

<b>Recommendation</b>  <input type="checkbox"/> <b>DECISION</b>  <input type="checkbox"/> <b>NOTE</b> (select)	<div style="border: 1px solid black; padding: 5px; text-align: center;"><b>Joint Health Oversight and Scrutiny Committee</b></div> <p><b>Purpose:</b> To receive a report from SaTH detailing the CQC findings, the resultant enforcement action and SaTH's action plan/response. SaTH are asked to report on any implications for the Business Continuity Plan and the sustainability of both Accident and Emergency Departments.</p>
<b>Reporting to:</b>	<b>Joint Health Oversight and Scrutiny Committee</b>
<b>Date</b>	19 September 2018
<b>Paper Title</b>	<b>Shrewsbury and Telford Hospital NHS Trust - Enforcement Action Taken by CQC</b>
<b>Brief Description</b>	<p>This paper seeks to provide the Joint Committee with further information relating to the initial findings of the CQC, the requirements of the conditions imposed on the regulated activity and the response from the Trust and our action plan going forward. Additionally, implications for the Business Continuity Plan and the sustainability of both ED will be reported upon.</p> <p>In August 2018 the Care Quality Commission (CQC) visited Shrewsbury and Telford Hospital NHS Trust (SaTH) as part of a structured formal albeit unannounced inspection process. At this visit the CQC raised concerns specifically related to the care of patients within our Emergency Department (ED) at Princess Royal Hospital (PRH) and the practice of placing additional patients on wards (known as "boarding").</p> <p>Subsequently, the CQC formally notified the Trust that under Section 31 of the Health and Social Care Act 2008 they intended to impose conditions related to the regulated activity Treatment of disease, disorder or injury that related to the ED at both sites relating to the care of deteriorating patients and the environment in the ED at PRH.</p> <p>The Trust has a plan in place to ensure that we meet the requirements of the conditions to provide assurance to the CQC that we have a robust action plan in place to address the concerns raised and that we meet the requirement to submit weekly reports to provide that assurance.</p> <p>Since 2014 the Trust Board and wider system have been updated on the significant workforce challenges that have met the Emergency Departments at RSH and PRH.</p> <p>This risk was, and remains, the greatest risk on the Trust Board Assurance Framework and Trust Risk Register. It has previously also formed part of the programme of review and scrutiny by the Joint Health Overview and Scrutiny Committee for Shropshire and Telford &amp; Wrekin.</p> <p>The recent CQC unannounced visit in September 2018 identified significant concern in relation to the management and escalation of patients who may present with sepsis or a deteriorating medical condition in both ED. This has been significantly influenced by the ongoing workforce challenges the EDs are experiencing and demonstrates that the sustainability of both Accident and Emergency Departments is challenged. As a result, the case for change is strengthened and the options detailed in the paper will be considered in detail by</p>

	the Trust Board later in September.
<b>Sponsoring Director</b>	Deirdre Fowler, Director of Nursing, Midwifery and Quality
<b>Author(s)</b>	Helen Jenkinson, Deputy Director of Nursing and Quality
<b>Recommended / escalated by</b> (Tier 2 Committee)	None
<b>Previously considered by</b> (consultation / communication)	None
<b>Link to strategic objectives</b>	
<b>Link to Board Assurance Framework</b>	
<b>Outline of public/patient involvement</b>	
<b>Equality Impact Assessment</b> (select one)	<ul style="list-style-type: none"> <li><input checked="" type="radio"/> <b>Stage 1 only (no negative impacts identified)</b></li> <li><input checked="" type="radio"/> <b>Stage 2 recommended (negative impacts identified)</b> <ul style="list-style-type: none"> <li>* <b>EIA must be attached for Board Approval</b></li> <li><input checked="" type="radio"/> negative impacts have been mitigated</li> <li><input checked="" type="radio"/> negative impacts balanced against overall positive impacts</li> </ul> </li> </ul>
<b>Freedom of Information Act (2000) status</b> (select one)	<ul style="list-style-type: none"> <li><input checked="" type="radio"/> <b>This document is for full publication</b></li> <li><input checked="" type="radio"/> <b>This document includes FOIA exempt information</b></li> <li><input checked="" type="radio"/> <b>This whole document is exempt under the FOIA</b></li> </ul>

## Inspection Process

In August 2018 the Care Quality Commission (CQC) carried out an unannounced visit to Shrewsbury and Telford Hospital NHS Trust (SaTH) as part of a formal inspection process. The CQC review the services of the Trust based on the following key lines of enquiry to measure whether services are:

**Safe:** Patients are protected from physical, psychological or emotional harm or abuse

**Effective:** Patients needs are met and care is in line with national guidelines and standards and promote best chance of getting better

**Caring:** Patients are treated with compassion, respect and dignity and that care is tailored to their needs.

**Responsive:** Patients get the treatment or care at the right time, without excessive delay, and are involved and listened to

**Well Led:** There is effective leadership, governance and clinical involvement at all levels and a fair, open culture exists which learns and improves from listening and experience.

