

## Partnership Board

<b>Title of Paper</b>	<b>Quality Report (Quarter 2, 2019/20 exceptions)</b>		
<b>Agenda Item</b>	10	<b>Date of meeting</b>	28 November 2019
<b>Exec Lead</b>	Julia Barton, Executive director of quality and Nursing HIOW Partnership of CCGs		
<b>Authors</b>	Julia Barton; Wendy Gray; Louise Spencer; Suzanne Van Hoek		

<b>Purpose</b>	For Decision	
	To Ratify	
	To Discuss	
	To Note	X

<b>Executive Summary</b>	
<p>This report details exceptions against quality compliance, risks, and issues from the following CCGs and their commissioned providers:</p> <ul style="list-style-type: none"> <li>Fareham and Gosport CCG</li> <li>IOW CCG &amp; IOW NHST</li> <li>South Eastern Hampshire CCG</li> <li>North Hampshire CCG</li> </ul> <p>Due to the scheduling of the Board, this report is a summary of the detailed report provided to the Quality, Performance and Finance Committee which will be considered at the next committee meeting (pm of 28/11/2019). Access to the full report is available to all members via Boardpacks.</p> <p><b>Items for consideration are:</b></p> <ul style="list-style-type: none"> <li><b>Fareham and Gosport/South Eastern Hampshire CCG:</b> Hampshire Safeguarding Adults Board have commissioned a review of a patient who is alleged to have experienced neglect, and who was in contact with local health and social care community services. An initial workshop has taken place as well as interviews with relevant staff and the patient's family. A further meeting is arranged with the panel for December 2019. The report is anticipated to be published in March 2020.</li> <li><b>South Eastern Hampshire CCG:</b> Havant Primary Care Services – there has been a recent increase in workforce gaps with an associated risk of reduced capacity to deliver quality, safe and effective services for the local population.</li> <li><b>Portsmouth Hospitals NHS Trust:</b> Ambulance handover delays for October 2019 were high, with an increase in overnight queuing and 'long' delays.</li> <li><b>Integrated urgent care/111 pathway :</b> quality risks have been identified and work is ongoing to ensure sufficient mitigation.</li> <li><b>North Hampshire CCG:</b> One <i>never event</i> reported at HHFT. A new risk has been added to the risk register in relation to lack of therapy provision to nursing homes.</li> <li><b>Isle of Wight NHS Trust:</b> Following the CQC re-inspection in quarter 1 of 2019 the IOW NHS Trust overall rating has changed from Inadequate to Requires Improvement. Mental Health services remain inadequate.</li> </ul>	
<b>Recommendations</b>	<p><b>Members are asked to:</b></p> <ol style="list-style-type: none"> <li>Note the report and the risks, issues and challenges and improvements being made by respective CCGs and the providers they commission.</li> <li>Request any further information or assurance required on the content of the report.</li> </ol>

# Hampshire Partnership CCGs Quarter 1 Quality Report

## 1. CQC and NHS Improvement Regulatory Compliance

Service	Provider	Date inspection /report	Overall Rating	Regulatory Action In Place/Comments
Acute	Hampshire Hospitals NHS Foundation Trust	Inspection June/July 2018  Report published 26 <sup>th</sup> September 2018  Unannounced CQC inspections in April 2019 to Basingstoke and Winchester sites	Requires Improvement	<ul style="list-style-type: none"> <li>NHSI Challenged Provider.</li> <li>Enforcement Actions: Section 29a and 31 of the Health &amp; Social Care Act</li> <li>CQC has confirmed that the Trust has met the requirements for improvement set out in the warning notice issued under Section 29A of the Health and Social Care Act 2008 following last year's full inspection. Trust ratings were not changed as the core services were not reviewed as a whole</li> <li>October 2019 - Provider Information Request (PIR) submitted to the CQC – re-inspection within 6 months of the well-led domain and at least one core service</li> </ul>
	University Hospitals Southampton	Inspection 4 - 6 Dec 2018, 22 – 24 Jan 2019	Good	<ul style="list-style-type: none"> <li>The CQC issued 8 MUST do's as the Trust was not meeting the requirements relating to regulations 12,15 and 17.</li> </ul>
	UHS Princess Ann Hospital	(Report published 17 April 2019)	Good	<ul style="list-style-type: none"> <li>Nil</li> </ul>
	Portsmouth Hospitals NHS Trust	Full inspection April 2018 (Report published October 2018)  Unannounced CQC ED inspection on 25 February 2019. (Report published 16 April 2019)	Requires Improvement	<p>PHT has the following conditions on their registration:</p> <ul style="list-style-type: none"> <li>CQC Section 31: The Registered Provider must ensure that Deprivation of Liberty Safeguards are applied as per the requirements of Mental Capacity Act, 2005, prior to depriving a person of their liberty.</li> <li>Section 29a in place relating to breaches of regulation 10 (Dignity &amp; respect); 12 (safe care &amp; treatment) and 6 “must do” actions for improvement.</li> <li>The CQC visited PHT from 14th-16th October 2019.</li> <li>A CQC Well Led inspection is being undertaken 14-15th November 2019. CQC report and outcome of findings awaited.</li> </ul>

