

Review of compliance

Exel Europe Limited t/a DHL Hospital Transport
Services
Hospital Logistics Centre

Region:	London
Location address:	3 Premier Park Road Park Royal London NW10 7NZ
Type of service:	Ambulance service
Date of Publication:	April 2012
Overview of the service:	Hospital Logistics Centre is part of the DHL Logistics group. Hospital Logistic Centre offers a 24 hour service, by trained ambulance technicians. The service is located in an industrial estate in Park Royal North West London. Hospital Logistics Centre owned and leased a number of Patient Transport and High Dependency vehicles, which

	were maintained and renewed according to contract with NHS hospitals.
--	---

Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Hospital Logistics Centre was meeting all the essential standards of quality and safety.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review because concerns were identified in relation to:

- Outcome 04 - Care and welfare of people who use services
- Outcome 07 - Safeguarding people who use services from abuse
- Outcome 08 - Cleanliness and infection control
- Outcome 14 - Supporting staff
- Outcome 16 - Assessing and monitoring the quality of service provision

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 13 March 2012, checked the provider's records and talked to staff.

What people told us

There were no patients using Hospital Logistics Centre available to talk to us during the day of our inspection.

What we found about the standards we reviewed and how well Hospital Logistics Centre was meeting them

Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights

The registered person ensured that all patients were protected against the risk of receiving treatment, care or transport that was inappropriate or unsafe by obtaining appropriate patient information.

Overall, we found that Hospital Logistics Centre was meeting this essential standard.

Outcome 07: People should be protected from abuse and staff should respect their human rights

The registered person had made suitable arrangements to put safeguarding procedures in

place. Staff received safeguarding training and a safeguarding lead was appointed by the provider.

Overall, we found that Hospital Logistics Centre was meeting this essential standard.

Outcome 08: People should be cared for in a clean environment and protected from the risk of infection

The registered person ensured that vehicles were clean and patients were not exposed to unnecessary risk resulting from poor hygiene procedure.

Overall, we found that Hospital Logistics Centre was meeting this essential standard.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

The registered person ensured that arrangements were in place for staff to obtain and gain qualifications and training relevant to carry out their job.

Overall, we found that Hospital Logistics Centre was meeting this essential standard.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

The registered person ensured that quality assessment and monitoring was in place and patients were not at risk of inappropriate or unsafe treatment and care.

Overall, we found that Hospital Logistics Centre was meeting this essential standard.

Other information

Please see previous reports for more information about previous reviews.

**What we found
for each essential standard of quality
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

There were no patients using Hospital Logistics Centre available to talk to us during the day of our inspection. However we observed the controllers in the control room arranging ambulances to pick up patients from various London hospitals the provider has contracts with. The controllers were observed obtaining basic patient information such as type of condition, mobility and access to the patients' property when patient transport was arranged. The ambulance service used a computerized system to log calls, similar to the London Ambulance Service.

Other evidence

The assessment of patients varied depending upon the type of transport required. For example, some patients required transport with a High Dependency Unit (HDU) vehicle and a qualified paramedic on board. Computerized patients records viewed during our visit had detailed information taking into account the patients circumstances and what treatment the patient required during transport. Vehicles used for patient transport services (PTS), pick up location, the patients name and destination was sent to the ambulance crew by GPS to a device in the ambulance.

Control room staff told us that the majority of time, in particular for PTS the information provided by the hospital was not very detailed, but the ambulance crew received patient information from the hospital ward during pick up. Ambulance crews told us that they filled out an online patient transport sheet, which they used and forwarded to the control room at the end of each shift.

We discussed with the ambulance crew the procedure followed if the destination where the patient would be left was not suitable. The crew told us that they would call the

controller and pick up location for advice. If the situation continued to be unsafe they transferred the patient back to the pick up location.

Our judgement

The registered person ensured that all patients were protected against the risk of receiving treatment, care or transport that was inappropriate or unsafe by obtaining appropriate patient information.

