

## CARE QUALITY COMMISSION (CQC) INSPECTION OUTCOMES

### QUARTER 4 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 January and March 2020 (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, **14** 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:

- six Adult Care services were reported on (four were rated Good, and two were rated Requires Improvement);
- five Primary Medical Care services were reported on (three were rated Outstanding, and two were rated Good);
- three Hospitals / Other Health Care services (one was rated Requires Improvement, and two were rated Inadequate)

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>	<b>St Martin's Care Limited</b>	
<b>Service Name</b>	<b>Woodside Grange Care Home</b>	
<b>Category of Care</b>	<b>Nursing, Residential, Dementia &amp; Learning Disability</b>	
<b>Address</b>	Teddar Avenue Thornaby Stockton-on-Tees TS17 9JP	
<b>Ward</b>	<b>Stainsby Hill</b>	
<b>CQC link</b>	<a href="https://www.cqc.org.uk/sites/default/files/new_reports/INS2-6848058371.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/INS2-6848058371.pdf</a>	
	<b>New CQC Rating</b>	<b>Previous CQC Rating</b>
<b>Overall</b>	<b>Requires Improvement</b>	<b>Requires Improvement</b>
<b>Safe</b>	<b>Requires Improvement</b>	<b>Requires Improvement</b>
<b>Effective</b>	<b>Requires Improvement</b>	<b>Good</b>
<b>Caring</b>	<b>Requires Improvement</b>	<b>Good</b>
<b>Responsive</b>	<b>Requires Improvement</b>	<b>Good</b>
<b>Well-Led</b>	<b>Requires Improvement</b>	<b>Requires Improvement</b>
<b>Date of Inspection</b>	<b>4<sup>th</sup> December 2019</b>	
<b>Date Report Published</b>	<b>21<sup>st</sup> January 2020</b>	
<b>Date Previous Report Published</b>	<b>22<sup>nd</sup> December 2018</b>	
<b>Breach Number and Title</b>		
Regulation 12 HSCA RA Regulations 2014 Safe care and treatment: Medicines were not always managed safely and risks were not always correctly assessed or recorded.		
Regulation 17 HSCA RA Regulations 2014 Good governance: The systems in place to monitor the service had not been effective in identifying all areas of concern. Complete and accurate records were not being maintained.		
<b>Level of Quality Assurance &amp; Contract Compliance</b>		
Level 2 – Supportive Monitoring		

Level of Engagement with the Authority		
<p>There has been no attendance at the Leadership groups.                  An Activity Coordinator attended the first Activity Champion Network in December.                  Manager has not yet engaged well with the Transformation Managers.                  Woodside Grange accessed NTHEA Falls Training during May and June 2019 and the sessions went ahead. Overall engagement with the Alliance has been poor; they were contacted regarding the sessions; particularly the Wellbeing; Hydration and Nutrition but did not respond.</p>		
Supporting Evidence and Supplementary Information		
<p>Woodside Grange is registered to provide care for up to 121 people across six separate units over three floors.</p> <p>The former Registered Manager and Deputy Manager both left the home in September 2019. An interim management structure was in place until a new Manager and Deputy were appointed in late October 2019. The new Manager has applied for registration with CQC and this is currently pending. The Deputy recently left her post and has been replaced by the former Clinical Lead; a new Clinical Lead is being recruited.</p> <p>Most areas of concern within the CQC report relate to the nursing units on the top floor of the home, which will be the focus of supportive monitoring.</p>		
<b>Participated in Well Led Programme?</b>	<b>No</b>	
<b>PAMMS Assessment - Date / Rating</b>	<b>05/07/2019</b>	<b>Good</b>

