



Special measures – update report

February 2014

Special measures describes a package of tools which NHS regulators put in place in July last year, after Sir Bruce Keogh's Review into persistently high hospital mortality rates identified failings in the quality of care at 11 NHS trusts and foundation trusts. In addition to that first tranche of hospitals, a further three trusts have since been placed into special measures by Monitor and the NHS Trust Development Authority, following advice from the Care Quality Commission. The purpose of the regime is to give intensive support to trusts so they address their care problems effectively and put them right as quickly as possible.

The main features of the special measures regime are that:

- Monitor and TDA appoint an improvement director to help each trust turn around its performance and improve patient care;
- failing trusts are partnered with high-performing trusts to provide expert advice and support; and
- each trust is required to develop a detailed action plan, which the trust publishes and updates regularly.

In addition, Monitor and the NHS Trust Development Authority ("NHS TDA") review the leadership of trusts in special measures and, if necessary, use their powers to ensure trusts have the right leadership in place.

The special measures programme results in increased public accountability for the NHS' response to incidents of poor care, because trusts in special measures must publish monthly updates about how they are doing on the NHS Choices website. These updates demonstrate transparently how concerted action is being taken to tackle poor care in response, not only to the Keogh Review of mortality but also the general issues raised by the Francis Review into Mid Staffordshire NHS Foundation Trust.

A judgement of how well these trusts are progressing will come after they are reinspected by the CQC later this year. In advance of those inspections, Monitor and the NHS TDA are providing an update report on progress being made at the special measures trusts – particularly for the original 11 that have been in special measures for longest.

Although there is further work to be done, NHS staff at all special measures trusts deserve praise for driving improvements in the quality of their services.

All NHS trusts need robust clinical staffing arrangements, the right leadership in place, the right management processes and, above all, better ways of listening to patients to ensure that services are meeting patient needs. The first challenge for trusts in special measures is to ensure they have the right people and processes in place to produce the caring culture and health outcomes that patients and communities expect. Trusts in special measures have made considerable progress in these areas.

Over the period July to October 2013, published data shows that: almost 650 (whole time equivalents) of additional nurses and nurse support staff; and more than 130 additional doctors have been appointed by special measures trusts. Since this date, special measures trusts have continued to increase their establishment.

Across the 14 trusts, leadership has been strengthened through 49 new appointments. These include: four chairs, five chief executives, 11 non-executive directors, seven medical directors, four nurse directors and 18 other director changes. Half of the trusts have changed either their chair or their CEO chief executive or both.

Special measures trusts have been partnered with NHS organisations that are highperforming in relevant areas. The partner organisations are providing targeted help to improve services highlighted as problem areas in the Keogh/CQC inspections. In addition, all trusts have had improvement directors appointed to provide support, oversight and challenge on behalf of Monitor or the NHS TDA.

An important marker for progress are the steps that each trust in special measures has taken to implement its action plan and ensure that the improvements are sustainable. Each action plan sets out work that the trust needs to do to make improvements. Trusts are held to account for their progress in part by being required to publish a status update of progress against their action plans every month on NHS Choices. Of the 244 actions within the 14 special measures trusts' plans, 82 (34%) have been delivered and a further 127 (52%) are on track for completion within the expected timescales. Trusts are working to address actions that are currently delayed.

Whilst it is very encouraging to see the progress that each of the organisations has made, it is also clear that there is still a lot of work that each of the trust boards need to do before they can achieve the highest quality, sustainable services for patients.

Although more work needs to be done, special measures trusts are making progress to improve standards of patient care.

Summaries of progress at all trusts are outlined in this report. Further information can be found at:

http://www.nhs.uk/nhsengland/specialmeasures/pages/about-special-measures.aspx

Signed by:

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Trusts placed into special measures as a result of the Keogh Review

The following 11 trusts were placed into special measures in July 2013.

Tameside Hospital NHS Foundation Trust

Staff at the trust have commented that "communication with the Chief Executive has increased" and "there has been significant change...a positive one, which I can feel and see."

Tameside was put into special measures following the Keogh Review, which identified concerns with measures the trust was taking to prevent hospital acquired infections. The Keogh Review also raised concerns that there was insufficient clinical cover, particularly out of hours.

The trust has been partnered with University Hospital South Manchester which is providing senior clinical support to spread clinical best practice and help cultural change across the trust to take place.

Since entering special measures, the number of patient falls has decreased by 18%¹, and the trust is now meeting the national target to deliver 95% of all care harm free. Staff at the trust have commented that "communication with the Chief Executive has increased" and "there has been significant change...a positive one, which I can feel and see."

Since entering special measures in July 2013 data published in October 2013 shows that the trust gained an additional 32 whole time equivalent nurses and nursing support staff over the same period. In addition, the percentage of patients that would recommend the trust has increased by 9 percentage points.

Tameside had 22 urgent or immediate actions in their Keogh Action Plan. By January 2014, it had delivered five and 17 were on track to be delivered.

While improvements have clearly been made, further progress is required in the trust's emergency care pathway, particularly in its acute medical unit, to ensure recent improvements are consolidated, sustained and built upon in the future. This should include further recruitment to substantive clinical posts and further development of the trust's ambulatory care model. The trust also needs to ensure that it continues to strengthen the supervision and training of junior doctors.

Basildon & Thurrock University Hospitals NHS Foundation Trust

"Visibility of senior trust staff and non-executive directors on the wards and departments, in particular the Chief Executive and Chair, was noted and appreciated by trust staff."

¹ HSCIC, NHS Safety Thermometer Data

The Keogh Review at Basildon identified concerns with poor systems for bed management; patient flows and that the trust was not ensuring infection control procedures were being applied consistently.

The trust is partnered with the Royal Free London NHS Foundation Trust, which will support Basildon in improving patient flow and management by reviewing processes and sharing protocols. Staff from Basildon will also visit Royal Free London to see schemes in action.

A follow-up progress review, led by NHS England, was undertaken in November 2013 by some of the original review panel. The progress review concluded that "the panel chair and other panel members would be happy to be treated at the hospital themselves". In addition, "visibility of senior trust staff and non-executive directors on the wards and departments, in particular the Chief Executive and Chair, was noted and appreciated by trust staff."

Since entering special measures in July 2013 published data shows that the trust gained: 141 nurses and nursing support staff; and 17 additional doctors. In addition, the percentage of patients that would recommend the trust to their friends and family had increased by 14 percentage points.

Basildon has 15 urgent or immediate actions in its Keogh Action Plan. As of January 2014, the trust had delivered eight of these, and the remaining seven were on track to be delivered. The key challenge for the trust will be to deliver and embed the remaining actions ahead of a proposed CQC inspection at the end of March 2014.

Northern Lincolnshire and Goole (NLaG) NHS Foundation Trust

"Significant improvement in systems and services and a sense of improved pride and confidence amongst staff."

Concerns raised by the Keogh Review included: progress in improving clinical leadership; patient flow management; staffing levels, quality and skill mix; and evidence of poor care and patient experience in some areas.

The trust has established a 'partnership' arrangement with Sheffield Teaching Hospitals Foundation Trust. Key areas of support include: mentoring support for new medical director; sharing examples of good practice, innovation and policy; support and expertise to ensure consistency of pathways / approach.

Since entering special measures, the trust's leadership has been strengthened by the appointment of a new medical director. A re-visit by members of the Keogh Review team in November found evidence of "significant improvement in systems and services and a sense of improved pride and confidence amongst staff" since the previous visit. Since entering special measures in July 2013 data published in October 2013 showed that the trust gained an additional 75 nurses and nursing

support staff over the same period. The trust has also established one hyper stroke unit serving the area, with rapid repatriation of patients after their acute phase.

North Lincolnshire and Goole had 16 urgent or immediate actions in its Keogh Action Plan. By January 2014, the trust had delivered five of these and 11 were on track to be delivered. The trust must ensure that its actions address the fundamental concerns identified in the Keogh Review, and that the new Medical Director drives implementation of the required improvements to clinical leadership throughout the organisation.

Medway NHS Foundation Trust

Monitor has taken steps to strengthen the trust's leadership arrangements and a new Chief Executive and Chair are now in place.

Medway was placed into special measures following the Keogh Review. The Review team identified insufficient board focus on quality and safety issues, insufficient clinical supervision in some departments, and a poorly laid-out emergency pathway as key areas for improvement. The trust has partnered with East Kent University Hospitals NHS Foundation Trust, which is providing support on informatics.

Medway had 16 urgent or immediate actions in its Keogh Action Plan. By January 2014, it had delivered two actions, 11 were on track to be delivered and three will be implemented but are delayed.

Since entering special measures, Monitor has taken steps to strengthen the trust's leadership arrangements and a new Chief Executive and Chair are now in place. The trust has overhauled its complaints process, clearing a backlog of 2000 complaints. Since entering special measures in July 2013 data published in October 2013 showed that the trust gained an additional 102 nurses and nursing support staff over the same period. The most recent Standardised Hospital Mortality Index data published in January 2014 shows the trust's overall mortality rates have reduced and are now within the expected range.

