

Care Quality Commission inspection of children's and young people's hospital 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, Ashford, and Queen Elizabeth Queen Mother Hospital, Margate.
- 1.2. On 13 February 2019 the CQC published its reports into the October 2018 inspection which rated children's services 'good' for caring, but the overall rating for children's services in the two hospitals as 'inadequate'.
- 1.3. The services inspected were the children's ward at each hospital, the emergency departments and operating theatres. In their inspection the CQC recognised that staff are caring and compassionate.
- 1.4. They also inspected the Neonatal Intensive Care Unit at Ashford and the special care baby units at both hospitals, where they reported staff were very caring and supportive.
- 1.5. Following the inspection the CQC required the Trust to meet a number of conditions. On publication of its inspection report, the CQC confirmed that since October the Trust has made significant improvements in all of the areas that they highlighted and therefore the conditions can be removed shortly. The conditions said:
 - The trust must not use adult trolleys for patients under the age of 18 unless a risk assessment has been undertaken and documented to minimise any risk of harm.
 - The trust must submit a report to the Care Quality Commission each week giving the numbers of paediatric nursing and paediatric medical staff for all shifts along with the number of patients under the age of 18 in both hospitals, along with any incidents reported by the child health division in the seven days prior to the report.
 - Every four weeks the trust must submit a report to CQC in respect of the child health division, giving audit figures for paediatric early warning scores, medicines, use of resuscitation trolleys, and sepsis. The reports must show how clinical outcomes are being audited, monitored and acted upon.
 - The trust must submit its current risks on the child health division risk register to CQC every two weeks.
 - The provider must submit a report to CQC every four weeks on the current training rates for all staff who provide care and treatment to patients under the age of 18.
- 1.6. On 7 and 8 February 2019, East Kent Clinical Commissioning Groups held a Quality Assurance Visit to the services that the CQC had inspected and reported that they were satisfied that they had seen improvements within all the areas of the children and young people's services highlighted by the CQC. They reported that staff talked about the improvements they had made to date and plans for further and continued improvements for families.

2. Increased staffing levels

- 2.1 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. We have filled a number of vacant posts in both hospitals since the date of inspection, including four children's nurses, two emergency department children's nurses, one neonatal nursery nurse, two doctors and two child safeguarding practitioners.
- 2.2 Two more children's nurses are joining the children's ward at William Harvey Hospital shortly. We now have children's nurses in our two emergency departments 24/7, which means children and young people attending our emergency departments are cared for by nurses who are expert in these patients' needs.

3. Thorough daily safety checks

- 3.1 Daily safety checklists are carried out across all hospital areas caring for children and young people, including 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.
- 3.2 The outcomes of the daily checks are discussed at daily staff 'safety huddles' on the wards and clinical departments and action taken. They are also reported to the chief nurse daily.

4. Staff re-trained on early signs of deterioration

- 4.1 There have been no serious incidents at the hospitals relating to the identification or care of a deteriorating child, however we have updated our guidelines for staff on how to monitor sick children to recognise the early signs of a child becoming more unwell. Children's nurses on the children's wards, operating theatres and emergency departments are undergoing training in these updated guidelines and new staff also undertake this training when they begin work at the Trust.
- 4.2 The revised guidance and re-training will ensure every member of staff caring for sick children follows the same national procedures and standards.

5. Improved emergency department care for children and young people

- 5.1 In our emergency departments, we now have 24/7 children's nurses, so children and young people can be assessed and wait in dedicated children's areas.
- 5.2 Senior doctors and nurses are reviewing the way children and young people are assessed, diagnosed and treated in the emergency departments, to cut down the time children need to wait.

6. Ensuring risks are recognised and responded to quickly and appropriately

- 6.1 In October, the Trust restructured from four, large clinical divisions into seven smaller care groups, led by clinicians not managers. Each care group meets monthly with the Chief Operating Officer, Chief Nurse and Medical Director to review quality, risk and governance within their services. The monthly reports then go to the Board of Directors' Quality Committee every month for scrutiny by Board members, including

Non-executive Directors. The Quality Committee reports to the Board in public monthly.

- 6.2 This new structure and reporting framework brings a higher level of clinical assurance to the Board on the quality, risks and governance of services.

7. Further improvements

- 7.1 We are mapping our current practice against best practice standards, so we can take the right actions to improve how we assess and care for children and young people who are brought to our hospitals to wait for the mental health crisis service. Over the next 12 months we will focus on further mental health training for staff caring for these patients, and we are also assessing how we can provide a more appropriate environment for these patients to wait in to give them more privacy.
- 7.3 Under the NHS Long Term Plan, the NHS in England is making a commitment to invest in expanding access to community-based mental health services to meet the needs of more children and young people, and ensure children and young people experiencing a mental health crisis will be able to access the support they need.
- 7.4 We are investing £941k this financial year to redesign and redecorate Padua Ward – our oldest children’s ward - at William Harvey Hospital. This will create a ward environment and layout more suitable for children’s care and provide more privacy for children on the assessment unit.
- 7.5 We are changing how we organise planned operations so children do not have to fast before their procedure for longer than absolutely necessary and making sure children have the choice of wearing their own PJs or an operating gown on their way to the operating theatre. These are examples of small but important ways in which we are organising our services around the needs of each child.
- 7.6 A 12-month intensive improvement programme is fostering a culture of excellence and best practice within the hospital children’s and young people’s services. This programme is based on our successful BESTT programme (Birthing Excellence Success Through Teamwork), which saw rapid, radical, staff-led change in our maternity service.
- 7.7 In its 2018 report on the Trust, the CQC commented that “it was notable that the maternity department had made great strides to drive learning, improve patient outcomes and inspire innovation” and cited a number of examples of outstanding practice.