

Barts Health Royal London Hospital CQC Report December 2016

Initial briefing for the Health Scrutiny Panel – January 2017

The CQC inspected the Royal London Hospital in July 2016. The inspectors reviewed eight core services: Urgent and Emergency Care, Medicine (including older people's services), Surgery, Critical Care, Maternity and Gynaecology, End of Life Care, Services for Children and Young People and Outpatients and Diagnostics.

Overall the Royal London Hospital has improved from a rating of Inadequate in 2015 to Requires Improvement in 2016

The full report is attached but the table below shows a very high level comparison between the 2015 and 2016 inspections.

2015 and 2016 Rating Comparison

	Safe	Effective	Caring	Responsive	Well-led	Overall	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and emergency services	Requires improvement	Good	Good	Requires improvement	Requires improvement	Requires improvement	Requires improvement	Good	Good	Requires improvement	Good	Requires improvement
Medical care	Requires improvement	Good	Good	Requires improvement	Requires improvement	Requires improvement	Requires improvement	Good	Requires improvement	Good	Requires improvement	Requires improvement
Surgery	Inadequate	Good	Good	Inadequate	Requires improvement	Inadequate	Requires improvement	Good	Requires improvement	Inadequate	Requires improvement	Requires improvement
Critical care	Good	Good	Good	Good	Good	Good	Good	Good	Outstanding	Requires improvement	Good	Good
Maternity and gynaecology	Inadequate	Good	Good	Good	Requires improvement	Requires improvement	Inadequate	Good	Requires improvement	Requires improvement	Inadequate	Inadequate
Services for children and young people	Inadequate	Requires improvement	Good	Requires improvement	Inadequate	Inadequate	Requires improvement	Requires improvement	Good	Requires improvement	Requires improvement	Requires improvement
End of life care	Requires improvement	Inadequate	Requires improvement	Requires improvement	Inadequate	Inadequate	Requires improvement	Requires improvement	Good	Requires improvement	Good	Requires improvement
Outpatients and diagnostic imaging	Requires improvement	Not rated	Good	Requires improvement	Requires improvement	Requires improvement	Requires improvement	Not rated	Good	Requires improvement	Good	Requires improvement
Overall	Inadequate	Requires improvement	Good	Requires improvement	Inadequate	Inadequate	Requires improvement	Requires improvement	Requires improvement	Requires improvement	Requires improvement	Requires improvement

Areas of improvement include:

- Outstanding in Caring in Adult Critical Care. The service had also developed a programme of learning to ensure best practice and improve patient care for a frequently changing workforce.
- Acknowledgement of the positive changes in the management structure
- Outstanding practice identified relating to innovation in trauma services, excellent sexual health services, code black protocol for patients with head injuries

- A change from inadequate to good for caring in end of life care and a move from requires improvement to good for well led in the same specialty
- Inadequate ratings reduced from seven to three

The Trust recognises that there is more work to be done and areas of specific focus include:

- Maternity services where the hospital was rated inadequate
- Particular focus on security and baby wrist bands
- High levels of agency staff. Concerns were raised that maternity services were not meeting the 1:28 ratio
- Flow throughout the hospital needs to be improved
- Caring has moved from Good to Requires Improvement in three specialties

The site leadership team is now working on a detailed action plan to address all of the CQCs concerns and a detailed plan will be fully discussed at the CQC Summit to be held at the end of January. There have been many specific areas of improvement since the inspection in July 2016 including

- a revision of the abduction policy within maternity which is now formally tested on a monthly basis along the lines of major incident testing protocol
- New baby wrist bands have been developed with the supplier and these are now in use throughout the maternity unit. Daily audit of use of wrist bands in place.
- Baby tagging system being sourced by PFI provider
- Staffing into permanent posts across the RLH has increased by 4%
- Agency usage on site has reduced by 31%
- The hospital has achieved a 40% response rate in the staff survey and early indications are positive. This level of response rate will facilitate a meaningful plan to improve areas of concern.

The RLH Leadership Team and Executive will be pleased to attend a Health Scrutiny panel at a later date to share the detailed action plan if requested.

Jackie Sullivan

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