Areas still requiring improvement include A&E wait time performance and emergency flow. The trust is addressing these through improved admissions and discharge arrangements, in place since late 2013, and a new acute admissions unit, due to open in December 2014.

The trust reports its finances will deteriorate by some £6.7 million during 2013/14, leading to a year-end deficit of £7.9 million. The increase in its costs derives principally from the need to increase staffing to address Keogh and other quality issues. In light of these pressures, the trust is commissioning a clinical and financial diagnostic to inform its five-year strategic plan for the period 2014 - 2019.

Buckinghamshire Healthcare NHS Trust

Since entering special measures and up to October 2013 the trust had an additional 16 doctors.

The trust entered special measures due to a need to: build strong urgent care pathways; develop a more open and transparent approach to gathering real-time feedback from patients; and bring together all improvement projects into a trust wide Patient Safety Strategy which includes looking at care and management of the deteriorating patient. There were also further concerns over staffing levels of senior grades, in particular out of hours.

The trust is partnered with Salford Royal NHS Foundation Trust. Salford are sharing their process for nursing assessment and accreditation to encourage continuous quality improvement at ward level and work to further improve mortality levels. In addition the trust are providing support to further improve board governance. The trust has appointed a new Nursing Director; she takes up post on 1st April 2014. The new Chair takes up post in March this year and the Medical Director commenced in November 2013.

Since entering special measures and up to October 2013 the trust had an additional 16 doctors. The trust's number of patients that would recommend the hospital to friends and family also increased.

Buckinghamshire had 29 required actions in their Keogh Action Plan and, as of January 2014, 17 of them had been delivered, eight were on track to be delivered, and the remaining four were subject to delay. The remaining four relate to introducing new systems in the trust; all are in progress but will not be regarded as completed until there is demonstrable evidence that the new systems have resulted in a change in behaviour.

The trust still has work to do to improve on their lower than national recommended level of midwife to birth ratio. Whilst they have recruited additional nurses, the trust needs to work on their retention policy.

East Lancashire Hospitals NHS Trust

The number of patients who would recommend the hospital to friends and family has increased.

The trust was placed into special measures due to issues with the trust's complaints process and lack of a compassionate approach to care. Additionally the Board's quality governance processes were not cohesive and failed to use information effectively to improve the quality of care provided to patients.

The trust has been partnered with Newcastle Hospitals NHS Foundation Trust. Following the appointment of a new Interim Chief Executive to East Lancashire, senior leadership from Newcastle and East Lancashire are working together constructively to strengthen improvements on approach to care, quality and governance. Since entering special measures the executive team has been strengthened with a new Interim Chief Executive, new Nurse Director and a change of Medical Director and a new Chair also took up post on 1st February 2014.

Since entering special measures the trust has recruited an additional 104 nurses and nursing support staff and 22 additional doctors. The number of patients who would recommend the hospital to friends and family has increased.

East Lancashire had 16 required actions in their Keogh Action Plan and, as of January 2014, seven of them had been delivered and nine were on track to be delivered.

Of those actions on track to be delivered the trust has increased its oversight on deaths in hospital, further reduction in its HSMR is needed. The trust also needs to recruit more nurses and further strengthen the improving staff and patient engagement. The trust needs to continue to work with its commissioners to make sure some services are, where appropriate, provided closer to people's homes.

George Eliot Hospital NHS Trust

The trust are recruiting 12 new consultants to deliver a new "seven day" working pattern including acute medical, elderly care, respiratory physicians and gastroenterology.

The trust were placed into special measures due to concerns in relation to low levels of clinical cover, particularly out of hours and the panel identified that a number of patients could be placed in more appropriate settings within the trust, and multiple bed moves were common during a patient stay.

The trust is partnered with University Hospitals Birmingham NHS Foundation Trust who are helping in improving the trust's system for measuring improvement and working on programs to help reduce mortality further. They are also providing support to further improve board governance.

The trust has appointed to a new post of Head of Patient Safety and Mortality, which is a dedicated role looking at different programs of activity to help drive down mortality. Clinicians from University Hospitals Birmingham have been helping the trust review the notes of patients who have died in hospital.

The trust are recruiting 12 new consultants to deliver a new "seven day" working pattern including acute medical, elderly care, respiratory physicians and gastroenterology.

Since entering special measures and up to October 2013 the trust had an additional 19 nurses and nursing support staff and 13 additional doctors.

George Eliot had 23 required actions in their Keogh Action Plan and, as of January 2014, 18 of them had been delivered and 5 were on track to be delivered.

The trust will have to continue to maintain robust financial control and achieve further reduction in costs to respond to the challenges it faces. The changes in board positions will need time to become established in order to demonstrate a strong board.

