

# CQC Report

16 August 2017



The Shrewsbury and Telford Hospital NHS Trust  
**Our 16-page summary of the CQC report**

# Introduction from our Chief Executive



**The Care Quality Commission (CQC) has published its report, following its announced inspection of The Shrewsbury and Telford Hospital NHS Trust (SaTH) on 12-15 December 2016 and an unannounced inspection on 30 December 2016 and 3 January 2017.**

The report is available online at [www.sath.nhs.uk/cqc](http://www.sath.nhs.uk/cqc). This newsletter provides an overview of the findings and includes the overall ratings for the Trust and each of our services. The inspection focused on: Urgent and Emergency Services, Medical Care, Surgery, Maternity and Gynaecology and End of Life Care.

The Care Quality Commission (CQC) recognises a number of improvements since its last inspection. However, they still rated us as Requires Improvement. We recognise this as a fair and balanced report, and furthermore we will be encouraging the CQC to return to our hospitals to inspect areas that were not re-visited as part of inspection as we know we have made other significant improvements. There are many excellent comments in the report that make me extremely positive about the future of our Trust as we embark on a journey to provide the safest and kindest care in the NHS.

The CQC rates services by classifying them as Outstanding, Good, Requires Improvement or Inadequate. I am pleased that none of our services fall under the latter category but it does raise some important issues that we must continue to focus on. Furthermore, 64% (81/127) of the areas inspected are rated as Good. This improvement is particularly noticeable within Medical Care, but there is also positive movement within Surgery and End of Life Care.

However, one thing that is clear throughout the report is the care and compassion our staff show to our patients every single day. Indeed, we were rated "Good" for caring and one of the key findings of the report was that patients consistently told inspectors how staff cared for them with compassion and kindness. In the report it is also warming to read comments such as "we saw examples of good care being given on every ward and department we visited". The fact our Trust has been rated Good for caring doesn't surprise me at all. I see evidence of our staff caring for patients, families and staff on a daily basis.

The Trust is also rated Good when it comes to being effective. The report tells us that people's care and treatment is planned and delivered in line with current evidence-based guidance, standards, best practice and legislation. Furthermore, it adds that the outcomes for people who use our service are generally positive. This is another area where we are getting it right. We must not, however, gloss over the areas where we can and must improve. The ratings in the report show Requires Improvement in a number of areas at both the Princess Royal Hospital in Telford and the Royal Shrewsbury Hospital. The fragility of our A&E and some of our other services is no secret but we are working hard to resolve the challenges these services are facing. The need to resolve these challenges is the driving force behind our plans to reconfigure hospital services and to work more closely with GPs. We have set out a clear future that will bring state-of-the-art services into our county, protect those already here and encourage health professionals to want to come here, to work and live in this beautiful area.

We are also addressing many of our issues through our partnership with the Virginia Mason Institute, USA. During their visit the inspection team were incredibly impressed with this work, as well as our Transforming Care Institute, where the innovation and change work is housed, describing it as one of several areas of outstanding practice.



I cannot speak highly enough of the staff at SaTH. I appreciate times can be challenging but I really believe, and the CQC report suggests it too, that we are on the brink of something exciting. There was further evidence of this during the initial verbal feedback I received from the inspectors who said we have made a "demonstrable step forward" and have demonstrated areas of "outstanding care". We have a real opportunity to shape healthcare in Shropshire for future generations. Our strategic intentions around hospital services re-design, maternity reconfiguration and investment in our workforce with Virginia Mason are all improving services month-by-month, and therefore we look forward to being recognised as a 'Good' organisation in the very near future.

**Simon Wright**  
Chief Executive

## Overall rating for this trust

- Are services at this trust safe?
- Are services at this trust effective?
- Are services at this trust caring?
- Are services at this trust responsive?
- Are services at this trust well-led?

## Requires improvement

- Requires improvement 
- Good 
- Good 
- Requires improvement 
- Requires improvement 

# How we did

Our ratings for the Princess Royal Hospital in Telford are:

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent & Emergency services	Requires improvement	Good	Good	Requires improvement	Requires improvement	Requires improvement
Medical Care	Requires improvement	Good	Good	Good	Good	Good
Surgery	Requires improvement	Good	Good	Requires improvement	Requires improvement	Requires improvement
Critical Care	Requires improvement	Requires improvement	Good	Requires improvement	Requires improvement	Requires improvement
Maternity & Gynaecology	Requires improvement	Good	Good	Good	Requires improvement	Requires improvement
Children & Young People	Good	Good	Good	Good	Good	Good
End of Life Care	Requires improvement	Requires improvement	Good	Requires improvement	Good	Requires improvement
Outpatients & Diagnostic Imaging	Requires improvement	Not Rated	Good	Good	Good	Good
Overall	Requires improvement	Requires improvement	Good	Requires improvement	Requires improvement	Requires improvement

