

**'You matter, we care'**

Trust Board Meeting (Part 1)	Date: 29 October 2014
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<b>Title:</b>	Response to the Care Quality Commission Warning Notices
<b>Item:</b>	BD/14/181

<b>Executive Director lead and presenter</b>	Hayley Richards, Executive Medical Director
<b>Report author(s)</b>	Sarah Jones, Acting Head of Nursing; Dr Bill Bruce-Jones, Clinical Directors, B&NES; Dr Pete Wood, Clinical Directors, Secure Services, Emma Roberts Director of Corporate Affairs

<b>History:</b>	Previous reports of progress reviews and assurance following CQC compliance actions were submitted to the Quality and Standards Committee 19 <sup>th</sup> August 2014. Quality and Standards Committee 21 <sup>st</sup> October 2014
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The following impacts have been identified and assessed in relation to this report:	
Equality	None identified.
Quality	None identified.
Privacy	None identified.

This report is for:	
Decision	
Discussion	X
To Note	

### Executive summary of key issues:

This report advises the committee on the following:

- The Trust response to the 3 Warning Notices received from the CQC in relation to Regulation 22 at Fromeside, Secure Services, and Regulation 15 at Fromeside, Secure Services and Hillview Lodge, B&NES.
- The internal assurance checks carried out by Nursing and Quality to ensure compliance with the Warning Notices.
- The locality action plans in place in B&NES and Secure Services to meet any on-going areas of non-compliance and in order to maintain those changes made.
- The Trust response to the Regulation 10 Warning Notice.

Three letters responding to the Warning Notices have been submitted to the CQC, in relation to Regulation 22 on 20<sup>th</sup> September, and in relation to Regulation 15 on 30<sup>th</sup> September. The letters highlight actions taken to by the Trust to achieve compliance with the regulations. The final letter, relating to Regulation 10 will be submitted following Board endorsement.

The internal assurance checks carried out by Nursing and Quality at Fromeside on 23<sup>rd</sup> September and at Hillview Lodge on 29<sup>th</sup> September showed that significant progress had been made but highlighted some work that still needed to be carried out. This included a previously unidentified requirement to replace a number of carpets at Fromeside.

Action plans which outline action taken, action which remains outstanding and actions to sustain compliance with the regulations have been developed and are included with this report.

The Board is invited to **consider** and **endorse** the responses to the warning notices.

### This report addresses these Strategic Priorities:

We will deliver the best care	X
We will support and develop our staff	X
We will continually improve what we do	X
We will use our resources wisely	X
We will be future focussed	X

## 1. Summary of Trust Responses to Warning Notices

### 1.1. Regulation 22, Fromeside

The Locality has undertaken significant action to address the CQC finding that the Trust had not safeguarded the health, safety and welfare of service users by taking appropriate steps to ensure that, at all times, there are sufficient numbers of suitably qualified, skilled and experienced persons employed for the purposes of carrying on the regulated activity.

The Trust response to this has included a significant recruitment drive, recruitment to leadership roles including modern matron and ward manager posts and additional support in partnership with the University of the West of England to support newly registered nurses undertaking preceptorship. The response has also included the closure of one ward, this closure has taken place with consultation with commissioners.

Centralised assurance processes in relation to safe staffing levels have included daily sit rep reports from the Fromeside Unit Co-ordinator to the Acting Director of Nursing, Safer Staffing reporting and planned Nursing and Quality assurance visit on 17<sup>th</sup> October 2014.

### 1.2. Regulation 15, Fromeside

The CQC found that the Trust had not ensured that service users and others having access to premises where a regulated activity is carried on are protected against the risks associated with unsafe or unsuitable premises. This included potential ligature points and malodorous carpets at Fromeside.

The Anti-ligature Group has met weekly since verbal feedback from the CQC highlighting non-compliance in relation to ligature points in Fromeside in June 2014. Work has already been undertaken to remove all taps and ligatures relating to sinks in en-suite and other bathroom areas across the unit. Plans are in place for a programme of work to replace windows and immediate work undertaken to minimise risk of ligature from window fittings by removal of handles. En-suite doors have been removed in all bedrooms and in most instances replaced with shower curtains attached with anti-ligature magnetic rails. Solutions for the acute wards at Fromeside have been found but not yet installed. The magnetic rails were installed but soon used as weapons and had to be removed.

An assurance visit was carried out by Nursing and Quality on 23<sup>rd</sup> September 2014. This visit found that overall work was being carried out in relation to removal of ligatures according to the plan of work; however the visit identified that a number of carpets which although they had been cleaned, the cleaning process has not been successful and the carpets remain malodorous. A programme to replace the carpets is now in place.

### 1.3. Regulation 15, Hillview Lodge

The CQC found that the Trust had not ensured that service users and others having access to the premises where a regulated activity is carried on are protected against the risks associated with unsafe or unsuitable premises. This included potential ligature points and an unsuitable ward environment at Hillview Lodge.

The Trust response to this has been to carryout a combination of significant building work to remove ligature points and to improve lines of sight and other factors within the layout of the ward, including décor and the installation of a new beverage bay. Bed numbers have been reduced in order to improve safety and the ensure privacy and

dignity in relation to eliminating mixed sex accommodation and again improving layout and safety in the ward environment.

An assurance visit was carried out by the locality triumvirate in late September which highlighted some work which remained outstanding in order to achieve compliance with the regulation and a further assurance visit carried out Nursing and Quality on 29<sup>th</sup> September 2014. This visit found that the planned works had been carried out but did also make some additional recommendations regarding further improvements to the environment and in relation to medicines management.

#### **1.4. Regulation 10 – Governance**

The Trust has provided a robust response to the concerns raised in relation to Regulation 10, and the response letter sets out action and improvement for each element. Board and Committee sightedness is referred to throughout by way of evidencing the rigour of the board governance structures. The actions identified have been built into the ongoing Board Development Action Plan, and work is ongoing with Beachcroft LLP healthcare governance advisors to ensure systems and processes are further reviewed and refined.

#### **2. On-going action planning for sustained change and processes to monitor compliance over time.**

Localities have developed plans which will allow for on-going compliance and improvement in relation to the regulations above. Further assurance visits will be programmed including the involvement of commissioners over the next 3 – 6 months.

#### **3. Conclusions**

The Board is invited to **consider and endorse** the responses to the warning notices.