

Trust Board meeting (Part 1)		Date:	24 June 2015
Agenda item	Title	Executive Director lead and presenter	Report author
BD/15/071	Achieving CQC Compliance across all Quality Domains	Mathew Page, Acting Director of Operations	Dr Rebecca Eastley CQC Programme Lead
This report is for:			
Decision			
Discussion			
To Note		X	
History			
<i>Heat Map shared with TDA</i>			
The following impacts have been identified and assessed within this report			
Equality	None identified		
Quality	Identified in action plans		
Privacy	None identified		
Executive summary of key issues			
<p>This report provides assurance to the Board on the Trust's delivery of its Quality Improvement Plan on a monthly basis.</p> <p>The report describes the June 2015 position in relation to the quality improvement work, and provides exception reporting to the Board in relation to any identified risks and mitigations.</p> <p>The Heat Map is attached as appendix 1.</p> <p>The Board should note the report.</p>			
This report addresses these strategic priorities:			
We will deliver the best care		X	
We will support and develop our staff			
We will continually improve what we do		X	
We will use our resources wisely			
We will be future focussed		X	

1 Introduction

Exception reporting on action plan delivery has been derived from LDU self-assessments with scrutiny through the two weekly check and challenge process, and deep dive action plan reviews undertaken by Operations team and LDU triumvirates.

2 Compliance Notices

2.1 Anti-ligature work

Considerable work has been undertaken to reduce ligatures risks in our estate but further work is required. Clinical areas are mitigating the risk of harm by ligature by individual risk assessment and care planning.

2.2 Staff shortages

Secure services and Wiltshire in partnership with Human resources have both developed Staff Retention and Recruitment Strategies to address their specific challenges. There has been some success with recruitment but staff retention in Secure services remains concerning. During the Secure Service Week in Focus Service Review some staff expressed resentment that newly recruited staff receive a “golden handshake” but loyalty by existing staff has not received recognition or reward. In addition some substantive nursing staff are leaving to join agencies where remuneration is higher. LDUs are maintaining safer staffing numbers on the inpatient units by a combination of temporarily reduced beds (Secure services and Wiltshire), and use of bank and agency staff.

2.3 Juniper

Building work on Juniper ward has not been completed. As a result Juniper is not compliant with single sex accommodation guidance due to lack of provision of a women only day area. Line of sight has not been improved. There has been some improvement in the therapeutic environment but further work is required to ensure compliance.

2.4 Caseloads

The caseload for staff working in assessment and recovery teams in Bristol remain higher than national guidelines. The recruitment of

Recovery Navigators by partner organisations and their ability to take on full role requirements has been slower than projected. Recruitment is now approaching required capacity.

2.5 Community treatment orders

This action plan remains red in Bristol due to the deteriorating performance in the number of people on CTOs being given their rights. This is a function of the wider challenges in Bristol due to the scale of the service re-design.

2.6 Amber action plans

LDUs have rated some action plans amber rather than green pending compliance checking to ensure that implementation has achieved required outcomes.

3 Week in Focus

A total of five Week in Focus LDU inspections have been completed: Banes, Swindon, Wiltshire, Bristol, Secure services.

Reports for Banes, Swindon, Wiltshire, and Bristol will have been received by Quality and Standards when this paper is received by Board.

The Week in Focus inspections have identified issues where further improvement is required to ensure compliance across the five quality domains.

4 Path to Quality

Close partnership between all Directorates will continue in order to achieve compliance across the five Quality Domains. A further three Week in Focus inspections will be undertaken by 28th August 2015: North Somerset, South Gloucestershire, Specialised Services.

The Quality and Nursing Directorate will undertake the next phase of compliance checking, and standard setting to continue the Quality Improvement Programme.

5 Recommendation

The Board should **note** this report.