

REPORT TO: Health Policy & Performance Board

DATE: 7 January 2014

REPORTING OFFICER: Strategic Director, Communities

PORTFOLIO: Health and Wellbeing

SUBJECT: Care Quality Commission's Inspection of Mental Health Hospitals and Community Services.

WARD(S) Borough-wide

1.0 PURPOSE OF THE REPORT

1.1 To present the Board with a brief overview of the Care Quality Commission's (CQC) new inspection regime for mental health hospitals and community services and as part of this process seek feedback from the Board in relation to Bridgewater Community Healthcare NHS Trust.

2.0 RECOMMENDATION: That the Board:

- i) **Note the contents of the report; and**
- ii) **Provide feedback on the services etc. provided by Bridgewater Community Healthcare NHS Trust as part of the CQC inspection process.**

3.0 SUPPORTING INFORMATION

3.1 CQC is currently undertaking a radical review of how they inspect mental health hospital and community services. The new inspections will involve significantly larger inspection teams which will include clinical and other experts, and trained members of the public. The teams will spend longer inspecting hospitals and community locations that deliver mental health services.

3.2 The teams will examine key service areas and others if necessary, for example: acute admission wards; psychiatric intensive care units and health based places of safety; long stay, forensic and secure services; in patient and community services; child and adolescent mental health services (CAMHS); services for older people; inpatient and community settings; in patient services for people with learning disabilities and health related community learning disabilities services; adult community based services; eating disorder and community based crisis services.

3.3 CQC will make better use of information and evidence, using new surveillance indicators and information from partners to guide their teams on where and what to inspect.

CQC's new approach will aim to answer five key questions about an organisation:

- Is it safe?
- Is it effective?

- Is it caring?
- Is it responsive to people's needs?
- Is it well led?

Each inspection will provide the public with a clear picture of the quality of care, exposing poor and mediocre care and highlighting good care; hospitals will be rated as outstanding; good; require improvement; or inadequate.

3.4 A crucial part of development on the new inspection regime is the first wave of inspections CQC will be undertaking between January and March 2014 to test their new approach in Mental Health and Community NHS Trusts. Nine trusts have been chosen in this first wave, including Bridgewater Community Healthcare NHS Trust.

3.5 CQC have requested feedback about Bridgewater in advance of their inspection. Bridgewater's inspection is due to commence on 3 February 2014.

3.6 CQC have asked for feedback which is relevant to the quality of care provided at Bridgewater and any of the services it provides. This includes evidence of high-quality care as well as concerns identified. CQC would like to receive evidence that is held which relates to:

- the systems, environment or services in these trusts;
- feedback from people who use services in any form, including complaints information;
- any scrutiny activity you have completed or plan in these trusts; and
- your experiences of working with these trusts.

3.7 In the period before the inspection, the inspection team will make contact with the local scrutiny committees covering Bridgewater to discuss any information that is held.

3.8 The feedback provided will be considered before the inspection to help identify any current issues or concerns, and any additional services which CQC may look at during their inspection of the trust. They will not publish the information that is sent unless they discuss it with the Board first.

3.9 After each inspection is complete, the Chair of the inspection team will hold a quality summit with the trust and local partners to share the inspection findings and to focus on next steps where action is needed.

4.0 **POLICY IMPLICATIONS**

4.1 None identified at this stage.

5.0 **OTHER/FINANCIAL IMPLICATIONS**

5.1 None identified at this stage.

6.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

6.1 **Children & Young People in Halton**

None identified at this stage.

- 6.2 **Employment, Learning & Skills in Halton**
None identified at this stage.
- 6.3 **A Healthy Halton**
The remit of the Health Policy and Performance Board is directly linked to this priority.
- 6.4 **A Safer Halton**
None identified at this stage.
- 6.5 **Halton's Urban Renewal**
None identified at this stage.
- 7.0 **RISK ANALYSIS**
- 7.1 None identified at this stage.
- 8.0 **EQUALITY AND DIVERSITY ISSUES**
- 8.1 None identified at this stage.
- 9.0 **LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF
THE LOCAL GOVERNMENT ACT 1972**
- 9.1 None under the meaning of the Act.