

### **Care Quality Commission (CQC) Inspection Outcomes – Quarter 3 2019-2020**

The CQC is the national inspectorate for registered health and adult care services. Inspection reports are regularly produced and these are published on a weekly basis.

The CQC assesses and rates services as being 'Outstanding', 'Good', 'Requires Improvement', or 'Inadequate'. Where providers are found to be in need of improvement or inadequate, the CQC make recommendations for improvement and / or enforcement action. Specific actions taken in each case can be found in the relevant inspection report.

Where inspections are relevant to the Borough, a summary of the outcome is circulated to all Members each week. An update from Adult Services is included which summarises the position in relation to service provision and any actions taken at that time.

#### **Quarterly Summary of Published Reports**

This update includes inspection reports published between October and December 2019 inclusive. These are included at **Appendix 1** and contain the results of all inspections of services based in the Borough (irrespective of whether they are commissioned by the Council).

During this quarter, ten inspection results were published. Please note: there is a time lag between dates of the inspection and the publication of the report. In addition, where concerns are identified by CQC, re-inspections may take place soon after the initial report is published. When the outcomes are made available within the same quarter, the result of the most recent report is included in this update.

The main outcomes from the reports are as follows:

- ten Adult Care services were reported on (one was rated Outstanding, seven were rated Good, two were rated Requires Improvement);
- no reports were released on Primary Medical Care services
- no reports were published on Hospitals/Other Health Care services

A summary of each report and actions taken (correct at the time the CQC inspection report was published) is outlined below. Links to the full version of the reports, and previous ratings where applicable, are also included.

#### **Overall position – Commissioned Services**

**Appendix 2** outlines the current overall position for those Adult Social Care services that are commissioned by the Council.

## APPENDIX 1

**Adult Services (includes services such as care homes, care homes with nursing, and care in the home)**

|  |   |                            |
|--|---|----------------------------|
| <b>Provider Name</b>   | DCS&D Limited (Spot Provider)   |                            |
| <b>Service Name</b>  | Heritage Healthcare North East  |                            |
| <b>Category of Care</b>  | Care at Home – Standard   |                            |
| <b>Address</b>   | The TAD Centre<br>Ormesby Road<br>Middlesbrough<br>TS3 7SF  |                            |
| <b>Ward</b>  | Not applicable  |                            |
| <b>CQC link</b>  | <a href="https://www.cqc.org.uk/sites/default/files/new_reports/INS2-7275475341.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/INS2-7275475341.pdf</a> |                            |
|  | <b>New CQC Rating</b>   | <b>Previous CQC Rating</b> |
| <b>Overall</b>   | Good  | Requires Improvement       |
| <b>Safe</b>  | Good  | Requires Improvement       |
| <b>Effective</b>   | Good  | Good                       |
| <b>Caring</b>  | Good  | Good                       |
| <b>Responsive</b>  | Good  | Good                       |
| <b>Well-Led</b>  | Good  | Requires Improvement       |
| <b>Date of Inspection</b>  | 16 <sup>th</sup> August 2019  |                            |
| <b>Date Report Published</b>   | 23 <sup>rd</sup> October 2019   |                            |
| <b>Date Previous Report Published</b>  | 20 <sup>th</sup> August 2018  |                            |
| <b>Breach Number and Title</b>   |   |                            |
| None   |   |                            |
| <b>Level of Quality Assurance &amp; Contract Compliance</b>  |   |                            |
| Quality Assurance Level 1 – No concerns/minor concerns.<br>Heritage Healthcare are a spot provider under the Care at Home Framework. |   |                            |
| <b>Participated in Well Led Programme?</b>   | Not applicable  |                            |
| <b>PAMMs Assessment- Date / Rating</b>   | Not yet assessed  |                            |

|   |   |                            |
|---|---|----------------------------|
| <b>Provider Name</b>  | <b>Stockton-on-Tees Borough Council</b>   |                            |
| <b>Service Name</b>   | <b>OneCall</b>  |                            |
| <b>Category of Care</b>                                     | <b>Care at Home</b>   |                            |
| <b>Address</b>  | The Square<br>Stockton-on-Tees<br>TS18 1TE  |                            |
| <b>Ward</b>   | <b>Not Applicable</b>   |                            |
| <b>CQC link</b>   | <a href="https://www.cqc.org.uk/sites/default/files/new_reports/INS2-6857197721.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/INS2-6857197721.pdf</a> |                            |
|   | <b>New CQC Rating</b>   | <b>Previous CQC Rating</b> |
| <b>Overall</b>  | <b>Good</b>   | <b>None</b>                |
| <b>Safe</b>   | <b>Good</b>   | <b>None</b>                |
| <b>Effective</b>  | <b>Good</b>   | <b>None</b>                |
| <b>Caring</b>   | <b>Good</b>   | <b>None</b>                |
| <b>Responsive</b>   | <b>Good</b>   | <b>None</b>                |
| <b>Well-Led</b>   | <b>Good</b>   | <b>None</b>                |
| <b>Date of Inspection</b>                                   | <b>22<sup>nd</sup> October 2019</b>   |                            |
| <b>Date Report Published</b>                                | <b>12<sup>th</sup> November 2019</b>  |                            |
| <b>Date Previous Report Published</b>                       | <b>Not previously inspected</b>   |                            |
| <b>Breach Number and Title</b>                              |   |                            |
| None  |   |                            |
| <b>Level of Quality Assurance &amp; Contract Compliance</b> |   |                            |
| Quality Assurance Level 1 – No concerns/minor concerns.     |   |                            |
| <b>Participated in Well Led Programme?</b>                  | Not currently available for Care at Home  |                            |
| <b>PAMMs Assessment- Date / Rating</b>                      | Not yet assessed  |                            |

|   |   |                            |
|---|---|----------------------------|
| <b>Provider Name</b>  | Real Life Options   |                            |
| <b>Service Name</b>   | 96 Bishopton Road   |                            |
| <b>Category of Care</b>                                     | Residential – Learning Disability   |                            |
| <b>Address</b>  | 96 Bishopton Road<br>Stockton-on-Tees<br>TS18 4PA   |                            |
| <b>Ward</b>   | Newtown   |                            |
| <b>CQC link</b>   | <a href="https://www.cqc.org.uk/sites/default/files/new_reports/INS2-5770235201.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/INS2-5770235201.pdf</a> |                            |
|   | <b>New CQC Rating</b>   | <b>Previous CQC Rating</b> |
| <b>Overall</b>  | Good  | Good                       |
| <b>Safe</b>   | Good  | Good                       |
| <b>Effective</b>  | Good  | Good                       |
| <b>Caring</b>   | Good  | Good                       |
| <b>Responsive</b>   | Good  | Good                       |
| <b>Well-Led</b>   | Good  | Good                       |
| <b>Date of Inspection</b>                                   | 1 <sup>st</sup> October 2019  |                            |
| <b>Date Report Published</b>                                | 13 <sup>th</sup> November 2019  |                            |
| <b>Date Previous Report Published</b>                       | 9 <sup>th</sup> May 2017  |                            |
| <b>Breach Number and Title</b>                              |   |                            |
| None  |   |                            |
| <b>Level of Quality Assurance &amp; Contract Compliance</b> |   |                            |
| Quality Assurance Level 1 – No concerns/minor concerns.     |   |                            |
| <b>Participated in Well Led Programme?</b>                  | Not currently available for LD Res.   |                            |
| <b>PAMMs Assessment- Date / Rating</b>                      | Not yet assessed  |                            |

|  |   |                            |
|--|---|----------------------------|
| <b>Provider Name</b>   | <b>Community Integrated Care (C-I-C)</b>  |                            |
| <b>Service Name</b>  | <b>Teesside Domiciliary Care Office</b>   |                            |
| <b>Category of Care</b>  | <b>Care at Home - Learning Disabilities</b>   |                            |
| <b>Address</b>   | Room 4001, DBH Belasis Business Centre<br>Belasis Technology Park, Coxwold Way<br>Billingham<br>Stockton-on-Tees<br>TS23 4EA  |                            |
| <b>Ward</b>  | <b>Billingham East</b>  |                            |
| <b>CQC link</b>  | <a href="https://www.cqc.org.uk/sites/default/files/new_reports/INS2-3783507689.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/INS2-3783507689.pdf</a> |                            |
|  | <b>New CQC Rating</b>   | <b>Previous CQC Rating</b> |
| <b>Overall</b>   | <b>Good</b>   | <b>Good</b>                |
| <b>Safe</b>  | <b>Good</b>   | <b>Good</b>                |
| <b>Effective</b>   | <b>Good</b>   | <b>Good</b>                |
| <b>Caring</b>  | <b>Good</b>   | <b>Good</b>                |
| <b>Responsive</b>  | <b>Good</b>   | <b>Good</b>                |
| <b>Well-Led</b>  | <b>Good</b>   | <b>Good</b>                |
| <b>Date of Inspection</b>  | <b>5<sup>th</sup> November 2019</b>   |                            |
| <b>Date Report Published</b>   | <b>16<sup>th</sup> November 2019</b>  |                            |
| <b>Date Previous Report Published</b>  | <b>9<sup>th</sup> May 2017</b>  |                            |
| <b>Breach Number and Title</b>   |   |                            |
| No breaches  |   |                            |
| <b>Level of Quality Assurance &amp; Contract Compliance</b>  |   |                            |
| Level 1 – Low/Minor Concerns<br><br>Has been at Level 2 (moderate concerns and supportive monitoring) since July 2019, upon taking on a large number of packages from CRG. Following the CQC inspection, has now changed to Level 1. |   |                            |
| <b>Participated in Well Led Programme?</b>   | Not currently available for Care at Home  |                            |
| <b>PAMMs Assessment- Date / Rating</b>   | Not yet assessed  |                            |

|   |   |                            |
|---|---|----------------------------|
| <b>Provider Name</b>  | <b>Methodist Homes</b>  |                            |
| <b>Service Name</b>   | <b>Reuben Manor</b>   |                            |
| <b>Category of Care</b>   | <b>Residential / Residential Dementia</b>   |                            |
| <b>Address</b>  | 654-656 Yarm Road<br>Eaglescliffe<br>Stockton-on-Tees<br>TS16 0DP   |                            |
| <b>Ward</b>   | <b>Eaglescliffe</b>   |                            |
| <b>CQC link</b>   | <a href="https://www.cqc.org.uk/sites/default/files/new_reports/INS2-6257865741.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/INS2-6257865741.pdf</a> |                            |
|   | <b>New CQC Rating</b>   | <b>Previous CQC Rating</b> |
| <b>Overall</b>  | <b>Requires Improvement</b>   | <b>Good</b>                |
| <b>Safe</b>   | <b>Requires Improvement</b>   | <b>Good</b>                |
| <b>Effective</b>  | <b>Good</b>   | <b>Good</b>                |
| <b>Caring</b>   | <b>Good</b>   | <b>Good</b>                |
| <b>Responsive</b>   | <b>Good</b>   | <b>Good</b>                |
| <b>Well-Led</b>   | <b>Requires Improvement</b>   | <b>Good</b>                |
| <b>Date of Inspection</b>   | <b>30<sup>th</sup> October &amp; 4<sup>th</sup> November 2019</b>   |                            |
| <b>Date Report Published</b>  | <b>3<sup>rd</sup> December 2019</b>   |                            |
| <b>Date Previous Report Published</b>   | <b>13<sup>th</sup> December 2018</b>  |                            |
| <b>Breach Number and Title</b>  |   |                            |
| Regulation 12 – Safe Care & Treatment: medicines were not always managed safely.  |   |                            |
| <b>Level of Quality Assurance &amp; Contract Compliance</b>   |   |                            |
| <p>When the last inspection was completed, Reuben Manor was owned by Silk Healthcare; the home was subsequently taken over by Methodist Homes on 6<sup>th</sup> January 2019.</p> <p>I visited the home on 19<sup>th</sup> November and discussed the Inspection with the Registered Manager. She believes that the medication errors that were identified by CQC were due to new recording paperwork recently introduced by Methodist Homes.</p> <p>The Registered Manager is very receptive to working with the Quality Assurance and Compliance Officer.</p> |   |                            |
| <b>Participated in Well Led Programme?</b>  | <b>No</b>   |                            |
| <b>PAMMs Assessment- Date / Rating</b>  | <b>Due February 2020</b>  |                            |

|   |   |                            |
|---|---|----------------------------|
| <b>Provider Name</b>  | <b>Bondcare (Ambassador) Limited</b>  |                            |
| <b>Service Name</b>   | <b>Elton Hall Care Home</b>   |                            |
| <b>Category of Care</b>                                     | <b>Residential Dementia and Mental Health</b>   |                            |
| <b>Address</b>  | Elton Village<br>Elton<br>Stockton-on-Tees<br>Cleveland<br>TS21 1AG   |                            |
| <b>Ward</b>   | <b>Western Parishes</b>   |                            |
| <b>CQC link</b>   | <a href="https://www.cqc.org.uk/sites/default/files/new_reports/INS2-5770179301.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/INS2-5770179301.pdf</a> |                            |
|   | <b>New CQC Rating</b>   | <b>Previous CQC Rating</b> |
| <b>Overall</b>  | <b>Good</b>   | <b>Good</b>                |
| <b>Safe</b>   | <b>Good</b>   | <b>Good</b>                |
| <b>Effective</b>  | <b>Good</b>   | <b>Good</b>                |
| <b>Caring</b>   | <b>Good</b>   | <b>Good</b>                |
| <b>Responsive</b>   | <b>Good</b>   | <b>Good</b>                |
| <b>Well-Led</b>   | <b>Good</b>   | <b>Good</b>                |
| <b>Date of Inspection</b>                                   | <b>20<sup>th</sup> November 2019</b>  |                            |
| <b>Date Report Published</b>                                | <b>7<sup>th</sup> December 2019</b>   |                            |
| <b>Date Previous Report Published</b>                       | <b>19<sup>th</sup> May 2017</b>   |                            |
| <b>Breach Number and Title</b>                              |   |                            |
| No breaches   |   |                            |
| <b>Level of Quality Assurance &amp; Contract Compliance</b> |   |                            |
| Level 1 – Business as Usual / Standard Monitoring           |   |                            |
| <b>Participated in Well Led Programme?</b>                  | <b>No</b>   |                            |
| <b>PAMMs Assessment- Date / Rating</b>                      | <b>22/02/2019</b>   | <b>Good</b>                |

|   |   |                            |
|---|---|----------------------------|
| <b>Provider Name</b>  | <b>Stockton Care Limited</b>  |                            |
| <b>Service Name</b>   | <b>Cherry Tree Care Centre</b>  |                            |
| <b>Category of Care</b>   | <b>Residential Home</b>   |                            |
| <b>Address</b>  | South Road<br>Stockton-on-Tees<br>TS20 2TB  |                            |
| <b>Ward</b>   | <b>Norton South</b>   |                            |
| <b>CQC link</b>   | <a href="https://www.cqc.org.uk/sites/default/files/new_reports/INS2-6257865661.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/INS2-6257865661.pdf</a> |                            |
|   | <b>New CQC Rating</b>   | <b>Previous CQC Rating</b> |
| <b>Overall</b>  | <b>Good</b>   | <b>None</b>                |
| <b>Safe</b>   | <b>Good</b>   | <b>None</b>                |
| <b>Effective</b>  | <b>Good</b>   | <b>None</b>                |
| <b>Caring</b>   | <b>Good</b>   | <b>None</b>                |
| <b>Responsive</b>   | <b>Good</b>   | <b>None</b>                |
| <b>Well-Led</b>   | <b>Good</b>   | <b>None</b>                |
| <b>Date of Inspection</b>   | <b>12<sup>th</sup> November 2019</b>  |                            |
| <b>Date Report Published</b>  | <b>10<sup>th</sup> December 2019</b>  |                            |
| <b>Date Previous Report Published</b>   | <b>N/A</b>  |                            |
| <b>Breach Number and Title</b>  |   |                            |
| N/A   |   |                            |
| <b>Level of Quality Assurance &amp; Contract Compliance</b>   |   |                            |
| 1 - No Concerns/Minor Concerns<br><br>Stockton Care purchased this home in December 2018, at the time of purchase held a CQC rating of requires improvement in 4 domains and an overall requires improvement. |   |                            |
| <b>Participated in Well Led Programme?</b>  | <b>Yes – 50%</b>  |                            |
| <b>PAMMs Assessment- Date / Rating</b>  | <b>29/07/2019</b>   | <b>Good</b>                |



|   |   |                            |
|---|---|----------------------------|
| <b>Provider Name</b>  | <b>Teesside Healthcare Limited</b>  |                            |
| <b>Service Name</b>   | <b>Churchview Nursing and Residential Home</b>  |                            |
| <b>Category of Care</b>   | <b>Nursing</b>  |                            |
| <b>Address</b>  | Thompson Street, Stockton-on-Tees TS18 2NY  |                            |
| <b>Ward</b>   | <b>Stockton Town Centre</b>   |                            |
| <b>CQC link</b>   | <a href="https://www.cqc.org.uk/sites/default/files/new_reports/INS2-6289840221.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/INS2-6289840221.pdf</a> |                            |
|   | <b>New CQC Rating</b>   | <b>Previous CQC Rating</b> |
| <b>Overall</b>  | <b>Requires Improvement</b>   | <b>Good</b>                |
| <b>Safe</b>   | <b>Requires Improvement</b>   | <b>Good</b>                |
| <b>Effective</b>  | <b>Requires Improvement</b>   | <b>Good</b>                |
| <b>Caring</b>   | <b>Good</b>   | <b>Outstanding</b>         |
| <b>Responsive</b>   | <b>Good</b>   | <b>Good</b>                |
| <b>Well-Led</b>   | <b>Requires Improvement</b>   | <b>Good</b>                |
| <b>Date of Inspection</b>   | <b>20<sup>th</sup> November 2019</b>  |                            |
| <b>Date Report Published</b>  | <b>11<sup>th</sup> December 2019</b>  |                            |
| <b>Date Previous Report Published</b>   | <b>9<sup>th</sup> June 2017</b>   |                            |
| <b>Breach Number and Title</b>  |   |                            |
| N/A   |   |                            |
| <b>Level of Quality Assurance &amp; Contract Compliance</b>   |   |                            |
| 2 – Moderate Concerns/Supportive Monitoring   |   |                            |
| <b>Level of Engagement with the Authority</b>   |   |                            |
| None  |   |                            |
| <b>Supporting Evidence and Supplementary Information</b>  |   |                            |
| <p>Since taking over, the provider has gone through a period of unsettlement and staff retention alongside a change of registered manager. This resulted in recommendations not being implemented following the quality inspection earlier in the year. At the time of this inspection, the new manager had been in post for 3 months, and despite the small amount of time in post, CQC were confident in the new management going forward. Areas for improvement around documentation recording and person centered information, staffing levels and staff training were common themes that were identified and resulted in the decline in rating. As a Local Authority we will be working through the current action plan with the provider, alongside their own improvements and CQC recommendations.</p> |   |                            |
| <b>Participated in Well Led Programme?</b>  | <b>No</b>   |                            |
| <b>PAMMs Assessment- Date / Rating</b>  | <b>07/05/2019</b>   | <b>Good</b>                |

|   |   |                            |
|---|---|----------------------------|
| <b>Provider Name</b>  | <b>Voyage 1 Limited</b>   |                            |
| <b>Service Name</b>   | <b>Saxon Lodge</b>  |                            |
| <b>Category of Care</b>   | <b>Learning Disabilities</b>  |                            |
| <b>Address</b>  | South Road, Norton, Stockton-on-Tees TS20 2TB   |                            |
| <b>Ward</b>   | <b>Norton South</b>   |                            |
| <b>CQC link</b>   | <a href="https://www.cqc.org.uk/sites/default/files/new_reports/INS2-5770259601.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/INS2-5770259601.pdf</a> |                            |
|   | <b>New CQC Rating</b>   | <b>Previous CQC Rating</b> |
| <b>Overall</b>  | <b>Good</b>   | <b>Good</b>                |
| <b>Safe</b>   | <b>Good</b>   | <b>Good</b>                |
| <b>Effective</b>  | <b>Good</b>   | <b>Good</b>                |
| <b>Caring</b>   | <b>Good</b>   | <b>Good</b>                |
| <b>Responsive</b>   | <b>Good</b>   | <b>Good</b>                |
| <b>Well-Led</b>   | <b>Good</b>   | <b>Good</b>                |
| <b>Date of Inspection</b>   | 25 <sup>th</sup> November 2019  |                            |
| <b>Date Report Published</b>  | 18 <sup>th</sup> December 2019  |                            |
| <b>Date Previous Report Published</b>   | 27 <sup>th</sup> June 2017  |                            |
| <b>Breach Number and Title</b>  |   |                            |
| N/A   |   |                            |
| <b>Level of Quality Assurance &amp; Contract Compliance</b>   |   |                            |
| 1 – No concerns/Minor Concerns  |   |                            |
| <b>Level of Engagement with the Authority</b>   |   |                            |
| The provider is responsive to requests from the Local Authority and there is a good relationship between the provider and the Local Authority. It is anticipated that the provider will engage with the LD provider forum, and good to outstanding groups in the coming year. The provider's annual quality assessment was an overall good and the subsequent action plan is also complete. |   |                            |
| <b>Supporting Evidence and Supplementary Information</b>  |   |                            |
| The provider was aiming for an outstanding; feedback was complimentary for the service and the care provided. The provider is continuing to aim for an outstanding rating and working on feedback from CQC.   |   |                            |
| <b>Participated in Well Led Programme?</b>  | <b>No (not available for LD services)</b>   |                            |
| <b>PAMMs Assessment- Date / Rating</b>  | 19/08/2019  | <b>Good</b>                |

|  |   |                            |
|--|---|----------------------------|
| <b>Provider Name</b>   | <b>SSL Healthcare Ltd</b>   |                            |
| <b>Service Name</b>  | <b>The White House Care Home</b>  |                            |
| <b>Category of Care</b>  | <b>Residential</b>  |                            |
| <b>Address</b>   | 76a Darlington Rd, Hartburn, Stockton-on-Tees TS18 5ET  |                            |
| <b>Ward</b>  | <b>Hartburn</b>   |                            |
| <b>CQC link</b>  | <a href="https://www.cqc.org.uk/sites/default/files/new_reports/INS2-5770235421.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/INS2-5770235421.pdf</a> |                            |
|  | <b>New CQC Rating</b>   | <b>Previous CQC Rating</b> |
| <b>Overall</b>   | <b>Outstanding</b>  | <b>Good</b>                |
| <b>Safe</b>  | <b>Good</b>   | <b>Good</b>                |
| <b>Effective</b>   | <b>Outstanding</b>  | <b>Good</b>                |
| <b>Caring</b>  | <b>Good</b>   | <b>Good</b>                |
| <b>Responsive</b>  | <b>Outstanding</b>  | <b>Good</b>                |
| <b>Well-Led</b>  | <b>Outstanding</b>  | <b>Good</b>                |
| <b>Date of Inspection</b>  | <b>21<sup>st</sup> November 2019</b>  |                            |
| <b>Date Report Published</b>   | <b>18<sup>th</sup> December 2019</b>  |                            |
| <b>Date Previous Report Published</b>  | <b>23<sup>rd</sup> May 2017</b>   |                            |
| <b>Breach Number and Title</b>   |   |                            |
| N/A  |   |                            |
| <b>Level of Quality Assurance &amp; Contract Compliance</b>  |   |                            |
| Level 1 – Standard Monitoring  |   |                            |
| <b>Level of Engagement with the Authority</b>  |   |                            |
| <p>Engaged fully with the Leadership &amp; Peer Support Network Group.<br/> Engaged and collaborated fully with Transformation Team in the Good to Outstanding Group.<br/> Manager + Deputy completed Well Led Programme.<br/> Part of the collaboration between Transformation Team &amp; Public Health, to develop policy, leaflet and resources for Oral Health in Care Homes, including promotion to other homes.<br/> Attended the DSP toolkit event and have since worked to Entry Level, gaining NHS mail to allow for secure communication between home and health professionals.<br/> Engaged fully with Alliance; all staff trained, and home fully utilising the NEWS kits.<br/> Attended the Teepa Snow / PAC training (i.e. engaged with dementia recommendations).</p> |   |                            |
| <b>Supporting Evidence and Supplementary Information</b>   |   |                            |
| N/A  |   |                            |
| <b>Participated in Well Led Programme?</b>   | <b>Yes</b>  |                            |
| <b>PAMMS Assessment - Date / Rating</b>  | <b>22/02/2019</b>   | <b>Good</b>                |

**Primary Medical Care Services**

n/a

**Hospital and Community Health Services (including mental health care)**

n/a

APPENDIX 2

**Overall position for commissioned services**

As of Quarter 3, the overall summary of CQC ratings for Adult Social Care services commissioned by the Council is as follows:



