

AGENDA ITEM

**REPORT TO HEALTH AND
WELL BEING BOARD**

26 March 2015

**Report of the Chief
Executive, North Tees and
Hartlepool NHS
Foundation Trust**

**Care Quality Commission inspection 7th – 10th July 2015, North Tees and
Hartlepool NHS Foundation Trust**

SUMMARY

The NHS is under ever increasing scrutiny for the quality of services both in terms of care provision and efficiency. The role of the Care Quality Commission (CQC) is to inspect health and social care settings inspections being based on rigorous national standards. The CQC review provider services in relation to the five key domains which assess whether services are:

1. Safe
2. Caring
3. Effective
4. Responsive to people's needs
5. Well Led

As of 1 April 2015, organisations will be measured against fundamental standards as set down within the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. There are 12 fundamental standards each of which has key lines of enquiry to support assessment by the CQC.

1. Person-centred care
2. Dignity and respect
3. Need for Consent
4. Safe Care and treatment
5. Safeguarding service users from abuse and improper treatment
6. Meeting nutritional and hydration needs
7. Premises and Equipment
8. Receiving and acting complaints
9. Good Governance
10. Staffing
11. Fit and proper persons employed
12. Duty of Candour

On completion of the inspection provider organisations are rated on whether their services are;

- Outstanding
- Good
- Requires Improvement
- Inadequate
- Poor

Breaches of any of the standards may result in a regulatory enforcement order and for some standards i.e. consent can include a fine and/or prosecution. The purpose of enforcement orders being to protect patients from harm/risk of harm and hold providers and individuals to account for failures in service provision.

RECOMMENDATION

1. The Health and Wellbeing Board Members are asked to note the content of the briefing relating to the announced inspection visit of the Care Quality Commission to North Tees and Hartlepool NHS Foundation Trust Numbered 7th -10th July 2015.

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Introduction

The NHS is under ever increasing scrutiny for the quality of services both in terms of care provision and efficiency. The focus on inspection and monitoring having escalated significantly since the publication of the report by Sir Robert Francis of the public enquiry into healthcare provision within Mid Staffordshire. This was followed by the Berwick report into improving patient safety. The role of the Care Quality Commission (CQC) is to inspect health and social care settings which includes acute and community services. The inspections which are based on defined national standards are rigorous and the impact of the outcomes far reaching. The CQC review provider services in relation to the five key domains which assess whether services are:

1. Safe
2. Caring
3. Effective
4. Responsive to people's needs
5. Well Led

The aim of the inspection is to have a broader and richer understanding of the quality of services provided and to allow consideration of the leadership and governance within organisations.

On completion of the inspection a report will be written and the organisation will be rated against each of the five domains individually and an overarching rating will then be applied. The ratings are;

- Outstanding
- Good
- Requires Improvement
- Inadequate
- Poor

Fundamental Standards

As of 1 April 2015, organisations will be measured against fundamental standards as set down within the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. The new standards will supersede the essential standards which were the basis of inspections to date and which Sir Robert Francis described as being insufficiently focused and recommended should be redrawn. There are 12 fundamental standards each of which has key lines of enquiry to support assessment by the CQC.

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3. Need for Consent
4. Safe Care and treatment
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Pre Inspection

The organisation is currently preparing for the visit with an identified project board and a lead with overall responsibility for project managing the preparation, inspection visit and post visit outcomes and actions.

Preparation will include mock inspections of clinical areas, implementation of a communication strategy to ensure all staff are aware of the visit and their responsibilities, focus groups, workshops and gathering and submission of required documentary evidence.

Inspection Visit

North Tees and Hartlepool NHS Foundation Trust acute and integrated care services will be inspected on 7th-10th July 2015. The inspection team will be led by a chair and will consist of clinical experts, experts by experience/patient and public representatives, CQC inspectors and managers.

The methodology utilised will include

- Announced visit
- Speaking to service users
- Focus groups with staff and service users/key stakeholders
- Observing care
- Staff interviews
- Review of records, policies and documents
- Inspection of the care environments
- Unannounced visits

The organisation will be expected to undertake a self-assessment against each domain and assess where they believe the organisation is in terms of an overall rating which is presented to the inspection team.

Health and Wellbeing Board members will be invited to a focus group led by the CQC to discuss the working relationship with the organisation and to share any good practice.

Inspection visit

The inspection visit will be managed by the Director of Nursing, Quality and Patient Safety supported by the project board and project team.

Post inspection

Post inspection outcomes and review will be managed via the project Board and project team.

Legal Implications/Risk

Breaches of any of the standards may result in a regulatory enforcement order and for some standards i.e. consent can include a fine and/or prosecution. The purpose of enforcement orders being to protect patients from harm/risk of harm and hold providers and individuals to account for failures in service provision.

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