

Review of compliance

Royal Berkshire NHS Foundation Trust
West Berkshire Community Hospital

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| Region: | South East Region |
| Location address: | West Berkshire Community Hospital London Road Benham Hill Thatcham Berkshire RG18 3AS |
| Type of service: | Acute Services |
| Date the review was completed: | 30 March 2011 |
| Overview of the service: | <p>The West Berkshire Community Hospital is part of the Royal Berkshire NHS Foundation Trust. The hospital provides a day surgery unit and an acute out-patient unit. It also runs a variety of clinics. All the trust's services at the hospital are led by medical consultants</p> <p>The hospital building is owned by Berkshire West Primary Care Trust. The primary care trust runs a number of services in the hospital,</p> |

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| | <p>including in-patient wards. The primary care trust is also responsible for cleaning and the maintenance of the building.</p> <p>The Royal Berkshire NHS Foundation Trust has a dedicated operational manager based at the West Berkshire Community Hospital.</p> |
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Summary of our findings for the essential standards of quality and safety

What we found overall

We found that West Berkshire Community Hospital was meeting all the essential standards of quality and safety we reviewed but, to maintain this, we have suggested that some improvements are made.

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

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider and carried out a visit to the hospital in December 2010. We observed how people were being cared for, talked to patients in the hospital, talked to staff, checked the provider's records, and looked at records patient records.

What people told us

People told us that they were very happy with the facilities and the standard of care they received at the West Berkshire Community Hospital. They felt that staff kept them informed of any changes or delays and that staff were courteous. Patients felt involved in their care and treatment. They stated that staff explained the risks and benefits in a way they could understand.

What we found about the standards we reviewed and how well West Berkshire Community Hospital was meeting them

This review assessed whether the services provided by the Royal Berkshire NHS Foundation Trust at West Berkshire Community Hospital meet essential standards of quality and safety and respect people's dignity and ensure their rights. This review focused the 16 regulations and associated outcomes that most directly relate to the

quality and safety of care. We found that the West Berkshire Community Hospital was compliant with all of the essential standards. However we have identified minor concerns with five of these where improvement is needed. These concerns include staff not knowing the procedure for reporting safeguarding concerns, some staff not having a criminal records bureau (CRB) check and a significant number of staff not having an annual appraisal.

The Royal Berkshire NHS Foundation Trust therefore needs to take action to make some improvements at the West Berkshire Community Hospital. We will monitor its plans to address the concerns raised in this report.

Outcome 1: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

Patients were very positive about their experiences of care and treatment at the West Berkshire Community Hospital. The trust has systems in place for gathering feedback on care including privacy and dignity issues. It has initiatives and strategies in place for promoting privacy and dignity for patients, and for monitoring whether staff maintain these standards.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Outcome 2: Before people are given any examination, care, treatment or support, they should be asked if they agree to it

The trust has policies and procedures in place to gain and review consent from patients who receive treatment. These are understood and followed by staff and patients are given explanations of procedures and any associated risks and benefits.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Outcome 4: People should get safe and appropriate care that meets their needs and supports their rights

The hospital has systems in place for assessment, care planning, and patient involvement which are generally implemented. Relevant national guidance is implemented and monitored.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Outcome 5: Food and drink should meet people's individual dietary needs

The hospital has policies and procedures in place to ensure patients have food and drink when it is safe for them to do so.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Outcome 6: People should get safe and coordinated care when they move between different services

The hospital has developed effective and cooperative working relationships with others involved in the care, treatment and support of patients.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Outcome 7: People should be protected from abuse and staff should respect their human rights

Most of the staff we spoke to told us they were trained in safeguarding and in reporting safeguarding incidents. However, a small number of staff had not received training and told us they were not aware of how to find the trust's safeguarding policies and procedures.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard but there are areas of concern where improvements need to be made.

Outcome 8: People should be cared for in a clean environment and protected from the risk of infection

The trust has systems and processes in place for managing, monitoring, and preventing infection. Hospital facilities are clean and regular audit arrangements are in place.

Overall, we found that West Berkshire Community Hospital was meeting this essential standard.

Outcome 9: People should be given the medicines they need when they need them, and in a safe way

The trust has policies and procedures in place regarding relevant aspects of medicines management. Staff sometimes provide prescriptions as part of out-patient treatment but this is limited. Operations department practitioners are responsible for supervising the use of controlled drugs for surgery.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare

The areas of the hospital which we visited were well maintained. The different departments in the hospital were signposted. There was adequate space to ensure patients' privacy. Waiting areas were clean and comfortable.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Outcome 11: People should be safe from harm from unsafe or unsuitable equipment

The trust has systems in place to ensure equipment is safe and well maintained. Generally, equipment is available in sufficient quantities. However, monitoring of equipment does not always review the relevant guidance or safety alerts.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard, but there are areas of concern where improvements need to be made.

