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# Health and Wellbeing Board – Supplementary agenda no. 1

A meeting of the Health and Wellbeing Board will be held on:

Date: 15 September 2015

Time: 4.00pm

Venue: Civic Room - Level 2, Gun Wharf, Chatham ME4 4TR

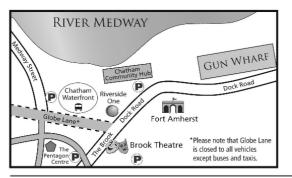
# Items

#### 16 Response to latest Care Quality Commission Inspection of Medway NHS Foundation Trust

This tabled report will be considered as an urgent item, with the agreement of the Chairman, as the next meeting is not until 3 November 2015 and it is important that the Board receives an immediate update on developments arising from a CQC Inspection of Medway NHS Foundation Trust which took place at the end of August.

For further information please contact Stephen Platt, Democratic Services Officer on Telephone: 01634 332011 or Email: <u>democratic.services@:medway.gov.uk</u>

Date: 15 September 2015



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If you have any questions about this meeting and you want to speak to someone in your own language please ring 01634 335577											
বাংলা	331780	ગુજરાતી	331782	ਪੰਜਾਬੀ	331784	کوردي	331841	<i>اروو</i>	331785	Русский	332374
中	331781	ਵਿંદી	331783	Polski	332373	এওহ্ৎশক্ষব	331786	فارسی	331840	Lietuviškai	332372



# MEDWAY HEALTH AND WELLBEING BOARD

### 15 SEPTEMBER 2015

# RESPONSE TO LATEST CARE QUALITY COMMISSION (CQC) INSPECTION OF MEDWAY NHS FOUNDATION TRUST

Report from:Dr Peter Green, Chief Clinical Officer, NHS Medway<br/>CCGAuthor:Dr Peter Green, Chief Clinical Officer, NHS Medway<br/>CCG

Summary

This report advises the Health and Wellbeing Board of collaborative action being taken across the local healthcare system to support Medway NHS Foundation Trust following a Care Quality Commission (CQC) Inspection of the Trust at the end of August 2015.

#### 1. Budget and Policy Framework

- 1.1 The Health and Wellbeing Board seeks to provide collective leadership to improve health and wellbeing across the local authority area, enable shared decision-making and ownership of decisions in an open and transparent way. The Board has a responsibility to encourage persons who arrange for the provision of any health and social care services in the area to work together in an integrated manner for the purpose of advancing the health and wellbeing of the people of Medway.
- 1.2 The Chairman of the Health and Wellbeing Board has agreed to accept this report as an additional urgent item for consideration at this meeting as the next meeting is not until 3 November 2015 and it is important that the Board receives an immediate update on developments arising from a CQC Inspection of Medway NHS Foundation Trust which took place at the end of August.

#### 2. Report

2.1 Following the latest CQC Inspection of Medway NHS Foundation Trust (MFT) at the end of August, the Trust is keen to make improvements and have asked for support from across the local healthcare system to help them in

doing this. The hospital has been rated as inadequate by the CQC since May 2014 and had been placed in special measures by the Commission before that following a Keogh review. The Council has been supporting the Trust and Commissioners in the improvement journey since that time.

- 2.2 The CQC findings will not be formally reported until later in the year. In the meantime the Chief Inspector of Hospitals has said the CQC was concerned by the lack of clinical leadership in the accident and emergency department and the subsequent risk to patient safety. The CQC found that in the busiest times the Emergency Department was not able to cope with the numbers of patients attending; patients in need of treatment were waiting too long to see a doctor, or were being left unattended while they waited.
- 2.3 In response to MFT's request for support NHS England and local Commissioning Groups are working actively with health providers across Kent, Medway and South East England to consider how best to provide this support to the Trust. Attached as appendix A is a letter from NHS England to the Chairman of the Health and Wellbeing Board explaining the proposed action in this regard. There has been an emphasis on putting in place the most appropriate actions to fully support the Trust, whilst ensuring the ongoing quality and safety of care for patients across the local area.

#### 3. Risk management

3.1 Risk management is an integral part of good governance. The Council and partners have a responsibility to identify and manage threats and risks to achieving strategic objectives and enhancement of the value of services they provide to the community.

Risk	Description	Action to avoid or mitigate risk
Failure to secure improvements required to consistently deliver safe effective and high quality care in the Emergency Department at Medway Maritime Hospital	Medway NHSFoundation Trust, in collaboration with Commissioners and other health and social care providers need to respond to the CQC findings in order to secure safe effective and high quality care in the Emergency Department. Otherwise the CQC will consider using its urgent powers to protect the continued safety and wellbeing of people who rely on this service.	NHS England and local Clinical Commissioning Groups are actively coordinating a plan of action to support MFT.

#### 4. Consultation

4.1 NHS England is engaging with stakeholders to evaluate and agree the action required to support Medway NHS Foundation Trust to make required improvements following the latest CQC Inspection of the Trust.

#### 5. Financial implications

5.1 NHS England, local Clinical Commissioning Groups and MFT are working together to assess and address any financial pressures arising for the latest CQC findings following its inspection of MFT in August 2015.

#### 6. Legal implications

6.1. The Care Quality Commission was established by the Health and Social Care Act 2008 as the independent regulator of health and social care in England. The Commission monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. The CQC publishes its findings, including performance ratings, to help people chose care. Medway NHS Foundation Trust is under an obligation to respond to areas of concern identified by the CQC, to develop an action plan to address them and make improvements. The CQC has a range of powers including authority to use requirement notices or warning notices or to place a provider in special measures.

#### 7. Recommendations

7.1. The Health and Wellbeing Board is asked to consider and comment on the action being taken to address CQC interim findings following an inspection of MFT in August 2015.

#### Lead officer contact

Dr Peter Green, Chief Clinical Officer, NHS Medway CCG Peter.green@nhs.net

#### Appendices

Appendix A – letter from NHS England to Chairman of Health and Wellbeing Board

#### **Background papers**

None

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Our Ref: CB.14.09.15

Councillor David Brake

NHS England - South (South East) Wharf House Medway Wharf Road Tonbridge Kent TN9 1RE

> Felicity.cox1@nhs.net Tel 0113 824 8548

By email: <u>david.brake@medway.gov.uk</u>

14 September 2015

Dear David

I am writing to let you know about a short-term service change which will be implemented at Medway NHS Foundation Trust.

The Care Quality Commission (CQC) carried out an inspection of Medway NHS Foundation Trust at the end of August. As a result of this inspection the Trust asked for support from healthcare partners to help them in addressing concerns which were raised about the performance of the Trust's A&E department.

NHS England, Clinical Commissioning Groups (CCGs) and the CQC have agreed to put in place an ambulance divert at Medway Maritime Hospital for a short period to provide support to the Trust whilst ensuring patient safety and quality of care.

The ambulance divert will assist in alleviating pressures in the emergency department and help to move patients through the emergency care pathway, as well as allowing clinical leaders within the department a period of time to review existing processes and procedures in the department.

On Wednesday 16th September and Thursday 17<sup>th</sup> September ambulances will not take patients to Medway Maritime Hospital between the hours of 7am and Midday.

This will not apply to some patients according to clinical need including cardiac arrest, maternity, AAA (abdominal aortic aneurysm) and paediatric patients who will continue to be taken to Medway Maritime Hospital for treatment. Walk in patients attending the emergency department will also still be treated there.

The ambulance divert is being managed in a way which allows temporary changes to be put in place across the wider healthcare system to facilitate this measure.

We are also working with partners across the healthcare system to put in place further measures to support staff at the hospital. This includes additional training for clinical staff in the emergency department and bringing in experience clinical staff to work in Medway Maritime's A&E department to allow staff time to attend this training. We are also working with local authorities and community health teams to help to improve the flow of patients through the hospital.

I, along with the Medical Director and Director of Nursing at NHS England South (South East), have been actively engaging with the CQC with regards to the concerns raised. In the light of those discussions the CQC confirmed they felt a collaborative approach and introducing the ambulance divert and other support would be a good short-term solution.

NHS England and the CCGs are working with South East Coast Ambulance Service NHS Foundation Trust (SECAmb), Medway Foundation Trust, other healthcare providers and the local authorities to put the ambulance divert in place. The majority of patients will be diverted to Maidstone Hospital or Darent Valley Hospital in Dartford for treatment. We are also working with community health providers and local authorities to improve the flow of patients across the healthcare system.

The main impact of the divert will be on South East trusts. It is not intended to divert any ambulances to London. However the London Ambulance Service will not be taking any patients to Darent Valley Hospital, which often accepts patients brought in by the London ambulance service, during this time.

Medical directors in NHS England have undertaken a full clinical risk assessment of the proposed divert to ensure the safety and quality of care for patients.

NHS England, CCGs and providers are working together to consider a longer term solution. I will update you as soon as further information on this is available. If you have any questions on this in the meantime please do not hesitate to contact my business office at england.southeast@nhs.net

Yours sincerely

Felicity Cox Director of Commissioning Operations NHS England South (South East)