Care Quality Commission
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For the attention of Caroline Shaw CBE

Caroline Shaw CBE
The Queen Elizabeth Hospital Kings Lynn NHS Foundation Trust
Gayton Road
Kings Lynn
PE30 4ET

6 January 2021

Care Quality Commission
Health and Social Care Act 2008
Urgent notice of decision to remove conditions from your registration as a service provider in respect of a regulated activity

The Queen Elizabeth Hospital
Maternity Services

Our reference: RGP1-10064183576
Account number: RCX

Dear The Queen Elizabeth Hospital Kings Lynn NHS Foundation Trust

We are serving this notice under Section 31 of the Health and Social Care Act 2008.

We are formally notifying you of our decision under Section 31 of the Health and Social Care Act 2008, to remove conditions from your registration as a service provider in respect of the above regulated activity.

We have removed the following conditions for the regulated activity stated above:

Condition 1: The Registered Provider must ensure, with immediate effect, that staff reviewing, interpreting and classifying Cardiotocography (CTG) traces are trained and competent to do so.

Condition 2: By 1 August 2018, the provider must submit to the Care Quality Commission written evidence of the completion of CTG training for all midwifery and medical staff that are currently working.

Condition 3: The Registered Provider will ensure that there is a consultant obstetrician of the day nominated and who has oversight of the delivery suite from 9am to 7pm, Monday to Friday, with appropriate presence between 7pm Friday and 9am Monday.

Condition 4: The Registered Provider will ensure a clear process and on call rota in place for consultant obstetric cover out of hours.

Condition 6: The Registered Provider will ensure that all women and babies will receive ongoing risk assessments for the duration of their maternity care.

These are imposed at the following location(s):

The Queen Elizabeth Hospital
Gayton Road
Kings Lynn
PE30 4ET

Following the 2018 CQC Inspection, Maternity Services was rated as 'Inadequate' and Section 31 Warning Notices were issued outlining a number of conditions which the Trust must comply with, to ensure the safe delivery of care.

Following the Trust's application (dated 11 May 2020) to remove a number of the conditions and after our recent inspection (September 2020), we have made the decision to remove the requested conditions:

Condition 1: The Registered Provider must ensure with immediate effect that staff reviewing, interpreting and classifying Cardiotocography (CTG) traces are trained and competent to do so.

You provided evidence to confirm compliance with CTG training which included details of training using the K2MS for six modules which are completed by all relevant staff annually. Modules included Fetal Physiology, Antenatal CTG, Intrapartum CTG, Cord Blood Gas, Errors and Limitations in Fetal Monitoring, Intrapartum Intermittent Auscultation. CTG training was reported as being part of departmental induction/ medical induction, and weekly CTG meeting minutes evidenced discussions and learning.

At our recent inspection which took place on 14 to 23 September 2020, staff confirmed training and felt able to escalate any issues or concerns. Staff confirmed they completed K2 competencies and saving babies care bundle assessments online.

Midwives were not always able to attend the CTG meetings and we recommended that the service should ensure that attendance improves. Medical staff confirmed they received CTG training as part of their induction and staff reported that they were confident in CTG processes and training, with the ability to access training at home for additional experience. Any issues with CTG interpretation were reported through Datix.

Condition 2: By 1 August 2018 the provider must submit to the Care Quality Commission written evidence of the completion of CTG training for all midwifery and medical staff that are currently working.

You provided evidence to confirm training compliance. Compliance for midwives at the time of application was 93%, and 95% for medical staff.

Condition 3: The Registered Provider will ensure that there is a consultant obstetrician of the day nominated and who has oversight of the delivery suite from 9am to 7pm, Monday to Friday, with appropriate presence between 7pm Friday and 9am Monday.

You provided evidence to confirm consultant obstetrician cover during normal working and out of hours. During our recent inspection on 14 to 23 September 2020, we identified that there was a robust duty rota which evidenced sufficient obstetrician cover seven days per week. Staff confirmed that consultants were accessible and visible within the department. Midwives also reported that they felt comfortable seeking medical support.

Condition 4: The Registered Provider will ensure a clear process and on call rota in place for consultant obstetric cover out of hours.

Evidence provided outlined that obstetric cover consists of an allocated consultant present in the delivery suite from 9am to 7pm Monday to Friday with appropriate presence between 7pm and 9am Monday to Friday. There was a dedicated rota with formal handovers at 9am and 5pm to all members of the team with four hourly reviews of women between these times. The on call rota is made available and visible for all staff and included out of hours. You provided copies of rotas.

At inspection which took place on 14 to 23 September 2020, staff reported that there were no issues in seeking support or calling for a consultant. Escalation processes were in place. Rotas were reviewed and they confirmed cover in line with plan.

Condition 6: The Registered Provider will ensure that all women and babies will receive ongoing risk assessments for the duration of their maternity care.

You provided us with evidence to support the completion of regular risk assessments and audits completed to confirm compliance. Audit data showed that compliance with risk assessments was that Risk Assessments were complete 100% at booking, and repeated >95% at 37 week assessments and >90% at antenatal management plan meetings for the last four quarters. However, compliance for management plans was not as high. Staff completed monthly safety briefings and newsletters evidenced staff prompts for completing risk assessments.

At the inspection which took place on 14 to 23 September 2020, we reviewed ten sets of women's notes and two babies records. Notes and risk assessments were clear and comprehensive. The gestational related optimal weight (GROW) package was used, and these were seen to be plotted correctly. The World Health Organisation (WHO) checklist was used appropriately and fully with audits completed to ensure/ review compliance.

This decision takes effect immediately when this notice is given and you must carry on the regulated activity in a way which complies with your conditions of registration, including this removal.

If you do not agree with our decision, you have the right to make an appeal to the First-tier Tribunal (Health, Education and Social Care Chamber), under Section 32(1) of the Health and Social Care Act 2008. You should make your appeal using the correct appeal application form which can be downloaded from the Tribunals Service website (https://www.gov.uk/courts-tribunals/first-tier-tribunal-care-standards) or copies can be sent to you by contacting the Tribunals Service using the details below.

You must make your appeal in writing within 28 days of the date this notice was served on you and send it to:

HM Courts & Tribunals Service
Care Standards
1st Floor
Darlington Magistrates' Court
Parkgate
Darlington
DL1 1RU
Tel: 01325 289350
Fax: 01264 785013
cst@hmcts.gsi.gov.uk

Appeals against decisions made under Section 31 of the Health and Social Care Act 2008 will be given priority by the Tribunals Service, as reflected in a Memorandum of Understanding between CQC and the Tribunal Service. The Memorandum of Understanding can be found on the CQC website, or by following this link: http://www.cqc.org.uk/content/joint-working-agreements

You should contact the Tribunal Service if you have any questions about the tribunal process or making an appeal. If you do make an appeal, the final outcome will depend on the decisions made by the Tribunal.

If you have any questions about this notice, you can contact our National Customer Service Centre using the details below:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Write to: Care Quality Commission
Citygate
Gallowgate
Newcastle upon Tyne
NE1 4PA

If you do get in touch, please make sure you quote our **reference number** at the top of this notice, as it may cause delay if you are not able to give it to us.

Yours sincerely

Heidi Smoult
Deputy Chief Inspector
Hospitals

cc. Mark Heath- Head of Hospital Inspections (Interim)