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Three thousand needless deaths every year in hospital as watchdog fails to spot poor standards

By [Daniel Martin](#)

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Damned: As a result of unusually high death rates at Colchester Hospital, chairman Richard Bourne has been sacked

The scandal of filthy and inadequate NHS hospitals deepened yesterday as figures revealed more than 3,000 patients could be dying needlessly every year.

Death rates are abnormally high at a fifth of trusts in England, with some 3,145 excess deaths at 26 hospitals during 2007/08.

The figures come at a time of collapsing public confidence in the NHS after two reports within 24 hours revealed high numbers of needless deaths at hospitals.

Yesterday, the chairman of Colchester Hospital in Essex, Richard Bourne, was sacked after it emerged that death rates were a massive 12 per cent higher than expected last year.

It means that there are likely to have been dozens of excess deaths at the trust, where regulators said safety was a low priority and patients had to wait months for treatment.

Mr Bourne's dismissal came a day after a damning report reported at least 70 needless deaths at Basildon Hospital's A&E department, also in Essex, as a result of filthy wards and appalling nursing care.

Both hospitals were elite foundation trusts - a supposed marker of excellence-which allows NHS organisations financial freedom and control over their own affairs.

In both cases, the Care Quality Commission watchdog failed to note poor standards of care.

Just weeks ago, it scored Colchester 14 out of 14 for 'safety and cleanliness' - even though the foundation trust regulator Monitor is now attacking it for failures on patient safety, a persistently high death rate and breaches of MRSA targets. Overall the CQC downgraded the trust from 'excellent' to 'fair'.

The Nursing and Midwifery Council said it was considering action against nurses at Basildon and Colchester hospitals, and was thinking about stopping their use as training hospitals for nurses and midwives.

And Health Secretary Andy Burnham last night ordered the CQC to establish if there are any other hospitals with similar issues to Basildon and Colchester which require 'immediate investigation'. He said: 'Patient safety is absolutely paramount and we must make sure that it takes precedence above all else.'



Condemned: Fellow Essex hospital, Basildon, was criticised for more than 70 needless deaths at the A&E department

The 3,145 'excess deaths' emerged in an analysis by the Conservatives.

They include Basildon and Thurrock trust, which in 2007/08 notched up 358 excess deaths, Blackpool Fylde and Wyre (280), United Lincolnshire (226) and Royal Bolton (191).

At Colchester, the figures indicate there were 158 deaths in 2007/08 - a year before Monitor raised concerns.

THE ROLL CALL OF TRAGEDY

Basildon and Thurrock University
Hospitals foundation trust: **358 needless deaths**

Blackpool Fylde and Wyre
Hospitals foundation trust: **280**

United Lincolnshire
Hospitals trust: **226**

Royal Bolton Hospital
foundation trust: **191**

Pennine Acute Hospitals trust: **188**

Barking, Havering and Redbridge
Hospitals trust: **75**

Southampton University Hospitals
foundation trust: **173**

Colchester Hospital University
foundation trust: **158**

Kettering General Hospital f
oundation trust: **132**

University Hospitals Coventry
and Warwickshire trust: **127**

Tameside Hospital
foundation trust: **119**

Mid Cheshire Hospitals
foundation trust: **117**

Mid Yorkshire Hospitals
Hospitals trust: **117**

Stockport foundation trust: **116**

Hull and East Yorkshire
Hospitals trust: **113**

North Tees and Hartlepool
foundation trust: **90**

University Hospital Birmingham
foundation trust: **83**

East and North Hertfordshire
foundation trust: **79**

Newham University
Hospital trust: **65**

Countess of Chester Hospital
foundation trust: **51**

The Dudley Group of Hospitals
foundation trust: **46**

Basingstoke and North Hampshire
foundation trust: **46**

Dartford and Gravesham trust: **40**

South Tyneside
foundation trust: **38**

Peterborough and Stamford
Hospitals foundation trust: **10**

Calderdale and Huddersfield

The roll call of tragedy

It emerged on Thursday that in Basildon, some 71 people died needlessly in the A&E department alone. More up-to-date figures for all these hospitals will be released on Sunday.

