

Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA

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Dear Chief Executive Officer,

Medical Cover at Temporary Events

We write to inform you of concerns the Care Quality Commission (CQC) has identified about the safety of people using medical services at temporary events. We ask you to consider these concerns when licencing events with Temporary Events Notices to ensure that people attending events are safe and protected from risk.

Our concerns

CQC is the independent regulator of health and social care services in England. Whilst we regulate the independent ambulance sector, there are exemptions to this – with some activities falling outside of the scope of CQC regulation as determined by the Department of Health and Social Care. Services provided solely within the confines of an event site are one of these exemptions, and are not regulated by CQC (see appendix one).

The risks in the (regulated aspects of) the independent ambulance sector are significant (see appendix 2). Seventy percent of our inspections of the sector to date have found a breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. It is fair to assume that there are likely to be similar or greater risks in the unregulated environment.

Whilst we have no regulatory remit over independent ambulances that solely provide services on an event site, we have evidence of many patient safety and quality issues within this group of providers. These present a public health protection risk and some professionals and commissioners are unaware that they fall outside of CQC's regulatory remit.

The nature of events required to have first aid cover might involve high risk physical activity, predominance of younger people, high usage of alcohol or drugs all of which increases the vulnerability of those needing treatment.

We have been made aware of a number of incidents which we have dealt with following appropriate processes. The vulnerability of patients at events and the level of risk concerns us. When escalating our concerns we have had to involve a number of local safeguarding boards such has been our level of concern.

A summary of some of the concerns we have includes:

- Lack of knowledge of local health systems and failure to escalate or pre-alert poorly patients to the receiving hospital.
- Failure to operate safe recruiting practices including disclosure and baring (DBS) checks prior to employment.
- Inappropriate procurement, storage and administration of medicines including controlled drugs.
- Serious incidents relating to inappropriate treatment of injury/illness resulting in to harm to service users.

As the CQC understands it, current requirements for consideration of event organisers include:

1. HSE Guidance:

http://www.hse.gov.uk/event-safety/incidents-and-emergencies.htm

2. The Purple Guide (to health, safety & welfare at musical and other events)

Chapter Five: Medical

http://www.thepurpleguide.co.uk/index.php/the-purple-guide

We want to share these concerns with commissioners of medical cover for events and activities which fall outside of our remit. We are aware that your licencing boards have responsibility for ensuring the health and safety of temporary events and would be most grateful if you could ensure they are made aware of the public health risks when licencing events. Consideration of the quality and suitability of medical cover and staffing is an essential part of this role.

If you would like greater detail on any of the points raised above or have any further questions please contact our national contact centre to speak to one of our inspectors via e-mail address enquiries@cqc.org.uk or by telephone on 03000 616161.

Yours sincerely

Ellen Armistead

Deputy Chief Inspector, Hospitals

National Lead for Ambulance Services

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Appendix One

The independent ambulance sector – what is and is not regulated.

In the main, there are two regulated activities that relate to ambulance services:

• Treatment of Disease, Disorder or Injury (referred to in the remainder of this letter as 'TDDI').

This includes the following exemptions:

- The provision of treatment in a sports ground or gymnasium (including associated premises) where it is provided for the sole benefit of persons taking part in, or attending, sporting activities and events (4(3)(f))
- The provision of treatment (not being first for the purposes of paragraph 9 of Schedule 2) under temporary arrangements to deliver health care to those taking part in, or attending, sporting or cultural events (4(3)(g))
- Transport services, triage and medical advice provided remotely (referred
 to in the remainder of this document as 'patient transport'). This includes
 transport services provided by means of a vehicle which is designed for
 the primary purpose of carrying a person who requires treatment. It
 includes the following exemptions:
 - Transport services which are provided within the confines of the site or venue being used for an activity or event mentioned in paragraph 4(3)(f) or (g).

It is possible that independent ambulance providers may be registered for further regulated activities, such as Diagnostic and Screening Procedures, or Surgical procedures, for which there is no such exemption.

Please see our scope of registration for more details: https://www.cqc.org.uk/sites/default/files/20151230 100001 Scope of registration guidance updated March 2015 01.pdf

Appendix Two

Key findings from CQCs inspection of independent ambulance services

Under the safe key question:

 Problems with the recruitment processes, including Disclosure and Barring Service (DBS) checks and ensuring staff hold the correct driving licence categories.

- Safeguarding knowledge of staff and staff not always being trained to the appropriate safeguarding levels.
- Concerns around incident reporting including poor reporting systems and culture, and limited evidence of learning from incidents.
- Variable adherence to infection prevention and control standards and concerns about vehicle and equipment maintenance.
- Concerns regarding the management of medicines including the safe storage of medication.

Under the effective key question:

 Issues relating to staff training, supervision and performance management of staff.

Under the responsive key question

• The management of complaints with patients often finding it difficult to complain and there was little use of complaints as a learning opportunity.

Under the well led key question

Variable standards in relation to governance and risk management processes and procedures were poor and in some cases absent.