<b>Provider Name</b>	<b>Saint John of God Hospitaller Services</b>	
<b>Service Name</b>	<b>Saint John of God Hospitaller Services – 22 Sandown Road</b>	
<b>Category of Care</b>	<b>Residential Home – Learning Disabilities</b>	
<b>Address</b>	22 Sandown Road Billingham Stockton-on-Tees TS23 2BQ	
<b>Ward</b>	<b>Billingham Central</b>	
<b>CQC link</b>	<a href="https://www.cqc.org.uk/sites/default/files/new_reports/INS2-5869852091.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/INS2-5869852091.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>Outstanding</b>	<b>Good</b>
<b>Well-Led</b>	<b>Good</b>	<b>Good</b>
<b>Date of Inspection</b>	<b>22<sup>nd</sup> October 2019</b>	
<b>Date Report Published</b>	<b>21<sup>st</sup> January 2020</b>	
<b>Date Previous Report Published</b>	<b>14<sup>th</sup> April 2017</b>	
<b>Breach Number and Title</b>		
N/A		
<b>Level of Quality Assurance &amp; Contract Compliance</b>		
1 - No Concerns/Minor Concerns. CQC found that the provider plans personalised care to ensure people have choice and control and to meet their needs and preferences. People received exceptional care and outstanding support from dedicated staff, whose sole aim was to provide care which was based entirely upon people's detailed and individual preferences.		
<b>Level of Engagement with the Authority</b>		
The provider is responsive and transparent in their approach to the local authority with open and timely communication around the recent management changes.		
<b>Supporting Evidence and Supplementary Information</b>		
There is a new manager in post a from January 2020. At time of this inspection there was a peripatetic manger in post with support from a regional manager.		
<b>Participated in Well Led Programme?</b>	<b>No</b>	
<b>PAMMs Assessment- Date / Rating</b>	<b>Not yet assessed</b>	

<b>Provider Name</b>	<b>Qualia Care Limited</b>	
<b>Service Name</b>	<b>St Mark's Care Home</b>	
<b>Category of Care</b>	<b>Nursing, Residential, Dementia</b>	
<b>Address</b>	1 Hartburn Lane Stockton-on-Tees TS18 3QJ	
<b>Ward</b>	<b>Parkfield &amp; Oxbridge</b>	
<b>CQC link</b>	<a href="https://www.cqc.org.uk/sites/default/files/new_reports/INS2-7534405151.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/INS2-7534405151.pdf</a>	
	<b>New CQC Rating</b>	<b>Previous CQC Rating</b>
<b>Overall</b>	<b>Requires Improvement</b>	<b>Inadequate</b>
<b>Safe</b>	<b>Requires Improvement</b>	<b>Inadequate</b>
<b>Effective</b>	<b>Requires Improvement</b>	<b>Requires Improvement</b>
<b>Caring</b>	<b>Requires Improvement</b>	<b>Requires Improvement</b>
<b>Responsive</b>	<b>Requires Improvement</b>	<b>Requires Improvement</b>
<b>Well-Led</b>	<b>Requires Improvement</b>	<b>Inadequate</b>
<b>Date of Inspection</b>	<b>2<sup>nd</sup> December 2019</b>	
<b>Date Report Published</b>	<b>5<sup>th</sup> February 2020</b>	
<b>Date Previous Report Published</b>	<b>26<sup>th</sup> June 2019</b>	
<b>Breach Number and Title</b>		
Regulation 17 HSCA RA Regulations 2014 Good governance - The service failed to assess, monitor and mitigate the risks to people. The provider did not operate effective systems to monitor and assess the quality of the service.		
<b>Level of Quality Assurance &amp; Contract Compliance</b>		
<p>CQC found that the service failed to maintain accurate and complete records in respect of people's care and support. Individual risks associated with medical conditions were not identified. Some care plans contained inaccurate and missing information. Medicines were not managed safely.</p> <p>CQC acknowledged that the provider had made some improvements since the last inspection. People had a safe environment. Health and safety checks were regularly conducted. Areas of the home had been repaired, resolving infection control issues. Safeguarding matters had been appropriately managed by the service</p> <p>Level 2 – Supportive Monitoring will be conducted to support the provider whilst working through the CQC action plan to address those areas identified as requiring improvement.</p>		

Level of Engagement with the Authority		
<p>The new acting manager has attended several Leadership and Peer Support Meetings and has engaged with the Oral Health Project. The provider has not engaged with North Tees &amp; Hartlepool Education Alliance (NTHEA), however has started a consultancy with the Transformation Managers.</p> <p>The provider did not attend the Well Led programme, but the new acting manager was not the manager of St Marks at the time of the training.</p>		
Supporting Evidence and Supplementary Information		
<p>Former Registered Manager has left the home and a new Acting Manager is in place. Recruitment is taking place for a new permanent manager.</p>		
Participated in Well Led Programme?	No	
PAMMS Assessment - Date / Rating	14/08/2019	<b>Requires Improvement</b>

<b>Provider Name</b>	<b>Real Life Options</b>	
<b>Service Name</b>	<b>Real Life Options – Darlington Road</b>	
<b>Category of Care</b>	<b>Residential Care Home – Learning Disabilities (LD)</b>	
<b>Address</b>	54 Darlington Road Hartburn Stockton-on-Tees TS18 5EW	
<b>Ward</b>	<b>Hartburn</b>	
<b>CQC link</b>	<a href="https://www.cqc.org.uk/sites/default/files/new_reports/INS2-5770235221.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/INS2-5770235221.pdf</a>	
	<b>New CQC Rating</b>	<b>Previous CQC Rating</b>
<b>Overall</b>	<b>Good</b>	<b>Requires Improvement</b>
<b>Safe</b>	<b>Good</b>	<b>Requires Improvement</b>
<b>Effective</b>	<b>Good</b>	<b>Requires Improvement</b>
<b>Caring</b>	<b>Good</b>	<b>Good</b>
<b>Responsive</b>	<b>Outstanding</b>	<b>Requires Improvement</b>
<b>Well-Led</b>	<b>Good</b>	<b>Requires Improvement</b>
<b>Date of Inspection</b>	<b>24<sup>th</sup> January 2020</b>	
<b>Date Report Published</b>	<b>14<sup>th</sup> February 2020</b>	
<b>Date Previous Report Published</b>	<b>7<sup>th</sup> June 2016</b>	
<b>Breach Number and Title</b>		
None.		
<b>Level of Quality Assurance &amp; Contract Compliance</b>		
Level 1 – No concerns.		
<p>CQC found the Responsive element of their inspection was Outstanding, this meant that the service was tailored to meet the needs of individuals is delivered to ensure flexibility, choice and continuity of care. The service had introduced 'Active Support' which is a method of enabling people with learning disabilities to engage more in their daily lives and this had made a real difference to the resident's lives through this change to working practice. The residents were more truly engaged in daily household activities and their own personal care.</p> <p>The service had also incorporated the 'Accessible Information Standards' (AIS). The AIS standard was introduced to ensure people with a disability are given information in a way they understand. The service ensured that all information was available in easy read format; as an example, the cook had spent over a year photographing actual meals so that residents could easily identify what they would like to eat.</p>		

Level of Engagement with the Authority		
<p>The Manager of this home has always had a very good level of engagement with the Local Authority.</p> <p>They have attended the provider forum at the end of 2019 and have attended the very first LD / Mental Health Leadership network.</p> <p>They also recently attended Sepsis training.</p> <p>They're keen to work more in partnership with other providers and are looking forward to engaging with the provider network.</p>		
Supporting Evidence and Supplementary Information		
As above.		
<b>Participated in Well Led Programme?</b>	N/A	
<b>PAMMs Assessment- Date / Rating</b>	Not yet assessed	



<b>Provider Name</b>	Akari Care	
<b>Service Name</b>	Ayresome Court	
<b>Category of Care</b>	Nursing/Residential	
<b>Address</b>	Green Lane, Yarm TS15 9EH	
<b>Ward</b>	Yarm	
<b>CQC link</b>	<a href="https://www.cqc.org.uk/sites/default/files/new_reports/INS2-8244495481.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/INS2-8244495481.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>	Outstanding	Good
<b>Well-Led</b>	Good	Good
<b>Date of Inspection</b>	23 <sup>rd</sup> January 2020	
<b>Date Report Published</b>	26 <sup>th</sup> February 2020	
<b>Date Previous Report Published</b>	28 <sup>th</sup> April 2018	
<b>Breach Number and Title</b>		
N/A		
<b>Level of Quality Assurance &amp; Contract Compliance</b>		
1 – No concerns		
<b>Level of Engagement with the Authority</b>		
<p>The provider has a good history of cooperating with the local authority and the Quality Assurance and Compliance team. The manager regularly attends various meetings that the local authority holds including provider forums. The manager completed 50% of the Well lead programme with a deputy member of staff competing 25% of the sessions. The manager has also attended the 'good to outstanding collaborative', sharing best practice and ideas on how to gain an outstanding rating.</p>		
<b>Supporting Evidence and Supplementary Information</b>		
<p>CQC found "The service was exceptionally responsive." The CQC stated the service was committed to providing exceptional person-centred end of life care. They found the service worked closely with other organisations to ensure peoples end of life wishes were respected and fulfilled. One person was supported to travel overseas to their home town to spend their final days. The manager of the home is long standing with a strong and consistent staff team supporting her.</p>		
<b>Participated in Well Led Programme?</b>	Yes	
<b>PAMMs Assessment- Date / Rating</b>	21/10/2019	Good

<b>Provider Name</b>	<b>Oxbridge Care Limited</b>	
<b>Service Name</b>	<b>Windsor Lodge</b>	
<b>Category of Care</b>	<b>Residential – Mental Health</b>	
<b>Address</b>	60 Bowesfield Lane Stockton-on-Tees TS18 3ET	
<b>Ward</b>	<b>Parkfield and Oxbridge</b>	
<b>CQC link</b>	<a href="https://www.cqc.org.uk/sites/default/files/new_reports/INS2-6848058351.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/INS2-6848058351.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>18<sup>th</sup> February 2020</b>	
<b>Date Report Published</b>	<b>8<sup>th</sup> March 2020</b>	
<b>Date Previous Report Published</b>	<b>25<sup>th</sup> August 2017</b>	
<b>Breach Number and Title</b>		
None		
<b>Level of Quality Assurance &amp; Contract Compliance</b>		
<p>Level 1 – no concerns.</p> <p>CQC found that resident’s medication was managed safely, there were enough staff to meet people’s needs and they had a good knowledge of the resident’s needs and preferences. Staff were supported by means of regular training, supervision and appraisal.</p> <p>Residents felt staff treated them with respect and protected their privacy and dignity at all times. Residents were supported where appropriate, to manage their health needs. Resident’s dietary needs were fully understood, and they were encouraged to eat a healthy diet. Support plans were in place to meet people’s assessed need.</p> <p>Systems were in place for auditing the quality of the service and for making improvements.</p>		

Level of Engagement with the Authority		
<p>The Registered Manager (and owner) has always had a very good level of engagement with the Local Authority.</p> <p>Windsor Lodge have fully engaged with the Transformation team, consistently attending the Leadership and Peer Support Network, Good to Outstanding Collaborative and the Activity Coordinators Network. The Registered Manager also completed the Well Led training and attended all of the sessions provided. Windsor Lodge have also engaged in partnership working alongside the Local Authority supporting Public Health England to develop resources for the Oral Health Project, attended the Data Security and Protection Toolkit event hosted by NHS England and engaged with North Tees and Hartlepool education Alliance training.</p>		
Supporting Evidence and Supplementary Information		
None		
Participated in Well Led Programme?	Yes	
PAMMs Assessment- Date / Rating	26/02/2020	Good

