

NUFFIELD HEALTH BRISTOL HOSPITAL – THE CHESTERFIELD

CQC INSPECTION 2015 ACTION PLAN

| Introduction |
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| <p>Nuffield Health Bristol Hospital – The Chesterfield was inspected by the Care Quality Commission (CQC) from the 22nd – 25th February 2015, with a subsequent unannounced and out of hours visit on 10th March 2015.</p> <p>A team of 7 inspectors reviewed aspects of the Hospital's clinical and support services. The inspection was structured around the CQC's 5 key questions for each of the 8 core services they inspect to provide assurance that services are:</p> <ul style="list-style-type: none">• Safe• Effective• Caring• Responsive• Well led <p>Findings</p> <ul style="list-style-type: none">• The Hospital received a 'Good' rating for adult surgery and outpatients services and also for our services being caring and responsive. However, disappointingly, the CQCs rating for children's services were 'Inadequate'. These results reflected the overall rating the CQC gave the hospital of 'Requires Improvement'. The dedication, commitment and flexibility of our frontline people was specifically noted – highlighting the high levels of quality care and compassion provided to patients.• The final report concluded that there was insufficient evidence to assess the hospital's rating for effective.• A Quality Summit was held on July 8th 2015 and the final report was published on 15th July 2015 and is available from http://www.cqc.org.uk/location/1-918228984 |
| Governance Process |
| <p>Internal</p> <ul style="list-style-type: none">• The Local Hospital Board directly approves the CQC action plan, receives monthly assurance updates via the Hospital Quality plan, and Safety Report and will update the Medical Advisory Committee on a quarterly basis |

- The Group Hospital Quality and Safety committee will directly monitor and provide assurance of CQC actions to the Hospital Board.

External

The report and action plan will form part of reporting mechanisms to external partners to include Clinical Commissioning Groups' & NHS Trusts.

ACTIONS THE PROVIDER MUST IMPLEMENT

| Ref | Area of Improvement | Actions | Lead (s) responsible | Completion / due date | Outcome / Success Criteria (including on-going assurance) |
|--------|--|---|---|---------------------------------|---|
| MI / 1 | Ensure that there are sufficient number of suitably qualified, skilled and experienced staff, employed by the provider to ensure standards of safety of children and young people are met and are meeting the requirements set out in national guidance, prior to providing any further services to children and young people. | Gap analysis to be completed against national guidance for standards and safety of children and young people to ensure compliance within: <ul style="list-style-type: none"> Ward team Theatre team Operating Department Team | Hospital Matron / Lead Paediatric Nurse | 31 st August 2015 | To be presented to September local Hospital Board. |
| | | Develop a workforce plan to support recruitment and retention of Registered Children's Nurses | Hospital Matron / HR Manager | 31 st August 2015 | To be presented to September local Hospital Board. |
| | | Review Out Patient and Surgical Pathways for Children and Young People ensuring : <ul style="list-style-type: none"> There is sufficient prior planning to ensure there are suitably qualified skilled and experienced staff on duty to care for children and young people | Hospital Director (Designate) / Hospital Matron | 30 th September 2015 | Local Hospital Board |

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|--------|--|--|--|---|---|
| | | <p>Seek written assurance from all consultants caring for children and young people that they have appropriate qualifications, skills and experience to deliver safe and effective care to include:</p> <ul style="list-style-type: none"> Evidence of qualification and skills for inclusion on Practice Privilege files Evidence safeguarding children training Resuscitation training to include Paediatric Basic Life Support if working with 3-11 years; Basic Life Support for 12-17 years <p>Seek assurance from third party providers that staff caring for children have appropriate qualifications, skills and experience to include:</p> <ul style="list-style-type: none"> Safeguarding Children Resuscitation <p>Seek assurance from NES Resident Medical Officers' caring for children and young people have appropriate qualifications, skills and experience prior to commencement of hospital placement.</p> | <p>Hospital Director (Designate)</p> <p>Hospital Matron</p> <p>Hospital Matron</p> | <p>30th September 2015</p> <p>12th August 2015</p> <p>Completed</p> | <p>Response to be monitored at local monthly Hospital Board</p> <p>Diagnostic Services Group</p> |
| MI / 2 | Ensure that there is adequate resuscitation equipment and medicines to ensure safety of children and | <p>Replace all resuscitation trolleys ensuring there is paediatric specific drugs and equipment in:</p> <ul style="list-style-type: none"> OPD Ward Lower Ground (Radiology / Day Case | Hospital Matron / Nursing Services Manager | Completed 30/6/15 | Hospital Resuscitation Committee |

