| London Borough of Hammersmith \& Fulham |
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| HEALTH, ADULT SOCIAL CARE AND SOCIAL INCLUSION <br> POLICY AND ACCOUNTABILITY COMMITTEE <br> 4 November 2015 |
| TITLE OF REPORT: <br> West London Mental Health NHS Trust CQC Quality Improvement Update |
| Report of West London Mental Health Trust |
| Open Report |
| Classification - For Scrutiny Review \& Comment <br> Key Decision: No |
| Wards Affected: All <br> Accountable Executive Director: Beverley Murphy, Director of Nursing and Patient <br> Experience <br> Report Author: <br> Vanessa Ford, Director of Nursing Standards and <br> Governance <br> Ania Becla, CQC Business Support ManagerContact Details: <br> Vanessa.ford@wlmht.nhs <br> un |

## 1. EXECUTIVE SUMMARY

1.1. The Care Quality Commission (CQC) undertook an inspection of West London Mental Health Trust services week commencing 8th June 2015 as part of their comprehensive mental health inspection programme. Visits took place in and outside of office hours by a team of 75 inspectors.
1.2. Following the Quality Summit on 15th September 2015, the CQC published the trust's full inspection report, which rated West London Mental Health NHS Trust as 'requires improvement' with 12 regulatory requirements.
1.3. In response to the CQC's findings and recommendations, the trust developed a full quality improvement plan with the engagement of front line staff, senior clinicians and leaders, and the support of key stakeholders. Following agreement through local SMT structures and approval by the Board on $9^{\text {th }}$ September 2015, the quality improvement plan was submitted to the CQC and key stake-holders on Friday $25^{\text {th }}$ September 2015.

## 2. RECOMMENDATIONS

2.1 This report is received at the request of the Health, Adult Social Care and Social Inclusion Policy and Accountability Committee.
2.2 A need for Health and Social Care support with focus on local services transformation for mental health provision.

## 3. INTRODUCTION AND BACKGROUND

3.1. Within the quality improvement plan, the main actions fall into the following areas, with the overarching commitment of the trust to quality improvement methodologies and staff engagement:
$\checkmark$ Right People, Right Skills, Right Place.
$\checkmark$ "The New Broadmoor".
$\checkmark$ Restrictive Practice.
$\checkmark$ Local Services Transformation.
$\checkmark$ West London Forensic Service Improvement.
$\checkmark$ Strengthen Governance e.g. monitoring ligature anchor point risks and learning from complaints.
3.2 All of the above fall into one of four categories:

- Actions at a team level which require no investment and are within the team's ability to complete.
- Action requiring trust wide improvement with no required investment and are within the Trust's ability to complete.
- Actions requiring complex trust wide investment and/ or high level of staff input
- Actions requiring complex Trust investment and multi-agency support e.g. local services transformation, staffing level (Creating a flexible workforce).
3.3 Appendix 2 "CQC Quality Improvement Board Presentation" contains a summary presentation outlining all "must" and"should" do actions, alongside predicted dates for compliance with regulatory actions.
3.4 Appendix 3 provides a summary of the trust's response to the CQC inspection.
3.5 Appendix 4 "CQC Quality Summit Presentation" and Appendix 5 outline the trust's full response to the CQC's findings, including actions which have already been taken as well as those that are on-going as part of the trust's quality improvement plan.
3.5 Appendix
3.6 Appendix 6 "Transforming Local Services Newsletter" and Appendix 7 provides an update regarding the trust's two year local services transformation programme.


## 4. LEGAL IMPLICATIONS

4.1. $\quad$ The CQC is a regulatory body and as such works within a legal framework for providers of mental health services. Any legal regulatory action would be taken up with West London mental Health trust rather than directly with any other key stakeholder. It is not anticipated that the CQC will proceed with any legal action.
5. FINANCIAL AND RESOURCES IMPLICATIONS
5.1. An initial analysis of the financial implications of the CQC inspection and the subsequent Quality Improvement Plan implementation is being completed.

## 6. RISK MANAGEMENT

6.1. The Board Assurance Framework (BAF) risk related to the CQC report is provided below:

| Risk no. | Strat. aim | Risk description |  | Justification |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 7838 | SA3 To become the provider of choice | Failure to implement the 12 regulatory requirements placed upon the Trust following the CIH inspection in June 2015, thus not improving the rating of inadequate for Adult Acute wards and PICU under the Safety domain and Forensic services under the Safety and Well Led domains, will impact on the Trusts reputation and delay the application for FT. | $3 \times 4$ | Risk of not improving the rating of inadequate under the safety and well led domains and implement the QIP. | Quality Committee | Beverley Murphy | $\begin{gathered} \text { Oct } \\ 2015 \end{gathered}$ |

### 6.2 The quality and reputational risks are being considered.

## 7 List of Appendices:

| 1. WLMHT Quality Improvement Action Plan Trust wide v1.0 submitted 20150925 FINAL | 1. WLMHT Quality Improvement Action I |
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| 2. CQC Quality Improvement Board Presentation |  |
| 3. Improving Quality: Our response to the CQC inspection | 3. CQC improvement plan presentation - H |
| 4. CQC Quality Summit Presentation |  |
| 5. WLMHT Improving our services - Response from the CQC inspection | https://vimeo.com/139453660 |
| 6. Transforming Local Services Newsletter |  |
| 7. Local Services Transformation: How West London Mental Health NHS Trust is planning to change services to make services more responsive to patient's needs and easier to access. | https://vimeo.com/136181442 |