On Colchester, Monitor said last night that there were serious concerns over the quality of decisions made to admit patients to accident and emergency.

It concluded: 'Patient safety may be compromised and no progress (has been made) in external measures. There is no real evidence to suggest that in future patient safety will actually be progressed as a priority. There is no evidence that actions to improve patient safety had any sense of pace or urgency prior to scrutiny from external parties.'

Monitor's report says Colchester is the only trust in the country to have breached the Government's 18-week target for three quarters in a row, but the board failed to acknowledge there was a problem. It even tried to claim Colchester was 'only the third-worst' for A&E failures in January to March 2009 - as if that were acceptable.

The trust also failed to sustain meeting stringent cancer waiting times. Measures of patient satisfaction, of board level and governance were also much worse than they should have been.

A statement from Monitor said the trust was in 'significant breach' of terms relating to its foundation trust status. 'Monitor decided a change in board leadership was most likely to assist in a rapid and sustained return to compliance with the terms of its authorisation.'

Monitor has sent in Sir Peter Dixon, current chairman of University College Hospitals London, as interim chairman of the trust.

He will be paid £35,000 a year for the part-time post. In a message to staff, he said Monitor's view of the trust 'does not acknowledge the hard work and dedication of the staff who have all focused on the best interests of the patients.'

'It is sad that Monitor did not acknowledge that the trust does not have any significant issues around infection control, hygiene and cleanliness or, indeed, finance.' The Conservatives have used figures from Dr Foster Intelligence, a public-private partnership which analyses NHS statistics to help trusts improve their performance by comparing their results with others.

Dr Foster has already compared the expected and actual number of deaths in each trust.

Tory health spokesman Andrew Lansley said: 'We have seen failings in a number of hospitals and the Government's response to this is unacceptably complacent.'

'It should not be possible for managers to put a tick in a box marked "target met" while patients are pushed off to a ward and left to die. It is unacceptable that inspectors can then score hospitals as "good" when many patients could tell them that the opposite is in fact true.'

My son died because doctors missed his punctured lung

A mother whose son died at Colchester General after a car crash has accused staff of a catalogue of blunders.

The condition of 22-year-old James Leeks should not have been life-threatening - he had broken bones and a punctured lung - but doctors failed to diagnose the lung problem for more than 24 hours, despite obvious signs of a chest wound.

As a result he never regained consciousness after an operation to set his bones.



Failure: Judy Leeks accused Colchester General Hospital of a catalogue of blunders that led to her son's death

He had by this time developed acute respiratory syndrome, where the lungs fail to provide enough oxygen to the blood, leading to organ failure.

His life support-machine was turned off a month later.

Judy Leeks, a 52-year-old housewife from Sudbury, Suffolk, said it was 'beyond belief' that doctors and nurses had failed to spot the wound. 'They robbed us of our son.'

James, a photographer for Auto Trader magazine, was admitted to hospital on August 3, 2006. His mother and father Malcolm, 53, a retired police constable, were told his condition was not serious.

Mother-of-five Mrs Leeks, pictured below, said staff did not bother to remove his jumper, missing a livid red mark on his chest. When she saw the mark and mentioned it to a nurse, the nurse failed to inform doctors.

During an inquest at Suffolk Coroner's Court, the family heard the mark was an early warning sign of the lung condition.

Mrs Leeks said there were numerous other failings in the care her son received.

She described the ward as 'short staffed' and said a male trainee nurse had failed to find a vein in James's arm four times and knocked his broken leg walking past.

An attempt to drain excess fluid from James's body using a dialysis machine had been 'plagued with errors'.

She added: 'They could have done so much more, they should have acted a lot more quickly. So many mistakes were made and this mustn't happen again to another family.'

The family has lodged an official complaint with the Health Care Commission, and an external investigation is under way.

