

NORTHUMBERLAND TYNE AND WEAR NHS FOUNDATION TRUST

BOARD OF DIRECTORS MEETING

Meeting Date: 27 January 2016

Title and Author of Paper:

CQC Registration Update

Lisa Quinn, Executive Director of Performance and Assurance

Paper for Debate, Decision or Information: Information

Key Points to Note:

Compliance Visits

- The Trust has been given formal notice of a CQC compliance inspection which is to take place in June 2016.
- A CQC Inspection Steering Group and associated sub groups have been established to prepare for the visit.
- A social and residential unannounced compliance visit is also anticipated to take place at Easterfield Court in the near future.
- An unannounced focused visit to Ferndene (Stephenson) took place on 18.01.2016.

Registration Update

No changes to registration have been submitted since the last update.

Notifications

No notifications have been submitted since the last update.

CQC Intelligent Monitoring Report

The latest draft CQC Intelligent Monitoring report has been received by the Trust for checking.

The Intelligent Monitoring tool has been developed to give CQC inspectors a clear picture of the areas of care that need to be followed up trusts providing mental health services. The system is built on a set of indicators that look at a range of information including patient experience, staff experience and performance. The indicators relate to the five key questions CQC ask of all services: Are they safe, effective, caring, responsive and well-led?

The Intelligent Monitoring report is publicly available in line with the CQC commitment to transparency.

The key dates for this process are as follows:

- Monday 11 January – Draft reports shared with trusts for two weeks
- Friday 22 January – Deadline for trusts to provide feedback / raise queries
- Monday 8 February – Notification to trusts adversely affected by any changes made as a result of feedback
- **Thursday 25 February – Publication on the CQC website**

There are 90 indicators assessed within the report (shown at Appendix 1), of which 18 are new indicators. These are currently being reviewed and a further update will be provided at the next Trust Board. Note that NEQOS have also conducted benchmarking of IMR data which will be made available shortly.

Consultation re CQC Charges

The Trust has in January submitted a response to the CQC consultation regarding CQC fees.

Outcome required: Committee to note information

CQC Mental Health Intelligent Monitoring Indicators January 2016

Appendix 1

Indicator ID	Indicator Name	CQC Key Question	Time period for version 3 (v3)	Is the v3 Time Period more recent than that used in v2?
MHSAF07C	Potential under-reporting of patient safety incidents - NRLS/MHLDDS	Safety	Numerator: 01 Nov 2014 to 31 Oct 2015 Denominator: 01 July 2014 to 30 June 15	Yes
MHSAFE06	Proportion of reported patient safety incidents that are harmful - NRLS	Safety	01 Nov 2014 to 31 Oct 2015	Yes
MHSDS_PMIN1	Proportion of mortality among mental health inpatients aged 0-74 (death recorded in ONS) - MHLDDS-HES/ONS	Safety	01 July 2014 to 30 June 2015	New Indicator
MHSDS_PMCT1	Proportion of mortality among people in contact with community mental health services aged 0-74 (death recorded in ONS) - MHLDDS-HES/ONS	Safety	01 July 2014 to 30 June 2015	New Indicator
MHSDS_PMCT2	Proportion of mortality among people in contact with community mental health services aged 0-74 (self-harm or undetermined ONS death) - MHLDDS-HES/ONS	Safety	01 July 2014 to 30 June 2015	New Indicator
MHSAFE63	Patients that die following injury or self-harm within 3 days of being admitted to acute hospital beds - MHLDDS-HES Bridged	Safety	01 July 2014 to 30 June 2015	Yes
MHSAFE64	People that take their own lives within 3 days of discharge from hospital - MHLDDS-HES Bridged	Safety	01 July 2014 to 30 June 2015	Yes
COM_MORT01	Composite indicator showing trusts flagging for risk in relation to the number of deaths of patients detained under the Mental Health Act - Mental Health Act database/MHLDDS	Safety	01 Aug 2014 to 31 July 2015	Yes

Indicator ID	Indicator Name	CQC Key Question	Time period for version 3 (v3)	Is the v3 Time Period more recent than that used in v2?
MHMORT 01	<i>Trusts flagging for risk in the number of suicides of patients detained under the Mental Health Act (all ages) - MHLDDS/MHA database</i>	Safety	01 Aug 2014 to 31 July 2015	Yes
MHMORT 03	<i>Trusts flagging for risk in relation to the number of deaths due to natural causes of patients detained under the Mental Health Act (people aged under 75) - MHA database/HSCIC KP90</i>	Safety	01 Aug 2014 to 31 July 2015	Yes
NHSSTAF F11	Fairness and effectiveness of incident reporting procedures - NHS Staff Survey	Safety	01 Sep 2014 to 31 Dec 2014	No
NRLSL08 MH	Consistency of reporting to the National Reporting and Learning System - NRLS	Safety	01 Oct 2014 to 31 March 2015	Yes
COM_CAS MH	Composite of Central Alerting System (CAS): Dealing with (CAS) safety alerts in a timely way - CAS	Safety	01 Mar 2009 to 31 Oct 2015	Yes
CASM01 A	<i>The number of alerts which CAS stipulated should have been closed by trusts during the preceding 12 months, but which were still open on the date CQC extracted data from the CAS system - CAS</i>	Safety	01 Nov 2014 to 31 Oct 2015	Yes
CASM01 B	<i>The number of alerts which CAS stipulated should have been closed by trusts more than 12 months before, but which were still open on the date CQC extracted data from the CAS system - CAS</i>	Safety	01 March 2009 to 31 Oct 2015	Yes
CASM01 C	<i>Percentage of CAS alerts with closing dates during the preceding 12 months which the trust has closed late - CAS</i>	Safety	01 Nov 2014 to 31 Oct 2015	Yes
MHRES20	Proportion of discharges from hospital followed up within 7 days - MHLDDS	Safety	01 July 2014 to 30 June 2015	Yes
NHSSTAF F07	Proportion of staff receiving health and safety training in last 12 months - NHS Staff Survey	Safety	01 Sep 2014 to 31 Dec 2014	No

Indicator ID	Indicator Name	CQC Key Question	Time period for version 3 (v3)	Is the v3 Time Period more recent than that used in v2?
PLACE_M H01	PLACE (patient-led assessments of the care environment) score for cleanliness of environment - PLACE	Safety	04 Feb 2015 to 30 June 2015	Yes
SAFEGUA R01	CQC's National Customer Service Centre (NCSC) safeguarding concerns - CQC/MHLDDS	Safety	01 Nov 2014 to 31 Oct 2015	Yes
MHESR01	Proportion of registered nursing staff - ESR	Safety	30 Sept 2015 to 30 Sept 2015	Yes
MHESR02	Ratio of occupied beds to all nursing staff - ESR	Safety	30 Sept 2015 to 30 Sept 2015	Yes
CMHSUR A06	Being informed: for having been told who is in charge of organising their care and services - CMH Survey	Effective	01 Sep 2014 to 30 Nov 2014	Yes
CMHSUR A38	Help finding support for physical health needs: for those with physical health needs receiving help or advice with finding support for this, if they needed this - CMH Survey	Effective	01 Sep 2014 to 30 Nov 2014	Yes
MHCAR20 1	Proportion of patient records checked that show evidence of a physical health check on admission where the patient has been in hospital less than a year - MHA Database	Effective	01 Sept 2014 to 31 Aug 2015	Yes
MHSDS_A E1	Proportion of detained mental health inpatients who attend Accident and Emergency departments - MHLDDS bridged to HES	Effective	01 July 2014 to 30 June 2015	New Indicator
MHSDS_A CS1	Proportion of emergency admissions of mental health inpatients for ambulatory care sensitive conditions - MHLDDS bridged to HES	Effective	01 July 2014 to 30 June 2015	New Indicator
MHCAR20 2	Proportion of wards visited where there were difficulties in arranging GP services for detained patients - MHA Database	Effective	01 Sept 2014 to 31 Aug 2015	Yes
MHEFF10 7	Proportion of patient records checked where care plans showed evidence of discharge planning - MHA Database	Effective	01 Sept 2014 to 31 Aug 2015	Yes

