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Overview and Scrutiny
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Dear Councillor

**HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE -
FRIDAY, 11TH MARCH, 2016**

I am now able to enclose, for consideration at next Friday, 11th March, 2016 meeting of the Health and Adult Social Care Overview and Scrutiny Committee, the following reports that were unavailable when the agenda was printed.

Agenda No Item 6

East Cheshire NHS Trust response following CQC Report (Pages 1 - 4)

Report of East Cheshire NHS Trust Chief Executive

To consider a presentation from East Cheshire NHS Trust regarding the CQC's Inspection Report of May 2015 and how the Trust has responded to the actions recommended in the report.

Yours sincerely

Democratic Services Officer

Encs

Health and Adult Social Care Overview and Scrutiny Committee -

11th March 2016

Care Quality Commission Report on East Cheshire NHS Trust

1. Purpose

- 1.1 This paper is intended to give the Scrutiny Committee a brief summary of the position as seen by East Cheshire Trust and to give assurance that the care provided by the trust to the residents of East Cheshire are safe.
- 1.2 It is intended to stimulate discussion at the meeting at which the trust CEO will be present.

2. Background

- 2.1 As part of its national inspection programme the Care Quality Commission (CQC) visited the trust over 3 days in December 2014. In line with CQC practice, an unannounced visit was also undertaken within 5 days of the full inspection.
- 2.2 Circa 45 inspectors visited the trust and viewed services in the hospital and in community settings including observing care given to patients in their own homes. The inspection covered 5 domains and gives an overall rating. The 5 domains are:
 - Safe
 - Effective
 - Caring
 - Responsive
 - Well Led
- 2.3 The CQC has a four point rating system and the four overall ratings are:
 - Outstanding
 - Good
 - Requires Improvement
 - Inadequate

3. Findings

- 3.1 The report concluded that the trust be rated overall as “requires improvement”.

3.2 The assessment matrix had 59 indicators and the trust was rated as follows:

Area	Rating	%
33	Good	56
23	Requires Improvement	39
3	Inadequate	5

- 3.3 In the caring domain the trust was rated “good” in every area both in the hospital setting as well as out of hospital care and there were many positive statements made by the patients the inspectors spoke with.
- 3.4 The report highlighted a number of areas of good practice and there was a view that the trust was a few small steps away from achieving an overall good rating.
- 3.5 The trust was clearly disappointed by the overall assessment however, there was no defensiveness about the report and the findings were presented to over 400 staff by the CEO in face-to-face briefings over the 3 days before publication.
- 3.6 The trust has been open with the CQC throughout the process and sees this as an opportunity to improve services it provides. The CQC were complimentary about the speed with which the trust reacted to their main concerns.
- 3.7 Improvements were made in specific areas between the inspection and the publication of the report and action plans put in place to address the concerns raised.
- 3.8 The Director of Nursing, Performance and Quality and the Director of Corporate Affairs and Governance led the development of the action plan and are accountable to the Board for its delivery. The action plans are overseen by the Trust Development Authority (TDA) as the regulator of East Cheshire but the trust also involved the Clinical Commissioning Groups in the development of the action plans and they are also involved in overseeing their implementation.

4. Actions Taken

4.1 The outcome of the action plans are summarised below:

- The trust was already actively recruiting District Nurses as it was aware the level of vacancies was placing pressure on the staff and the delivery of the service. This focus continued as part of the action plan and the District Nursing teams were fully established a short time after the report was published;
- The trust strengthened its monitoring of environmental cleanliness using, where necessary, the contractual levers it has with its external provider;
- Introduced further auditing of case records and storage of medical records when not within the central records library;

- Raised awareness of incident reporting processes across the trust as, whilst the level of reporting at trust level was good, there were certain areas where the processes were not well established. In addition, feedback reports are now provided to those staff who raise the concerns;
- Reprioritised capital expenditure to address estates maintenance and upgrading of the working environment; and
- Increased the level of and focus on staff training around the Mental Capacity Act and Deprivation of Liberty regulations to ensure consistency across all areas of the trust.

5. Current Position of the Trust

- 5.1 In line with many Trusts across the country East Cheshire has a financial problem in the current year however the Board are clear that patient safety will not be compromised whilst the financial situation is addressed.
- 5.2 Quality and safety of the trust is assessed in many ways and is overseen by the Trust Board and the Safety Quality and Standards sub-committee of the Board. Some of the indicators are noted below:
- The trust has a good mortality rate with comparative performance on a number of indicators;
 - Infection control at the trust is good with 1 MRSA Bacteraemia in the 10 months of the current financial year and 22 *Clostridium difficile* cases, the vast majority of which were unavoidable (as agreed by external oversight);
 - The trust has demonstrated sustained performance against the “NHS Safety Thermometer”, a range of indicators approved nationally;
 - For the 10 months of the current financial year the trust has delivered all the cancer waiting time standards;
 - The trust has not achieved the 4 hour standard for patients attending the Emergency Department however this is a problem being experienced across the NHS at the present time. The position of the trust compares well with neighbouring organisations however the level of delays in discharging patients remains a challenge for the trust and its health and social care partners;
 - The trust undertakes the NHS Family and Friends test on an ongoing basis and has 96% positive response rate on wards and 90% within the emergency Department;
 - The trust is a comparative high reporter of incidents, the majority of which are low or no harm, demonstrating an open safety culture; and
 - The recent NHS Staff Survey results have demonstrated an improving staff engagement score for the third year running.

6. Next Steps

- 6.1 The CQC will return to the trust within the current calendar year to undertake a further inspection at a date which is to be agreed between the trust and the CQC. The Inspection process is very detailed however the trust is confident that the changes it has put in place together with the continued dedication of staff will result in a “good” rating for the trust.

7. Summary

- 7.1 The Trust Board and members of staff were disappointed with the overall rating given to the trust however were pleased with the good rating for care given across all settings and the acknowledgement of areas of outstanding care delivery.
- 7.2 The trust has been open in its response to the report as it wishes to ensure that it learns from the areas identified to further improve the care given to patients.
- 7.3 The trust believes it has taken steps to improve services for patients and to improve internal processes to evidence these improvements.

John Wilbraham
Chief Executive
East Cheshire NHS Trust