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|------|---|--|---|---------------------------------|--|
| | young people, prior to providing any further services to children and young people. | <p>Unit)</p> <ul style="list-style-type: none"> Theatre / Recovery <p>Review the delivery of mandatory resuscitation training for clinical staff to include care of the deteriorating child ensuring there are on-going training sessions booked throughout the calendar year and achieve overall compliance > 90%</p> | Hospital Matron / HR Co-ordinator | 31/8/15 | Compliance monitored monthly at local Hospital Board and quarterly by Hospital Resuscitation Committee |
| MI/3 | Ensure that consent of children and young people is appropriate, with consideration to the capacity of the child, prior to providing any further services to children. | Ensure all Pre-assessments are carried out on all children and young people undergoing treatment by a Registered Children's Nurse and they are competent in assessing the child's capacity to understand their plan of care and this is documented in the patient's care record | Lead Paediatric Nurse / Hospital Matron | 30th September 2015 | Audit of care records Paediatric Audit |
| MI/4 | Ensure that there is sufficient leadership and oversight of services provided to children and young people, prior to providing any further services to children and young people. | <p>Develop Hospital Strategy to support the existing and future development of services within the hospital. To include:</p> <ul style="list-style-type: none"> The formation of a Hospital Children and Young People expert advisory group Develop formal links with Bristol Children's Hospital | Hospital Director / Hospital Matron | 30 th September 2015 | Monthly Hospital Board MAC Medical Advisory Committee |

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Information Classification: Unrestricted

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|------|--|--|----------------------|-----------------------|---|
| | | <ul style="list-style-type: none"> Ensure appropriate infrastructure and availability of Registered Children Nurses to support the delivery of the service. Review the membership of the Medical Advisory Committee (MAC) to include a paediatric consultant to advise and support the delivery of the service. Review agenda of Medical Advisory Committee to include standing item for Children and Young People Services to include a formal report from the Hospital Resuscitation Committee Review the membership of Hospital Resuscitation Committee to include membership of: <ul style="list-style-type: none"> Lead Paediatric Nurse Paediatric Anaesthetist Radiology representative | Hospital Matron | Completed 30/6/15 | |
| | | Review agenda of Hospital Resuscitation Committee to include standing agenda item for Children & Young People | Hospital Matron | Completed 30/6/15 | |
| MI/5 | Ensure that there is sufficient data collection, external benchmarking and monitoring of | Review monthly Hospital's Quality & Safety Report to the Nuffield Health Hospital Board and identify local variances; lessons learnt and changes to local practice. | Hospital Matron | Monthly | Monthly at local Hospital Board Meeting via Quality & Safety Report |

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ACTIONS THE PROVIDER SHOULD IMPLEMENT

| Ref | Area of Improvement | Actions | Lead (s) responsible | Completion / due date | Outcome / Success Criteria (including on-going assurance) |
|-------|---|--|---|---|---|
| SI/1 | Provide sufficient training to make sure that all staff have a clear understanding of the Mental Capacity Act 2005. | <p>All clinical staff to complete academy online Mental Capacity training module.</p> <p>Mental Capacity seminar to be delivered by RCN National Mental Health Advisor on 28th July 2015.</p> <p>Matron and Senior Clinical HOD's to attend Mental Capacity Training offered by Bristol City Council</p> | <p>Hospital Matron</p> <p>Hospital Matron</p> <p>Hospital Matron</p> | <p>30/10/15</p> <p>Completed</p> <p>31/12/15</p> | Hospital Board monthly report |
| SI/2. | Provide sufficient mandatory training in basic life support | <p>Annual programme for the delivery and content of resuscitation training for clinical and non-clinical staff to be reviewed to ensure overall compliance of > 90%</p> <p>Bi-monthly resuscitation training scenarios to be reviewed to incorporate care of the deteriorating child.</p> | <p>Hospital Matron / HR Manager</p> <p>Hospital Matron / Resuscitation training officer</p> | <p>Completed 30/6/15</p> <p>Completed 30/6/15</p> | <p>Resuscitation training compliance to be monitored via monthly reporting to Hospital Board, Hospital Resuscitation committee and Medical Advisory Committee</p> <p>Resuscitation committee to provide formal report to Medical Advisory Committee on outcome's from scenarios, lessons learnt and actions to improve compliance</p> |