Our ratings for the Royal Shrewsbury Hospital are:

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent & Emergency services	Requires improvement	Good	Good	Requires improvement	Good	Requires improvement
Medical Care	Good	Good	Good	Good	Good	Good
Surgery	Requires improvement	Good	Good	Requires improvement	Requires improvement	Requires improvement
Critical Care	Requires improvement	Good	Good	Requires improvement	Requires improvement	Requires improvement
Maternity & Gynaecology	Good	Good	Good	Good	Good	Good
Children & Young People	Good	Good	Good	Good	Good	Good
End of Life Care	Good	Requires improvement	Good	Requires improvement	Good	Requires improvement
Outpatients & Diagnostic Imaging	Requires improvement	Inspected but not rated	Good	Good	Good	Good
Overall	Requires improvement	Good	Good	Requires improvement	Requires improvement	Requires improvement

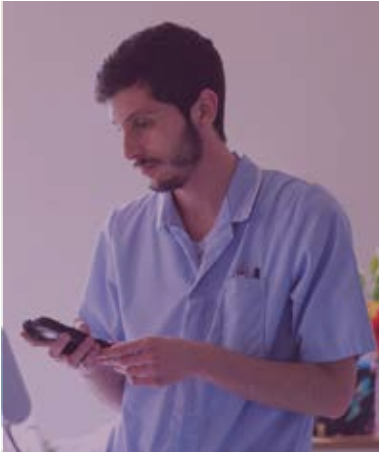
Our ratings for Bridgnorth and Oswestry Midwife-Led Units are:

Maternity & family planning	Good	Good	Good	Good	Good	Good
Overall	Good	Good	Good	Good	Good	Good

Our ratings for Ludlow Midwife-Led Units are:

Maternity & family planning	Requires improvement	Good	Good	Good	Requires improvement	Requires improvement
Overall	Requires improvement	Good	Good	Good	Requires improvement	Requires improvement

# Proud to Care



**There is a lot to be proud of in this report as it shows SaTH to be a learning organisation that has improved a number of its services.**

There are of course areas where we still need to improve; but while our overall rating remains Requires Improvement we are a lot closer to achieving Good than we were two years ago.

For me, the most heartening part of the report is that we are once again rated Good for caring. I am still fairly new to this organisation but in that time I have witnessed every day clear examples of the great care and compassion our staff deliver.

For the CQC inspectors to say they saw that all clinical and non-clinical staff treating patients and their relatives with compassion and respect fills me with joy. But perhaps even more importantly is the feedback we receive directly from our patients. Therefore I am even more delighted that in the NHS Friends and Family Test survey our results are better than the national average.

An area where we have really improved is in End of Life Care. SaTH made this a strategic priority in 2015 and the inspection team recognised the Swan Scheme, which has been rolled out across the Trust, as an area of "outstanding practice". The inspection team were also really impressed with how our Palliative Care team have developed a fast-track checklist to provide guidance to ward staff on what to consider when discharging an end of life patient. We have still been graded Requires Improvement for End of Life Care but considering the service was deemed Inadequate two years ago it shows how much we have achieved in a short space of time.

Over the past few years SaTH has taken great pride in being an open and transparent organisation and therefore I'm delighted the inspection team saw examples of this, commenting: "Across all the areas we visited, we saw a positive change in culture amongst staff and leaders since our 2014 inspection. There was an increasing atmosphere of openness, honesty and candour and this was being driven by senior leaders."



2014

5 Inadequate Services  
46 Require Improvement  
74 Good

64% of our services are now rated as good

2017

0 Inadequate Services  
43 Require Improvement  
81 Good



## Getting the basics right

They also told us that in every interaction they saw between nurses, doctors and patients, the patients were treated with dignity and respect, and that our staff are highly motivated and passionate about the care they deliver. Another pleasing aspect of the report is they recognise we have defined and embedded systems, processes and standard operating procedures to keep people safe and safeguarded from abuse. And as well as this the treatment we deliver is planned and delivered in line with national guidelines and best practice recommendations. Clearly, however, our overall rating of Requires Improvement tells us we are still on a journey and that there are areas where we can and must make changes.