Indicator ID	Indicator Name	CQC Key Question	Time period for version 3 (v3)	Is the v3 Time Period more recent than that used in v2?
NAS_PH02	Service users who had five individual cardio metabolic health risk factors monitored in the past 12 months - NAS2	Effective	01 Aug 2013 to 30 Nov 2013	No
NAS_PH03	Monitoring of alcohol intake in the past 12 months - NAS2	Effective	01 Aug 2013 to 30 Nov 2013	No
NAS_PT01	Has cognitive behavioural therapy ever been offered to the service user? - NAS2	Effective	01 Aug 2013 to 30 Nov 2013	No
NAS_PT02	Has family intervention ever been offered to the service user? - NAS2	Effective	01 Aug 2013 to 30 Nov 2013	No
PLACE_MH02	PLACE (patient-led assessments of the care environment) score for food - PLACE	Effective	04 Feb 2015 to 30 June 2015	Yes
NHSSTAF F04	Proportion of staff appraised in last 12 months - NHS Staff Survey	Effective	01 Sep 2014 to 31 Dec 2014	No
NHSSTAF F05	Proportion of staff having well-structured appraisals in last 12 months - NHS Staff Survey	Effective	01 Sep 2014 to 31 Dec 2014	No
NHSSTAF F06	Proportion of staff receiving support from immediate managers - NHS Staff Survey	Effective	01 Sep 2014 to 31 Dec 2014	No
MHSAFE51	Proportion of patient records checked where the Responsible Clinician has recorded their assessment of a patient's capacity to consent at first treatment - MHA Database	Effective	01 Sept 2014 to 31 Aug 2015	Yes
MHCAR19	Proportion of wards visited where there is an Independent Mental Health Advocacy (IMHA) service available - MHA Database	Effective	01 Sept 2014 to 31 Aug 2015	Yes
MHCAR20	Proportion of wards visited where detained patients have direct access to the Independent Mental Health Advocacy (IMHA) service - MHA Database	Effective	01 Sept 2014 to 31 Aug 2015	Yes
MHEFF106	Proportion of patient records checked where there was an approved mental health practitioner (AMHP) report available - MHA Database	Effective	01 Sept 2014 to 31 Aug 2015	Yes

Indicator ID	Indicator Name	CQC Key Question	Time period for version 3 (v3)	Is the v3 Time Period more recent than that used in v2?
MHSAFE52	Proportion of patient records checked that show evidence of discussions about rights on detention - MHA Database	Effective	01 Sept 2014 to 31 Aug 2015	Yes
CMHSUR A18	Respect and dignity: for feeling that they were treated with respect and dignity by NHS mental health services - CMH Survey	Caring	01 Sep 2014 to 30 Nov 2014	Yes
CMHSUR A31	Time: for being given enough time to discuss their needs and treatment - CMH Survey	Caring	01 Sep 2014 to 30 Nov 2014	Yes
PLACE_M H03	PLACE (patient-led assessments of the care environment) score for privacy, dignity and well being - PLACE	Caring	04 Feb 2015 to 30 June 2015	Yes
CMHSUR A10	Involvement in planning care: for those who have agreed what care and services they will receive, being involved as much as they would like in agreeing this - CMH Survey	Caring	01 Sep 2014 to 30 Nov 2014	Yes
CMHSUR A12	Involvement in care review: for those who had had a formal meeting to discuss how their care is working, being involved as much as they wanted to be in this discussion - CMH Survey	Caring	01 Sep 2014 to 30 Nov 2014	Yes
CMHSUR A35	Involvement in decisions: for those receiving medicines, being involved as much as they wanted in decisions about medicines received - CMH Survey	Caring	01 Sep 2014 to 30 Nov 2014	Yes
CMHSUR A42	Involving family or friends: for NHS mental health services involving family or someone else close to them as much as they would like - CMH Survey	Caring	01 Sep 2014 to 30 Nov 2014	Yes
NAS_SD01	Was the patient provided with written information (or an appropriate alternative) about the most recent antipsychotic prescribed? - NAS2	Caring	01 Aug 2013 to 30 Nov 2013	No
CMHSUR A16	Support: for the people seen through NHS mental health services helping them achieve what is important to them - CMH Survey	Caring	01 Sep 2014 to 30 Nov 2014	Yes
COM_BED S	Composite indicator to assess bed occupancy - MHA Database/NHS England	Responsive	01 Sept 2014 to 30 Sept 2015	Yes

Indicator ID	Indicator Name	CQC Key Question	Time period for version 3 (v3)	Is the v3 Time Period more recent than that used in v2?
MHSAF65a	<i>Occupancy ratio, looking at the number of patients allocated to visited wards, compared with the number of available beds - MHA Database</i>	Responsive	01 Sept 2014 to 31 Aug 2015	Yes
MHSAF65c	<i>Occupancy ratio, looking at the average daily number of available and occupied consultant-led beds open overnight - NHS England</i>	Responsive	01 Oct 2014 to 30 Sept 2015	Yes
PLACE_MH04	PLACE (patient-led Assessments of the care environment) score for facilities - PLACE	Responsive	04 Feb 2015 to 30 June 2015	Yes
CMHSUR A23	Contact: for knowing who to contact out of office hours if they have a crisis - CMH Survey	Responsive	01 Sep 2014 to 30 Nov 2014	Yes
CP_MH01	Proportion of discharged patients without a recorded crisis plan - HSCIC - MHLDDS	Responsive	01 July 2014 – 30 June 2015	New Indicator
COM_DtcMH	Composite indicator based on analysis of delayed transfers of care where bed data is available (DTC46) and where it is not available (DTCMH01)	Responsive	01 July 2015 to 30 Sept 2015	Amended Indicator
DTCMH01	<i>Number of Trusts where there is evidence of delayed transfers of care but no bed data available</i>	Responsive	<i>01 July 2015 to 30 Sept 2015</i>	<i>New Component</i>
DTC46	<i>The ratio of the number of patients whose transfer of care is delayed to the average daily number of occupied beds open overnight in the quarter, where the delay is attributable to the NHS and both the NHS and social care</i>	Responsive	<i>01 July 2015 to 30 Sept 2015</i>	Yes
CQC_CO M02	Concerns and complaints received by CQC - CQC	Responsive	01 Nov 2014 to 31 Oct 2015	Yes
PHSOMH01	Fully and partially upheld investigations into complaints - PHSO	Responsive	01 Apr 2014 to 31 Mar 2015	Yes
PROV_CO M01	NHS written complaints - HSCIC	Responsive	01 Apr 2014 to 31 Mar 2015	Yes

