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**BOD 04/2016**

(Agenda item: 7)

# Report to the Meeting of the

# Oxford Health NHS Foundation Trust

# Board of Directors

**27 January 2016**

**CQC Comprehensive Inspection Report**

**For Information**

**Executive Summary**

The comprehensive inspection report for OHFT was published on 15th January 2016.

The CQC rated three out of the five quality domains – *caring , responsive and well led as ‘*good*’,* in the remaining two *safety and effective* were rated as ‘requires improvement’. This gives an overall rating of ‘Requires Improvement’.

We are delighted that our children’s community services which include health visiting, school nursing and children’s community nursing were rated ‘outstanding’.

Ten core services were rated as Good, whilst four core services were rated as ‘requires improvement’ including adult acute inpatient wards, our one rehabilitation ward, community mental health teams for adults and community inpatients services for adults (community hospital wards).

The CQC found that staff were caring, compassionate and treated people with dignity and respect, and although the Trust has 11 good/outstanding services, they found improvements were needed for services to be consistently safe and effective.

The journey of improvement in all our services has been considerable; before, during and after the CQC inspection. The inspection confirmed many areas which we had already identified and a small number of additional areas to improve upon. We will continue through our plans and oversight to make sufficient improvements aiming for all our core services to achieve a good/ outstanding rating upon re-inspection. The CQC have offered to return within a short time frame to undertake a focussed inspection.

Our Improvement plans have been developed with involvement from patients and staff across our teams and directorates. The Quality Summit with our external stakeholder’s includes the CQC, MONITOR and principle Commissioners takes place on 29th January 2016. The outcome of the Inspection has to be displayed in all locations and on the website within 21 days and is underway.

The Board will be informed about the outcome of the Quality Summit and the final Improvement Plan at its next meeting in February. The Quality Committee will be the Board Committee responsible for oversight of the Improvement plan,and ongoing IC5 peer review/shared governance process and there will be regular updates on progress to the Board of Directors.

**Recommendations**

The Board is asked to receive the Overview Report (Attached Appendix 1) and the 15 core service reports (not attached ), all reports are also available on our internet and intranet and at http://www.cqc.org.uk/provider/RNU

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**CQC Inspection Report Outcome**

The Care Quality Commission’s inspection results for Oxford Health FT were published on the 15th of January 2016. During the comprehensive inspection during September and October a team of over 100 inspectors, and specialists including Drs nurses AHP’s and experts by experience visited 33 wards including nine wards in eight community hospitals and all 24 mental health inpatient services for children, adults including acute, rehabilitation and forensic and older peoples wards in Oxford Buckinghamshire, Milton Keyne ,Swindon and Marlborough .The Inspection team visited and inspected another 52 locations where community health services for children adults and older adults were delivered including a GP Practice Luther Street. The team spoke to more than 340 patients, relatives and carers and interviewed 534 members of staff. The Overview Report and reports on all 15core services are available at <http://www.cqc.org.uk/provider/RNU> and our OHFT intranet and internet pages.

We were inspected across 15 core services against five domains of quality – caring, responsive, well-led, effective and safe. Of those 75 specific quality measurements across services, 49 were rated ‘good’, 6 ‘outstanding’ and 20 as ‘require improvement’. None were found to be inadequate and we received no enforcement notices.

We were over-all rated ‘good’ in three out of five quality measurements – *caring*, *responsive* and *well-led* and ‘requiring improvement’ in the remaining two, *effective* and *safe*. Based on weighted scoring across all services inspected the trust has an over-all rating of ‘requires improvement’

Within this rating, it is clear that there is a great deal to be proud of. The majority (11 out of 15) of the Trust’s services were over-all rated ‘good’ (10) or ‘outstanding’ (1). We are particularly pleased that the ‘outstanding’ rating was for our children and young people’s community service, which includes school health nurses, health visitors and children’s community nurses.

The CQC found that Oxford Health NHS Foundation Trust was *well-led* with: accessible visible management at all levels and good working governance systems. It was *responsive* to people’s needs across services especially in a crisis, including reducing the need for police involvement in mental health crises, and in providing emotional support and counselling, especially for end of life care and bereavement. Patients and staff knew how to raise concerns and there was good learning from incidents and complaints. Perhaps most importantly from the Trust’s perspective, staff were found to be *caring*.

The report notes: “In most services, we found that staff were committed, dedicated and passionate about the work they did. Patients and their carers spoke positively about the care they received and felt they were treated with dignity and respect.” In some services *caring* was rated ‘outstanding’… “Luther Street medical practice, CAMHS community services and community children’s services … showed passion, enthusiasm and received overwhelmingly positive feedback.” (CQC Oxford Health NHS Foundation Trust Quality Report p10).

