taking into account what we found in individual services. Ratings for other key questions are from combining ratings for services and using our professional judgement.

In comparison with the 2016 CQC inspection, both the 'safe' and 'well-led' domains were rated as inadequate at this inspection both have moved to 'requires improvement'. 'Effective', 'caring' and 'responsive' have remained the same and 'caring' rated as good across the board at all sites at this 2018 inspection.

Overall, our individual ratings for each hospital site remain the same:

- Lincoln County Hospital – Requires Improvement
- Pilgrim Hospital Boston – Inadequate
- Grantham and District Hospital – Good
- County Hospital, Louth – Good

In their report inspection report the CQC identified examples of best practice and exemplary care, including an improving patient safety culture and good MDT working across services. CQC saw many improvements across many core services since our last inspection and Morale across the trust was mixed however the morale had improved since our last inspection

However the CQC highlighted concerns around governance especially ensuring fully effective arrangements for identifying, recording, and managing risks, issues, and taking mitigating action, as in place. These are issues the trust was aware of prior to the visit and this awareness was reflected in the report.

### **3. Trust progress**

The CQC found a number of areas had significantly improved since their last visit and these were identified throughout the report with some specific aspects identified as 'outstanding' examples of these included:

- 'An improved patient safety culture within the Trust' they found our staff caring and treating patients with 'dignity, respect and kindness'. There is a recognition that significant work still needs to be undertaken and developing a safety culture remains the first programme of work within the Quality and Safety Improvement Programme
- Older people's care praised for focus on dementia patients at Lincoln and Pilgrim and reducing the risk of malnutrition, distress and falls. However nursing recognises the continuing need to focus on delivering harm free care and this is priority identified within the developing Quality Strategy.
- Inspectors highlighted improvements in the management of our sickest patients including detection and treatment of sepsis. We recognise our continuing requirement to recognise and improve the care of all deteriorating patients irrespective of the cause.
- On the Stroke ward (Pilgrim) staff worked above and beyond their clinical duties including arranging a long-term patient to carry out their wedding ceremony on the unit. Through our patient experience work the trust aims to develop

compassionate cultures which consistently add value to the care outpatient and their loved ones experience.

- Housekeeping staff recognised for how they track individual needs according to a red, amber and green risk system. This forms part of the improvement of the trust compliance with the hygiene code, which continues and is monitored through the Infection Prevention and Control Committee.

#### **4. Identified Challenges**

A number of significant areas were identified as requiring focus to improve. These were all challenges that were known to the Trust and the CQC report acknowledge that the Trust had already commenced improvement work in these areas. These three pivotal areas are identified below and form part of the Quality and Safety Improvement Plan.

- *Delivering urgent and emergency care on the Pilgrim site specifically the Emergency Department.* Improvement commenced at the time of the CQC visit in February when concerns were raised and significant improvements have already been made. This work will continue and be monitored through QSIP structure.
- *Care of children and improving the responsiveness of services for children.* In addition to the focussed work ensuring the trust has a structure to deliver safe effective care within the children's services, the trust needs to better identify the 'hidden child' and monitor and improve care to children, young people and their families and carers. An experienced senior paediatric nurse has been seconded to the trust, working to the Deputy Chief Nurse to lead this work.
- *Developing and delivering robust governance from Board to Ward to be effective, robust and transparent.* Whilst pockets of improvement were identified in the CQC report and through the 2017/18 QSIP. Work to improve the well-led approach of the trust, aspects of wider governance such as Duty of Candour and clinical governance through specialities. This work is extensive and incorporates
  - Structure & processes
  - Data quality
  - Risk identification & management
  - Openness and candour
  - Learning from incidents

Additionally in their inspection report the CQC identified a number of 'must do's' and 'should do's'. These have all been mapped into Quality and Safety Improvement Plan or other improvement programmes being delivered within the Trust. Monitoring of progress will be through the Quality and Safety Improvement Board.

#### **5. Next steps**

There is a requirement for the trust to return the Quality and Safety Improvement Plan, which addresses issues highlighted within the CQC inspection report, to the CQC by the end of July 2018.

## **6. Recommendations**

For the Board of Directors to note the information provided and the timelines regarding return of information to the CQC.