

## East Kent Hospitals Update for Health Overview and Scrutiny Committee

### Care Quality Commission inspection of children's services

#### **1 Background**

- 1.1 The Care Quality Commission (CQC) undertook an inspection in October 2018 of children's and young people's hospital services at William Harvey Hospital (WHH), Ashford, and Queen Elizabeth Queen Mother Hospital (QEQM), Margate. The CQC inspected the:
- Children's ward at each hospital
  - Emergency departments
  - Operating theatres
  - Neonatal Intensive Care Unit at WHH
  - Special care baby units at both hospitals
- 1.2 On 13 February 2019 the CQC published its reports which rated children's services 'good' for caring with the overall rating for children's services in the two hospitals as 'inadequate'. The CQC confirmed that since October 2018 the Trust has made significant improvements in all of the areas that they highlighted and the Trust has met the conditions required by the CQC following the inspection.
- 1.3 In September 2019 the Trust undertook a Routine Quality Review to children's services at WHH and QEQM to review progress, and noted significant improvements had been made. Action plans were updated after the visit to reflect findings and those areas that required further improvement.
- 1.4 To date 112 of 116 actions on the Trust's paediatric improvement plan have been met with work underway to complete the remaining four. Monthly CQC Paediatric Taskforce meetings, chaired by the Chief Nurse, continue to ensure oversight and progression of the improvement plan.

#### **2. Padua Ward improvements**

- 2.1 Padua Ward – the children's ward at WHH – has been extensively redesigned and renovated, providing a much more conducive environment for children and young people. New cots and children's beds were purchased and air conditioning installed.
- 2.2 The Children's Assessment Unit has been relocated onto the ward to improve safety and provide more space. The outpatient children's area has also been enlarged, to provide an extra clinic room and a larger waiting area.
- 2.3 A larger locked drug room for safe storage and preparation of medicines has been provided, along with fob access to the ward for improved safety.

#### **3. Increased staffing levels**

- 3.1 Since the inspection staffing levels in our emergency departments for children's services at both hospitals have increased to ensure services are safe and children and young people are well-cared for.

- 3.2 We have also successfully appointed a Head of Nursing for Child Health in May 2019 and a Quality Improvement Matron, work within the senior nursing team, to support and embed the improvements underway for children and young people.
- 3.3 Our emergency departments provide a 24/7 service for children and young people, with specialist children's nurses and Health Care Assistants, supported by specialist A&E and paediatric doctors. This means children and young people attending our emergency departments are cared for by clinicians who are expert in these patients' needs.
- 3.4 The paediatric nursing team at WHH emergency department is fully staffed and we are actively recruiting to fill the remaining paediatric nursing vacancies at QEQM's emergency department. These are currently filled by a consistent group of agency paediatric nurses.
- 3.5 Both children's wards have been successful in recruiting additional staff and are currently fully staffed. This is supported by an additional layer of support at both hospitals with a senior paediatric nurse on-call rota to provide additional paediatric expertise out of hours and at weekends. Daily assurance regarding staffing is gained and is escalated to the Chief Nurse or her deputy to ensure safe services.
- 3.6 We have recruited two additional paediatric speciality middle grade doctors at WHH and now have eight at each WHH and QEQM. We are seeking to recruit four more middle grade doctors, to have ten at each hospital.
- 3.7 During the winter we have increased the presence of middle grade doctors overnight at both hospitals (currently locums), to ensure that we have two doctors on at night seven days per week. We are putting plans in place to continue this level of night staffing with substantive staff.
- 3.8 We have appointed an additional Consultant Paediatrician (locum) at QEQM to release a substantive Consultant Paediatrician to provide specialist paediatric expertise within the Emergency Department.
- 3.9 We have extended the presence of paediatric consultants at QEQM to provide additional support to the emergency care pathway, with additional capacity at the busiest times, four days a week, with plans to extend this to seven days a week at both QEQM and WHH hospitals. We are seeking to recruit two additional consultant paediatricians at both QEQM and WHH.

#### **4. Daily safety checks**

- 4.1 Daily safety checks are carried out across all hospital areas caring for children and young people, including in the emergency departments. This gives full assurance that thorough checks are carried out every day on the fundamentals of care, including medicines storage, cleanliness of equipment and safe medical and nursing staffing.
- 4.2 These are reported daily to the Chief Nurse and discussed at the daily staff safety huddles led by the senior paediatric nurse on duty with actions progressed. Safety huddles provide daily assurance and ensure safe staffing across the Trust as staff can be deployed where they are needed.
- 4.3 Each children's ward now has a Quality Board visible in the patient areas containing daily assurance for families/children and staff on a variety of safety issues including staffing levels both nursing and medical, audits including hand hygiene, infection

control, number of complaints/complements/incidents and also learning from them. We also regularly report back on how learning from complaints is being taken forward.

## **5. Care of the deteriorating child**

- 5.1 Ongoing training in the identification and care of the deteriorating child continues with staff on the children's wards, operating theatres and emergency departments.

A separate "Management of the Child and Young Person Deteriorating Policy" is now in use. This revised guidance and re-training is ensuring every member of staff caring for sick children and young people follows the same Trust procedures and standards.

## **6. Improved systems**

- 6.1 Children's observations are now electronically monitored via the VITAL PAC system used in other wards in our hospitals, using the paediatric early warning system (PEWS) template. This is in full use on our children's wards and being rolled out within our emergency departments imminently.

Recording observations electronically enables robust and accurate audits to be gathered of both PEWS and Sepsis, and has ensured that clinicians can monitor a child's observations remotely.

## **7. Workstreams**

- 7.1 The Paediatric Improvement Programme continues to foster a culture of excellence and best practice, with improvement projects being taken forward under six workstreams, led by senior paediatric clinicians. The workstreams are: 1) Every child big voice 2) complex teams working together 3) culture of good effective communication 4) high quality safe service 5) consistent clinical standards and 6) confident decision-making using data and evidence.

## **8. Paediatric mental health training**

- 8.1 We have recently been successful in receiving funding from NHS England to participate in a project in collaboration with our local mental health Trust. This involves additional funding to improve training for professionals who care for children with mental health needs.

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