	<p><b>Isle of Wight NHS Trust</b></p>	<p>Inspection 23 to 25 January and 20 to 22 February 2018</p> <p>Report published June 2018</p> <p>Re-inspected May 2019.</p> <p>(Report published 4 September 2019)</p>	<p><b>Requires Improvement</b></p>	<p>Following CQC re-inspection in May the trust overall rating of inadequate (IA) has moved to Requires Improvement (RI):</p> <ul style="list-style-type: none"> <li>• <b>Mental Health</b> services remain rated 'Inadequate' by the CQC and the following notice has been issued;</li> <li>• <b>Community Mental Health services:</b> a section 29a warning notice is in place with regard waiting times for allocation to a care coordinator and for some therapeutic services.</li> <li>• <b>Older Persons Mental Health (OPMH):</b> a section 29a warning notice was in place and Shackleton Ward is now closed, with the Trust Board agreeing to develop a new service model.</li> <li>• <b>Urgent and Emergency services:</b> The section 29a warning notice for the ED has been met.</li> <li>• <b>Acute:</b> The CQC has served a section 29A warning notice to improve services relating to the failure to follow policy and process in identifying deteriorating patients. The Trust has until 31/12/19 to address the issues identified and has challenged the notice.</li> <li>• <b>Community services</b> have significantly improved, with an overall rating of 'Good'.</li> <li>• <b>End of Life Care</b> has significantly improved, with an overall rating of 'Good' and examples of innovative and outstanding practice in partnership with Mountbatten Hospice.</li> <li>• <b>The Trust's NHS 111, frontline ambulance and Urgent Care Service (out of hours):</b> were all rated 'Good'.</li> </ul>
<p><b>Community</b></p>	<p><b>Southern Health NHS Trust</b></p>	<p>Inspection May and July 2018 (report published October 2018)</p> <p>Unannounced CQC inspection commenced 10 October 2019</p>	<p><b>Requires Improvement</b></p>	<ul style="list-style-type: none"> <li>• 7 breach notices were served in relation to regulations 9, 10, 11, 12, 13, 17 and 18.</li> <li>• All mental health services (not LD) were visited as part of the CQC unannounced inspection. Initial feedback has been positive with care reported as being good.</li> <li>• A focussed well-led inspection is expected during November 2019.</li> </ul>

	<b>Solent NHS Trust</b>	Inspection October 2018 (report published February 2019)	<b>Good</b>	<ul style="list-style-type: none"> <li>Outstanding rating for Caring domain.</li> </ul>
<b>Ambulance</b>	<b>South Central Ambulance Service NHS Foundation Trust</b>	Inspection August 2018 (report published September 2018)	<b>Good</b>	<ul style="list-style-type: none"> <li>SCAS have received a PIR from CQC with a turnaround date for return of info by end of November.</li> <li>SCAS therefore expect an unannounced inspection in Jan 2020, with the Well Led inspection to follow.</li> </ul>
<b>Out of Hours</b>	<b>North Hampshire Urgent Care</b>	Inspection February 2017 (report published May 2017)	<b>Good</b>	<ul style="list-style-type: none"> <li>Nil</li> </ul>
<b>Primary Care</b>	<b>Fareham and Gosport and South Eastern Hampshire Practices</b>	Various	<b>Good</b>	<ul style="list-style-type: none"> <li>30 practices rated Good</li> <li>Southern Hampshire Primary Care Alliance received first Inspection and published report ( 10.09.19) rated overall <i>Good</i> in 3 sites with <i>requires improvement</i> in one safe and two effective domains</li> </ul>
			<b>Requires Improvement</b>	<ul style="list-style-type: none"> <li>5 practices rated overall requires Improvement</li> <li>CCG supporting and continuing to seek assurance</li> </ul>
			<b>Inadequate</b>	<p>2 practices rated inadequate</p> <ul style="list-style-type: none"> <li>SEH - Pinehill Surgery</li> <li>FG - Bridgemary Surgery</li> </ul> <p>Both practices have received a robust contract review and both successfully completed the process. CCG remain vigilant and continue to support and seek assurance.</p>
	<b>North Hampshire Practices</b>	Various	<b>Good</b>	<ul style="list-style-type: none"> <li>12 practices are rated Good</li> </ul>
			<b>Requires Improvement</b>	<ul style="list-style-type: none"> <li>2 practices are rated Requires Improvement <ul style="list-style-type: none"> <li>Watership Down Health – rated good in caring and responsive domains</li> <li>Acorn Health Partnership – rated good in effective and caring domains</li> </ul> </li> </ul>
		<p>With the splitting of the Cedar Medical practice, the following CQC position is reported:  The Rooksdown Practice is now a branch site of Brambls Grange Surgery and falls under their overall CQC rating (RI), until re-inspection occurs  The Beggarwood site is now provided by NHUC, and as yet has not been subject to CQC inspection, which is awaited.  <b>Quality team support to both continues.</b></p>		

	<b>Isle of Wight Practices</b>	15 practices various dates	<b>Good</b>	<ul style="list-style-type: none"> <li>All practices rated as good.</li> <li>At least 5 practices have had planned CQC telephone calls; no issues identified.</li> <li>Please note 1 merger has taken place and therefore there are now 15 practices on the IOW</li> </ul>
<b>Nursing &amp; care homes; care agencies</b>	<b>Fareham and Gosport; South Eastern Hampshire</b>	Various	<b>Outstanding</b>	3 homes rated outstanding: <ul style="list-style-type: none"> <li>FGCCG:1 home</li> <li>SEHCCG: 2 homes</li> </ul>
			<b>Good</b>	144 homes rated as Good: <ul style="list-style-type: none"> <li>FGCCG: 66 homes</li> <li>SEHCCG: 78 homes</li> </ul>
			<b>Requires Improvement</b>	34 Homes are rated requires improvement; <ul style="list-style-type: none"> <li>16 FGCCG</li> <li>18 SEHCCG.</li> </ul>
			<b>Inadequate</b>	4 homes are rated inadequate: <ul style="list-style-type: none"> <li>SEHCCG; 2 homes</li> <li>FGCCG; 2 homes</li> </ul>
	<b>Isle of Wight</b>	Various	<b>Outstanding</b>	<ul style="list-style-type: none"> <li>3 care homes</li> <li>3 care agencies</li> </ul>
			<b>Good</b>	<ul style="list-style-type: none"> <li>51 care homes</li> <li>7 nursing homes</li> <li>18 care agencies</li> </ul>
			<b>Requires Improvement</b>	<ul style="list-style-type: none"> <li>14 care homes</li> <li>4 nursing homes`</li> <li>3 care agencies</li> </ul>
			<b>Inadequate</b>	<ul style="list-style-type: none"> <li>zero</li> </ul>
			<b>Not rated</b>	<ul style="list-style-type: none"> <li>3</li> </ul>
	<b>North Hampshire</b>	Various	<b>Outstanding</b>	<ul style="list-style-type: none"> <li>2</li> </ul>
			<b>Good</b>	<ul style="list-style-type: none"> <li>24 care homes are rated good</li> </ul>
			<b>Requires Improvement</b>	<ul style="list-style-type: none"> <li>2 care homes are rated requires improvement</li> </ul>
	<b>Hospices</b>	<b>Mountbatten Hospice (IOW)</b>	Inspection Jan 2017 Report published March 2017	<b>Outstanding</b>
<b>Mountbatten Hospice (Soton)</b>		Not inspected yet	<b>NA</b>	<ul style="list-style-type: none"> <li>The service was taken over by Mountbatten in 2019; previous rating under management of UHS was good</li> </ul>
<b>Rowans Hospice (South Hampshire)</b>		Inspection Sept 2016 Report published august 2017	<b>Outstanding</b>	<ul style="list-style-type: none"> <li>Nil to note</li> </ul>