North Cumbria University Hospitals NHS Trust

The trust has recruited an additional 67 nurses and nursing support staff.

The trust was placed into special measures due to sustained failings in the governance arrangements to ensure the safe maintenance of the estate and equipment. Additionally the trust had inadequate staffing levels and was over-reliant on locum cover in some areas.

The trust have partnered with Northumbria Healthcare NHS Foundation Trust. Key areas of support have included: leadership on improving delivery of performance standards; achieving CQC standards for medical records; mentoring support to help develop clinical nurse leadership and crucially organisational development to support a cultural change throughout the trust.

Since entering special measures the trust has been actively recruiting nurses and permanent consultants. By the end of February five new doctors will have joined the trust since entering special measures and the trust has recruited an additional 67 nurses and nursing support staff. The number of patients that would recommend the trust to friends and family has increased.

North Cumbria had 19 required actions in their Keogh Action Plan and, as of January 2014, six of them had been delivered, 11 were on track to be delivered, and two were not on track. Whilst the trust have significantly strengthened the leadership and management capacity there are still some specific gaps within the management structure; the trust is actively recruiting to fill these roles.

The trust still needs to reduce the number of locum doctors it employs. This will mean continuing to work hard to recruit to the vacant posts. There is further work to do to ensure future services across the trust are sustainable. Whilst nurse staffing has improved there is need to both maintain this increase and retain existing staff.

United LincoInshire Hospitals NHS Trust

Since entering special measures nurse staffing levels have increased significantly with investment planned over the next two years.

The trust was placed into special measures due to inadequate staffing levels and poor workforce planning, particularly out of hours. Additionally there were problems

with the completion of some care documentation, which the trust has reviewed and rectified.

The trust have partnered with Sheffield Hospitals NHS Foundation Trust. Key areas of support have included: leadership and executive team support; improvement to the management of complaints; out of hours medical staffing; management of the deteriorating patient; critical care outreach / hospital at night; working towards 7 day working and developing strong clinical leadership.

The trust have strengthened their leadership with a new Chairman, Medical Director, Director of Finance and a new Nurse Director will be appointed in the coming months.

Since entering special measures nurse staffing levels have increased significantly with investment planned over the next two years. New appointments have been made to key clinical areas to further improve quality and safety of care for patients; these new staff will take up post in April 2014. Since entering special measures and up to October 2013 the trust had an additional 36 qualified nurses.

United Lincolnshire had 17 required actions in their Keogh Action Plan and, as of January 2014, four had been delivered and 13 were on track to be delivered.

The trust needs to continue work to provide seven-day services across the hospital sites. Whilst there has been significant increase in nurse staffing numbers the trust needs to sustain recruitment. There must be further improvement in performance standards particularly in A&E waiting times. A major challenge is to work with commissioners and other key strategic partners as part of the Lincolnshire sustainability review.

Burton Hospitals NHS Foundation Trust

The trust has re-modelled their urgent care services and as a result have significantly improved performance against the A&E 4 hour standard.

The Keogh Review identified the following areas for improvement including: the skill mix of clinical teams; support for junior doctors; communication between trust management and front-line staff; and the adequacy of board information on the quality of services. The trust is now partnered with University Hospitals Birmingham NHS Foundation Trust, which is to provide support across a range of areas.

Burton had 17 required actions in its Keogh Action Plan classed as urgent or immediate. By January 2014, it had delivered four of them and the remaining 13 were on track.

Since entering special measures, the trust has ended long shift patterns and introduced an alternative nursing shift system at ward level. The trust has strengthened its medical leadership and has appointed two associate medical

directors. These roles will provide additional support to the medical director. They will have a particular focus on patient safety and clinical effectiveness.

Since entering special measures in July 2013 data published in October 2013 shows that the trust gained an additional 35 nurses and nursing support staff over the same period. The trust has re-modelled their urgent care services and as a result have significantly improved performance against the A&E 4 hour standard.

The trust is strengthening board oversight of its quality agenda, but there is scope for improvement in certain areas including tracking progress against key quality performance indicators.

Sherwood Forest Hospitals NHS Foundation Trust

The complaints process has been overhauled and the backlog of 2,000 complaints has been cleared.

The Keogh Review identified the following areas for improvement including: complaints dating back to 2010; a significant backlog of discharge letters and clinic appointments; and backlogs in reading scans and x-rays.

The trust has partnered with Newcastle Upon Tyne NHS Foundation Trust, which is providing support in four areas: delivery of the integrated improvement programme, enhancing relationships with primary care to deliver vertically integrated patient pathways; business intelligence and analysis; and an improved trust board quality governance process.