## Areas to progress

The rating for Maternity and Gynaecology at the Princess Royal Hospital in Telford is Requires Improvement. The reports states the service is in a transitional period and although new senior leaders have started to make positive changes, the inspectors had some concerns regarding embedded safety and culture. They also tell us that more work is required on the management of medicines and checking of resuscitation equipment. Since our inspection we have commissioned the Royal College of Obstetricians and Gynaecologists to help in this regard and internally we have introduced a fifth Value Stream, as part of our work with the Virginia Mason Institute, to improve patient safety.

We welcome these helpful observations and we have taken immediate actions to improve the situation. We will also take heart from the fact they witnessed a positive incident reporting culture, that staff understand the importance of reporting and learning from incidents, and that serious incident investigations had improved and involved families in the process.

These are by no means all of the areas were the report say we need to improve, but please be assured that in response to the findings contained within the CQC report the Trust will produce an action plan to address points raised with our team. This will be presented to the Board of Directors and then an updated version of the plan will be presented to the Board every month in order to provide assurance that progress is being made and that the changes implemented have had the desired effect. Finally, this report shows real progress in our journey of improvement and it's important we now take the necessary improvements highlighted in the report.

**Deirdre Fowler**  
Director of Nursing, Midwifery and Quality



# What the inspectors saw

We saw that staff treated patients in a compassionate manner.

Patients told us they had felt fully informed throughout their experience and had good understanding of their treatment as a result.

**New staff members felt there was a positive culture within the trust and told us they had felt welcomed and supported.**

There was a range of choices for women during labour. Women told us they felt involved with decisions in their care.



# at our two hospitals



The trust had a clear policy on antenatal clinical risk assessment, we saw these were completed by staff.

We found that incidents were reported, analysed, and learning was shared with staff.

All staff we spoke with said there was a strong drive to provide the best care and experience for all women, babies and their families.

We saw, and patients and relatives we spoke with consistently told us, that staff were kind and caring.

# Good for Medical Care



**To be rated Good for Medical Care at both hospitals is a great achievement and really demonstrates the journey of improvement we have been on over the past few years.**

When the inspection team visited us in October 2014 they judged Medical Care to Require Improvement at both sites, yet fast forward little over two years and we have lit the board green – making it is an area of our organisation we, and the people we serve, can be immensely proud of.

While we aspire to be Outstanding, I am delighted that inspectors found Medical Care to be rated Good in all five categories - Safe, Effective, Caring, Responsive and Well-led - at the Royal

Shrewsbury Hospital (RSH) and in four of the five areas at the Princess Royal Hospital (PRH). I am in little doubt that this also played a key role in the Trust receiving a Good rating for Effective Services.

**Below are just a few examples of some of the great comments in the report**

- There was clear statement of vision and values, driven by quality and safety. Leaders at every level prioritised safe, high quality, compassionate care.
- Openness and transparency about safety was encouraged. Staff understood and fulfilled their responsibilities to raise concerns and report incidents and near misses. There were clearly defined and embedded systems, processes and standard operating procedures to keep people safe and safeguarded from abuse.
- Staff planned and delivered patients' care and treatment in line with current evidence-based guidance, standards, best practice and legislation.



- Staffing levels and skill mix were planned, implemented and reviewed to keep people safe at all times. Any staff shortages were responded to quickly and adequately.
- We found that incidents were reported, analysed, and learning was shared with staff. We saw an electronic board system, which displayed patient information and allowed quick and easy access for all staff. We saw staff caring for patients in all areas that we inspected.

**Our score for Surgery has also improved. I was particularly pleased to read the following:**

- Staff treated patients in a caring and compassionate manner, they felt supported by their immediate line managers and that there was a positive culture at the hospital. There were effective tools and processes in place to meet patient's individual needs including learning disabilities and dementia.
- Systems were in place and staff were clear of the protocols for assessing patient risks and managing deteriorating patients and there was a positive incident reporting culture.
- Evidence based care was provided and care pathways were based on relevant and current guidance.

**Dr Edwin Borman,  
Medical Director**



# Our hospitals: 2016/17



## EMERGENCY

**170**  
AMBULANCES A DAY



## PLANNED CARE



**410,000**  
OUTPATIENT APPOINTMENTS



**64,000**  
DAYCASE  
AND ELECTIVE  
INPATIENT SPELLS

## WOMEN AND CHILDREN

**62,000**  
OUTPATIENTS EACH YEAR



**4,900**  
BABIES  
A YEAR



**9,000**  
PAEDIATRIC INPATIENTS A YEAR



# End of life Care improved



There has been a “drive for change and improvement of End of Life Care services” at SaTH, according to CQC inspectors.

