

## **CQC Inspection and Ratings 2015 – Frequently Asked Questions**

The CQC undertook its first major inspection of the Trust's services in April 2015 and has assigned an overall rating of requires improvement. It is recognised that people will want more information about what this means and assurance that the services being provided by the Trust are safe, good quality and effective. These frequently asked questions have been provided for your own information and to support you in responding to queries that you may get from others. If we have missed something or you require further clarity on any aspect of the inspection process or reports please contact [CQC.Enquiries@Lancashirecare.nhs.uk](mailto:CQC.Enquiries@Lancashirecare.nhs.uk)

The Trust was upfront with the CQC about some known issues prior to the inspection and we will continue to be open about the challenges that we are facing and what we have done or are doing to address these. We have published an action plan on our website and we will update this as and when we make progress against it.

### **What is the Trust's reaction to the CQC rating?**

As an organisation aspiring to achieve excellence, a rating of good would have been our best case scenario. However, going into the inspection, we were realistic about the fact that there are challenges in some parts of the organisation and issues that need to be resolved, and were open with the CQC about that. As such, some of the aspects highlighted in the report did not come as a surprise and in many cases work has already started to make the necessary improvements.

The Trust has used this first major inspection under the new format as a learning opportunity and in some respects, the outcome is helpful in that it will provide a clear focus for us to make the necessary improvements, with the support from our commissioners. We have taken the whole inspection process and the findings very seriously and will act on the recommendations made in order to make the necessary improvements.

### **How was the rating arrived at?**

The CQC produced 16 inspection reports and the overall rating was amalgamated from those. This concluded that the Trust requires improvement in the domains of safety, responsiveness and well led. The Trust received a rating of good for caring and responsiveness, which would suggest that we have got the basics right and have a solid foundation to build upon. The CQC also saw evidence of an open culture and an understanding amongst employees about the duty of candour.

### **What does require improvement actually mean?**

The CQC's definition is that some aspects of the Trust's services are not performing as well as they should be and the CQC has set out those areas that must be improved. These are clearly listed in a table in each report and in some cases the Trust has already made good progress in responding to these requirements.

### **How can people be assured that the Trust is taking the findings seriously and acting accordingly?**

The inspection process and the learning from it has been shared and understood from team and ward level right through to the Board. Those services that are required to make improvements are absolutely clear about what needs to be done and the progress of corrective actions is being

tracked through the organisation to Board level to ensure that they are completed and in a timely way.

The whole organisation has taken the inspection process and the feedback extremely seriously and has taken the opportunity to learn and improve. The external scrutiny that the inspection process has offered is welcome and progress against the action plan will be shared so that the people using the Trust's services can see what changes have been made.

### **Does the rating mean that every one of the Trust's services requires improvement?**

No, the Trust has over 100 services and it was not logistically possible for the inspection team to visit all of them. The CQC spent a week at the Trust and due to its size and scale, saw approximately 30% of its services and spoke to around 300 people. Out of the 16 inspection reports that were compiled about the Trust's services, 8 of these received a rating of good:

- Garstang Road (Preston) Learning Disabilities Supported Living Scheme
- Ormskirk Hospital (adult supported living based at Bickerstaffe House)
- Community End of Life Care
- Community Health Inpatient Services (Longridge Hospital)
- Community based services for people with learning disabilities or autism
- Community based mental health services for older people
- Mental health crisis services and health based places of safety
- Child and adolescent mental health wards

Four of these were rated as good across all domains and mental health crisis services/places of safety were rated outstanding for the effectiveness of the care they provide.

### **What were the areas of most concern and what has been done?**

Two of the services inspected received a rating of inadequate in one domain. Forensic inpatient/secure wards were rated as inadequate in the responsiveness domain and wards for older people with mental health problems received a rating of inadequate for safety. This mainly related to ward 22 in Burnley; the CQC had some concerns about the ward environment, staffing levels, training and the ability to keep patients safe in this context.

