



Health Scrutiny Panel

27 March 2014

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| Report Title | Royal Wolverhampton Hospital NHS Trust - Care Quality Commission Chief Inspector of Hospitals inspection – outcome and action plan | |
| Classification | Public | |
| Cabinet Member with Lead Responsibility | Councillor Sandra Samuels Health and Well Being | |
| Wards Affected | All | |
| Accountable Strategic Director | Sarah Norman, Community | |
| Originating service | Royal Wolverhampton NHS Trust | |
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Recommendations

The Panel is asked to comment on the contents of the action plan approved by the RWT Trust Board on January 27 2014.

1.0 Purpose

- 1.1 The Health Scrutiny Panel requested an update on progress in implementing recommendations following two Care Quality Commissions inspection reports that were presented on 19 December 2013.

2.0 Background

- 2.1 The Royal Wolverhampton NHS Trust was inspected as part of the first wave by the Care Quality Commission (CQC) on 27/28 September 2013. Following approval of the report, published on the CQC website, the Trust developed an action plan to address the points raised by the CQC as requiring attention.

3.0 Progress

- 3.1 The action plan is an iterative plan that is updated monthly and assurance is sought via the internal Trust governance framework. The CQC planned to return within a month of the inspection however this has not, to date taken place. The Trust anticipates a return inspection in May 2014.

4.0 Financial implications

- 4.1 A major concern impacting on finances was the action required by the CQC around increasing ward nurse staffing levels, particularly at night. This has been partly addressed with a skill mix review business case presented to Trust Board where the methodology and analysis was approved. This was taken to Wolverhampton Clinical Commissioning Group in December 2013, who were also supportive of the business case.
- 4.2 The funding for the business case has not yet been sourced from either the Trust or the CCG. In the meantime measures have been put in place to ensure additional nursing staff are employed, at a cost pressure, on elderly care and orthopaedic wards at night because these wards present the highest risk to patient safety. All wards continue to be risk assessed shift by shift and appropriate actions taken to maintain safety on a daily basis.

5.0 Legal implications

- 5.1 The CQC will expect to see improvements and in particular around staffing arrangements which without this may impact on Royal Wolverhampton NHS Trust ability to remain registered with the CQC.

6.0 Equalities implications

- 6.1 There are no implications for the Council's property portfolio arising from this report.

7.0 Environmental implications

7.1 The environmental recommendations within the CQC action plan are being addressed through the capital programme.

8.0 Human resources implications

8.1 There are significant implications for funding of additional nursing staff.

9.0 Corporate landlord implications

9.1 There are no implications for the Council's property portfolio arising from this report.

10.0 Schedule of background papers

10.1 The action plan is attached for the panel to consider and comment.