	<b>St Michaels Hospice (North Hants)</b>	Inspection July 2016 Report published Nov 2016	<b>Good</b>	<ul style="list-style-type: none"> <li>Nil to note</li> </ul>
<b>CAMHS</b>	<b>Sussex Partnership NHS Trust</b>	Inspection Oct/Dec 2017 Report published Jan 2018	<b>Good</b>	<ul style="list-style-type: none"> <li>Trust was awarded “outstanding” for caring.</li> </ul>
<b>Private / Independent Providers</b>	<b>BMI Hampshire Clinic</b>	Inspection April/May 2018 (report published Nov 2018)  Unannounced re-inspection January 2019 (report published March 2019)	<b>Requires Improvement</b>	<ul style="list-style-type: none"> <li><b>3</b> warning notices served: regulations 12, 17 and 18</li> <li><b>23 January 2019</b> - CQC unannounced inspection to assess compliance against the 3 warning notices which were issued to the provider on 06 July 2018.</li> <li>CQC report published <b>28 March 2019</b> - overall rating <i>Require improvement</i> remains - CQC notes provider has made considerable progress on all issues identified in the warning notices.</li> </ul>
	<b>Spire Portsmouth (Havant)</b>	Inspection April 2016 Report published September 2016	<b>Good</b>	<ul style="list-style-type: none"> <li>Requires improvement for safety</li> </ul>
	<b>St Mary’s Treatment Centre (Portsmouth)</b>	Inspection Sept/Oct 2015 Report published Feb 2016	<b>Good</b>	<ul style="list-style-type: none"> <li>Nil to note</li> </ul>
	<b>Southampton NHS Treatment Centre</b>	Inspection Sept 2018 Report published January 2019	<b>Outstanding</b>	<ul style="list-style-type: none"> <li>Outstanding for caring and well led domains.</li> </ul>
	<b>Priory - Nelson House Independent Hospital (Gosport)</b>	Inspection July 2018 Report published: September	<b>Good</b>	<ul style="list-style-type: none"> <li>CQRM Process currently under review as reporting not satisfactory.</li> <li>Additional quality assurance visits undertaken and recommendations provided</li> </ul>
	<b>Coveberry Limited - Uplands Independent Hospital (Fareham)</b>	Inspection December 2018 Report published: February 2019	<b>Good</b>	<ul style="list-style-type: none"> <li>Nil to note</li> </ul>
	<b>Priory - Mildmay Oaks (Hook)</b>	Inspection May 2018 Report published: July 2018	<b>RI</b>	<ul style="list-style-type: none"> <li>Regulatory activity in relation to compliance with regulation 12 (safe care &amp; treatment), regulation 17 (good governance) and regulation 18 (staffing)</li> </ul>

## 2. Provider and CCG risks rated above 15

CCG Area	Risk description	Risk rating	Controls and actions
Fareham and Gosport and South Eastern Hampshire CCGs	<b>Integrated Urgent Care</b>	16	<ul style="list-style-type: none"> <li>There is a risk of a fragmented integrated urgent care/111 pathway which has the potential to create quality and safety risks that may cause patient harm. The CCG has held several meetings with providers and commissioner partners and identified a series of mitigation actions to be implemented.</li> </ul>
	<b>Portsmouth Hospitals NHS Trust (PHT) restrictive interventions practice – mechanical.</b>	16	<ul style="list-style-type: none"> <li>Final draft of <b>restrictive practice</b> policy developed.</li> <li>Further change to restraint training provision. Training provision focus changed to include security as well as clinical staff.</li> <li>Restrictive practice task and finish group is being stood down, monitoring will be via PHT Safeguarding Committee at which the CCG has representation.</li> </ul>
	<b>PHT risk of harm from delays in assessment and treatment for planned care.</b>	16	<ul style="list-style-type: none"> <li>The planned care waiting list for September 2019 has increased from the previous month, with a proportion of this increase being in the 1 to 6 month waiting patients.</li> <li><b>Audiology</b> waits of over 7 months are showing a decreasing trajectory this financial year from July, August and September. 1 to 6 month waits remaining static with a slight increase for September 2019. 2 new locums started in early October and a revised recovery trajectory is in place.</li> <li><b>Diagnostics:</b> Against a maximum breach tolerance of circa 71, PHT had 187 breaches of the 6-week standard at the end of September 2019. This is significantly down from 668 at the end of August 2019. Almost half of the September breaches are for MRI (89 breaches).</li> </ul>
	<b>PHT emergency department and urgent care pathway</b>	16	<ul style="list-style-type: none"> <li>Continued sustained pressure on the urgent and emergency care pathway</li> <li>SCAS and PHT are working on a refresh of escalation plans.</li> </ul>
	<b>PHT safety of patients who require mental health care provision</b>	15	<ul style="list-style-type: none"> <li>Increase in incidents reported with mental health component. Themes: <ul style="list-style-type: none"> <li>Patients absconding whilst under mental health section</li> <li>Lack of availability and subsequent delay in finding a suitable mental health bed.</li> </ul> </li> <li>Ongoing work on ligature risk assessments with CCG involvement</li> </ul>
Isle of Wight CCG (IOW)	The risk register was fully reviewed by the IOW CCG in Quarter 2 and a number of risks reduced, closed and new risks opened. These risks have been noted and an audit trail can be obtained through the IOW senior management team (SMT) and IOW clinical delivery group (CDG)		
	Outpatient follow ups (auto discharge): If the trust does not implement the Standard Operating Procedure relating	16	<ul style="list-style-type: none"> <li>A review of practice has been undertaken and identified actions to change practice are being taken forward. Progress, which remains slow, is being monitored at the trust's Acute Board where the CCG are present.</li> <li>The CCG has written to the trust raising their concern and asking for assurance regarding</li> </ul>