Since entering special measures the trust has strengthened its leadership, the complaints process has been overhauled and the backlog of 2,000 complaints has been cleared. Nutrition of patients has also improved and there are now safe staff nursing levels across all areas of the trust.

Since entering special measures in July 2013 and October 2013, data published in October 2013 shows that the trust had gained an additional 63 nurses and nursing support staff and 18 additional doctors over the same period.

Sherwood Forest had 22 urgent or immediate actions in its Keogh Action Plan. By January 2014, it had delivered five and the remaining 17 were on track.

Although the trust has made good improvements in the management of complaints, and has eliminated the backlog, there is an over-reliance in this transitional period, whilst new processes are being implemented, on a small but critical number of staff to sustain the change momentum. The trust has further work to do in relation to workforce development in this area.

Much improvement has been made in fluid management, but work remains to be done in relation to the full implementation of new processes, and as yet consistent outcomes are not fully evident. Regular audits are being undertaken to ensure the sustainability of changed practices and better quality outcomes for patients.

Subsequent trusts placed in to special measures

King's Lynn Hospital NHS Foundation Trust

The trust leadership has been strengthened by the appointment of a new Chair, Chief Executive, Medical Director and Nurse Director and there is now 100% compliance with nurse staffing ratios.

The trust was placed into special measures in October 2013 when CQC inspectors found low and unacceptable staffing levels and a lack of training in dementia care.

The trust is partnered with Guy's and St Thomas' NHS Foundation Trust (GSTT). GSTT is providing: senior mentoring; nursing leadership mentoring; and staffing level modelling support.

Since entering special measures, the trust leadership has been strengthened by the appointment of a new Chair, Chief Executive, Medical Director and Nurse Director and there is now 100% compliance with nurse staffing ratios².

Queen Elizabeth Kings Lynn had 32 urgent or immediate actions in its Action Plan. By January 2014, it had delivered one, five were on track to be delivered, 21 were subject to delay, and five were not on track.

It is important to note that the trust entered special measures in October 2013 and developed its Action Plan in response during November 2013. Therefore, it is at a much earlier stage than most other special measures trusts in delivering its Action Plan.

Colchester Hospital University NHS Foundation Trust

The Royal Marsden Cancer Institute will be helping Colchester Hospital University Foundation Trust to improve its cancer services by providing support, input and advice.

The trust entered special measures in November 2013 after a CQC inspection highlighted concerns about the quality of some services for cancer patients at the trust. A number of cancer patients may have suffered undue delays in treatment and there were inaccuracies in waiting time data relating to cancer treatment. The trust is now working to implement its Integrated Cancer Action Plan. The Keogh Review also highlighted that responsibility among medical staff for deteriorating patients overnight was unclear and it also found patient at risk (PAR) escalation.

 $^{^2}$ The minimum nursing ratios for each ward, agreed with local commissioners, are one nurse to every eight patients in the daytime (8am – 8pm) and 1:11 at night (8pm – 8am). The staffing ratio is higher for more specialist wards.

The Royal Marsden Cancer Institute will be helping Colchester Hospital University Foundation Trust to improve its cancer services by providing support, input and advice. The leadership at the trust has been strengthened with a new Chief Executive and Nurse Director.

Colchester will report against its Action Plan for the first time in in February 2014.

Barking, Havering and Redbridge University Hospitals NHS Trust

Barking, Havering and Redbridge were placed into special measures following the CQC Chief Inspector of Hospital's report into care at the trust, which concluded that while there have been signs of sustained improvements in some areas, the leadership of the trust needed support to tackle the scale of the problems it faces. While aware of many of the issues raised by CQC around patient safety and patient care, attempts to address these issues by the trust have had insufficient impact. As a result the Chief Inspector recommended that the trust be placed into special measures. Their Action Plan is currently being developed and will be published in due course.

List of sources

Within this document we reference data submissions prepared by each special measures trust and the following sources:

Friends and Family data (period July to December 2013) is NHS England published at:

http://www.england.nhs.uk/statistics/statistical-work-areas/friends-and-family-test/friends-and-family-test-data/

Workforce numbers (whole time equivalents) over period July to October 2013 derived from HSCIC data:

http://www.hscic.gov.uk/catalogue/PUB13398/nhs-work-stat-oct-2013-csv.zip

Harm free care reflects period July to December 2013 and is sourced from Safety Thermometer published by HSCIC at:

http://www.hscic.gov.uk/catalogue/PUB13298/nati-safe-tool-dec-2012-dec-2013dat.xlsm

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