

London Borough of Hammersmith & Fulham

HEALTH, ADULT SOCIAL CARE & SOCIAL INCLUSION POLICY & ACCOUNTABILITY

4 NOVEMBER 2015



CLCH response to the CQC inspection findings following a comprehensive inspection between 7 and 10 April 2015

Report of: Central London Community Healthcare NHS Trust

Open Report

Classification - For Policy & Accountability Review & Comment

Key Decision: No

Wards Affected: All

Accountable Executive Director: Louise Ashley, Chief Nurse & Director of Quality Governance

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1. EXECUTIVE SUMMARY

1.1 This paper presents the CLCH CQC rating and associated action plans.

2. RECOMMENDATIONS

2.1. To note the report and seek clarification if required.

3. REASONS FOR DECISION

NA

4. INTRODUCTION AND BACKGROUND

4.1. To provide information on the CQC comprehensive assessment of Central London Community Health Care NHS Trust and subsequent action plan submitted by the Trust to the CQC.

4.2. The Trust was rated **Good**.

	SAFE	EFFECTIVE	CARING	RESPONSIVE	WELL-LED	OVERALL
Community health services for adults	Good	Good	Good	Good	Good	Good
Community health services for children, younger people and families	Requires Improvement	Good	Good	Good	Good	Good
Community health inpatient services	Good	Good	Good	Good	Good	Good
End of life care	Requires Improvement	Requires Improvement	Good	Good	Requires Improvement	Requires Improvement
Community dental services	Good	Good	Good	Good	Good	Good
Urgent Care centres	Good	Good	Good	Good	Good	Good
Overall	Requires Improvement	Good	Good	Good	Good	Good

5. PROPOSAL AND ISSUES

5.1 Overall, as a Trust, we found the inspection process exciting and informative

5.2 Staff welcomed the opportunity to showcase their services

5.3 We have welcomed the reports and the positive and constructive way in which they were presented

5.4 We are pleased with our overall rating of 'Good' and feel it accurately reflects the standard of our services

5.5 CQC findings

Good and Outstanding Practice to be replicated across the Trust

- The **tissue viability** service had developed innovative practice and had taken part in international research and the development of NICE guidance
- The **nutrition and dietetics** service provided excellent, patient centred care based on leading and setting standards in dietetics and nutrition including NICE guidance development and facilities for patients. The service participated in international research and publication

In adult services:

- The service responded proactively to reported incidences of pressure ulcers through training, communication and distribution of resource packs to residential home staff
- Multi-disciplinary, patient centred care was evident and involved a range of specialist staff involved in joint visits to the patient. External partners included GPs, housing and social services, police, the prison service and mental health
- The turnaround work undertaken on **Jade Ward** was noted to have effected significant improvements in delivery of care

Areas for Improvement

- End of Life Care services were caring and responsive although required improvement to safe, effective and well-led domains
- Children's services were caring, effective, responsive and well-led although required improvement in the safe domain
- Recruitment and retention of staff across a number of areas

5.6 Next steps

- Action plans implemented by the local operations teams. Progress is reported to the CQC Compliance group, monthly, which internally feeds into Quality Committee and Board, and externally into the Clinical Quality Groups, chaired by the commissioners
- Work closely with commissioners and TDA if external support/influence is needed
- Request review of end of life care changes
- Continue internal Quality Inspection Team visits to ensure continue compliance and improvement as we aspire towards a rating of outstanding.
- External peer review of End of Life care

6. OPTIONS AND ANALYSIS OF OPTIONS

NA

7. CONSULTATION

NA

8. EQUALITY IMPLICATIONS

NA

9. LEGAL IMPLICATIONS

NA

10. FINANCIAL AND RESOURCES IMPLICATIONS

NA

11. IMPLICATIONS FOR BUSINESS

NA

12. RISK MANAGEMENT

NA

13. PROCUREMENT AND IT STRATEGY IMPLICATIONS

NA

LOCAL GOVERNMENT ACT 2000
LIST OF BACKGROUND PAPERS USED IN PREPARING THIS REPORT

No.	Description of Background Papers	Name/Ext of holder of file/copy	Department/ Location
1.	None		

LIST OF APPENDICES:

Appendix #1 - CQC Action Plans (x 10)