Overall, we found that Hospital Logistics Centre was meeting this essential standard.

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

There were no patients using Hospital Logistics Centre available to talk to us during the day of our inspection.

Other evidence

We viewed the safeguarding procedure which was made available to us. The manager told us that the safeguarding procedure and whistle blowing procedure was given to staff at their induction. We discussed with staff how they would respond to allegations of abuse or what they would do if they witnessed abuse of patients. Staff told us that they would contact the control room and report their concern or would talk to the nurses on the ward. Staff told us that they had received safeguarding training and that they were aware of the whistle blowing procedure.

During the day of our visit we discussed how safeguarding allegations were reported within the organisation and we were told and shown that there was one point of contact in the organisation who would triage safeguarding alerts and report them to appropriate authorities if required.

Our judgement

The registered person had made suitable arrangements to put safeguarding procedures in place. Staff received safeguarding training and a safeguarding lead was appointed by the provider.

Overall, we found that Hospital Logistics Centre was meeting this essential standard.

Outcome 08: Cleanliness and infection control

What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the Code of Practice for health and adult social care on the prevention and control of infections and related guidance.

What we found

Our judgement

The provider is compliant with Outcome 08: Cleanliness and infection control

Our findings

What people who use the service experienced and told us

There were no patients using Hospital Logistics Centre available to talk to us during the day of our inspection. However we observed the ambulance vehicles to be clean and tidy.

Other evidence

We discussed the cleaning regime of ambulances with ambulance staff and observed ambulances being cleaned thoroughly during our visit. Staff told us that ambulances were cleaned following each transport and at the end of each shift and a weekly deep clean of each vehicle was undertaken. Staff spoken with told us that disinfectant to clean the ambulances was available. Ambulance crew checked all ambulances daily prior to commencing their shifts, records of these checks were viewed during our visit. Hand gel and gloves were available on the ambulance we inspected.

Our judgement

The registered person ensured that vehicles were clean and patients were not exposed to unnecessary risk resulting from poor hygiene procedure.

Overall, we found that Hospital Logistics Centre was meeting this essential standard.

Outcome 14: Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

There were no patients using Hospital Logistics Centre available to talk to us during the day of our inspection.

Other evidence

Prior to our visit we received information that the management at the independent ambulance service were not qualified and experienced enough to support emergency ambulance technicians (EMT) appropriately. We found this information to be incorrect. During the day of our visit there had been three members of the control room staff with previous EMT experience. The Health and Safety manager who assisted us during our inspection, was previously employed by various ambulance services as an Emergency Medical Technician and trainer.

We viewed training records during our visit, staff received a wide range of relevant training. The provider is an accredited training provider with a number of training providers, this provided opportunities for staff to gain further qualifications.

Our judgement

The registered person ensured that arrangements were in place for staff to obtain and gain qualifications and training relevant to carry out their job.

Overall, we found that Hospital Logistics Centre was meeting this essential standard.

Outcome 16: Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:

* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us

There were no patients using Hospital Logistics Centre available to talk to us during the day of our inspection. The provider was collecting feedback from patients weekly. We viewed feedback received, which was very positive and demonstrated patients were satisfied with the treatment and care provided.

Other evidence

The provider ensured that regular quality audits were carried out. Health and Safety checks were carried out every 13 weeks. The manager told us that regular spot checks were undertaken on ambulances and ambulance staff at hospital locations.

Feedback from patients and purchasers obtained by the provider, had been positive throughout and praised the provider as being "very reliable and efficient".

Our judgement

The registered person ensured that quality assessment and monitoring was in place and patients were not at risk of inappropriate or unsafe treatment and care.

Overall, we found that Hospital Logistics Centre was meeting this essential standard.

What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

Enforcement action: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

Information for the reader

Document purpose	Review of compliance report
Author	Care Quality Commission
Audience	The general public
Further copies from	03000 616161 / www.cqc.org.uk
Copyright	Copyright © (2010) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.

Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA