

Leicester, Leicestershire and Rutland
Joint Health Overview and Scrutiny Committee

Tuesday 15 February 2022, 12 pm

Report title: Care Quality Commission Inspection of Leicestershire Partnership NHS Trust

Report presented by: Angela Hillery, Chief Executive, Leicester Partnership NHS Trust (LPT)

Andy Williams, Chief Executive, Leicester, Leicestershire and Rutland Clinical Commissioning Groups (LLR CCGs)

Executive summary:

1. The Care Quality Commission (CQC), the NHS regulatory body, carried out a planned unannounced inspection of Leicestershire Partnership NHS Trust (LPT), between May and July 2021.
2. The CQC assess how safe, effective, caring, responsive, and well-led services are. They selected three of our 15 core services for inspection: All 3 were mental health services. Core services are the essential services Trusts provide. They also inspected our Trust against the well-led domain. The well-led domain assesses the leadership, management and governance of an organisation to make sure it's providing high-quality care, encouraging learning and innovation, and promoting an open and fair culture.
3. The outcome from the inspection included:
 - a. Improved core service ratings as the Trust no longer have any core service rated Inadequate overall.
 - b. A focus on areas where we must do more to ensure our fundamental standards are being met.
 - c. Improved the Well-led domain which has progressed from 'Inadequate' to 'Requires Improvement' with many 'Good' characteristics including significant improvements in leadership, governance and oversight of performance and risk, and an improved culture and engagement with staff and people using services.
 - d. Retained the overall rating of 'Requires Improvement' at this time and retained the 'Good' rating for 'Caring'.

Areas where we must improve

4. The CQC asked that we must make further improvements in:
 - a. Eliminating our dormitory accommodation/ensuring our ward environments do not compromise privacy and dignity
 - b. Ensuring all patients in our adult mental health wards have access to personal alarms should they need assistance

- c. The timeliness of repairs in our wards and storage of patient's personal possessions
- d. Continuing our focus on individualised care plans
- e. Greater sharing of learning from incidents
- f. Compliance with mandatory training for staff
- g. Our searching and risk management processes for patients returning from unescorted leave
- h. Environmental risk assessments in our mental health rehabilitation wards &
- i. Filling vacant roles in psychology and occupational therapy

Areas where improvement is evident

5. The CQC recognised that we have improved in a number of areas. Safety is our number one priority, so we are pleased that the CQC report has recognised "an improved safety culture" at LPT. In addition, the CQC has said that:
- a. Mental health patients have good access to physical healthcare and support to live healthier lives
 - b. Improved patient involvement in planning care and service improvements
 - c. LPT practice good infection prevention control
 - d. We have drastically reduced the number of people requiring care in Mental Health beds in hospitals outside of Leicester ('Out of area placements'). Staying closer helps families and service users to stay connected and leave hospital quicker
 - e. Improved seclusion environments, where a mental health patient is observed separately in a quiet space
 - f. Significantly improved medicines management, such as labelling and recording of medications.
 - g. Eliminated mixed sex accommodation, which ensures men and women aren't sharing facilities and therefore have better privacy and dignity
 - h. Staff manage risks better and have reduced ligature risks (ie. ways you could harm yourself) to keep our inpatients safe, an area previously highlighted for improvement.
 - i. Complaints are taken seriously, and lessons shared with staff to keep improving

Our Well-Led Inspection

6. The CQC report on our well-led domain identified:
- a. A 'strong executive team
 - b. Significant improvements to develop a strengthened vision and strategy
 - c. A positive and collaborative culture since the last inspection

- d. Strengthened governance and risk management
 - e. Strengthened strategy to Step up to Great whilst responding to a Covid pandemic
7. We are proud of this progress and **proud of our staff** for embracing step up to great, our positive staff morale and our improved positive relationships with stakeholders provide a strong platform to continue our journey of improvement.

Oversight and Governance

8. We are focussed on continuing to make improvements across our organisation. Working with the CQC we have an agreed action plan and oversight of this progress is monitored by the Executive Team, with assurance from the LPT Board. We also meet regularly with the CQC to update and review progress. We have attached the summary of our CQC action to this paper for your information.
9. CQC will revisit LPT to undertake an independent inspection to ensure that we have delivered the actions they set out that we must do.

Summary

10. We would recognise that we have made improvements and there are more improvements to made as we continue our journey to Step up to Great.
11. We would like to recognise how our staff, they have been tremendous throughout this Covid pandemic, and despite this challenging time, they have demonstrated improvements and retained our *Good* rating for Caring.