


Agenda Item 7

		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE	
Boston Borough Council	East Lindsey District Council	City of Lincoln Council	Lincolnshire County Council
North Kesteven District Council	South Holland District Council	South Kesteven District Council	West Lindsey District Council

Open Report on behalf of Lincolnshire Partnership NHS Foundation Trust

Report to	Health Scrutiny Committee for Lincolnshire
Date:	29 July 2016
Subject:	Lincolnshire Partnership NHS Foundation Trust – Response to the Care Quality Commission Comprehensive Inspection

Summary:

The purpose of this report is to provide the Health Scrutiny Committee for Lincolnshire with assurance that Lincolnshire Partnership NHS Foundation Trust (LPFT) is making progress with implementation of the action plan arising from the Care Quality Commission (CQC) Comprehensive Inspection, which took place between 30 November and 4 December 2015.

Actions Required:

- (1) The Committee is asked to note progress on implementing the action plan arising from the Care Quality Commission's comprehensive inspection and the process by which the plan is monitored.
- (2) To comment as necessary on the content of the report.

1. Background

The Care Quality Commission (CQC) inspected eleven service areas of Lincolnshire Partnership NHS Foundation Trust (LPFT) and on 23 April 2016 published a detailed report for each along with an overall provider report. Copies of the CQC reports are available on the Trust website and the ratings given to services by the CQC are displayed across the

service areas so that patients, carers and visitors can see the results. A summary of the outcomes is attached at Appendix A.

Overall the organisation was rated "Requires Improvement" with a "Good" rating for caring in all services inspected and an "Outstanding" rating for community based Child and Adolescent Mental Health Services. The rating for "safe" was "Inadequate", due to concerns from the CQC about Mixed Sex Accommodation and Points of Ligature.

Action Plan

Following publication of the CQC Report on 23 April 2016, LPFT was required to submit an action plan covering the five CQC domains and to address the issues raised in the reports. This plan was submitted to the CQC in early June 2016 in line with the CQC deadline.

This is a key plan for the organisation as it moves forward with learning from the inspection. A copy of the action plan was considered by the Board of Directors of LPFT on 30 June 2016, in public session, and is available at the website address: www.lpft.nhs.uk.

In terms of the development of the action plan, immediately following the inspection, a plan was in place to address the initial feedback given by the CQC during the inspection visit. This included Mixed Sex Accommodation breaches and Points of Ligature where action was taken to make immediate changes to both. This secured patient safety immediately. An example of this was putting up a safety fence at the Ash Villa Unit given the outside space was one where there were trees and other possible points of ligature.

The action plan was then updated following the publication of the CQC reports and the latest version of the action plan includes all of the immediate "must do" and "should do" actions identified as a result of the inspection provider report as well as individual service area actions required in the provider reports. The action plan also includes progress on the well led domain.

In total there are approximately 100 actions in the action plan – each has an accountable person along with the evidence of progress being made and the key milestones for each action.

The CQC Action Plan forms a part of the overall Quality Improvement Plan, which is in place for the organisation and includes the wider transformational activities that the services are taking forward through initiatives to improve care for patients, staff satisfaction and wider Lincolnshire developments.

Monitoring the Plan

The action plan describes the accountable and responsible officers along with the actions to be taken and timescales. Assurance and evidence columns are populated with hyperlinks through to documentation (which will be stored on the LPFT intranet site for staff and audit access).

A review and reporting process is in place and further reports on progress will be available monthly. Where evidence is photographic, for example a stair rail, a dated image will be stored as the evidence.

A diagram describing how the action plan will be monitored internally to LPFT is attached as Appendix B.

Internal monitoring of the plan is led by the LPFT Director of Operations, who is the executive sponsor, liaising on a regular basis with Clinical Division leaders and through the internal Operations Governance meetings.

The pulling together of factual evidence of progress is through the Compliance Team, who will produce reports to the Quality Committee for scrutiny at each meeting.

The Chief Executive has further oversight of progress through regular updates to the Executive Team and assurance is given to the Trust Board of Directors via the scrutiny of the action plan performed by the Quality Committee.

A quarterly meeting is being established with NHS Improvement and NHS England/Clinical Commissioning Group colleagues to ensure that there is one process for advising stakeholders on progress with the action plan.

Quality Summit and feedback on the action plan

Following feedback from the Quality Summit and in addition from NHS Improvement on the action plan, the following work is being undertaken to strengthen it further: -

- Incorporation of the CQC well led key line of enquiry into the action plan (complete);
- Completion of the Assurance and Evidence columns (will be complete end of July 2016);
- Description of the monitoring process (complete); and
- Consideration, by the Board of Directors, of the Well Led Domain.

Risks

Identification of risks to delivery will be included in the Clinical Divisional Risk Registers and escalated to the Operational Risk Register according to the established system of recording and reporting risk and mitigation. Risks to delivery are described and monitored as part of the Trust Board Assurance Framework on a monthly basis.

Assurance and oversight

Assurance on progress is overseen by the Health Scrutiny Committee for Lincolnshire, NHS Improvement, NHS England, South West Lincolnshire Clinical Commissioning Group through regular contact and quarterly meetings.

LPFT teams have made good progress including on addressing the areas of concern relating to the SAFE domain of the CQC inspection.

The main areas of concern about SAFE related to patients on wards in mixed gender areas (mixed sex accommodation breaches at Ash Villa, Sleaford (inpatient child and adolescent unit) and Peter Hodgkinson Centre, Lincoln (inpatient acute mental health wards) and on points of ligature that may be used by patients to harm themselves (either removed or the risk associated with them assessed and managed).

The point of ligature concerns related to some points of ligature inside some of the LPFT patient building areas (inpatient and rehabilitation services) and possible points of ligature in outside/external areas in the immediate surrounding areas of buildings that patients have access to.

The latest report on progress to the Trust Board (30 June 2016) confirmed, for the “must do” areas of the CQC report that relate to the organisation as a whole (and that relate to mixed sex accommodation and points of ligature specifically) are ON TRACK with areas of concern about progress clearly highlighted and action being taken, through named individuals, to address them.

On Mixed Sex Accommodation and Points of Ligature, the Director of Nursing and Quality and the Director of Operations respectively lead task and finish groups to review safety, privacy and dignity along with best practice relating to these important patient issues.

The Trust implemented a smoke free policy on 28 June 2016, which will also allow existing outside spaces that were used for patients to smoke to be improved and upgraded.

2. Conclusion

As a learning organisation, LPFT welcomes the feedback given by the CQC as part of the inspection and is making progress on the areas identified in the CQC inspection. The Board of Directors has a clear line of sight, through the action plan, on continued progress and will update the Health Scrutiny Committee on a regular basis as required.

3. Consultation

There are no issues of public consultation arising from this report.

4. Appendices

These are listed below and attached at the back of the report	
Appendix A	Summary of the CQC ratings for LPFT in the Comprehensive Inspection
Appendix B	Flow chart of the internal LPFT monitoring process

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by Jane Marshall, Director of Strategy and Performance at Lincolnshire Partnership NHS Foundation Trust, who can be contacted on 01529 222244 or jane.marshall@lpft.nhs.uk