Improvements are required in *safety* to ensure that across all Trust services the same high standards are observed. Inspectors noted “On the whole services were safe, but the Trust received a rating of requires improvement because we found pockets of poor practice.” They also noted that some of our older estate, especially inpatient mental health settings at the Warneford Hospital, was outdated for the delivery of modern mental health care. The Trust has long been aware of the challenge of operating from Victorian buildings and in recent years has developed the Whiteleaf Centre in Buckinghamshire and the Highfield Adolescent Unit, Warneford Hospital as exemplars of purpose built 21st century mental health care. A working group is currently developing options for future development of the Warneford Hospital site in particular to better address modern health care needs. Other areas of for further work are around:

* Improving how we record and demonstrate patients’ involvement in their own care planning
* Ensuring consistent high quality records of care plans and assessments
* Continuing our work to implement a new end of life care pathway and monitoring the impact of this work
* Continuing to monitor and respond to increasing demands on staff specifically in community services in adult mental health and district nursing.
* Reviewing ‘blanket’ restrictions on some wards for example allowing all patients free access to garden areas
* Tightening monitoring arrangements around equipment including resuscitation equipment and Trust labelling for ‘To Take Out’ medicines
* Continuing to work with staff to ensure all mandatory training specifically resuscitation is completed.

Inspectors noted that: “Across all services Trust staff were good at recognising safeguarding and reporting incidents. Teams learnt from incidents and there was shared learning across services, through regular ‘briefing notes’ and “staff had good access to mandatory training and good induction programmes, as well as opportunities for continuous professional development.”

Oxford Health FT has a strong track record of working in partnership with others and providing integrated services, inspectors noted. “The Trust is clearly committed to services that are multi-agency and multi-disciplinary and this was evident from the board discussions we observed and how staff at the frontline described the care.”

Effectiveness was rated as requiring improvement, due to known issues that we are addressing. The main area is about involving patients in planning and reviewing their care and noting it on their records. A major piece of work on developing a new Patient Involvement and Engagement Strategy, in collaboration with patients and people who care for them is underway and due for completion by Spring 2016. The second area for improvement is around embedding more consistent patient assessments to evaluate pain (although timely administration of pain relief was reported positively by patients) and swallowing difficulties; and the third area is continuing to implement and assess the impact of our new end of life care pathway. Work has been completed or is underway to address all of these matters.

In all, there are some very positive messages about the Trust over all from the inspectors in the reports, particularly about three of the five domains (caring, safe, effective, responsive, well-led). Caring, responsive, well-led domains have all had really good reviews. There are some areas where we think we need to do more, around ‘safety' and 'effectiveness’ in particular. The vast majority of the areas for improvement were things we recognised and had plans in place to address. WE have received no enforcement actions and that inspectors found that National Institute for Health and Care Excellence (NICE) guidelines were followed.

Our caring staff for can be proud of contributing to delivering and improving our services before, during and after the CQC inspection. We began this journey of improvement before the inspection and we value the insights that our own preparations and the inspection process have given us. We will continue this improvement work into the future and we will have an opportunity to measure our progress with a follow-up inspection in about six months’ time. All of this helps our learning and is part of our ongoing drive to work together to improve our services to benefit the people we serve.

A summary of the 75 ratings applying to each core service is shown below:

| Core Service | Overall Rating | Domain Rating | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| Safe | Effective | Caring | Responsive | Well led |
| *Trust wide* | *Requires Improvement* | *Requires Improvement* | *Requires Improvement* | *Good* | *Good* | *Good* |
| CAMHS wards | Good | Good | Good | Good | Good | Good |
| CYP Services | Outstanding | Good | Outstanding | Outstanding | Good | Good |
| CAMHS community | Good | Requires Improvement | Good | Outstanding | Good | Good |
| Luther Street GP | Good | Requires Improvement | Good | Outstanding | Outstanding | Good |
| Adult mental health teams | Requires Improvement | Good | Requires Improvement | Good | Good | Requires Improvement |
| Rehab mental health ward | Requires Improvement | Requires Improvement | Requires Improvement | Good | Requires Improvement | Requires Improvement |
| Adult acute mental health wards and PICU | Requires Improvement | Requires Improvement | Requires Improvement | Requires Improvement | Good | Requires Improvement |
| Forensic wards | Good | Good | Good | Good | Outstanding | Good |
| Health based places of safety (MH) | Good | Good | Good | Good | Requires Improvement | Good |
| Urgent care services (MIU) | Good | Requires Improvement | Good | Good | Good | Good |
| Community hospitals | Requires Improvement | Requires Improvement | Requires Improvement | Good | Good | Requires Improvement |
| Older people mental health wards | Good | Requires Improvement | Good | Good | Good | Good |
| Community services for adults( Comm Ng & ILT) | Good | Requires Improvement | Good | Good | Good | Good |
| End of life care | Good | Good | Requires Improvement | Good | Good | Good |
| OP CMHTs | Good | Good | Good | Good | Good | Good |

The Quality Summit with the CQC, MONITOR , commissioners, partners and Healthwatch is being held on 29th January. A draft Improvement Plan has been developed and will be finalised following the Quality Summit and published in February.

There will be an update in February provided to the Board of Directors.

The full overview Report is attached. The 15 Core service Reports have already been circulated to Board members and are available at <http://www.cqc.org.uk/RNU> and on the OHFT website and intranet.