Outcome 12: People should be cared for by staff who are properly qualified and able to do their job

The trust has systems in place for monitoring the professional registration of staff and identifying breaches of recruitment procedures. The trust has however, identified the need to increase the take up and provision of CRB disclosures.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard, but there are areas of concern where improvements need to be made.

Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs

The wards we visited appeared to be adequately staffed. The hospital is trying to recruit an additional senior nurse to provide more support to staff in the out-patients department.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

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

Staff have regular statutory and mandatory training as part of their role. However, most staff at the hospital had not received an annual performance appraisal in the last year.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard, but there are areas of concern where improvements need to be made.

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 trust has a range of measures in place to assess and monitor the quality of patient care it provides. However, systems are trust wide and do not show how the quality of care provided specifically at the West Berkshire Community Hospital is monitored. While clinical governance arrangements are in place, audit findings are also not always communicated to staff to identify what they do well and where they need to improve.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard, but there are areas of concern where improvements need to be made.

Outcome 17: People should have their complaints listened to and acted on properly

The hospital has systems in place for ensuring information about how to make complaints is available to service users. It has a system for monitoring and responding quickly to complaints.

Overall, we found that the trust was meeting this essential standard.

Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential

The hospital has systems and processes in place to ensure patient records are completed, used and stored in line with relevant guidance.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Action we have asked the service to take

We found that the West Berkshire Community Hospital of the Royal Berkshire NHS Foundation Trust was compliant with the 16 essential standards of quality and safety.

For five of the essential standards, although compliant, we believe there is a risk that they will not *maintain* compliance with these outcomes. We have noted that we have minor concerns that they may not be able to sustain compliance in this area and have set an **improvement action** upon the trust for these areas.

We have asked the provider to send us a report within 28 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

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 1: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- Understand the care, treatment and support choices available to them.
- Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- Have their privacy, dignity and independence respected.
- Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant with outcome 1: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us
In assessing this outcome, we used information provided by patients via NHS Choices website, information from complaints we received, and patient survey results. We also spoke to patients during our visit to the hospital in December 2010.

During our visit, the patients we spoke to were very complimentary about their experiences at the West Berkshire Community Hospital. Patients stated that they felt involved and informed about their treatment and care. They felt they were given good information about their treatment and were given adequate opportunities to ask questions. They also said staff spoke to them respectfully. This was supported by comments sent in by patients via the NHS Choices website. One patient's relative commented on her mother's 'positive experience' at the hospital and that staff did not 'talk down' to her. During our visit we observed staff speak courteously to patients.

There were no complaints submitted to the Care Quality Commission (CQC) by patients about this hospital. Although the CQC does not deal with individual

complaints, when complaints are received, they are used to inform our assessment of providers of care.

Trust-wide results for the outpatient's survey (2009) were returned by 431 patients. Overall results were positive; however, the trust scored low for patients being told about any danger signals to watch for after going home. This also included being told who to contact if they were worried about their condition or treatment after leaving hospital. The patients we spoke during our visit felt that they were given adequate information and knew who to contact if they had any concerns once they returned home.

Other evidence

The annual patient environment action team (PEAT) assessment (2010) for West Berkshire Community Hospital showed that the hospital scored 'excellent' for privacy and dignity. The PEAT assessment is an assessment of non clinical aspects of care such as the environment, food, and privacy and dignity for Healthcare sites in England that have more than ten inpatient beds. The scores for the trust's multiple sites are achieved through self assessment and verified by the National Patient Safety Agency. The scores for this hospital include assessments of all services offered including those offered by Berkshire West Primary Care Trust.

During our visit, we observed that adequate arrangements were in place to protect the privacy and dignity of patients. In the out-patients department, where patients attend for tests and clinics, there were individual consultation and treatment rooms. In the day case unit, where patients go for operations, there was one recovery ward which was mixed sex. However, the ward is divided up into large bays which are separated by curtains. There are also separate male and female changing rooms and toilets.

A range of written information is provided throughout the outpatients unit and in the day case unit waiting room. This included information for carers, how to provide feedback about care and treatment, single sex accommodation and directions for getting to the Royal Berks Hospital. There is also preventative health information about the effects of smoking and alcohol intake.

Our judgement

Patients were very positive about their experiences of care and treatment at the West Berkshire Community Hospital. The trust has systems in place for gathering feedback on care including privacy and dignity issues. It has initiatives and strategies in place for promoting privacy and dignity for patients, and for monitoring whether staff maintain these standards.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Outcome 2: Consent to care and treatment

What the outcome says

This is what people who use services should expect.

People who use services:

- Where they are able, give valid consent to the examination, care, treatment and support they receive.
- Understand and know how to change any decisions about examination, care, treatment and support that has been previously agreed.
- Can be confident that their human rights are respected and taken into account.

What we found

Our judgement

The provider is compliant with outcome 2: Consent to care and treatment

Our findings

What people who use the service experienced and told us

During our visit, patients stated that staff explained their treatment to them in a way they could understand. They told us that they were able to ask questions about their care. Patients also said that they were asked for their written consent prior to treatment. This was supported by a review of a sample of patient records in the day case unit. The records we reviewed showed that written consent was obtained from patients in all cases.

In the out patient survey (2009), the trust scored

- 8.6 out of 10 for feeling the doctor explained treatments or actions in way they could understand
- 8.2 out of 10 for getting answers they could understand from their doctor, when they had important questions
- 8.3 out of 10 for getting answers they could understand from health professionals other than their doctor, when they had an important question
- 8.7 out of 10 for being given enough information on condition and treatment
- 8.6 out of 10 for being told what would happen, before treatment
- 8.3 out of 10 for having risks and benefits of treatment explained in a way

they could understand

These scores are similar to those of other trusts of this type and size.

Other evidence

There was a trust-wide policy on consent to examination or treatment. In line with the Mental Capacity Act 2005, the policy included a procedure for assessing whether a patient has the capacity to give consent and the procedure to follow when the patient is unable to consent to treatment. The trust identified a need to raise awareness and use of the independent mental capacity advocacy (IMCA) service. This service provides advocacy for people who cannot make independent decisions about medical treatment or residential care. The trust has a plan for promoting and monitoring the use of the IMCA service and for developing written procedures regarding advanced decisions.

Staff showed good knowledge of consent processes. Nursing staff stated that they did not have training in consent or the Mental Capacity Act 2005. They stated this was because consultants have responsibility for obtaining written consent for treatment.

An audit of 84 patient consent records, which was provided by the trust, showed that across all trust hospitals:

- 93% of consent forms documented intended benefits
- 98% of consent forms recorded serious or frequently occurring risks
- 38% of consent forms documented if information leaflets were provided
- 90% of consent forms were compliant with the consent policy.

Our judgement

The trust has policies and procedures in place to gain and review consent from patients who receive treatment. These are understood and followed by staff and patients are given explanations of procedures and any associated risks and benefits.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Outcome 4: 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 4: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

The patients we spoke to during our visit were highly complimentary about the care they received at the hospital. They rated staff attitude and knowledge highly. Patients also said that they were kept informed about their treatment and care. They also liked not having to wait very long for treatment. Of the occasions when they waited longer than expected to be seen, patients said staff kept them informed and explained the reasons for any delays. During our visit to the hospital, we saw signs in the outpatients unit which showed information about waiting times, clinics and reasons for any delays.

In the outpatient survey (2009) the trust scored about the same as other trusts in the following areas:

- 8.7 out of 10 for being given enough information on condition and treatment
- 9.1 out of 10 for not being told one thing by a member of staff and something quite different from another
- 5.6 out of 10 for seeing the same doctor or other staff member at each appointment, for patients who have visited the Outpatient Department before
- 7.5 out of 10 for having test results explained in a way they could understand
- 8.6 out of 10 before the treatment, being told what would happen
- 7.9 out of 10 for how good the overall care was that they received

Other evidence

A review of three sets of patient records on the day surgery unit showed that medical notes included patient contact details and next of kin and evidence of written consent. The notes also contained completed risk assessments, medical notes, completed care pathway forms and discharge notes. The care pathway forms demonstrate that treatment was provided in line with the trust's policies and procedures. The majority of notes and documentation was clearly written. Individual patient records contained a full medical history but were not always organised chronologically. This made it difficult to follow their treatment and care from beginning to end.

During our visit, we identified a significant delay in reporting back to general practitioners (GPs) on the consultations with patients who attended out-patient clinics. In some cases, it took over four weeks to inform GPs of the outcome of medical assessments, treatment plans or test results. Staff stated that the delay was due to insufficient administrative staff being in place to ensure GPs could be contacted in a timely way. Some staff also said that they did not know which of the files were potentially more urgent than others. Staff stated that the backlog was a temporary issue due to reorganisation within the trust. Plans were in place for this to be resolved by mid-January 2011. The trust has since addressed the delay in sending information to GPs.

Staff at the hospital review and implement guidance from the National Institute for Health and Clinical Excellence (NICE). There was also evidence that the use of NICE guidance is monitored by the trust. NICE is an independent organisation responsible for providing national guidance on promoting good health and preventing and treating ill health.

A trust board report from November 2010, which included information from all the trust's hospitals, stated that it was compliant with all of the relevant NICE guidance published since April 2009. The Quality Accounts 2009/10 report stated that the trust implemented the 'preventing venous thromboembolism' guidance from NICE. This is guidance around preventing blood clots. The trust reviewed how well staff implemented the guidance and identified where improvements were required. As a result, the Quality Accounts report stated that the trust would develop a new risk assessment for the treatment of blood clots. This would include the introduction of a new electronic system for recording the assessments by June 2011.

Our judgement

The hospital has systems in place for assessment, care planning, and patient involvement which are implemented. Relevant national guidance is implemented and monitored.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Outcome 5: Meeting nutritional needs

What the outcome says

This is what people who use services should expect.

People who use services:

- Are supported to have adequate nutrition and hydration.

What we found

Our judgement

The provider is compliant with outcome 5: Meeting nutritional needs

Our findings

What people who use the service experienced and told us
We did not speak to patients about meeting nutritional needs.

Other evidence
The Royal Berkshire NHS Foundation Trust only offers outpatient and day case surgical services at this location. This means that patients are expected to have a short visit to the hospital. These visits are not usually long enough to require a meal so the trust does not provide meals as part of its services. However, there are procedures in place for patients in the day surgery for patients who are required to fast prior to surgery. The Hospital's policy is to provide food and drink after surgery as soon as it is safe to do so.

There was a canteen with a seating area which sold hot and cold meals, snacks and beverages.

Our judgement
The hospital has policies and procedures in place to ensure patients have food and drink after surgical procedures when it is safe for them to do so.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Outcome 6: Cooperating with other providers

What the outcome says

This is what people who use services should expect.

People who use services:

- Receive safe and coordinated care, treatment and support where more than one provider is involved, or they are moved between services.

What we found

Our judgement

The provider is compliant with outcome 6: Cooperating with other providers

Our findings

What people who use the service experienced and told us
The patients we spoke to in the outpatients department said that the hospital always liaised promptly with their general practitioner (GP). One patient said there had been a recent incident where their follow up appointment had not come through to their GP. The GP contacted the hospital for the information, which the hospital sent immediately.

In the outpatient survey (2009) the trust scored 9 out of 10 for patients not being told one thing by a member of staff and something quite different from another. The trust scored 5.6 out of 10 for patients seeing the same doctor or other staff member at each appointment. This was for patients who had visited the outpatient department before.

Other evidence
We reviewed three sets of patient records in the day case department. These showed that hospital staff liaised with other services, mainly GPs and other services within Royal Berkshire NHS Foundation trust.

Emergency arrangements were in place. Staff stated that if a patient required emergency treatment which could not be dealt with by medical staff at the hospital they would be transferred. This would be by ambulance to the accident and

emergency department at the Royal Berkshire Hospital.

Our judgement

The hospital has developed effective and cooperative working relationships with others involved in the care, treatment and support of patients.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Outcome 7: 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

There are minor concerns with outcome 7: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us
The patients we spoke to on our visit, rated the attitude and behaviour of staff highly. They said they were given information about how to make a complaint or raise a concern.

Other evidence
A report provided by the trust, which covers all its hospitals, showed that as of October 2010, over 90% of staff across the trust had child protection training. The trust's Quality and Patient Safety report, produced in October 2010, stated that the trust trained 4564 staff in adult safeguarding and had a further 429 staff to train in order to complete its three year trust-wide cycle of adult safeguarding training.

Child protection and safeguarding of vulnerable adults was also included as part of mandatory staff induction. Most of the staff we spoke to at West Berkshire Community Hospital confirmed they had taken training in child protection. Some staff in the outpatients department had not had their annual update as this training had not yet been scheduled. Some staff in the day surgery told us that they had not had this training. . Some staff in this unit were not aware of adult safeguarding policies and procedures although they stated they could report any concerns to their senior site manager.

Our judgement

Most of the staff we spoke to told us they were trained in safeguarding and in reporting safeguarding incidents. . However, a small number of staff had not received training and told us they were not aware of how to find the trust's safeguarding policies and procedures.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard but there are areas of concern where improvements need to be made.

Outcome 8: 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 8: Cleanliness and infection control

Our findings

What people who use the service experienced and told us
The patients we spoke to during our visit said they liked the hospital because it was clean and modern.

The annual patient environment action team (PEAT) assessment (2010) for West Berkshire Community Hospital showed that the hospital environment was rated as excellent. The score for the environment includes a score for cleanliness. The scores for this hospital include assessments of all services offered at this hospital including those offered by Berkshire West Primary Care Trust.

Other evidence
During our visit to the hospital, alcohol gel for use by staff, patients and visitors was found throughout the hospital. The facilities we visited were clean. Staff stated that good cleaning arrangements were in place. The trust also has a large number of policies and procedures that relate to infection control. The hospital has an infection control team and the director of nursing is the director of infection prevention and control.

The trust's annual infection control report for 1 April 2009 to 31 March 2010, which covers all the trust's hospitals, states that the trust achieved a reduction in Meticillin Resistant Staphylococcus Aureus (MRSA) blood stream infections. MRSA is a bacterium responsible for several difficult-to-treat infections in humans. The report also states that the trust met its Clostridium difcile (C Diff) infections target. C Diff is

a common bacteria that can be deadly. It is most common in healthcare settings. According to a board level report from October 2010, the trust has reduced the number of Clostridium difficile incidences. These incidences are being monitored at trust board level.

The trust implements a wide range of infection prevention and control audits. These are trust wide and include all the trust's hospitals. However, staff at the West Berkshire Community Hospital stated that they were not informed about the results of any infection prevention and control audits. Some managers felt this was a disadvantage because they did not feel they could identify any infection control related concerns which were not easily visible.

There is an infection prevention and control committee which reports to the risk management committee and the executive committee of the trust board. The trust monitors risks regarding infection control against a high level annual plan at trust board level.

Our judgement

The trust has systems and processes in place for managing, monitoring, and preventing infection. Hospital facilities are clean and regular audit arrangements are in place.

Overall, we found that West Berkshire Community Hospital was meeting this essential standard.

Outcome 9: Management of medicines

What the outcome says

This is what people who use services should expect.

People who use services:

- Will have their medicines at the times they need them, and in a safe way.
- Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

What we found

Our judgement

The provider is compliant with outcome 9: Management of medicines

Our findings

What people who use the service experienced and told us

The patients we spoke to stated that they brought their own medication from home. They told us that that if they needed additional painkillers they could ask one of the medical staff to prescribe and provide these.

Other evidence

Generally, medicines and drugs were not stored or kept in the outpatients and day surgery departments. Limited medicines and drugs were kept in stock in the day surgery unit. Staff stated that a pharmacist brings additional drugs when they are required. There was a policy for issuing prescriptions in the outpatients department and staff were aware of this policy. Staff told us that they only prescribe under specific circumstances and have limited medication for specific uses. There were copies of the trust's prescribing policies in the outpatient consulting rooms.

Staff in the day surgery unit stated that controlled drugs are kept on site and that these are supervised by two members of staff called operations department practitioners (ODPs) who work at the hospital full time. ODPs manage operations and supervise anaesthetics. Staff reported that there are no controlled drugs in the outpatient department.

Our judgement

The trust has policies and procedures in place regarding relevant aspects of medicines management. Staff sometimes provide prescriptions as part of out-patient treatment but this is limited. Operations department practitioners are responsible for supervising the use of controlled drugs for surgery.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Outcome 10: Safety and suitability of premises

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

- Are in safe, accessible surroundings that promote their wellbeing.

What we found

Our judgement

The provider is compliant with outcome 10: Safety and suitability of premises

Our findings

What people who use the service experienced and told us
The patients we spoke to during our visit said they liked the hospital because it was clean and modern.

Other evidence
The West Berkshire Community Hospital was opened in 2004 so is a relatively new facility. In the hospital's annual patient environment action team (PEAT) assessment (2010), the hospital environment was rated as excellent. The environment score includes a score for maintenance. The scores for this hospital include assessments of all services offered at this location including those offered by Berkshire West Primary Care Trust.

On our visit to the hospital, we found that the wards and departments we visited were of a good standard of cleanliness and repair. Staff reported good arrangements for identifying maintenance and repair issues and generally quick responses.

Our judgement
The areas of the hospital which we visited were well maintained. The different departments in the hospital were signposted. There was adequate space to ensure patients' privacy. Waiting areas were clean and comfortable.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Outcome 11: Safety, availability and suitability of equipment

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

- Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).
- Benefit from equipment that is comfortable and meets their needs.

What we found

Our judgement

There are minor concerns with outcome 11: Safety, availability and suitability of equipment

Our findings

What people who use the service experienced and told us
The patients we spoke to during our visit reported they had no concerns regarding the condition of equipment used by staff.

Other evidence
Staff reported that they had adequate supplies and equipment. Staff from both departments we visited, knew who to contact and how to report broken equipment. They told us that the trust was responsive to requests to fix or replace faulty equipment. Staff said that they received training in using equipment and that they must be formally assessed as competent before using the equipment without supervision.

The trust’s internal monitoring report states it does not have evidence that the trust takes into account and acts on relevant medicines and healthcare products regulatory agency (MHRA) guidance and other patient safety alerts. During our visit, staff at the West Berkshire Community Hospital confirmed that they did receive alerts from a colleague at the Royal Berkshire Hospital. Staff explained they had to respond to the alerts to indicate whether the alert was applicable to their service, and if it was applicable, state how they dealt with it.

Our judgement

The trust has systems in place to ensure equipment is safe and well maintained. Generally, equipment is available in sufficient quantities. However, monitoring of equipment does not always review the relevant guidance or safety alerts.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard, but there are areas of concern where improvements need to be made.

Outcome 12: Requirements relating to workers

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 staff who are fit, appropriately qualified and are physically and mentally able to do their job.

What we found

Our judgement

There are minor concerns with outcome 12: Requirements relating to workers

Our findings

What people who use the service experienced and told us
We did not speak to patients about this requirements relating to workers

Evidence
Information relating to the recruitment of staff is not held at West Berkshire Community Hospital. It is kept at the trust’s main site, which is the Royal Berkshire Hospital.

The trust has trust-wide audit arrangements in place to identify areas where adequate pre-employment checks are undertaken consistently. The audits also identify areas which require improvement. Audit results show that although pre-employment checks are made, there is a concern with the take up of criminal records bureau checks. These checks are used to make safer recruitment decisions by identifying candidates who may be unsuitable for certain work; especially that involves children or vulnerable adults. Regular monitoring of registration with professional bodies also takes place.

Our judgement
The trust has systems in place for monitoring the professional registration of staff and identifying breaches of recruitment procedures. The trust has however, identified the need to increase the take up and provision of CRB disclosures.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard, but there are areas of concern where improvements need to be made.

Outcome 13: Staffing

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 sufficient numbers of appropriate staff.

What we found

Our judgement

The provider is compliant with outcome 13: Staffing

Our findings

What people who use the service experienced and told us
Patients we spoke to in both the outpatients and day surgery departments felt that there were sufficient numbers of staff to meet their needs. They told us that they were seen promptly and that staff took the time to address any concerns they had.

Evidence
During our visit, the departments we observed appeared to be adequately staffed. However, staff in both the departments we visited expressed concerns regarding staffing arrangements. In some cases this was due to staff having to cover for colleagues who were absent. Staff told us that no additional support is provided for staff when colleagues are absent through illness.

Staff in the outpatients department were also concerned over the lack of qualified nurses who were working full-time. They were particularly worried about being able to access senior nursing support and advice due to senior nursing staff choosing to reduce the number of hours worked. We were told that the hospital was trying to recruit to fill this vacancy.

Nursing staff vacancies or absences are covered by bank staff. This is where nurses on permanent contracts with the trust work overtime or staff work flexible hours for the trust.

Our judgement

The wards and departments we visited were adequately staffed. Nursing staff vacancies and absences are covered by bank staff. Recruitment is underway to fill vacant positions for qualified nursing staff.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Outcome 14: Supporting workers

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

There are minor concerns with outcome 14: Supporting workers

Our findings

What people who use the service experienced and told us
We did not speak to patients about supporting staff.

Evidence
The trust has undertaken a trust-wide training needs analysis. It consisted of a spreadsheet listing all the training which is offered by the trust and matching this to staff groups who require the training. Although the analysis did not provide information specific to the West Berkshire Community Hospital, it did cover all staff groups across the trust and from all hospitals.

A trust-wide training report from October 2010 showed that over 90% of staff across the trust took child protection training. The trust is also in the process of providing adult safeguarding to all relevant staff.

Staff at the West Berkshire Community Hospital told us that they had attended their mandatory and statutory training. They said that training was often organised at the hospital rather than at an external venue so that more staff could attend. Where training was cancelled, staff also reported that it was rescheduled.

In response to feedback from staff regarding its appraisal system, the trust redesigned its system for appraisal and is due to implement it in 2011. A trust report on the number of appraisals and personal development plans (PDP's) completed

between April 2010 and September 2010; show that 89% of staff across the trust had not had an appraisal or a PDP in place. Feedback from staff at the West Berkshire Community Hospital confirms this finding. Most of the staff we spoke to stated they had not had an annual appraisal in the last year. Some staff said they had not had an annual appraisal for the past two years.

Staff within the departments we visited told us that they enjoyed their work and recommended the hospital as a good employer.

Our judgement

Staff have regular statutory and mandatory training as part of their role. However, most staff at the hospital had not received an annual performance appraisal in the last year.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard, but there are areas of concern where improvements need to be made.

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

There are minor concerns with outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us
We did not speak to patients on assessing and monitoring the quality of service provision.

Evidence
There is a clinical governance strategy/policy for 2009/2012 which sets out how the trust will achieve its clinical objectives and meet quality standards. The strategy applies to all the trust's hospitals although it does not identify the specific priorities and improvements required at each of its hospitals.

The trust delivers its clinical governance strategy through a trust-wide clinical governance committee which is based at the Royal Berkshire Hospital. This is then implemented through local clinical governance committees, one of which is based at the West Berkshire Community Hospital. The clinical governance committees are responsible for identifying concerns or risks that may affect the quality or safety of care given to patients. They are also responsible for sharing information across the trust. Information which the committees share includes reviews of complaints and incidents, national guidance, or audit findings.

However, staff at the West Berkshire Community Hospital stated that it was often difficult to link into the trust-wide clinical governance discussions. Minutes from the June and September 2010 meetings of the local clinical governance committee mainly showed a review of local issues and concerns. There was one reference to one member of staff who was involved in an audit and a reference to complaints but there was no information relating to results of any quality monitoring arrangements.

Senior staff at West Berkshire Community Hospital told us that they attended clinical audit committee and integrated governance committee meetings at the Royal Berkshire Hospital. Audit findings are explained and discussed and then shared with managers at the community hospital. However, managers and staff we spoke to during our visit did not know the results of audits in their departments. For example, when asked about their last infection control audit, staff at the West Berkshire Community Hospital reported that they thought there was an audit but that they were not told the results of the audit. Also, when asked about the hospital's last consent to treatment audit, staff were not aware of any such audit at the hospital.

Another way that the trust monitors the quality of services across all its hospitals is through high level reporting at board level using reports called integrated board performance reports. These reports include information on targets, staff sickness and turnover, medical procedure related performance data. They also include information on coding, finance, litigation issues, patient feedback or complaints, admissions and infection control. The trust uses these reports to assess and monitor the quality of service provision. These reports include information across all the trust's hospitals. The information is not specific to each of the trust's hospitals.

Information held about the trust by the Commission shows that national patient safety agency alerts and timeliness of other returns is good. Staff reporting incidents and near misses are also good. The trust scored similar to expected for a number of national priorities 2009/10 including participation in heart disease audits and participation in local and/or national audits.

The trust has systems in place for monitoring incidents. According to an incident report provided by the trust which covers April – June 2010, the highest number of incidents were in the medicines division. The vast majority of incidents were graded as very low or low. The most frequent incidences reported across the trust were slips, trips and falls followed by issues in maternity services, pressure ulcers incidences and medication. This report has information for all the trust's hospitals. Information specific to each of the trust's hospitals is not reported.

The trust also has processes and systems in place to manage risk. There is a corporate risk management team. Complaints and incidences are reported to the executive committee and the trust board. The staff we spoke to at the West Berkshire Community Hospital stated that they felt supported in raising any concerns and knew how to do so.

Our judgement

The trust has a range of measures in place to assess and monitor the quality of

patient care it provides. However, systems are trust wide and do not show how the quality of care provided specifically at the West Berkshire Community Hospital is monitored. While clinical governance arrangements are in place, audit findings are also not always communicated to staff to identify what they do well and where they need to improve.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard, but there are areas of concern where improvements need to be made.

Outcome 17: Complaints

What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:

- Are sure that their comments and complaints are listened to and acted on effectively.
- Know that they will not be discriminated against for making a complaint.

What we found

Our judgement

The provider is compliant with outcome 17: Complaints

Our findings

What people who use the service experienced and told us
We did not speak to patients about complaints

Other evidence
The trust has a complaints process in place and provides detailed reports to a range of committees, including the trust board. Complaints are analysed, reviewed, and addressed. A summary report to the trust board showed that the trust monitors complaint types, numbers, trends, and length of response time. The report also showed that the trust analysed the complaints by ward and by department.

The trust's patient's relations team annual report 2009/10 showed that 460 complaints were received by the trust in 2009-10, an increase of 32% on the previous year's total of 348. The report includes complaints from all the trust's hospitals.

The trust analysed the themes from complaints. The five most prominent issues raised through complaints in 2009-10 were:

- clinical care 31%
- staff behaviour / attitude 17%

- communication 14%
- diagnosis 6%
- delayed operations / diagnosis 5%

The patient's relations team annual report also showed that ten complaints were referred to the Ombudsman for preliminary assessment. Five of these were closed at this stage and three required the trust to provide further information to or take further action in regards to the complainants. There are currently two on going cases with the Ombudsman.

During our visit, we saw information leaflets about making complaints throughout the hospital.

Our judgement

The hospital has systems in place for ensuring information about how to make complaints is available to service users. It has a system for monitoring and responding quickly to complaints.

Overall, we found that the trust was meeting this essential standard.

Outcome 21: Records

What the outcome says

This is what people who use services should expect.

People who use services can be confident that:

- Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.
- Other records required to be kept to protect their safety and well being are maintained and held securely where required.

What we found

Our judgement

The provider is compliant with outcome 21: Records.

Our findings

What people who use the service experienced and told us
We did not speak to patients about records

Evidence
During our visit, we found that patient records were kept in a safe and confidential manner. A review of three sets of patient records on the day surgery unit showed that all relevant information was recorded.

The trust has policies and procedures in place for record keeping and the maintenance and storage of records. The trust's internal audit of patient records from across the trust show that these are not always implemented correctly. The audit reported that patient records are sometimes completed incorrectly or are not completed in full.

The trust has arrangements for patients to request access to their health records. The trust plans to implement a patient questionnaire to gather feedback on how effective the arrangements are. The trust undertook a survey of staff in order to understand any barriers that might prevent patients from accessing requested information. Outcomes from this survey were used to inform the following year's

targets.

Our judgement

The hospital has systems and processes in place to ensure patient records are completed, used and stored in line with relevant guidance.

Overall, we found that the West Berkshire Community Hospital was meeting this essential standard.

Action we have asked the provider to take

Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

| Regulated activity | Regulation | Outcome |
|--|---|---|
| Treatment of disease, disorder or injury | 11 | Outcome 7: Safeguarding people who use services from abuse |
| | <p>Why we have concerns: Most of the staff we spoke to told us they were trained in safeguarding and in reporting safeguarding incidents. However, a small number of staff had not received training and told us they were not aware of how to find the trust's safeguarding policies and procedures.</p> <p>Overall, we found that the West Berkshire Community Hospital was meeting this essential standard but there are areas of concern where improvements need to be made.</p> | |
| Treatment of disease, disorder or injury | 16 | Outcome 11: Safety, availability and suitability of equipment |
| | <p>Why we have concerns: The trust has systems in place to ensure equipment is safe and well maintained. Generally, equipment is available in sufficient quantities. However, monitoring of equipment does not always review the relevant guidance or safety alerts.</p> <p>Overall, we found that the West Berkshire Community Hospital was meeting this essential standard, but there are areas of concern where improvements need to be made.</p> | |

| | | |
|--|---|---|
| Treatment of disease, disorder or injury | 21 | Outcome 12: Requirements relating to workers |
| | <p>Why we have concerns:</p> <p>The trust has systems in place for monitoring the professional registration of staff and identifying breaches of recruitment procedures. The trust has however, identified the need to increase the take up and provision of CRB disclosures.</p> <p>Overall, we found that the West Berkshire Community Hospital was meeting this essential standard, but there are areas of concern where improvements need to be made.</p> | |
| Treatment of disease, disorder or injury | 23 | Outcome 14: Supporting Workers |
| | <p>Why we have concerns:</p> <p>Staff have regular statutory and mandatory training as part of their role. However, most staff at the hospital had not received an annual performance appraisal in the last year.</p> <p>Overall, we found that the West Berkshire Community Hospital was meeting this essential standard, but there are areas of concern where improvements need to be made.</p> | |
| Treatment of disease, disorder or injury | 10 | Outcome 16: Assessing and monitoring the quality of service provision |
| | <p>Why we have concerns:</p> <p>The trust has a range of measures in place to assess and monitor the quality of patient care it provides. However, systems are trust wide and do not show how the quality of care provided specifically at the West Berkshire Community Hospital is monitored. While clinical governance arrangements are in place, audit findings are also not always communicated to staff to identify what they do well and where they need to improve.</p> <p>Overall, we found that the West Berkshire Community Hospital was meeting this essential standard, but there are areas of concern where improvements need to be made.</p> | |

The provider must send CQC a report about how they are going to maintain compliance with these essential standards.

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent within 28 days of this report being received.

CQC should be informed in writing when these improvement actions are complete.

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 Adult 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

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|----------------------------|--|
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