

Review of compliance

West Hertfordshire Hospitals NHS Trust
Watford General Hospital

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| Region: | East |
| Location address: | Vicarage Road Watford Hertfordshire WD18 0HB |
| Type of service: | Acute services with overnight beds |
| Date of Publication: | January 2012 |
| Overview of the service: | Watford General Hospital, part of West Hertfordshire Hospitals NHS Trust, is an acute hospital in Watford servicing the local population with an A&E department, and providing general and medical, surgical and maternity care. |

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

Our current overall judgement

Watford General Hospital was not meeting one or more essential standards. Improvements are needed.

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 08 - Cleanliness and infection control

Outcome 13 - Staffing

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 1 December 2011, talked to staff and reviewed information from stakeholders.

What people told us

The parents of the children who use the service told us that they are very happy with the service. We were told that the staff are wonderful and that they are competent, calm, confident. We were told by the family of one child that the staff calm us in a very stressful situation. We were told that the family felt the the staff were on the journey of caring for the sick child with them.

What we found about the standards we reviewed and how well Watford General Hospital was meeting them

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

The trust is compliant with this outcome at this location because the children who attend Starfish ward have their needs identified and their individual needs met by a team of health professionals. Parents are involved in all aspects of their child's care and supported during their child's admission to the ward.

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

The trust is compliant with this outcome because there were systems and processes in

place to identify, prevent and control the spread of health care associated infections.

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

The trust is compliant with this outcome because there are sufficient staff on duty who are appropriately trained to meet the health and welfare needs of the children using this service.

Other information

In a previous review, we found that improvements were needed for the following essential standards:

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

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

The people who use the service told us that they found the staff 'superb'. One person said that they found the staff professional and experienced. Another person described a bad experience and described the relief of arriving at A&E and then going on the ward as having their minds put at ease by confident, competent staff. A relative of a sick child described their experience as feeling the staff are living the experience with them and were utterly lovely. A parent said that the staff were so kind and that nothing was too much trouble for them. We were told that the whole family is involved and that decisions are discussed.

Other evidence

We received concerning information about the treatment of families of the children who were admitted to Starfish children's ward.

During our visit to the ward on the 01 December 2011 the nurse in charge of the ward outlined the support and treatment available to the children and their families. For example each child has a named nurse and the nurse liaises with the family to ensure their needs as well as those of the child are recognised and where possible met while on Starfish ward. Information collected during this review did not identify any areas of concern regarding the treatment of families and children on Starfish Ward. Staff told us that they were very keen to create a caring and calm atmosphere where the children could be cared for and their families supported. We saw staff spending time with the children and their families explaining procedures and answering their questions to ensure they were fully informed.

We were told that generally children spend between 24 and 48 hours on the ward. To respond to this short length of stay and ensure the child's needs were met, the senior nurses had recently reviewed and changed the care plans. The new care plans were more compact and were reported to be an easy to use document. They contained a range of information including a risk assessment on specific aspects the child's care, patient's details for example who had parental responsibility for the child, nutrition, moving and handling, tissue viability, respiratory, cardiovascular, signs of pain. Additional risk assessments were drawn up as necessary to address specific issues for example if the child had diabetics. Staff told us that the care plans worked well were easy to read and enabled them to access the information to ensure they delivered the appropriate care that met the child's and their families needs.

Children are supported and encouraged to participate in their care. We observed staff interact with the children in a manner that calmed the child and the children were happy we heard children and staff laughing together. We saw staff encourage a child who was reluctant to engage with a treatment, the staff gently encouraged the child until the treatment was concluded. This approach built up the trust and ensured care was delivered in a manner that caused minimal distress to the child and their family. We were told that the ward works closely with the community nursing team and the local children's hospice where appropriate. This ensured that any on going care needs were met.

We noted that there were facilities on the ward to allow parents to stay with their child. These included a kitchen and bathroom facilities and a small sitting room that allowed the parents to spend time off the ward while allowing them to be in close proximity of the ward should they need to return quickly.

We were told that each child has a named nurse to care for them who took responsibility for the care of that child, this included administering medication and ensuring their nutritional needs were identified and met. This approach ensured that individualised care that met the child's needs was planned and delivered.

To meet the child's and their families needs care and support is provided by a range of professionals who are based both on the ward and in the community. For example there is a full time safeguarding nurse on the ward to support staff and ensure all allegations and signs of abuse are responded to in a timely manner to ensure the health and welfare of the child.

The staff we spoke with told us that the ward team work very well together, ensuring the continuity of care of the child and their family. For example to facilitate the child's discharge the community nurses visited the ward daily to make sure the community team are fully aware of the needs of the children who are discharged into their care.

Our judgement

The trust is compliant with this outcome at this location because the children who attend Starfish ward have their needs identified and their individual needs met by a team of health professionals. Parents are involved in all aspects of their child's care and supported during their child's admission to the ward.

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

People who use the service told us that they always find the facilities clean and fresh.

Other evidence

During our visit on 01 December 2011 a review of the infection control procedures on the ward found that audits of the cleaning procedures on the ward were regularly undertaken and action taken to address any issues identified. The sister in charge told us there are infection control systems in place on the ward. These include an isolation unit where children at risk of infection or those with a known infectious disease are cared for. This protects the sick child and ensures that the risk of cross infection to other children are minimised.

The ward was visibly clean and we did not see any areas that were dirty or untidy. We saw cleaning schedules in place. The cleanliness of the ward was regularly reviewed by the cleaning supervisor and the sister in charge this included checks of high level surfaces for example the tops of the screens and ventilation grills. The findings of these reviews were documented and any problems or issues found were addressed immediately.

To reduce the risk of infection staff told us that they use disposable medical equipment, for example syringes, and that the equipment is either for single use or for single patient use. Staff stated that there are always ample supplies of disposable equipment available and we saw that the stock area of the ward was well stocked.

We were told that audits were regularly undertaken to ensure staff are using disposable equipment appropriately. They said that if an issue was found it would be addressed immediately by drawing up and implementing an action plan that may

include arranging an additional or refresher training for staff as necessary. Throughout the ward and at the entrance we noted that there were plenty of hand washing facilities, including cleansing gels and reminders for people to wash their hands. We observed staff cleaning their hands on entering the units and between attending to patients.

The sister in charge showed us records where she discretely observes the hand hygiene routine of staff on the ward. The record showed 100% compliance with hand hygiene.

To reduce the risk of cross infection posed by children sharing toys we saw records that showed that toys were washed daily. We were told that ward had a policy of not having any communal soft toys as staff cannot be sure that the toys are cleaned appropriately. There were soft toys on the ward but they belonged to the individual child. We were also told that once a week the play area of the ward was given a deep clean to minimise the risk of children being exposed to infections.

Our judgement

The trust is compliant with this outcome because there were systems and processes in place to identify, prevent and control the spread of health care associated infections.

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

People who use the service told us that the staff are always there, were unflappable and lovely. There always seemed to be enough staff on duty.

We were told that there is never a time when staff do not have time for the children.

Other evidence

During our visit to Starfish ward we were told that all the staff who worked on the ward were appropriately qualified. This included the nurses, nursery staff and medical personnel. We were told that the ward was fully staffed at the moment with no vacancies and that staff absences for example sickness and holidays were usually covered by the ward staff themselves or by staff from the other children's ward. Bank staff were also used in emergencies. We were told that the bank staff are usually staff from the children's department in the hospital, this means that there are always experienced staff on duty.

The ward is staffed by a range of professionals for example during the day there are four pediatric trained nurses, one nursery nurse, one third year student and two first year students. The night is covered by three trained nurses and one nursery nurse. All the staff we spoke with stated that the staffing establishment was sufficient to meet the needs of the children. We were told that staffing levels are responsive to the dependency of the children on the ward. For example if a child had high dependency staffing levels were increased to ensure that their specific needs were met.

The staff that we spoke with confirmed that they had received a detailed induction programme when they joined the ward this included a wide range of mandatory training

such as moving and handling and infection control, as well as specific training which related to the specific areas they were going to work in. They confirmed that there were systems in place to identify when training updates were required and that this training was then arranged.

Our judgement

The trust is compliant with this outcome because there are sufficient staff on duty who are appropriately trained to meet the health and welfare needs of the children using this service.

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

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