CORPORATE REPORT SUMMARY

Name of meeting:	Plymouth Health Overview and Scrutiny Committee		
Date of meeting:	Wednesday 29th January 2020		
Name of report:	CQC Inspection report published 3rd January 2020		
Authors:	Trish Cooper		
Approved by:		**Presented by:**	
Report previously presented to: -			
PURPOSE OF REPORT: In just a few words please tell us why you are presenting this paper today and what you hope to achieve			
To inform the committee of the findings of the recent CQC inspection of services provided by Livewell Southwest.			
RECOMMENDATION(S): In just a few words tell us what you, as the expert, are recommending			
That the committee note the report.			
Everything we do needs to align with one or more of the LIVEWELL STRATEGIC AIMS so in just a few words tell us how your proposal helps us make progress:			
We put people at the centre of everything we do	The action taken by Livewell Southwest to ensure Quality and Safety is at the heart of what we do, provides assurance that people are at the centre of what we do.		
We value, support and empower each other			
We are an organisation with a strong social conscience			
We transform services to make them sustainable			
Please tick as appropriate:			
X	This paper provides **assurance** for the above objectives		
X	This paper presents **a risk** to achieving the above objective		

Care Quality Commission (CQC)

1.0 Overview and service ratings

1.1 On 3rd January 2020, the CQC inspection report for Livewell Southwest was published. In summary, the report showed:

Ratings	
Overall rating for this organisation	Good
Are services safe?	Good
Are services effective?	Good
Are services caring?	Good
Are services responsive?	Good
Are services well-led?	Good

1.2 The overall organisational rating **Good** remained the same as 2018. Five core services were reviewed at this inspection:

1.3 All Livewell Services are now rated as good or outstanding, due to the improvement in End of Life Care and Child and Adolescent mental health wards.

1.4 The overall organisational rating for Caring reduced in 2019 from Outstanding to Good. This was due to a reduction from outstanding to good for Wards for older people with mental health problems.

1.5 CQC Inspectors had a great deal of positive feedback, including:

Staff in the organisation had worked hard to address concerns we had raised in the last inspection. Two services that were previously rated as requires improvement at the last inspection were now rated as good. Community end of life care and child and adolescent mental health wards had both improved.

Livewell Southwest had strong leadership who had the appropriate range of skills, knowledge and experience to deliver community health and mental health services. Staff felt they were visible and approachable. There was a rolling programme of visits scheduled to services by the executives. Executives used these visits to engage with staff and also listen to their views on the services.

There was a positive, open and honest culture throughout the organisation. Staff at all levels of the organisation were proud to work at the organisation and morale among staff was very good. both leaders and staff across the organisation put patients at the centre of everything they did.

Staff treated all patients with compassion, respect and kindness. The privacy and dignity of patients was maintained at all times. Patients were supported by staff to understand and manage their care and treatment. Staff actively involved families and carers of patients in their care appropriately.

Across the organisation clinical areas and premises where patients received care were clean, well equipped and maintained.

The organisation managed incidents well and staff understood how to report them appropriately. Incidents were investigated, and lessons learned were shared with staff.

The organisation treated concerns and complaints seriously. The organisation investigated concerns and complaints and shared lessons learned with staff. Patients were included in the investigation of their complaint.

Ratings for mental health services

	Safe	Effective	Caring	Responsive	Well-led	Overall
Acute wards for adults of working age and psychiatric intensive care units	Good Oct 2016	Good Oct 2016	Outstanding Oct 2016	Good Oct 2016	Outstanding Oct 2016	Outstanding Oct 2016
Long-stay or rehabilitation mental health wards for working age adults	Good Apr 2018	Good Apr 2018	Good Apr 2018	Good Apr 2018	Good Apr 2018	Good Apr 2018
Forensic inpatient or secure wards	Good Oct 2016	Good Oct 2016	Good Oct 2016	Good Oct 2016	Good Oct 2016	Good Oct 2016
Child and adolescent mental health wards	Good ↑ Nov 2019	Good →← Nov 2019	Good →← Nov 2019	Good →← Nov 2019	Good ↑ Nov 2019	Good ↑ Nov 2019
Wards for older people with mental health problems	Good →← Nov 2019	Good →← Nov 2019	Good ↓ Nov 2019	Requires improvement ↓ Nov 2019	Good →← Nov 2019	Good →← Nov 2019
Community-based mental health services for adults of working age	Requires improvement ↓ Nov 2019	Good →← Nov 2019	Good →← Nov 2019	Good →← Nov 2019	Good →← Nov 2019	Good →← Nov 2019
Mental health crisis services and health-based places of safety	Good Apr 2018	Good Apr 2018	Good Apr 2018	Good Apr 2018	Good Apr 2018	Good Apr 2018
Specialist community mental health services for children and young people	Good Apr 2018	Good Apr 2018	Good Apr 2018	Good Apr 2018	Good Apr 2018	Good Apr 2018
Community-based mental health services for older people	Good Oct 2016	Good Oct 2016	Good Oct 2016	Good Oct 2016	Good Oct 2016	Good Oct 2016
Community mental health services for people with a learning disability or autism	Good Oct 2016	Good Oct 2016	Outstanding Oct 2016	Outstanding Oct 2016	Good Oct 2016	Outstanding Oct 2016
Overall	Good →← Nov 2019	Good →← Nov 2019	Good ↓ Nov 2019	Good →← Nov 2019	Good →← Nov 2019	Good →← Nov 2019