### PRIMARY MEDICAL CARE SERVICES

<b>Provider Name</b>	<b>Hartlepool and Stockton Health Ltd</b>	
<b>Service Name</b>	<b>Eaglescliffe Health Centre</b> (also known as Footsteps Teen Health Clinic)	
<b>Category of Care</b>	<b>Doctors / GPs</b>	
<b>Address</b>	Sunningdale Drive Eaglescliffe Stockton-on-Tees TS16 9EA	
<b>Ward</b>	<b>Eaglescliffe</b>	
<b>CQC link</b>	<a href="https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ8070.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ8070.pdf</a>	
	<b>New CQC Rating</b>	<b>Previous CQC Rating</b>
<b>Overall</b>	<b>Outstanding</b>	
<b>Safe</b>	<b>Good</b>	
<b>Effective</b>	<b>Outstanding</b>	
<b>Caring</b>	<b>Outstanding</b>	
<b>Responsive</b>	<b>Outstanding</b>	
<b>Well-Led</b>	<b>Outstanding</b>	
<b>Date of Inspection</b>	<b>14<sup>th</sup> November 2019</b>	
<b>Date Report Published</b>	<b>16<sup>th</sup> January 2020</b>	
<b>Date Previous Report Published</b>	<b>n/a</b>	
<b>Further Information</b>		
The service is a collaboration between Eaglescliffe Medical Practice, Stockton-on-Tees Borough Council and Tees Esk and Wear Valley hospital trust following identification of an increased demand and consequent shortfall in provision of mental health and wellbeing services for young people in the local area.		

<b>Provider Name</b>	<b>Hartlepool and Stockton Health Ltd</b>	
<b>Service Name</b>	<b>Tennant Street Medical Centre</b>	
<b>Category of Care</b>	<b>Doctors / GPs (extended access)</b>	
<b>Address</b>	Tennant Street Stockton-on-Tees TS18 2AT	
<b>Ward</b>	<b>Stockton Town Centre</b>	
<b>CQC link</b>	<a href="https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ8189.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ8189.pdf</a>	
	<b>New CQC Rating</b>	<b>Previous CQC Rating</b>
<b>Overall</b>	<b>Outstanding</b>	
<b>Safe</b>	<b>Good</b>	
<b>Effective</b>	<b>Outstanding</b>	
<b>Caring</b>	<b>Good</b>	
<b>Responsive</b>	<b>Outstanding</b>	
<b>Well-Led</b>	<b>Outstanding</b>	
<b>Date of Inspection</b>	<b>9<sup>th</sup> – 16<sup>th</sup> November 2019</b>	
<b>Date Report Published</b>	<b>16<sup>th</sup> January 2020</b>	
<b>Date Previous Report Published</b>	n/a	
<b>Further Information</b>		
Hartlepool and Stockton Health Limited is commissioned by Hartlepool and Stockton Clinical Commissioning Group (CCG) to operate this service.		

<b>Provider Name</b>	<b>Hartlepool and Stockton Health Ltd</b>	
<b>Service Name</b>	<b>Woodbridge Practice</b>	
<b>Category of Care</b>	<b>Doctors / GPs</b>	
<b>Address</b>	Ingleby Barwick Stockton-on-Tees TS17 0WG	
<b>Ward</b>	<b>Ingleby Barwick West</b>	
<b>CQC link</b>	<a href="https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ8184.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ8184.pdf</a>	
	<b>New CQC Rating</b>	<b>Previous CQC Rating</b>
<b>Overall</b>	<b>Outstanding</b>	
<b>Safe</b>	<b>Good</b>	
<b>Effective</b>	<b>Outstanding</b>	
<b>Caring</b>	<b>Good</b>	
<b>Responsive</b>	<b>Outstanding</b>	
<b>Well-Led</b>	<b>Outstanding</b>	
<b>Date of Inspection</b>	<b>9<sup>th</sup> – 16<sup>th</sup> November 2019</b>	
<b>Date Report Published</b>	<b>20<sup>th</sup> January 2020</b>	
<b>Date Previous Report Published</b>	n/a	
<b>Further Information</b>		
Hartlepool and Stockton Health Limited is commissioned by Hartlepool and Stockton Clinical Commissioning Group (CCG) to operate this service.		

<b>Provider Name</b>	<b>Hartlepool and Stockton Health Ltd</b>	
<b>Service Name</b>	<b>Norton Medical Centre (extended access)</b>	
<b>Category of Care</b>	<b>Doctors / GPs</b>	
<b>Address</b>	Billingham Road Norton Stockton-on-Tees TS20 2UZ	
<b>Ward</b>	<b>Norton North</b>	
<b>CQC link</b>	<a href="https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ8635.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ8635.pdf</a>	
	<b>New CQC Rating</b>	<b>Previous CQC Rating</b>
<b>Overall</b>	<b>Good</b>	
<b>Safe</b>	<b>Good</b>	
<b>Effective</b>	<b>Good</b>	
<b>Caring</b>	<b>Good</b>	
<b>Responsive</b>	<b>Good</b>	
<b>Well-Led</b>	<b>Outstanding</b>	
<b>Date of Inspection</b>	<b>9<sup>th</sup> November 2019</b>	
<b>Date Report Published</b>	<b>20<sup>th</sup> January 2020</b>	
<b>Date Previous Report Published</b>	n/a	
<b>Further Information</b>		
Hartlepool and Stockton Health Limited has a contract with Norton Medical Centre to deliver the extended hours on a Saturday morning from 10am to 1pm from the practice's premises. This service is only available to the existing practice patients who are registered at the practice.		

<b>Provider Name</b>	<b>Hartlepool and Stockton Health Ltd</b>	
<b>Service Name</b>	<b>Barwick Medical Centre (extended access)</b>	
<b>Category of Care</b>	<b>Doctors / GPs</b>	
<b>Address</b>	Lowfields Avenue Ingleby Barwick Stockton-on-Tees TS17 0RJ	
<b>Ward</b>	<b>Ingleby Barwick East</b>	
<b>CQC link</b>	<a href="https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ8634.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ8634.pdf</a>	
	<b>New CQC Rating</b>	<b>Previous CQC Rating</b>
<b>Overall</b>	<b>Good</b>	
<b>Safe</b>	<b>Good</b>	
<b>Effective</b>	<b>Good</b>	
<b>Caring</b>	<b>Good</b>	
<b>Responsive</b>	<b>Good</b>	
<b>Well-Led</b>	<b>Outstanding</b>	
<b>Date of Inspection</b>	<b>16<sup>th</sup> November 2019</b>	
<b>Date Report Published</b>	<b>20<sup>th</sup> January 2020</b>	
<b>Date Previous Report Published</b>	n/a	
<b>Further Information</b>		
Hartlepool and Stockton Health Ltd provided extended access provision from these premises.		



**HOSPITAL AND COMMUNITY HEALTH SERVICES**  
(including mental health care)

<b>Provider Name</b>	n/a	
<b>Service Name</b>	Tees, Esk and Wear Valleys NHS Foundation Trust	
<b>Category of Care</b>	Mental Health (adults / children and young people)	
<b>Address</b>	West Park Hospital Edward Pease Way Darlington County Durham DL2 2TS	
<b>Ward</b>	n/a	
<b>CQC link</b>	<a href="https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ6764.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ6764.pdf</a>	
	<b>New CQC Rating</b>	<b>Previous CQC Rating</b>
<b>Overall</b>	Requires Improvement	Good
<b>Safe</b>	Requires Improvement	Requires Improvement
<b>Effective</b>	Good	Good
<b>Caring</b>	Good	Good
<b>Responsive</b>	Requires Improvement	Good
<b>Well-Led</b>	Good	Good
<b>Date of Inspection</b>	24 <sup>th</sup> September 2019 – 6 <sup>th</sup> November 2019	
<b>Date Report Published</b>	3 <sup>rd</sup> March 2020	
<b>Date Previous Report Published</b>	23 <sup>rd</sup> October 2018 (last comprehensive inspection was in January 2015)	
<b>Further Information</b>		
<p>Tees, Esk and Wear Valleys NHS Foundation Trust provides services primarily across nine Clinical Commissioning Groups (CCGs), eight Local Authorities, and there are three STP / ICS footprints that relate to the Trust.</p> <p>The Trust services are provided in 22 locations across 73 wards. The Trust had a total 818 inpatient beds across services, of which 10 were children's mental health beds.</p>		

<b>Provider Name</b>	<b>Butterwick Limited</b>	
<b>Service Name</b>	<b>Butterwick Hospice Stockton</b>	
<b>Category of Care</b>	<b>Hospice (for adults)</b>	
<b>Address</b>	Middlefield Road Hardwick Stockton-on-Tees TS19 8XN	
<b>Ward</b>	<b>Hardwick and Salters Lane</b>	
<b>CQC link</b>	<a href="https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ8658.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ8658.pdf</a>	
	<b>New CQC Rating</b>	<b>Previous CQC Rating</b>
<b>Overall</b>	<b>Inadequate</b>	<b>Good</b>
<b>Safe</b>	<b>Inadequate</b>	<b>Good</b>
<b>Effective</b>	<b>Inadequate</b>	<b>Good</b>
<b>Caring</b>	<b>Good</b>	<b>Good</b>
<b>Responsive</b>	<b>Inadequate</b>	<b>Good</b>
<b>Well-Led</b>	<b>Inadequate</b>	<b>Good</b>
<b>Date of Inspection</b>	<b>5<sup>th</sup> November 2019 – 5<sup>th</sup> December 2019</b>	
<b>Date Report Published</b>	<b>26<sup>th</sup> March 2020</b>	
<b>Date Previous Report Published</b>	<b>25<sup>th</sup> May 2016</b>	
<b>Further Information</b>		
<p>Butterwick Hospice Stockton is operated by Butterwick Limited. The hospice has seven inpatient beds and a day hospice and provides care for adults from Stockton, Middlesbrough and surrounding areas.</p> <p>Butterwick Limited is registered as a charitable trust and also receives funding from the NHS.</p>		

<b>Provider Name</b>	<b>Butterwick Limited</b>	
<b>Service Name</b>	<b>Butterwick House</b>	
<b>Category of Care</b>	<b>Hospice (for children and young people)</b>	
<b>Address</b>	Middlefield Road Hardwick Stockton-on-Tees TS19 8XN	
<b>Ward</b>	<b>Hardwick and Salters Lane</b>	
<b>CQC link</b>	<a href="https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ8657.pdf">https://www.cqc.org.uk/sites/default/files/new_reports/AAAJ8657.pdf</a>	
	<b>New CQC Rating</b>	<b>Previous CQC Rating</b>
<b>Overall</b>	<b>Inadequate</b>	<b>Good</b>
<b>Safe</b>	<b>Inadequate</b>	<b>Good</b>
<b>Effective</b>	<b>Inadequate</b>	<b>Good</b>
<b>Caring</b>	<b>Not rated</b>	<b>Good</b>
<b>Responsive</b>	<b>Inadequate</b>	<b>Good</b>
<b>Well-Led</b>	<b>Inadequate</b>	<b>Good</b>
<b>Date of Inspection</b>	<b>5<sup>th</sup> November 2019 – 11<sup>th</sup> December 2019</b>	
<b>Date Report Published</b>	<b>26<sup>th</sup> March 2020</b>	
<b>Date Previous Report Published</b>	<b>18<sup>th</sup> June 2016</b>	
<b>Further Information</b>		
<p>Butterwick House is operated by Butterwick Limited. The service provides hospice care for children from Stockton, Middlesbrough and surrounding areas. The hospice has 6 inpatient beds (two of which are reserved for the provision of respite care), and cared for 42 patients in the last year.</p> <p>Butterwick House is registered as a charitable trust and also receives funding from the NHS.</p>		

## APPENDIX 2

### OVERALL POSITION FOR COMMISSIONED SERVICES

As of Quarter 4, the overall summary of CQC ratings for Adult Social Care services commissioned by the Council is as follows:



