

Trust Board – 28th March 2023

Care Quality Commission Update

Purpose of the report

This report provides assurance on our compliance with the CQC fundamental standards and an overview of current inspection activities. The Trust continues to prioritise quality improvement, patient care and compliance with the Care Quality Commission (CQC) fundamental standards in all care delivery.

Analysis of the issue

CQC Inspection Activity

The CQC will continue to prioritise inspections based on services where there is evidence of risk or harm to patients.

Alongside the inspections carried out on risk-based activity, they will also undertake ongoing monitoring of services offering support to providers to ensure that patients receive safe care.

Key inspection activity within LPT relates to:

1. Sustaining the May/June/July 2021 and February 2022 improvement action plans.
2. Participation in CQC Mental Health Act inspections.
3. Participation in external quality service reviews and commissioner inspections

Scrutiny and Governance

The continued governance arrangements for the CQC assurance action plan are detailed below:

- Ongoing monthly meetings with key nominated leads from the directorates and the Quality Compliance and Regulation team, to update evidence of embeddedness and sustained governance and oversight.

Action Plan Summary

1. All 'must do' and 'should do' actions from the May/June/July 2021 and February 2022 inspections have been completed.
2. Estates and Facilities work in relation to dormitories remains on track.
3. Trust wide learning from the inspection is shared through various forums and communications bulletins.

Mental Health Act Inspections

Since January 2023 there has been one Mental Health Act inspection carried out on:

- Gwendolen ward.

The trust has now received the report for the inspection and the ward has an individual action plan to address areas of concern.

Themes and commonalities from the recent reports have been shared at the Foundations for Great Patient Care meeting and Service Ward Sister / Charge Nurse meetings to focus the learning from the inspection findings.

External Visits

Since January 2023, colleagues from the Integrated Care Board (ICB) have visited:

- Thornton ward
- Agnes Unit
- Welford ward

The University of Leicester Medical School undertook a visit to review the undergraduate medical education provision as part of an annual quality monitoring cycle in January 2023. Feedback back confirmed that LPT will continue to provide and partner with the University to train future doctors.

NHS England visited the wards at the Evington Centre on the 7th March 2023 to review progress on the dormitory elimination programme.

On the 9th March 2023 a Quality Network for Eating Disorders visit was undertaken on Welford (ED) ward. This was an initial visit, whereby they assessed if the service meets the required standards, identifying any areas of improvement, which will be reviewed within 6 months, with the plan of being accredited. At this the trust awaits the final report.

Quality Visits

Since January 2023, there has been nine Quality Visits carried out by the Quality Compliance and Regulation team on:

- Thornton ward
- Aston ward
- Ward 1 St Lukes Hospital
- Ward 3 St Lukes Hospital
- Watermead ward
- Arran ward
- Skye ward
- Sycamore ward
- Cedar ward

Feedback was provided to the ward following the visit in the new style of a huddle and each ward is acting on the information provided.

Valuing High Standards Accreditation (VHSA) – Self Assessment

The newly designed self-assessment tool which forms part of the VHSA approach launched in January 2023 with Families, Young People and Childrens Services and Learning Disabilities Services, and Community Health Services now using the tool.

The Directorate for Mental Health and Enabling Services are to implement the tool over the forthcoming months.

Through self-assessment it is planned that staff will have a greater understanding of where their evidence and hard work sits within the trusts STEP up to GREAT ambitions and will be able to articulate their achievements internally, with partners or regulators.

It is planned that service users, patients and carers will partner with us, creating more opportunities for collaborative work and towards lived experience leadership of the programme.

Potential Risks

None

Decision required

For information.

Governance table

For Board and Board Committees: Paper sponsored by:	Public Trust Board 28 th March 2023	
	Anne Scott, Executive Director of Nursing, AHP's and Quality	
Paper authored by:	Jane Gourley Head of Quality, Compliance and Regulation	
Date submitted:	14 th March 2023	
State which Board Committee or other forum within the Trust's governance structure, if any, have previously considered the report/this issue and the date of the relevant meeting(s):	N/A	
If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/ partially assured / not assured:		
State whether this is a 'one off' report or, if not, when an update report will be provided for the purposes of corporate Agenda planning	Monthly reports to Board	
STEP up to GREAT strategic alignment*:	High Standards	Yes
	Transformation	Yes
	Environments	Yes
	Patient Involvement	Yes
	Well Governed	Yes
	Reaching Out	Yes
	Equality, Leadership, Culture	Yes
	Access to Services	Yes
	Trust wide Quality Improvement	Yes
Organisational Risk Register considerations:	List risk number and title of risk	N/A
Is the decision required consistent with LPT's risk appetite:	Yes	
False and misleading information (FOMI) considerations:	None	
Positive confirmation that the content does not risk the safety of patients or the public	Confirmed	
Equality considerations:	Yes	