	to outpatient auto-discharge then there is a potential for follow up outpatients appointments to be lost and a risk to patient safety		<p>the plans to address the issue.</p> <ul style="list-style-type: none"> <li>Action to ensure the central booking system is pushed as a priority for the Outpatients Steering Group.</li> <li>September 2019 - This risk was discussed at SMT and it was agreed that if the outpatient auto-discharge is functioning appropriately this risk would be closed, if not functioning appropriately then for the risk to be reviewed for mitigations and scoring.</li> </ul>
North Hampshire CCG (NH)	If residents living in care homes with nursing are not able to be assessed, reviewed and seen by therapy services this could lead to poorer functional outcomes, increased dependency and a poorer quality of life.	15	<ul style="list-style-type: none"> <li>NH CCG Enhanced Health in Care Home team provide support via the multi-disciplinary team to review residents in care homes with nursing and signpost to appropriate services when possible. This includes third sector agencies and condition specific charities.</li> <li>Southern Health NHS Foundation Trust have confirmed that funding is available to support the recruitment of a band 6 physiotherapist and 1WTE band 6 occupational therapist for care homes with nursing.</li> <li>Business case required to support development of a therapy service in care homes with nursing and the inclusion of a training and education programme.</li> </ul>
All Hampshire CCGs (excluding IOW)	If Sussex Partnership NHS Foundation Trust (SPFT) continue to report increased demand above their planned activity resulting in long waits for assessment and treatment, this may have a negative impact on patient outcomes and a loss of confidence in the service.	16	<ul style="list-style-type: none"> <li>SPFT contract review meeting (CRM) monitors waiting times in line with contractual targets</li> <li>SPFT monthly clinical quality review meeting (CQRM) monitors the safety and patient experience components of the service.</li> <li>SPFT hold a monthly case review of high risk patients as part of their discharge planning process to help prevent readmission to the service</li> <li>SPFT have a single point of access for new referrals that signposts clients to non CAMHS contracted services</li> <li>SPFT categorise referrals for waiting time to assessment by looked after children, youth offending team and learning disability</li> <li>SPFT triage first referrals by either, signposted routine or priority. Referrals can be downgraded or prioritised depending on the clinical indications and an initial risk assessment is performed and completed and documented in the electronic system</li> </ul>
All CCGs	<b>Workforce:</b> if there is an increasing workforce gap across all professions this may compromise provider staff resilience, retention and sickness/absence as well as the quality of services.	16 (FGSE H rating is 20)	<ul style="list-style-type: none"> <li>Continued high reliance on temporary workforce for all providers and continued challenges to ensure appropriate skill-mix to support safe patient care.</li> <li>Increasing feelings of exhaustion in the trainer and supervisor workforce may impact on provision of quality supervision to the medical and non-medical trainees.</li> <li>Allied health professional workforce challenges also continue, impacting on waiting list management within required timeframes.</li> <li>CCGs gain assurance on provider monitoring of patient safety incidents or omissions relating to workforce shortages and on safer staffing compliance.</li> <li>Strong links to the many Hampshire and Isle of Wight wide Local Workforce Action Board workforce programmes.</li> </ul>

	<p><b>Multi-agency Safeguarding Hub - health (children):</b> If the volume of referrals coming through the Multi-Agency Safeguarding Hub (MASH) exceeds the 2014 business case forecast, then health will not be able to research all children as required and outcomes will not get to front line staff on a timely basis.</p>	16	<ul style="list-style-type: none"> <li>• The service specification has been redesigned as an output based specification, with an aspiration to include in the next contract. This will need to be carefully managed and monitored by West Hampshire CCG.</li> <li>• Review of service provision in other areas to see if alternative model is available; on track.</li> <li>• Quarterly Safeguarding contractual meetings are in place to address and resolve complex issues</li> <li>• An external review of the corporate safeguarding arrangements in Southern Health NHS Foundation Trust is in progress.</li> <li>• Observational visits to the MASH have occurred</li> </ul>
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