

CQC inspection report and WVT sustainability plan November 2016

Update to HOSC
Jane Ives – Managing Director

Our Ratings - 2015

	Safe	Effective	Caring	Responsive	Well-led	OVERALL
A&E	Inadequate	Requires improvement	Good	Requires improvement	Requires improvement	Requires improvement
Medical Care	Inadequate	Requires improvement	Good	Requires improvement	Requires improvement	Requires improvement
Surgery	Requires improvement	Requires improvement	Good	Inadequate	Requires improvement	Requires improvement
Critical Care	Requires improvement	Good	Good	Requires improvement	Requires improvement	Requires improvement
Maternity and Family Planning	Inadequate	Requires improvement	Good	Good	Requires improvement	Requires improvement
Children and young people	Inadequate	Requires improvement	Good	Requires improvement	Requires improvement	Requires improvement
End of life care	Requires improvement	Requires improvement	Good	Requires improvement	Requires improvement	Requires improvement
Outpatients	Inadequate	Inspected but not rated	Good	Inadequate	Inadequate	Inadequate
OVERALL	Inadequate	Requires improvement	Good	Inadequate	Requires improvement	Inadequate

Inspection Outcome September 2016

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent and emergency services	Requires Improvement	Good	Good	Requires Improvement	Good	Requires Improvement
Medical care	Good	Requires Improvement	Good	Requires Improvement	Good	Requires Improvement
Surgery	Good	Requires Improvement	Good	Inadequate	Requires Improvement	Requires Improvement
Critical Care	Good	Good	Good	Requires Improvement	Good	Good
Maternity and Gynaecology	Requires Improvement	Requires Improvement	Good	Requires Improvement	Requires Improvement	Requires Improvement
Services for children and young people	Good	Requires Improvement	Good	Good	Requires Improvement	Requires Improvement
End of life care	Good	Good	Good	Good	Good	Good
Outpatients and diagnostic imaging	Requires Improvement	Inspected but not rated	Good	Inadequate	Requires Improvement	Requires Improvement
Overall	Requires Improvement	Requires Improvement	Good	Inadequate	Requires Improvement	Requires Improvement
Overall Trust	Requires Improvement	Requires Improvement	Good	Inadequate	Requires Improvement	Requires Improvement



Outstanding practice

Play workers who regularly made arrangements for long term patients to have days out to different places

Children's and young people's ambassador group
- involved in the service redesign

Non-invasive ventilation pathway bundle - increased level of care within the patient's own home

New clinic for patients with epilepsy had enlisted the support of a patient with epilepsy; their views had helped the clinic develop

Gilwern Assessment Unit – dementia-friendly environment

Improvement required

Access to
outpatient services

Staff receiving
mandatory training

Waiting times and
monitoring
patients on the
waiting list

Risks must be
identified on the
risk register

Governance
oversight of
incident reporting

Special measures

‘The trust was placed into special measures in October 2014. Due to the improvements seen at this inspection, I have recommended to NHS Improvement that the special measures are lifted.’

Professor Sir Mike Richards, Chief Inspector of Hospitals

Next steps

- Continue our improvement journey – aim for good, then outstanding
- Deliver the next phase of our Quality Improvement Plan
- Improve our sustainability and strengthen our governance through a partnership with South Warwickshire NHS Foundation Trust (SWFT)

Sustainability Plan



Compassion • Accountability • Respect • Excellence

First Impressions

- Good hospital, strong culture, support from community
- Understandable focus on CQC issues
- Distraction has led to a severe financial problem
- Need to move from a reactive approach to a proactive approach
- Need to focus on more than just the hospital
- Need a clear articulated plan

1. Deliver A&E standard

- Implement National Plan recommendations and 7 day working solutions, assess contribution from community flow including community hospital length of stay improvement and admission avoidance



2. Deliver RTT standard

- Address reporting compliance and develop capacity plans to deliver sufficient elective activity in house



3. Financial Benchmark with SWFT

- Carry out financial benchmarking exercise (income and expenditure) between WV T and SWFT and from this inform 2 year Financial Recovery Plan



4. Reduce spend on Agency

Nursing

- Develop an agency reduction plan which focuses on skill mix and safe staffing review, effective rostering, staff engagement, bank relaunch with supporting Comms campaign



5. Medical Workforce Review

- Carry out a review of medical workforce and job planning reducing the requirement for locum staff and ensuring sufficient in house capacity exists to deliver national standards



6. Progress One Herefordshire

Plan

- Develop new model of care in collaboration with 2G NHSFT, Taurus GP Federation, Hereford CCG and Herefordshire County Council



7. Review and Streamline Governance

- Review leadership portfolios, divisional structure and supporting governance arrangements ensuring delivery of agreed corporate objectives and effective use of management capacity



8. Assess Clinical Sustainability

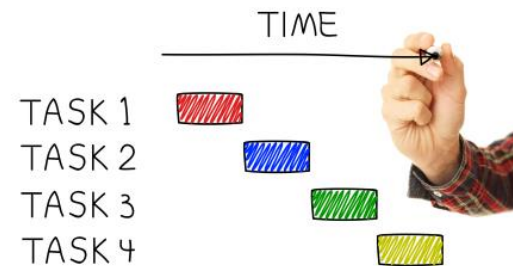
Models

- Agree sustainable acute delivery model as part of Sustainability and Transformation Plan



9. Agree Financial Recovery Trajectory with NHSI

- Negotiate revised control total or other financial support package including agreement with CCG on income/fines exposure



10. Review Organisational Sustainability

- Agree sustainable long term corporate model for WVT in partnership with SWFT

