

LNWUHT HARROW OSC BRIEFING		
<b>Date of Meeting:</b> 15 <sup>th</sup> October 18		<input type="checkbox"/> <b>Overview and Scrutiny Committee</b>
<b>Item No.</b>	<b>Xx</b>	<input type="checkbox"/> Approval <input type="checkbox"/> Endorsement/Decision <input type="checkbox"/> Discussion <input type="checkbox"/> Information
<b>Board Report No.</b>	<b>Xx</b>	
<b>Subject:</b> CQC inspection: outcomes and next steps		
<b>Director Responsible:</b> Barbara Beal, Interim Chief Nurse		<b>Author:</b> Ted Nyatanga, CQC Quality Assurance Lead Barbara Beal Interim Chief Nurse
<p><b>Summary:</b></p> <p>The Care Quality Commission (CQC) undertook an announced inspection of London North West University Healthcare NHS Trust for 3 days from 5 to 7 June 2018. Scheduled inspections took place across 4 of our sites: Northwick Park, Ealing, Community Inpatients-Willesden and Clayponds and Community Dental.</p> <p>The CQC also undertook a 'Well-Led' specific inspection of the entire service from the 3 to 6 July 2018 through tours and scheduled interviews with senior managers, service leads and the Executive team.</p> <p>An unannounced inspection took place between 8 to 18 July 2018.</p> <p>As part of the inspection, the CQC spoke to patients, visitors, carers and staff (in the hospitals, in focus groups and formal interviews) to gain a view of London North West University Healthcare NHS Trust' 8 core services; Surgery, Critical care, Maternity/Gynaecology, Services for Children and Young People, Medical care, Urgent &amp; Emergency Care, Community and Community Dental Services.</p> <p>The CQC methodology seeks to rate each of these in relation to five domains:</p> <ul style="list-style-type: none"> <li>• Were services safe?</li> <li>• Were services effective?</li> <li>• Were services caring?</li> <li>• Were services responsive to people's needs?</li> <li>• Were services well led?</li> </ul>		

In the period prior to the inspection, the Trust provided large amounts of documentation to the CQC via a process called the Provider Information Return (PIR). This was followed by further Data Requests (DR) during and after inspection. A total of approximately 700 DRs were received and responded to. The CQC use this information to provide focus during their inspection and triangulate their inspection results. All responses were provided within the required deadline and the inspection ran smoothly as a result of the robust preparation and engagement with staff at all levels and the CQC commented very positively on how the Trust hosted them.

The CQC issued six potential breaches of legal requirements that the Trust had to put right in advance of the reports publication. The report was published at the end of August and the overall Trust rating remained unchanged as 'Requires Improvement' from the previous CQC 2015 inspection-see summary table below;

**Rating for acute services/acute trust**

	Safe	Effective	Caring	Responsive	Well-led	Overall
Northwick Park Hospital	Requires improvement ↔ Aug 2018	Requires improvement ↓ Aug 2018	Good ↔ Aug 2018	Requires improvement ↔ Aug 2018	Requires improvement ↓ Aug 2018	Requires improvement ↓ Aug 2018
Ealing Hospital	Inadequate ↓ Aug 2018	Requires improvement ↔ Aug 2018	Good ↔ Aug 2018	Requires improvement ↔ Aug 2018	Requires improvement ↔ Aug 2018	Requires improvement ↔ Aug 2018
Central Middlesex Hospital	Good Aug 2014	Good Aug 2014	Good Aug 2014	Good Aug 2014	Requires improvement Aug 2014	Good Aug 2014
Community Services	Good ↑ Aug 2018	Requires improvement ↔ Aug 2018	Good ↔ Aug 2018	Good ↑ Aug 2018	Good ↑ Aug 2018	Good ↑ Aug 2018
<b>Overall trust</b>	Requires improvement ↔ Aug 2018	Requires improvement ↔ Aug 2018	Good ↔ Aug 2018	Requires improvement ↔ Aug 2018	Requires improvement ↓ Aug 2018	Requires improvement ↓ Aug 2018

Ratings for the trust are from combining ratings for hospitals. Our decisions on overall ratings take into account the relative size of services. We use our professional judgement to reach fair and balanced ratings.

Main highlights from the report include overall ratings as follows;

- Good for the 'Caring' domain with outstanding practice identified within Surgery and Community Inpatients services
- Good for Inpatient Community Service
- Inadequate for the 'Safe' domain at the Ealing site
- Inadequate for the Maternity service at Northwick Park site

Within the final report the CQC identified 39 'MUST DOs and 72 SHOULD DOs that the Trust needs to address to comply with a minor breach that did not justify regulatory action, to prevent breaching a legal requirement, or to improve service quality. The Trust has developed an action plan in response to all of these that was submitted to the CQC by the 30<sup>th</sup>

September 2018 deadline.

The CQC will check that the Trust takes the necessary action to improve its services. They will continue to monitor the safety and quality of services through the continuing relationship with the Trust and their regular inspections.

**Active and Next Steps include:**

- Trust Action Plan submitted to the CQC on 30<sup>th</sup> September 2018
- Key stakeholders invited to the CQC Quality Summit on 6<sup>th</sup> November 18
- The Executive Team to meet monthly for oversight of progress against the CQC action plan and with the development and implementation of the Quality Improvement Programme. The new Quality and Safety Committee will provide Board oversight.
- 8 of the 31 Maternity actions to address bleep system risk and security issues, among other identified concerns, have been completed with ongoing compliance monitoring
- 3 Care Quality Improvement work streams have been established and are progressing robust actions to mitigate medicines management, documentation and clinical risk assessment practice issues supported by the NHSI intensive support team and the Chief Pharmacist
- Treatment of children in the Ealing ED has been stopped; this has been communicated and reiterated to all staff. The Paediatric care environment including transfers is being improved and monitored
- Mandatory training compliance is being accelerated through various initiatives including more face to face and online sessions and introduction of a new system by HR
- NHSI have agreed to identify and support the allocation of a 0.5 WTE Quality Improvement Director (shared with Hillingdon Hospitals NHSFT) .
- £200k has been allocated by NHSI to support the Trust with the CQC improvement programme to include: 3.0 WTE band 8a posts to support and implement sustainable changes within the divisions and across the Trust as well as the NHSI Medical Engagement Survey; these were approved at the Executive Committee on 19th September 18
- An NHSI approved Maternity Advisor has commenced support to the Trust maternity services work stream
- The Trust has appointed the first cohort of 20 quality improvement leads that is ongoing in line with the Transformation programme
- A Quality Summit is scheduled for 6th November 2018, supported by NHSI
- Ambition to move from Requires Improvement to Outstanding in next 2 years

**Recommendations**

The Oversight and Scrutiny Committee is asked to note the CQC inspection outcomes, action being undertaken and next steps