Immediate remedial action has been taken and this includes maintenance work on ward 22 to improve bathroom facilities and maintain the privacy and dignity of patients, the ward environment is being monitored for any risks that could impact on patient safety and improvements are being made to the patient alarm system. On a longer term basis the plan is to replace this ward with improved accommodation and the exact scope of this is being worked through.

Across older adult wards, staffing levels have been increased to support the new shift pattern that started in June 2015 and there has been an increase of between 150% - 294% of care staff. When bank and agency staff are used, every effort is made to fill shifts with staff who are familiar with the wards. An improvement plan has been developed to address training, appraisals and supervision requirements and progress is being monitored by the Clinical Director.

The specialist network has also acted to improve the responsiveness of the service being provided on inpatient forensic wards. The network has worked hard to address this by ensuring that planned leave is meaningful and well supported and has undertaken further work with service users to improve the quality of the food and the implementation of a 7 day Occupational Therapy service

model has now commenced. Teams are also working to ensure that faith facilities are promoted and staff are aware of how to promptly request visits from individual faith leaders.

### **What are the other main things that the Trust needs to address?**

At Trust level, these are the main things that need to be addressed:

- Whilst our governance structure is comprehensive and maturing, we must continue to establish a more consistent approach to governance across clinical services and networks. This is key to ensuring quality, safety and that the Board is sighted on issues.
- Some of the environments that the Trust delivers care from are not fit for purpose and this applies to facilities owned by the Trust and those of partner organisations.
- The Trust has experienced staffing issues within some of its services and high case loads.
- Access to clinical records is variable and this will be addressed by the implementation of electronic care records.
- Compliance with training is variable across the Trust's services.
- Whilst teams have made every effort to implement the smoke free initiative, there are some areas of the Trust, particularly adult mental health wards and secure services, where there are some challenges and these are mirrored at national level.
- The Trust has improved the quality of responses to complaints and now needs to ensure that the learning from them and from incidents is fully embedded and shared across the organisation.
- Mental health services for children and young people need a better interface with adult services when a child reaches their 16th birthday and further work is needed with some of the acute hospitals in Lancashire to ensure that young people in a mental health crisis get the support that they need out of hours.
- Whilst improvements have been made in children's services there are still some services where responsiveness is hindered by waiting times.
- Although the CQC saw evidence of strong local leadership, supervision and appraisals need to be undertaken regularly and consistently across the organisation.
- Occupancy levels are above average in the Trust's mental health wards and work is progressing with commissioners to address this to ensure that the quality of care is not compromised. The CQC noted that the Trust's community mental health teams for adults and older people were working effectively to support people outside of hospital when possible, which is in line with best practice.

Each of the Trust's four clinical networks have a clear understanding of the improvements that need to be made to the services that were inspected and have an associated action plan.

### **What were the most positive aspects of the report?**

The Trust is proud of its employees who in the main were observed by the CQC as being responsive, respectful, caring and kind. The CQC also saw:

- Transparent safety culture, various mechanisms in place for reporting incidents and staff understand the duty of candour.
- Local leadership is strong in most areas and staff have an understanding of the Trust's vision and values.
- Care and treatment is planned to meet all of the patient's need and the CQC saw evidence based best practice and a multi-disciplinary approach to the delivery of care, involving a wide range of clinicians and the patient.
- The way that the Trust manages medicines is good overall.
- The CQC could see initiatives in place to drive quality and improvements to services.
- All of the people using the Trust's community services said that staff were efficient, kind, very helpful and that they felt well looked after.
- The majority of people accessing the Trust's mental health services that the CQC spoke to were positive, saying that staff are caring and respectful.

The positive behaviours that the CQC saw amongst Trust employees are absolutely aligned to our core values and the CQC gathered comments from the people that use our services including: "Staff are caring, compassionate and respectful" and "Patients are treated with dignity and respect."

### **How can we be assured that services are safe and high quality?**

The CQC saw evidence that the Trust has a transparent safety culture and various mechanisms in place for reporting incidents. They also recognised that staff understand the duty of candour, which is about being open and honest. They could see initiatives in place to drive quality and improvements to services.

