

SOLENT NHS TRUST Report

Committee: Southampton Health Overview and Scrutiny Panel

Date: 25 April 2019

Title: Regulatory Update and ratings after a comprehensive Care Quality Commission inspection of 8 core services, and a Well-Led inspection in October and November 2018

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1. Purpose of Report

1.1. The report below describes the circumstance and summary outcome of the 2018 Care Quality Commission regulatory inspections of Solent NHS Trust

2. Contextual Information

2.1. Solent NHS Trust underwent a comprehensive core services inspection of all 15 core services in June 2016. The overall rating at that time was Requires Improvement with the MH/LD service given an outstanding rating. In October and November 2018, we welcomed back the Care Quality Commission to undertake a core services inspection of all services that previously had a 2016 Requires Improvement rating, followed by the Board level inspection in November 2018.

2.2 2018 Inspection Update

The Care Quality Commission (CQC) undertook an inspection of eight core services at Solent NHS Trust. These were:

- 1. Community Adults*
- 2. Children and Families*
- 3. GP/Primary Care @ Adelaide HC*
- 4. MH/PICU*
- 5. MH/OPMH/Ward*
- 6. MH/OPMH/Community*
- 7. MH/Rehab IPU*
- 8. MH/Crisis/S136*

In early November 2018, they returned to undertake the well led inspection of the Trust. This involved 31 interviews, mainly of the Board and senior leadership teams, plus two focus groups over a 2 ½ day period.

Both these inspections were announced, and no NHSI “Use of Resources” inspection was deemed required at this time.

On December 19 2018, the draft reports and factual accuracy form was received. The highly positive draft report gave an initial overall Trust rating of ‘Good’ with some outstanding practice noted within the Well Led report. Every single core service was rated Good or Outstanding overall.

We were issued with one Requirement Notice for a breach of Regulation 12(2)(g): the proper and safe management of medicines. This was in one small, discrete location only ie not system-wide.

We were advised of 36 areas of minor breaches of regulations; these areas of improvement are spread across Trust-wide and service lines for action. While “should do’s” are non-mandated, they positively influence Trusts to deliver best practice, and the time frame for these improvements is usually set as approximately 6-12 months, except where significant embedding is required

A full executive review of the factual accuracy took place, and this did result in a positive change to the ratings.

On February 26 2019, the final report was published, giving the Older People Mental Health (OPMH) in-patient unit an elevated rating of Outstanding for Caring. This had the added benefit of raising the whole Trust rating to Outstanding in caring, which is an excellent and well-deserved recognition of our exceptional care.

Our 2019 Comprehensive ratings table is displayed below.

The Requirement Notice for Medicines Management in PICU is listed as Appendix One.

3. Progress and next actions

3.1 The Trust have returned a short but comprehensive action plan addressing the regulatory requirements of Regulation 12(2)(g) Medicines management. The actions are already well underway, and will be tracked through service-level governance, and for reviewed by Board at the Assurance Committee. Learning from this single location will be disseminated Trust-wide for maximal effectiveness.

4. Commissioner support and involvement in next stages

4.1 Commissioners from both cities have received copies of the report and attended Assurance Committee on 21 March, giving them the opportunity to discuss any points of interest.

5. Conclusion

5.1 *The Committee is asked to accept this report, and note the improvements in the period 2016-2018.*

APPENDIX ONE



	Safe	Effective	Caring	Responsive	Well led	Overall
Community mental health services with learning disabilities or autism	Good	Outstanding ☆	Outstanding ☆	Outstanding ☆	Outstanding ☆	Outstanding ☆
Mental health crisis services and health-based places of safety	Good	Good	Good	Good	Good	Good
Community health services for adults	Good	Good	Good	Good	Good	Good
Community-based mental health services for older people	Good	Good	Good	Good	Good	Good
Community health services for children, young people and families	Good	Good	Good	Good	Good	Good
Acute wards for adults of working age and psychiatric intensive care units	Requires improvement	Good	Good	Good	Good	Good
Wards for older people with mental health problems	Good	Good	Outstanding ☆	Good	Good	Good
Long stay or rehabilitation mental health wards for working age adults	Good	Good	Good	Good	Good	Good
Substance misuse services	Good	Good	Good	Good	Good	Good
Specialist community mental health services for children and young people	Good	Good	Outstanding ☆	Requires improvement	Good	Good