

# CARE QUALITY COMMISSION INSPECTION NOVEMBER 2022

Matthew Trainer  
Chief Executive

JHOSC

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TAKING  IN OUR CARE

  
Barking, Havering and Redbridge  
University Hospitals  
NHS Trust

# OVERVIEW

- **November 2022:** The Care Quality Commission (CQC) visited King George and Queen’s hospitals to inspect our Emergency Departments (EDs) at both sites, and medical wards and Radiology at King George Hospital (KGH)
- Some of our ratings have changed, including our urgent and emergency care services being rated Inadequate - this is not unexpected as we responded to an incredibly challenging winter
- We remain Requires Improvement overall
- There are improvements we need to make to our own processes; however in their report, the CQC also accepted the issues they highlighted at our Trust are made worse by pressures in primary care, adult social care and community care within the wider system
- Inspectors highlighted the number of patients with mental health needs waiting for long periods of time in A&E cubicles due to shortages of mental health beds elsewhere as a “significant issue of concern”
- They also expressed concern about delays in establishing if patients had been adversely affected after we’d discovered several thousand people waiting for routine radiology investigations had been left off waiting lists – all patients delayed have now been seen and all harm reviews have been completed
- We’re pleased the CQC found that our focus on building stability into the leadership team, and developing a model of inclusive leadership, was “beginning to positively impact the culture across the organisation”
- They also praised our staff for treating patients with compassion and kindness, in difficult circumstances



# TRUST RATINGS

## Our overall rating remains Requires Improvement (RI)

Changes include:

- Queen's Hospital now rated RI for Responsive
- The Trust is now rated RI for Well-led

### Rating for acute services/acute trust

	Safe	Effective	Caring	Responsive	Well-led	Overall
King George Hospital	Requires Improvement →← Jan 2023	Good →← Jan 2023	Good →← Jan 2023	Requires Improvement →← Jan 2023	Requires Improvement →← Jan 2023	Requires Improvement →← Jan 2023
Queen's Hospital	Requires Improvement →← Jan 2023	Good →← Jan 2023	Good →← Jan 2023	Requires Improvement ↓ Jan 2023	Requires Improvement →← Jan 2023	Requires Improvement →← Jan 2023
Overall trust	Requires Improvement →← Jan 2023	Good →← Jan 2023	Good →← Jan 2023	Requires Improvement →← Jan 2023	Requires Improvement ↓ Jan 2023	Requires Improvement →← Jan 2023



## Rating for King George Hospital

	Safe	Effective	Caring	Responsive	Well-led	Overall
Medical care (including older people's care)	Requires Improvement ↓ Jan 2023	Not rated	Not rated	Not rated	Not rated	Not rated
Services for children & young people	Requires improvement Jan 2020	Requires improvement Jan 2020	Good Jan 2020	Requires improvement Jan 2020	Good Jan 2020	Requires improvement Jan 2020
Critical care	Requires improvement Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020
End of life care	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020
Surgery	Good Jun 2018	Good Jun 2018	Good Jun 2018	Good Jun 2018	Requires improvement Jun 2018	Good Jun 2018
Urgent and emergency services	Inadequate ↓ Jan 2023	Not rated	Good ↔ Jan 2023	Inadequate ↓ Jan 2023	Requires Improvement ↔ Jan 2023	Inadequate ↓ Jan 2023
Outpatients	Requires improvement Jan 2020	Not rated	Good Jan 2020	Requires improvement Jan 2020	Requires improvement Jan 2020	Good Jan 2020
Diagnostic imaging	Good Jan 2023	Not rated	Good Jan 2023	Requires Improvement Jan 2023	Requires Improvement Jan 2023	Requires Improvement Jan 2023
<b>Overall</b>	Requires Improvement ↔ Jan 2023	Good ↔ Jan 2023	Good ↔ Jan 2023	Requires Improvement ↔ Jan 2023	Requires Improvement ↔ Jan 2023	Requires Improvement ↔ Jan 2023

To note, diagnostic imaging did not previously stand alone as a service



## Rating for Queen's Hospital

	Safe	Effective	Caring	Responsive	Well-led	Overall
Medical care (including older people's care)	Not rated	Not rated	Not rated	Not rated	Not rated	Not rated
Services for children & young people	Requires improvement Mar 2017	Good Mar 2017	Good Mar 2017	Good Mar 2017	Good Mar 2017	Good Mar 2017
Critical care	Requires improvement Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020	Good Jan 2020
End of life care	Good Jan 2020	Good Jan 2020	Good Jan 2020	Outstanding Jan 2020	Outstanding Jan 2020	Outstanding Jan 2020
Outpatients and diagnostic imaging	Good Mar 2017	Not rated	Good Mar 2017	Requires improvement Mar 2017	Good Mar 2017	Good Mar 2017
Surgery	Good Jun 2018	Good Jun 2018	Good Jun 2018	Good Jun 2018	Requires improvement Jun 2018	Good Jun 2018
Urgent and emergency services	Inadequate ↓ Jan 2023	Good Jan 2020	Requires Improvement ↓ Jan 2023	Inadequate ↓ Jan 2023	Requires Improvement ↔↔ Jan 2023	Inadequate ↓ Jan 2023
Maternity	Requires improvement Oct 2021	Good Jun 2018	Good Jun 2018	Good Jun 2018	Requires improvement Oct 2021	Requires improvement Oct 2021
Overall	Requires Improvement ↔↔ Jan 2023	Good ↔↔ Jan 2023	Good ↔↔ Jan 2023	Requires Improvement ↓ Jan 2023	Requires Improvement ↔↔ Jan 2023	Requires Improvement ↔↔ Jan 2023



# OUR MUST DO ACTIONS

## Emergency Departments at both KGH and Queen's hospitals

Both EDs moved from RI to Inadequate for Safe and Responsive

This resulted in an overall rating of Inadequate

- **Ensure that personal privacy and dignity of patients is maintained, including those located in the corridors outside the ED**  
When we need to use this space, patients receive cooked meals and regular drinks; we ensure the correct equipment and nurses are located there; and it is closed off to people using it as a thoroughfare.
- **Improve oversight of the time taken to triage patients arriving in ED from the UTC run by PELC**  
The patient administration systems used differ at each organisation, and so we're meeting with PELC weekly to identify new ways of working to provide better oversight and support a better overall patient experience
- **We must ensure all patient records are accessible to admitting wards and there is no possibility of duplication of medications**  
A review of our processes has been undertaken. A training need was identified, and this has now been addressed
- **We must ensure that medications are prescribed and administered in a timely manner**  
We have a dedicated pharmacist at Queen's. The addition of an Omnicell drugs cabinet at KGH means ED staff have quicker and easier access to medication. And we are looking to increase the number of band 5 nurses at both sites





## Radiology at KGH

The service has changed from Good to being rated RI for responsive and Well-led

- **We must ensure there is adequate information for radiology staff on the role of the radiation protection supervisors (RPSs) as well as the right support and structure for RPSs to fulfil their roles**

A robust communications and engagement plan has been developed and is being implemented

- **We must ensure that a clinical harm review is completed as soon as possible regarding the accuracy of patient tracking list (PTL) data for diagnostic imaging patients**

This has been completed



## Medical care at KGH

The service has changed from Good to RI

- **The service must ensure that all patient records and assessments are completed accurately and in a timely manner, and action plans must be clearly identified**

We have started undertaking CRABEL audits – these are audits of medical records looking at a range of criteria including legibility, dates, and GMC stamps



# HOW WE'RE RESPONDING

- We're focusing on addressing the 'Must Do' and 'Should Do' actions from the CQC to help improve patient care – detailed improvement plan developed and reviewed monthly
- Opened our Surgical Assessment Unit at Queen's to take surgical patients out of ED
- Opened our larger Same Day Emergency Care (SDEC) at Queen's to improve flow out of ED
- Daily discharge target for every ward, including weekends – monitored three times a day; focus on increasing pre-midday discharges
- Working with system colleagues to improve care for patients with mental health needs waiting too long in our EDs
- Fixed the issue that caused the problem with our diagnostic waiting list. We organised additional capacity for MRI, CT scans and non-obstetric ultrasounds and all patients who experienced a delay have now been seen
- All harm reviews have been completed
- We're carrying out a thorough review of the way data is collected to ensure all our systems are working properly and reporting accurately