A spokesman for Colchester General Hospital said: 'It would be very difficult for us to comment responsibly and accurately about this specific case because it was several years ago.' ˜ A cleaner who was admitted to the same hospital found it so dirty that she got down on her hands and knees and scrubbed the floor herself, dragging her drip trolley behind her.

Tereza Tosbell, 48, also scrubbed sinks, bed frames and surfaces in the four-bed ward.

'The place was filthy,' she said. 'I watched the cleaner. Her idea of cleaning a bedframe, between patients, was to give it a quick wipe down with a handtowel dampened with water. She didn't think to use disinfectant.'

She said the lavatories were left covered in faeces for more than 24 hours.

Mrs Tosbell, from Stanway, Colchester, had an infected abscess in her neck.

The day after it was removed she discharged herself. Mrs Tosbell added: 'In my view the hospital needs to sack the current cleaning contractors.'

'Proper cleaning is very simple to do. It is common sense. There is no excuse for it not to be done. And it saves lives.' A spokesman for the hospital said: 'She was with us for a few days but didn't raise any concerns over cleanliness to any of the staff on her ward.'

'The day after she left our hospital we had an unannounced inspection by the Care Quality Commission which didn't find any issues with her ward or any other ward.'

'I'm not saying we are perfect but we are being tarred with the Basildon brush.'

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N.U.F.F. said, Stockport

You highlighted another problem. One family member is ill, and 15 turn up, kids in tow, using facilities and also creating a racket. We are shamefully served in my area, with both major hospitals being in a 'danger zone'. Indeed, my neighbour was admitted to hospital, and contracted yet another infection. Thankfully, that was non-fatal, but prolonged her stay and cost the Trust lots more money. Which is what it's all about.

Cleaning services are generally slack, using staff and products (health & safety) which are not fit for purpose. No role appears designated to ensure standards are met, and that no-one is sleeping on the job, literally!

Yes, that happens! This is no longer a 'vocational' job, but as a means to an end. If someone takes the reins/initiative to chase-up cleaning staff, i would not be surprised if they put in a grievance that they are being 'picked-on'!

- jane, essex, 28/11/2009 17:26

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Visiting hours should be restricted to 1-2Hrs visit on Weds & Sun afternoon,

1 - 1 hour visit on Mon/Fri Nights

- N.U.F.F. Said, STOCKPORT, Cheshire

I understand and have some sympathy with the point you are making, NUFF, but if this had been the case earlier this year when my husband spent five weeks in a London hospital, he would have been living in filth, malnourished, have received the wrong medication on several occasions and would scarcely have experienced a kind word. Sadly, these days, family vigilance is the only thing that lifts the hospital experience from one of pure misery and neglect. I agree, though, that crowds of visitors who treat a hospital ward like a social club are something to be avoided.

- DLD, London, UK, 28/11/2009 17:20

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I once had an accident in which I fell onto the handle bar of my bike, back first. After recovering from the initial shock of not being able to breath for around half a minute and the acute pain I managed to stagger home with the help of a friend. I was then taken to the local hospital where I was told to "go home, you've just winded yourself, next patient". Later during the middle of the night I was in agony so my Dad took me to the city hospital, where after an x-ray was told i had broke a rib and punctured my lung! The NHS are in to much of a rush to see people and don't treat every case on its merits. All I needed was an X-ray!

- Chris, Nottingham, 28/11/2009 15:03

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nuliebour strikes again, when o when will we be rid of this nuliebour

- Ron, Isle of Sheppey, 28/11/2009 14:38

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Care Quality Commission...another quango presumably soaking up huge sums in salaries, for what? Quite obviously they are not up to the job, and in this case it's particularly serious as people's lives are at risk.

- Judith, King's Lynn, Norfolk, England, 28/11/2009 14:05

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This situation will only improve if the Care Quality Commission make impromptu visits to hospitals. If they are informed beforehand, obviously they will clean the place up before any visit. The problems with the dirt and maladministration can then be more easily identified.

- joy, london, england, 28/11/2009 13:53

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