Following the last CQC inspection, when the services were graded Inadequate, SaTH made it a priority to improve the service it offers to patients and their families. Following the introduction of a number of specialist services our performance is now greatly improved.

Staff were highly motivated and passionate to provide End of Life Care and that there was a drive for change and improvement of End of Life Care services at the hospital.

Introduced End of Life Care Team (3 Whole Time Equivalents)

Staff at all levels and from all departments understood the importance of a dignified death

5 Swan Rooms & 1,700 staff trained in End of Life Care

Swan scheme recognised as an **“Outstanding practice”**

1,000 Memory Boxes

Staff at all levels and from all departments understood the importance of a dignified death

£1.89 million Mortuary Upgrade

Since the 2014 inspection a £1.89 million refurbishment of the hospital's mortuary has led to improvements in capacity, security, incorrect fridge temperature alerts and a separate visitors entrance.

## What our patients said:

“Staff were polite and respected their dignity”

“We were only ever treated with kindness and compassion.”

# Transforming Care at SaTH

SaTH is developing a culture of safest and kindest care through its partnership with the Virginia Mason Institute (VMI) - the USA's 'Hospital of the Decade'.



The inspection team commented on areas of "Outstanding Practice" with how the Trust has embraced VMI's methodologies and developed new initiatives through the introduction of the Transforming Care Institute.

"We have 1,700 patient episodes every single day so the opportunity to transform lives is here for us all to take."

"We have so far focused our improvement in four areas - Respiratory Discharge, Sepsis, Recruitment and Ophthalmology."

"In less than two years we have seen 57,000 safer patient journeys."

"We have already seen nearly 2,000 people exposed to the production system and we have 436 members of staff using the tools in their daily work."



"We are on a journey - it has taken VMI 14 years to get where they are and I think they would admit you never really finish the journey. We have made a lot of improvements in a short period of time. The future is very exciting and I really do believe we can achieve our vision of providing the safest and kindest care in the NHS."

- Simon Wright Chief Executive



# A case for change

## Findings in the CQC report emphasised the need to re-shape healthcare in Shropshire for future generations.

The proposal is to create an emergency site and a specialist planned care site. The strategic service redesign will remove the workforce fragility, evidenced in areas such as our A&E Departments.



The report states: "Poor medical staffing levels meant that consultants regularly worked in excess of their contracted hours." It adds: "Two consultants told us they were supposed to attend between 9am and noon on weekends, to carry out ward rounds in the Emergency Department and the Clinical Decisions Unit. However, they said they rarely left the department before 5pm and were then frequently called back in overnight. They told us this level of pressure was unsustainable." Simon Wright, Chief Executive, agrees: "Our A&E services are perilously close to tipping point."

"Our staffing position has become frailer. We continue to have times where there are not any consultants on site at Telford, especially at evenings and weekends, that means the patients are waiting a longer period for assessment at A&E so that is a concern.

"What we have seen this year is there has been no let up. We have seen a six per cent increase in A&E attendances at Princess Royal Hospital in Telford recently which is quite a big increase. This has resulted in longer waiting times. The demand is all year round now.

"We are putting adverts out and linking appointments with our Virginia Mason work to offer something different but we are consistently getting the same message which is at the moment the rota is not appealing.

"This shadow that hangs over us about the future of emergency services is not making it any easier to retain our existing staff, let alone recruit.

"We established Future Fit to get a solution in two years - we are now three-and-a-half years into that so the hospital is extremely frustrated at the slow pace of decision making. We just want a decision to be made.

"The moment that a decision is taken then we will be attractive for people to come and work here."

**- Simon Wright Chief Executive**

The reports says SaTH must ensure the Emergency Department meets the Department of Health's target of discharging, admitting or transferring 95% of its patients with four hours of their arrival in the department. Our clinical teams and our regulators all agree we need this strategic re-design to secure our workforce in the future and the future services for our population.