Ratings for community health services

	Safe	Effective	Caring	Responsive	Well-led	Overall
Community health services for adults	Good Oct 2016	Good Oct 2016	Good Oct 2016	Good Oct 2016	Good Oct 2016	Good Oct 2016
Community health services for children and young people	Good Oct 2016	Good Oct 2016	Good Oct 2016	Good → ← Oct 2016	Good → ← Oct 2016	Good → ← Oct 2016
Community health inpatient services	Requires improvement ↓ Nov 2019	Good → ← Nov 2019	Good → ← Nov 2019	Good → ← Nov 2019	Good → ← Nov 2019	Good → ← Nov 2019
Community end of life care	Good ↑ Nov 2019	Good ↑ Nov 2019	Good Nov 2019	Good → ← Nov 2019	Good ↑ Nov 2019	Good ↑ Nov 2019
Sexual Health Services	Good Oct 2016	Good Oct 2016	Good Oct 2016	Good Oct 2016	Good Oct 2016	Good Oct 2016
Overall*	Good → ← Nov 2019	Good → ← Nov 2019	Good → ← Nov 2019	Good → ← Nov 2019	Good → ← Nov 2019	Good → ← Nov 2019

2.0 Well-Led Rating

A summary of the CQC's findings were:

The leadership team of the organisation had the appropriate range of skills, knowledge and experience to deliver community health and mental health services. The organisation had a strong and experienced group of Non-Executive Directors (NEDs) from a range of professional backgrounds. NEDs chaired committees and were confident to raise any concerns or challenge to the executive team.

The leadership team were considered visible and approachable by staff of the organisation. There was a rolling programme of visits scheduled to services by the executives. Executives used these visits to engage with staff and also listen to their views on the services.

Staff at all levels of the organisation were proud to work there and morale among staff was good. Staff were patient centred.

The leadership team and staff at all levels of the organisation were open and transparent. The vision and values of the organisation were clear and understandable and were integrated into services across the organisation.

The organisation had recently refreshed and published their new strategy. The strategy was developed in line with the NHS long term plan, STP plans and local authority plans. The strategy was co-produced with staff and stakeholders

The organisation was financially stable and there was relevant financial expertise among the executives and NEDs.

The organisation had a Freedom to Speak Up Guardians. There was no requirement on the organisation to have a Freedom to Speak Up Guardian as they are not an NHS organisation. However, the organisation had lobbied to get access to training for the roles. We were provided with examples of support and guidance that had been offered to staff by the Freedom to Speak Up Guardians.

The organisation was engaged in local strategy and had strong working and strategic alliances with partners. The executive team had worked hard to ensure Livewell was an equal partner within the local health economy and supported partner organisations. The organisation was valued in the STP as a non-NHS partner.

The organisation had effective systems and processes in place to support delivery of care. There was an appropriate sub board committee structure and escalation to board through the structure. The organisation had recently had a governance review and had convened a working group to take forward the actions identified to further strengthen and develop their governance arrangements.

There were a range of mechanisms that provided assurance from service level to board level. Directorate governance meetings were held monthly and considered service line performance by operational activity, quality governance metrics (including incidents, complaints and compliments), workforce and financial KPIs and risks faced by each individual directorate.

There was a strong emphasis on Quality Improvement throughout the organisation.

3.0 Actions/Improvements

3.1 There are 4 regulatory actions ('must do'), which require us to submit an action plan to the CQC by 4th February 2010. The Heads of Service have been requested to co-ordinate the actions. This year, the focus will not only be on the required actions, but also how these can be monitored on going. The actions are:

Wards for older people with mental health problems

• The organisation must take action to ensure patients can access their bedrooms during the day and the communal ward areas at night time, if they wish, unless there is a clinical reason to prevent this from happening (Regulation 9).

Community-based mental health services for adults of working age

• The organisation must ensure that patients are adequately assessed once their referral has been received by the services and ensure that patients waiting for assessments are monitored to detect and respond to any deterioration in their mental health (Regulation 12).

Community health service inpatients

• The organisation must ensure staff complete robust pressure ulcer risk assessments (Regulation 12).
• The organisation must ensure that safeguarding referrals are made appropriately to the local authority safeguarding team (Regulation 13).

4.0 Conclusion

The outcome of the Livewell CQC annual inspection as:

- 'Good' overall
- 'Good' for each of the domains overall
- 'Good' for 13 core service areas
- 'Outstanding' for 2 core service areas

This is a very strong position going forward. The action plan addressing areas for improvement will be monitored through the Performance committee and plans are being developed for 2020/2021 to demonstrate 'Outstanding' core services within our next inspection.

This external validation of Livewell services provides a high level of assurance to the staff, people who use the services, partner agencies and the wider local community of the quality of Livewell Services.