The Trust is absolutely committed to providing high quality care and services and has aligned its whole strategy so that it is driven by quality. This means that all of our plans must have quality at the core which involves people being at the heart of everything we do to ensure we are giving people who use our services the best possible experiences of safe and effective care. This commitment enables us to both build on and give greater clarity to quality being at the heart of strategic thinking which encompasses our finance, workforce, estates, performance, informatics and technology plans.

New governance arrangements are in place and maturing to ensure that risks or issues that could impact on the quality of care are known, escalated and addressed accordingly.

### **The inspection was in April, has the Trust done anything since then to make improvements?**

Yes, progress has already been made. The detail of this can be seen on the action plan which is available on our website. In summary, improvements made so far include:

**Governance** – the Corporate Governance and Compliance team is supporting the clinical networks to ensure that they have robust and consistent governance arrangements in place and

we have tested our governance and assurance framework below Board level. The next step is to extend the governance and assurance system to team level.

**Care environments** - it is recognised that some of the clinical environments that the Trust delivers services from are outdated and remedial maintenance work has been undertaken or is at least scheduled in relation to a few areas where potential risks were identified by the CQC. All inpatient wards now have a ligature audit and risk assessments are in place. We have also made improvements to ensure that the privacy and dignity of our patients is maintained whilst they are in our care. In some cases, the Trust delivers services at locations that are owned by other organisations and risk assessments are in place to ensure patient safety. Additionally, as a Trust we have joined the NHS England 'Sign up to Safety' initiative, which aims to reduce avoidable harm by 50%.

**Staffing** - there is an ongoing rolling recruitment programme underway and the focus is on securing qualified registered mental health nurses for our adult and older adult wards. We also have a recruitment drive running for staff to work in our prisons and secure units, and in the community we are recruiting more health visitors. Processes have been put in place to speed up the recruitment process so that posts can be filled faster and induction and mandatory training is completed straight away. Our Safer Staffing action plan continues to progress and actions to date have been completed on target. In addition, we are ensuring that within existing teams, we are maximising the contribution of the wider multi-disciplinary team to deliver care and frontline services.

**Training** – the Quality Academy has been launched and this aims to ensure that frontline staff are supported to undertake mandatory and professional training and that lower banded staff are afforded development opportunities, enabling the Trust to grow its own future talent base. Investment has been made in providing innovative technology to increase accessibility and support staff training. We are committed to developing our employees and believe that high quality, well developed staff equals high quality care.

**Smoke free** – the Trust is fully committed to supporting its employees and the people that use its services to stop smoking. In the last year we helped over 3,000 to give up smoking and our continued efforts will help to prevent the onset of diseases and ultimately add years to peoples' lives. Implementing such a policy in a mental health setting was always going to present a challenge but we truly believe that this is the right thing to do in order to ensure that our patients have good outcomes in terms of their overall health and we are also committed to addressing the parity of esteem and ensuring that people with mental illness have the same opportunities to live a healthy lifestyle as everyone else. We will continue to support people in our mental health wards and secure services to realise the health benefits of not smoking and ultimately help them to quit.

**Occupancy levels** - nationally, the demand for mental health beds is high and the Trust is one of many that is experiencing this pressure in the system. Work is on-going to increase capacity by opening step down beds, a clinical decision unit and assessment wards. We are also working with commissioners to ensure that older people can be discharged from hospital in a timely way, which will also free up more beds.

Our clinical networks all have action plans that set out what they must do and should do, and progress against these is being monitored and reported right up to Board level. A time limited

Board comprising all commissioners, wider stakeholders and Trust representatives has been established to ensure the timely delivery of the action plan.

**What should I do if I am worried about the care and treatment I am getting or want to raise something on behalf of a family member?**

In the first instance you could raise this with someone from within the service or ask for the details of the person that manages it. If you don't feel that you can do this or it wouldn't be appropriate please contact [CQC.Enquiries@Lancashirecare.nhs.uk](mailto:CQC.Enquiries@Lancashirecare.nhs.uk)

**Where can I see the full detailed reports?**

All 16 of the reports and the overarching report are available on the CQC website and also on the Trust's website [www.lancashirecare.nhs.uk](http://www.lancashirecare.nhs.uk)