

Report to LINKs regarding Basildon Hospital.
January 2010.

The Care Quality Commission was created in shadow form on 1st October 2008 and began operating on 1st April 2009. Baroness Barbara Young was appointed shadow Chair by the Department of Health. On 26th December 2009 Barbara Young announced that she is stepping down from that role, effective February 2010.

The Care Quality Commission is a non departmental public body, set up as a regulator for health and social care in this country.

The duties of the CQC charges them to ensure that cleanliness, service standards and procedures are relentlessly driven forward in care homes, hospitals doctors surgeries and dentists; in fact any location where health driven practices are carried out.

All health and social care providers that come within the scope of future registration are required to register with the CQC, in order to be granted registration to operate. Care providers need to demonstrate that they can meet, or are already meeting the registration requirements. To maintain their registration they will need to demonstrate an ongoing ability to meet these requirements.

Several unannounced inspections have already taken place at the Mid Staffs NHS Foundation Trust and the West London Mental Health Trust.

The CQC inspectors paid an unannounced visit to Basildon Hospital on Thursday 8th October 2009.

The inspection team found hygiene standards to be unacceptable and reported several concerns. In the A&E department 11 trolley mattresses were found to be stained through to the foam interior. Damaged mattress covers were found and subsequently discovered in other Trusts. This type of mattress has been withdrawn and certainly at Basildon Hospital they were immediately replaced. There can be no denial that greater care should have been taken to eliminate this problem at an earlier stage.

The team found blood pressure cuffs blood stained, including a child's cuff. Whilst not acceptable, it is understandable in such a busy department and such equipment should be changed and cleaned as soon as is reasonably practicable.

Suction collection bottles were found to be contaminated, both internally and externally and indicate a lack of concentration to detail and poor nursing standards.

Blood stains were found on the floor and although not acceptable it is understandable in a busy department. It does however indicate that prompt and thorough cleaning procedures need to be in place.

Long term high and low level dust was found on surfaces, including bed frames. I am unsure how you define long term dust apart from quantity, but while not acceptable it must be born in mind that construction work is taking place in very close proximity and will continue for some considerable time in the future. A good seal is needed between construction and treatment areas and far more diligent cleaning practices need to be followed.

Plaster damage to walls and damage to door frames and doors was highlighted. These problems are regularly identified during Patient Environmental Action Team Audits.

A significant amount of work has already been carried out, but on a recent visit it was obvious that traffic movement needs to be carried out in a more acceptable manner. There are obvious signs of doors being kicked open and vehicles driven against doors to force

them open. Whilst a great deal of damage could be prevented by automatic doors, costs must be born in mind. Bump pads have been installed, but unfortunately not all vehicular traffic conforms to the same dimensions. More care is certainly needed with internal vehicular traffic.

I would point out that these problems were only identified in specific areas of inspection and are not indicative of the general environment within the hospital. Additionally it must be said that remedial action was promptly put in place to rectify concerns.

I was not in this country when the news broke but Governors expressed concern that they were not notified of the impending announcement, or its content, although I must say that governors soon made me aware even in Egypt.

On Monday November 17th Dr Foster announced its Hospital Standard Mortality Rate (HSMR) showing Basildon Hospital to be the highest figure in the guide.

Dr Foster is the name of a software program producing computerised results to a number of indicators. Basildon Hospital had been using a different program and methods of recording differed. The Doctor Foster software is currently being modified and Basildon Hospital will in future using the same software. Under the new recording methods the Trust has already significantly improved its position. I personally feel that the public would wish to know actual mortality figures including age range and if any fatalities were found to be preventable for whatever reason, what actions would be taken to prevent recurrence.

Monitor was established in January 2004 to organise and regulate NHS Foundation Trusts and their intervention took the form of asking the Trust to work with external advisors to make improvements more rapidly and this has worked extremely well.

Public may be confused over the “Good” rating awarded by the Care Quality Commission for quality services for the 2008/9 year and the unacceptable cleaning standards found on a Hygiene Visit spot check in October. Dr William Moyes , Executive Chairman of Monitor, said “ I don’t think its as inconsistent as people think the “good” rating is looking at the performance across a very wide range of issues, across the whole of 2008/9. The Hygiene Code” inspection looked at the Emergency Dept on a single day in October. It’s perfectly possible for hospital on one day, one department and one time, to miss the targets and become sloppy with hygiene performance and yet still, over the course of a year, be a perfectly good hospital.” The Trust has now set up a Programme Management Office to ensure our key stakeholders are aware of progress against the programme currently being undertaken. The Trust now has its own officers supplementing the team provided by PricewaterhouseCoopers and this will enable the transition of the office to being a Trust-delivered team.

Regular Progress reports have been made by Barbara Stuttle CBE , Deputy Chief Executive/ Chief Nurse South West Essex Primary Care Trust expressing her satisfaction with the improvement progress.

The Care Quality Commission has revisited Basildon Hospital and confirmed that they have now passed the Hygiene Code Inspection.

On Monday January 11th the Evening Echo Headlines read “Troubled Hospital Battles Deadly Disease” It went on to state that two patients at the hospital were suffering from

Legionnaires disease. Legionella is a disease so named after a severe outbreak of the infection at an American Legion Convention held in Philadelphia in 1976. It is a type of pneumonia that tends to occur more in men than in women, a predisposition to chest problems, including smoking, as well as age and debility play a part in the disease process. The infection is not spread by contact, but by inhalation of water containing the bacteria, suspended in the air. Sources of nutrient for the organism can be found in sludge, scale, rust, algae and other organic material. It is worthy of note that it is recognised that such infections may be found in a significant proportion of domestic dwelling water services, but the majority of people exposed do not become ill. The Trust has taken and acted upon the best advice available at all times, to ensure best practices are always observed.

The next press reported incident was on the 8th January. “Burst pipe puts freeze on operating theatres”. Due to adverse weather conditions a pipe in the plant room above the operating theatre suite had burst, causing some water ingress into the theatre suite. It was possible to transfer services promptly and repairs were carried out over a very short time span and once the theatres had been thoroughly cleaned, normal service was resumed.

Hospital governors participate in the Annual Patient Environmental Action Team Audit and have representation at PEAT group meetings, as well as interim audits throughout the year. We have representation on the Infection Control Committee and governors are encouraged to use their powers of observation during regular business within the hospital and we are currently exploring best practice for dealing, reporting and follow-up off such observations. This does not include taking up personal agendas or complaints as these should be referred to the PALS office in the usual manner

Governors have been invited to attend a presentation of Trust Cleaning Standards and their implementation and thus encourage greater scrutiny and awareness of current methods.

I am constantly encouraging fellow governors to become involved in LINKs, as I see this as a constructive way forward and of benefit to all parties.

The progress that has already been made by the Trust is quite impressive and is making significant strides in the right direction to give it's constituents a service to be proud of.

Stan Wynne.

Deputy Chairman, Board of Governors,

Basildon and Thurrock University Hospitals NHS Foundation Trust.

Vice Chair LINKs,

South West Essex Locality Group.