## NHS FRIENDS AND FAMILY TEST

**94.7%**  
of users in **A&E**  
would recommend  
our hospitals



**98.1%**  
of **inpatients** would  
recommend our hospitals



**98.2%**  
of maternity users would  
**recommend** where they  
had their baby



**Cancer**  
waiting  
times  
**All**  
targets  
met

## ACCESS



**80.7%**  
of patients admitted, transferred  
or discharged within **4 hrs** of  
arriving at  
**A&E**

## WORKFORCE



**4.04%**  
Sickness  
absence



**86.17%**  
Appraisals

## HEALTHCARE-ACQUIRED INFECTIONS



**1** case of MRSA  
Bacteraemia

**18** cases of  
C difficile  
(target of less than 25)

## QUALITY OF CARE



**95.66%**

assessment for venous  
thromboembolism (VTE)

VTE is a condition where a blood clot  
forms in a vein  
(target 95%)

# On a journey to become

The CQC Report provides a lot of detail that gives us confidence in what we are getting right - and flags up areas where we need to make improvements.

Inspectors visited the hospital for an announced visit on 12-15 December 2016. Overall they rated The Shrewsbury and Telford Hospital NHS Trust as Requires Improvement. They saw that services were caring, compassionate and effective. They also saw a number of areas that required improvement.

Summary of the

Key findings:

- In every interaction we saw between nurses, doctors and patients, the patients were treated with dignity and respect. Staff were highly motivated and passionate about the care they delivered.

- Openness and transparency about safety was encouraged. Incident reporting was embedded among all staff, and feedback was given. Staff were aware of their role in Duty of Candour.

- Treatment was planned and delivered in line with national guidelines and best practice recommendations

- There were clearly defined and embedded systems, processes and standard operating procedures to keep people safe and safeguarded from abuse.

- It was easy for people to complain or raise a concern and they were treated compassionately when they did so.

- Local and national audits of clinical outcomes were undertaken and quality improvements projects were implemented in order to continually improve patient care and outcomes.

- There was clear statement of vision and values, driven by quality and safety. Leaders at every level prioritised safe, high quality, compassionate care.

- The Trust had made end of life care one of its priorities in 2015/2016.

- Nursing staff vacancies were impacting on continuity of care.

- Insufficient numbers of consultants and middle grade doctors were available.

“Workforce fragility is our biggest risk” - **Simon Wright, Chief Executive**



# the safest and kindest



## Areas of outstanding practice the inspectors highlighted were:

- The Swan scheme that has been rolled out across the Trust, which includes a Swan Bereavement Suite and Swan rooms.
- A fast track checklist, developed by the Palliative Care Team, to provide guidance to ward staff on what to consider when discharging an end of life patient.
- Our partnership with The Virginia Mason Institute, widely regarded as one of the safest hospitals in the world. The inspection team were impressed with how the Trust has embraced these methodologies and developed new initiatives

## Priorities for improvement arising from the report are:

• Ensure our Emergency Department meets the Department of Health's target of discharging, admitting or transferring 95% of its patients with four hours of their arrival in the department.

• Ensure all patients brought in by ambulance are promptly assessed and triaged by a registered nurse.

• Ensure a suitably qualified member of staff triages all patients, face to face, on their arrival in the Emergency Department by ambulance.

• Ensure the Trust meets the Referral to Treatment Time (RTT) for admitted pathways for surgery

• Ensure all staff received an annual appraisal.

• Ensure there are sufficient nursing staff on duty to provide safe care for patients. A patient acuity tool should be used to assess the staffing numbers required for the dependency of the patients.

• Review medical staffing to ensure sufficient cover is provided to keep patients safe at all times.



• Ensure that all staff are up-to-date with mandatory training.

• Ensure all staff have an understanding of how to assess mental capacity under the Mental Capacity Act 2005 and that assessments are completed, when required.

• Ensure the application of the World Health Organisation's (WHO) 'five steps to safer surgery' checklist is improved in theatres.

• Make sure an up-to-date safety thermometer information is displayed on all wards

• The trust must ensure they are preventing, detecting and controlling the spread of infections, associated in the mortuary department by ensuring surgical instruments are decontaminated to a high level and there are arrangements in place for regular deep cleaning.

• The trust should consider using the maternity specific safety thermometer to measure compliance with safe quality care



A huge thank you to all of our staff and volunteers. Your dedication and care is unquestionable and you should be proud of the improvements made in just two years.

The journey continues and we welcome the scrutiny of our regulators in charting our progress, in the very near future from Requires Improvement to Good and ultimately to Outstanding.

- **Simon Wright, Chief Executive**

**CQC's Chief Inspector of Hospitals, Professor Ted Baker, said:** "Our inspectors found a number of improvements had been made at Shrewsbury and Telford Hospital NHS Trust since our last inspection, and staff are to be commended for this.

"The change in ratings in a number of areas acknowledges what has been achieved by the trust's staff and leadership team and we found several examples of outstanding practice."