The inspection team visited areas within the organisation, talked to patients, their carers and the staff and reviewed written records in order to measure compliance against systems and processes.

Following the initial visit the CQC have revisited the Trust to better understand their initial findings and to gain assurance that any immediate actions that were required have been carried out. In addition to the visit to the Trust the CQC may request supporting documentation and to date (12 September) 485 data requests have been received.

## Findings of the Initial Inspection and Notice to Impose Conditions

The Committee will be aware that following their initial visit in August the CQC raised serious concerns related to the care of patients within our Emergency Department (ED) at Princess Royal Hospital (PRH) and the practice of placing additional patients on wards (known as "boarding"). The Committee is asked to note that the Trust has not had any additional patients on the wards since 22 August 2018.

Subsequently, on 05 September 2018, the CQC formally notified the Trust that under Section 31 of the Health and Social Care Act 2008 they intended to impose conditions related to the regulated activity "Treatment of disease, disorder or injury".

The conditions that were served on the Trust on 05 September 2018 were:

- The Registered Provider must ensure that there is an effective system in place to identify, escalate and manage patients who may present with sepsis or a deteriorating medical condition in line with the relevant national clinical guidelines. This applies to all patients in all areas of the emergency departments at the Princess Royal and the Royal Shrewsbury Hospitals.
- The Registered Provider must ensure that the emergency department premises at the Princess Royal Hospital are safe for their intended purpose with equipment stored safely. The Registered Provider must ensure that risk assessments are carried out and reviewed to ensure that the environment remains safe for its intended purpose and that all staff are aware of and adhere to protocols

## Requirements of the Conditions

In order to provide assurance to the CQC that we are progressing with the actions required under the conditions that have been imposed, the Trust is required to provide a report on a weekly basis describing specific actions under each of the two conditions above.

In order to achieve this, a report template has been devised and a process put into place to ensure Executive scrutiny and sign off prior to submission each week.

## Implications for the Business Continuity Plan and the sustainability of both ED

Since 2014 the Trust Board and wider system have been updated on the significant workforce challenges that have met the Emergency Department at RSH and PRH.

In March 2016 the public meeting of the Trust Board received a paper outlining a number of options to maintain safe and effective urgent and emergency care services. This paper followed on from an earlier paper received at the public meeting of the Trust Board in December 2015 which outlined the risks and challenges being faced at that time in relation to maintaining two emergency departments at the PRH and RSH sites.

This risk was, and remains, the greatest risk on the Trust Board Assurance Framework and Trust Risk Register. It has previously also formed part of the programme of review and scrutiny by the Joint Health Overview and Scrutiny Committee for Shropshire and Telford & Wrekin.

A presentation was given at the Trust Board in August 2018 by Edwin Borman (Medical Director) and Nigel Lee (Chief Operating Officer) that described the current work that is being progressed to review the business continuity plans. It also highlighted that there would be a paper presented to Trust Board in September 2018 requesting a decision to be made in relation to three options:

### Option 1 - Maintain existing dual site ED service

- Continue to request support from neighbouring Trusts for additional medical resource to maintain two ED
- Consultants maintain rota by acting down as Middle Grade support
- Measure and respond to risks on a shift by shift basis
- Continue to work up short and long term business continuity and service development plans
- Maintain workforce recruitment strategy

### Option 2 - Close PRH ED from 20:00 – 08:00

- Last ambulance @ 20:00, walk-in patients accepted at 20:00 (divert plan thereafter)
- UCC will accept patients via CCC until 22:00
- Some remaining patients would remain in ED into the night until pathway for discharge or admission available
- PRH will continue to accept GP referred admissions in those specialities managed at PRH
- Ambulance divert to neighbouring Trusts so as to not over stretch RSH ED and create additional risk for emergency paediatric and ENT patients.

### Option 3 - Close RSH ED from 20:00 – 08:00

- Last ambulance @ 20:00, walk-in patient accepted at 20:00 (divert plan thereafter)
- UCC will accept patients via CCC until 22:00
- Some remaining patients would remain in ED into the night as currently admitted under ED until pathway for discharge or admission available
- Trauma Unit status would need to be revoked
- Ambulance divert to neighbouring Trusts so as to not over stretch PRH ED and create additional risk for emergency surgical and trauma patients

The recent CQC unannounced visit in September 2018 identified significant concern in relation to the management and escalation of patients who may present with sepsis or a deteriorating medical condition in both ED. This is a significant outcome of the ongoing workforce challenges that the ED are experiencing and demonstrates that the sustainability of both Accident and Emergency Departments is challenged. As a result, the case for change is strengthened and Option 2 or Option 3 needs to be fully considered by the Trust Board on 27 September 2018.

Services have completed quality impact assessments in relation to all three options and this will form part of the intelligence that will be provided to enable the Board to make a decision on the options.