Appendix B

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Care Quality Commission Review of Maternity Services

October 2013

CARING RESPECTING LISTENING LEARNING

Better care *together*

Review process

- 19th August 2013 – 4 day review
- Alerted by a slight increase in incidents
- 12 inspectors with a wide range of skills and experience
- Desk research (70+ documents)
- Observed clinical practice (hospital and community)
- Interviews with staff, talked with 14 women receiving care and National Childbirth Trust

Review outcomes

- The inspectors looked for evidence that our maternity services were safe, effective, caring, well-led and responsive to people's needs

Outcome	Concern level	Action
Respecting and involving people who use our services (1)	Minor	Action
Care and welfare of people who use services (4)	Moderate	Action
Management of medicines (9)	Moderate	Action
Staffing (13)	Major	Enforcement
Supporting workers (14)	Major	Enforcement
Assessing and monitoring the quality of services (16)	Major	Enforcement

Actions already taken

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- **<u>Recruitment of Permanent Midwives</u>:**
  - **To achieve our 1:29 ratio: - (14.64 WTE)**
    - **Band 6 – 3 WTE**
    - **Band 5 – 9 WTE**
    - **Still to recruit: - 2.64** (advert still running – 7 applicants to date)
  - **Additional staff recruited since 22.8.13:**
    - **Band 2 – 5 WTE (MCAs)**
    - **Band 3 – 2 WTE (MSWs)**

Other Actions already taken

- Lockable bedside lockers ordered (installation 4.11.13 – 8.11.13)
- 8 New Dinamaps delivered - (5 in use, 3 awaiting EBME checks)
- IV fluid storage issues rectified
- Safe practice for sharps disposal – (directive issued & checks ongoing)
- Refrigerator & freezer temperatures monitored daily
- Room temperature thermometers ordered
- Weekly spot checks of emergency drugs implemented by Matron
- 24 hour checking of controlled drugs reinstated
- Non-Labelling of discharge medicines – (Practice ceased)
- SOP reinforced re: Expired medicines – (with ongoing monitoring)
- Self-administration of drugs for diabetic women – (risk assessment sheet implemented)
- Maternity Dashboard being circulated to all Midwives – Monthly
- Weekly review of all complaints, Datix, & SIs (by Directorate Mgt Team)

Outcome 1

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Respecting and involving people who use services (page 6)

Positive

- Midwives obtained comprehensive information from women
- The Birth Place provide a comfortable environment and appreciated by women
- Good access to interpretation services
- Good feedback from postnatal women
- Women who had a caesarean section were treated with dignity

Improvement

- Local women not supported in understanding antenatal care
- No plan to reach different sectors of the community
- Dignity compromised in the triage area and ward areas
- Unlockable bedside lockers
- Poor bereavement facilities

Outcome 4

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Care and welfare of people who use services (page 8)

Positive

- All women and relatives said the care they received was good
- Dedicated and committed midwives
- “The staff are busy but very caring”
- MCAs were fantastic
- Good liaison process between medical specialities

Improvement

- Low numbers of midwives had a clear impact on the delivery of care
- Comparatively high number of caesarean sections
- Elective sections on 3 days
- WHO surgical checklist not always carried out robustly
- Poor equipment availability
- Emergency equipment checks
- Inconsistent practice between Kent and Pearl wards

Outcome 9

Management of medicines (page 11)

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Positive

- Good arrangements in place to obtain medicines
- Medicines were prescribed and given appropriately
- Good recording of medicines use

Improvement

- IV fluids stored on the floor
- Fridge temperatures not monitored
- Patients' own medicines not stored securely
- No pharmacist visits
- Discharge medicines not labelled correctly
- Emergency medicines and CDs not checked regularly
- PGDs out of date
- Poor incident reporting

Outcome 13

Staffing (page 13)

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Positive

- Working towards a 1:29 ratio
- Sufficient numbers of consultants, registrars, junior doctors
- Staff were dedicated and caring

Improvement

- Not enough midwives in all settings
- No agency to cover shortage of staff
- Midwives having a high number of student midwives
- Moving the staff across the unit
- Birth Place closure
- 20 minute community appointments
- Midwives and MCA role reversal

Outcome 14

Supporting workers (page 16)

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Positive

- Good environment for doctors "This is a good place to work"
- Good clinical and academic support for doctors
- Good preceptorship for midwives
- Safeguarding team highly valued

Improvement

- Visibility of the maternity dashboards
- Unable to access e-learning
- Poor compliance with mandatory training
- Training cancelled if busy
- Gaps in monitoring compliance
- No bereavement training
- "Lots of whip cracking but no hands on help from senior management"
- Poor appraisal rates

Outcome 16

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Assessing and monitoring the quality of care (page 19)

- No evidence of learning from incidents and investigations
- No maternity service delivery plan
- Three dashboards
- Poor IT infrastructure
- SoMs and senior staff did not have clear systems for auditing
- Not enough hands on staff, too many management
- Poor staff and patient voice
- Little evidence of a commitment to safety and improvement
- Poor involvement of clinicians in the QIA TPP process
- Board ‘buddy’ visits lacked clarity and purpose
- No Chief Pharmacist
- Merger focus

Next steps

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- Improvement actions to be completed for outcomes 13, 14 and 16 by end of December 2013
  - Recruitment (midwives and MCAs)
  - Appraisals and mandatory training
  - Roles and responsibilities for quality governance (directorate and corporate)
- Action plan in place with directorate and Board of Directors oversight
- Unannounced re-inspection in the next 2 – 3 months
- Share learning across the organisation