Care Quality Commission
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Our reference: RQ8
Clare Panniker
Mid Essex Hospital Services NHS Trust
Court Rd,
Broomfield,
Chelmsford
CM1 7ET

Date: 8 November 2019

CQC Reference Number: INS2-7187080591

Dear Clare Panniker,

Re: CQC inspection of Mid Essex Hospital Services NHS Trust

Following your feedback meeting with Martine Pringle (CQC Inspection Manager), and Luam Kidane (CQC) Inspector. I thought it would be helpful to give you written feedback as highlighted at the inspection and given to you and your colleagues, Chief Nurse Diane Saker and Managing Director Jane Farrell, at the feedback meeting.

This letter does not replace the draft report and evidence appendix we will send to you, but simply confirms what we fed-back on 7 November 2019 and provides you with a basis to start considering what action is needed.

We would encourage you to discuss the findings of our inspection at the public session of your next board meeting. If your next board meeting takes place prior to receiving a final or draft inspection report and evidence appendix, this correspondence should be used to inform discussions with the board. When scheduling a discussion of this letter, or the draft report, please inform your CQC Regional Communications Manager, who is copied in to this letter.

An overview of our feedback

The feedback to you was:

The announced inspections took place on the 5,6 & 7 November 2019 and covered six core services. We inspected, Urgent and Emergency care, Medical Care (including older people), Surgery, Maternity, Outpatients and Gynaecology services.

The preliminary findings that we fed back to you were:

- We thanked yourself and the team for the warm welcome we received and the smooth running of the inspection. Your staff in all cores services we inspected were friendly and welcoming throughout the inspection.

Urgent & Emergency Care

- The observed that not all NEWS observations were repeated in the required timeframes.
- The service had created a 'fit to sit' area for patients to improve flow. However, we were not provided with a pathway to identify which patients are able to be treated in this area.
- We observed that fridge checks where medication was kept were inconsistent.
- The mental health room was out of action due to a broken window pane in the door. Staff were not aware how long this would be out of use.
- We observed good multidisciplinary working. In times of high acuity all staff worked as a team to treat and care for patients.

Medical Care (including older people)

- The ward for patients living with dementia lacked space to implement therapies effectively.
- Patient' privacy and dignity was compromised in the discharge lounge due to lack of space and screens.
- We found one ward completed morning handover at the patient's bedside which meant there was no privacy and patients were all woken without considering their individual preferences.
- The service checks all agency and bank staff competencies and staff completed the check list.
- We observed good recording keeping.
- Staff are very happy at work and proud of their achievements.

Surgery

- Theatres were not recording the patient's temperature in the anaesthetic room and during the operation in line with best practice.
- Staff we spoke with were not aware of the specific guidance or pathways for their area. We observed a limited amount on the intranet for staff to access.
- Venous thromboembolism assessments were inconsistent throughout the service.
- We observed that fluid balance charts were not fully completed.
- Staff completed patients risk assessments and documentation was good.
- Most staff told us that the senior leadership team (SLT) were visible and supportive, there were a few staff who told us that the SLT were not supportive.

Maternity

- The service did not have enough middle grade doctors to have a team for obstetrics and a team for gynaecology.

- The service did not have a robust system to ensure midwives and doctors had completed a CTG competency check.
- Staff had not practiced and baby abduction drills.
- MDT working was positive, and we observed respectful relations between staff.
- The culture within the service had improved since the appointment of the new head of midwifery (HOM). Staff spoke very highly of the HOM.

Outpatients

- We raised concerns regarding the environment for chemotherapy outpatients, it was very small and cramped which meant patient privacy & dignity was compromised and staff told us that it was difficult to maintain during an emergency.
- The area where chemotherapy drugs were prepared appeared to be an office and storage area and not a formal clinical treatment room we were concerned regarding infection prevention control in this area.
- The process for reporting of data and RTT times were not robust and targets not always achieved.
- Not all staff within the musculoskeletal clinic had completed level 3 safeguarding training.
- The culture within the department had improved. Staff were happy at work and administrative staff were easier to recruit.
- Staff were focused on making improvements within the department.

Gynaecology

- Staff told us that can be an issue with cancelling operations within the department due to bed pressures.
- The process for reporting of data and RTT times were not robust and targets not always achieved.
- Staff were proud of keeping their gynaecology specific ward.
- There were examples of multidisciplinary working internally and externally.

A draft inspection report will be sent to you once we have completed our due processes and you will have the opportunity to check the factual accuracy of the report. I am also copying this letter to at NHS Improvement

Could I take this opportunity to thank you once again for the arrangements that you made to help organise the inspection, and for the cooperation that we experienced from you and your staff.

If you have any questions about this letter, please contact me through our National Customer Service Centre using the details below:

Telephone: 03000 616161

Write to: CQC
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If you do get in touch, please make sure you quote or have the reference number (above) to hand. It may cause delay if you are not able to give it to us.

Yours sincerely

Inspection Manager

c.c. Copied to:
Fiona Allinson – CQC Head of Hospitals Inspection
NHS England and NHS Improvement East of England
Antoinette Smith CQC Inspection Manager
Luam Kidane CQC Inspector/Relationship owner of the trust