

## **Joint statement from Monitor and the Care Quality Commission (CQC) on the current position at Mid Staffordshire NHS Foundation Trust:**

The CQC believes Mid Staffordshire NHS Foundation Trust is safe to provide services. But it has also made it clear that the trust must address remaining concerns quickly.

On behalf of its patients, the trust must meet all the essential standards of safety and quality and the CQC will follow up robustly to ensure the trust improves in the areas that need further attention.

CQC and Monitor have strong powers of intervention and would not hesitate to take urgent action to protect patients if they thought this necessary.

The trust has made important progress since the period described in the Francis Report. Steps have been taken to address immediate risks to patients and the new leadership of the trust has responded positively. Patients should be keen for their trust to do better still.

It is important to understand that the scale of change required in this organisation was very significant and was never going to happen overnight. To track progress, the CQC is to carry out another detailed assessment, starting in March, and Monitor continues to hold the trust's leadership to account for progress against its transformation plan.

## **PRESS RELEASE**

### **CQC responds to Mid Staffordshire Inquiry Report – regulator says it intends to register the trust, but with conditions**

The Care Quality Commission today (Wednesday) responded to the findings of the inquiry into care at Mid Staffordshire NHS Foundation Trust.

Jo Williams, CQC's interim chair, said: "The experiences people describe in this report are deeply distressing and totally unacceptable. There is no excuse for the appalling care patients suffered in this trust and everything possible must be done to prevent this from ever happening again in any NHS trust.

"It is important to understand that the scale of change required in this organisation was very significant and was never, therefore, going to happen overnight. This is why we have been scrutinising the trust's performance rigorously over the past 12 months.

"What we currently see is a picture of progress. But in the areas in which we have continuing concerns, we need to ensure that the trust delivers on what it says it is going to do. We need to see that these improvements are delivered on the ground for patients.

"With this in mind, our intention is to impose a number of conditions on the trust's registration when the new system comes into force on April 1. We will then carry out a detailed review of progress, listening with particular care to the views of patients, their family members and carers. We will not hesitate to use our new enforcement powers if essential standards are not in place."

CQC said the new registration system being implemented on April 1 would make it a legal requirement for NHS trusts to meet the standards set out by the government.

Where CQC has evidence that standards are not being met, it will have tough new enforcement powers including issuing a warning notice, fines, restrictions on services, prosecution, or in extreme cases, closure.

CQC is considering the trust's registration application and while improvements have been made, the trust does not yet fully comply with all of the regulations. CQC intends to register the trust as safe to provide services, however it will impose conditions on its registration, requiring the trust to take action within specified deadlines.

Of the 16 regulations relating to quality and safety, the trust has declared that it does not comply with aspects of five regulations and provided action plans to address shortfalls. The particular areas of concern relate to:

- regulation 9, care and welfare of service users – the trust has developed new procedures to improve how patients are moved through the emergency department and into appropriate wards, where necessary. However, these new policies are yet to be fully implemented.
- regulation 10, assessing and monitoring the quality of service provision - the trust has not fully implemented new governance and audit arrangements to check on quality of care on the wards.
- regulation 16, safety, availability and suitability of equipment - the trust needs to improve its process for making sure that equipment is properly maintained and that staff have had the training they need.
- regulation 19, complaints - the trust must improve the way it deals with people's complaints. It has a good action plan in place to do this and we expect to see that implemented.
- regulation 23, supporting workers - support structures for supervision of staff and a staff appraisal system are not fully in place.

In addition, the trust declared that it is compliant with the regulation relating to staffing levels (regulation 22, staffing). However, CQC remains concerned about staffing levels at the trust.

CQC scrutinised the trust's progress at three months and again at six months after publication of the Healthcare Commission investigation report, making recommendations for improvement. In addition, it has conducted spot-checks on infection control.

CQC will now carry out another detailed assessment, starting in March, to review progress in implementing the recommendations from the original investigation report and any registration conditions. The review will focus on what patients say about their experiences in the hospital. It will include inspections and interviews with patients and staff, to get a current view of the quality of care being provided. CQC will also ask for the views of public groups and other organisations to hear their accounts of progress at the trust.

If the review identifies any further or continued breaches of the regulation, the trust could face tough legal sanctions.

### **Notes to editors**

CQC has subjected the trust to rigorous scrutiny since publication of the investigation report in March last year. This includes:

- A review of progress at three months, which involved meeting with the trust, other regulators and NHS bodies to examine action plans and evidence of new systems and processes. It found that a base for recovery had been put in place.
- A review of progress at six months. This involved announced and unannounced inspections, discussions with patients, interviews with staff and senior managers and a review of data and information collected from the trust. It found progress was being made, but called for the pace of change to quicken.

- Unannounced inspections to check systems of infection prevention and control. CQC made one recommendation to improve.

The above reports are available on CQC's website at [www.cqc.org.uk](http://www.cqc.org.uk)

**For more information contact CQC's press office on 0207 448 9401 or on 07917 232 143 out-of-hours.**

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### **About the Care Quality Commission**

The Care Quality Commission (CQC) is the independent regulator of all health and adult social care in England . We inspect all health and adult social care services in England , whether they're provided by the NHS, local authorities, private companies or voluntary organisations. We also seek to protect the interests of people whose rights are restricted under the Mental Health Act. We make sure that essential common standards of quality are met everywhere care is provided, from hospitals to private care homes, and we work towards their improvement. We promote the rights and interests of people who use services and we have a wide range of enforcement powers to take action on their behalf if services are unacceptably poor.

Our work brings together (for the first time) independent regulation of health, mental health and adult social care. Before 1 April 2009, this work was carried out by the Healthcare Commission, the Mental Health Act Commission and the Commission for Social Care Inspection. Our aim is to make sure that better care is provided for everyone, whether it is in hospital, in care homes, in people's own homes, or anywhere else that care is provided.

Registration: The Health and Social Care Act 2008 introduced a new, single registration system that applies to both health and adult social care. The new system will make sure that people can expect services to meet new essential standards of quality and safety that respect their dignity and protect their rights. The new system is focused on outcomes, rather than systems and processes, and places the views and experiences of people who use services at its centre.

From April 2010, all health and adult social care providers will be required by law to be registered with CQC and must show that they are meeting the essential standards. Registration isn't just about initial application for registration. We will continuously monitor compliance with the essential standards as part of a new, more dynamic, responsive and robust system of regulation.