

Leeds Teaching Hospital Trust

CQC Comprehensive Inspection march 2014

CQC Intelligent Monitoring Report

Following publication of the first CQC Intelligent Monitoring report, the Trust was placed in wave 2 of the new comprehensive inspection programme that was introduced in September 2013. This was because the risk assessment placed the Trust in Band 1 (higher level of risks identified) based on the specific indicators used for the period of time reviewed. The specific risks related to the incidence of *Clostridium difficile* infection, whistleblowing alerts, education concerns, incidence of Never Events, referral to treatment times and outcomes from the staff survey. These risk areas have been subject to programmes of improvement and progress was reflected in the publication of the second Intelligent Monitoring report in March 2014, which placed the Trust in Band 4 (lower risk). The Trust was placed in Band 4 in the most recent report that was published in April 2015.

Inspection visits 2014/15

The CQC did not undertake any unannounced compliance inspection visits in 2014/15.

The CQC undertook a comprehensive inspection of the Trust in March 2014. The inspection visit was preceded by a detailed programme within the Trust to prepare for the inspection, led by the Chief Nurse. This involved engaging with a wide range of staff groups at all levels of the organisation and the provision of information to the CQC inspection team to assist with their inspection. The inspection was extremely thorough, involving visits to a wide range of clinical areas across the Trust. The CQC returned to do an unannounced visit at the LGI and St James's Hospital locations on Sunday, 30 March 2014 to complete their inspection, focusing on the care provided to patients out of hours during the weekend (Sunday).

The new inspection approach involved identifying the key questions to ask about the quality and safety of care, based on the things that matter to people. The CQC adopted 5 key questions that will be used for the inspection of all service areas:

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

The new programme of inspection included the introduction of ratings at service level, hospital level, domain level (relating to the 5 key questions) and Trust level. These are on a 4-point scale:

Outstanding	Good	Requires Improvement	Inadequate
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The CQC identifies core services to be inspected and rated, involving the following 8 clinical areas and pathways, identified as priorities by the chief inspector of hospitals:

Outpatients	Critical Care	Acute Medical Pathways	Acute Surgical Pathways
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Paediatrics	A&E	Maternity	End of Life Care
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The Trust received the report of the findings from the inspection on 5 June 2014. The report was based on a combination of what they found when they visited the Trust in March 2014, information from their Intelligent Monitoring system and information provided to them from patients, the public and other organisations.

The judgements made by the CQC following their inspection relating to the 5 key questions for the Trust overall were:

Overall rating for this Trust	Requires Improvement
Are services at this Trust safe?	Requires improvement
Are services at this Trust effective?	Good
Are services at this Trust caring?	Good
Are services at this Trust responsive?	Requires improvement
Are services at this Trust well-led?	Requires improvement

The Trust was given an overall rating of Requires Improvement. The summary quality report included an overview of the ratings for each of the locations at LGI, St James's Hospital, Wharfedale and Seacroft Hospitals, together with a summary of the overall ratings. Detailed reports were also produced for each of the hospital locations and core services. A judgement was made for each core services, as follows:

Core Service	Rating
Medical Care	Requires improvement
A&E	Good
Maternity	Good
Children	Requires improvement
Surgery	Requires improvement
End of Life	Good
Critical Care	Requires improvement
Outpatients	Good

The reports from the CQC inspection were published on their website in July 2014 and can be found at the following link: <http://www.cqc.org.uk/provider/RR8>

Quality Summit meeting 20 June 2014

The CQC inspection team arranged a Quality Summit meeting on 20 June 2014 attended by senior representatives from the Trust and partner organisations, including the Trust Development Authority (TDA), CCG, Healthwatch Leeds, Health and Social Care and Local Authority.

At the meeting the CQC provided an overview of the inspection process and the methodology used together with a summary of their findings and rationale for the judgements that they had made. The Trust's Chief Executive provided a response and feedback to the CQC regarding the Trust's experience of the inspection. The Trust considered that the report was fair and balanced overall and was an accurate reflection of where we were as an organisation and that it would help in our development. The report also recognised the improvement work that had been undertaken, including risk, complaints, ward healthcheck, staff engagement and communication.

The Trust produced a framework and response to the actions that the Trust must and should take to improve quality and safety. Partner organisations were given opportunity to consider the Trust's response and to offer ways in which they could provide support to enable these actions to be implemented. It was recognised that some of the actions would require some investment both in the medium and longer-term, particularly relating to staffing and equipment replacement.

Action Plan

An action plan was developed in response to the recommendations identified in the report which has been regularly reviewed and updated with management leads during 2014/15, and also discussed at regular meetings with the TDA. Subsequent reports on progress have been provided to the Quality Committee and Trust Board, and progress has been discussed with commissioners at NHS West Leeds CCG at the monthly quality meetings. The actions plans were also reviewed at Scrutiny Board for Health in September and December 2014.

The CQC identified 17 actions the Trust *must* take to improve quality and safety, 13 of which were mapped against specific Regulations set out in The Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. These were described in the action plan under the following headings:

- Staffing
- Training
- Risk and Safety
- Governance
- Communication
- Human Resources
- Mental Health
- Equipment

It was acknowledged that the majority of the recommendations related to broad topics that were subject to improvement plans already in place and would take some time to fully embed across the organisation; some of these recommendations would also be subject to continuous monitoring for improvement, e.g. medical and nurse staffing, training, handover, appraisal and application of the Mental Health Act. It was therefore agreed at the Quality Summit meeting in June 2014 that the Trust would identify immediate actions to ensure that the Trust was compliant with the essential standards of quality and safety for each of the Regulations identified in the report where the Trust must take action. These initial actions have been completed. It was agreed with commissioners and the TDA in December 2014 that the Trust would integrate these actions into existing programmes of work.

We have continued to monitor progress against the actions identified in the report during 2014/15 and we have welcomed the very detailed feedback received from the CQC inspection to help us make further improvements in the care we provide for our patients.