Indicator ID	Indicator Name	CQC Key Question	Time period for version 3 (v3)	Is the v3 Time Period more recent than that used in v2?
MHA_COMP01	Mental Health Act complaints received by CQC as a ratio to MHA activity - CQC	Responsive	Numerator: 1 Nov 2014 - 31 Oct 2015 Denominator: 1 Apr 2014 - 31 March 2015	New Indicator
COM_CPEMH	Composite Indicator: Proportion of Mental Health Act (MHA) and Hospital Inpatient Episodes closed by the provider -HSCIC - MHLDDS	Well-led	01 July 2014 to 30 June 2015	New Indicator
MHSDS_CPE01	<i>Proportion of provider closed episodes of Patients detained under the Mental Health act (MHA)</i>	Well-led	<i>01 July 2014 to 30 June 2015</i>	New Indicator
MHSDS_CPE02	<i>Proportion of provider closed Hospital Inpatient Episodes</i>	Well-led	<i>01 July 2014 to 30 June 2015</i>	New Indicator
MHSDS_COMSIO	Proportion of missing or invalid entries in MHLDDS employment status and accommodation status fields.	Well-led	01 July 2014 to 30 June 2015	New Indicator
MHSDS_SIO1	<i>Proportion of employment status (EMPSTAT) fields with a missing or invalid entry. Constituent Indicator (MHSDS_COMSIO) - MHLDDS</i>	Well-led	<i>01 July 2014 to 30 June 2015</i>	New Indicator
MHSDS_SIO2	<i>Proportion of accommodation status (ACCSTAT) fields with a missing or invalid entry. Constituent Indicator (MHSDS_COMSIO) - MHLDDS</i>	Well-led	<i>01 July 2014 to 30 June 2015</i>	New Indicator
MONITOR_MH01	Monitor: risk rating for governance - Monitor	Well-led	17 Nov 2015 to 17 Nov 2015	Yes
TDA_MH01	NHS Trust Development Authority escalation score - TDA	Well-led	01 April 2015 to 30 June 2015	Yes

Indicator ID	Indicator Name	CQC Key Question	Time period for version 3 (v3)	Is the v3 Time Period more recent than that used in v2?
FLUVACM H01	Proportion of Health Care Workers with direct patient care that have been vaccinated against seasonal influenza - Department of Health	Well-led	01 Sept 2014 to 28 Feb 2015	Yes
MHWEL13 7	Proportion of days sick in the last 12 months for medical and dental staff - ESR	Well-led	01 Oct 2014 to 30 Sept 2015	Yes
MHWEL13 8	Proportion of days sick in the last 12 months for nursing and midwifery staff - ESR	Well-led	01 Oct 2014 to 30 Sept 2015	Yes
MHWEL13 9	Proportion of days sick in the last 12 months for other clinical staff - ESR	Well-led	01 Oct 2014 to 30 Sept 2015	Yes
MHWEL14 0	Proportion of days sick in the last 12 months for non-clinical staff - ESR	Well-led	01 Oct 2014 to 30 Sept 2015	Yes
NHSSTAF F16	Proportion of staff reporting good communication between senior management and staff - NHS Staff Survey	Well-led	01 Sep 2014 to 31 Dec 2014	No
NHSSTAF F20	Proportion of staff feeling pressure to attend work when feeling unwell in the last 3 months - NHS Staff Survey	Well-led	01 Sep 2014 to 31 Dec 2014	No
NTS12_M H01	General Medical Council national training survey – trainees' overall satisfaction - GMC	Well-led	24 March 2015 to 6 May 2015	Yes
STASURB G01	Proportion of staff who would recommend the trust as a place to work or receive treatment - NHS Staff Survey	Well-led	01 Sep 2014 to 31 Dec 2014	No
GMC_MH0 1	General Medical Council enhanced monitoring - GMC	Well-led	01 June 2015 to 30 June 2015	Yes
MHRES17	Proportion of wards visited that have community meetings - MHA Database	Well-led	01 Sept 2014 to 31 Aug 2015	Yes
WBLOW_ MH01	Snapshot of whistleblowing alerts received by CQC - CQC	Well-led	16 Nov 2015 to 16 Nov 2015	Yes

Indicator ID	Indicator Name	CQC Key Question	Time period for version 3 (v3)	Is the v3 Time Period more recent than that used in v2?
COM_CM HS	Composite indicator to assess occurrence of errors and/or non-submission of data to the two most recent iterations of the Community Mental Health Survey -CMHS	Well-led	01 Sept 2013 to 30 Nov 2014	New Indicator
CMHS_CURR	<i>Occurrence of errors and/or non-submission of data relating to the current iteration of the Community Mental Health Survey</i>	Well-led	<i>01 Sep 2014 to 30 Nov 2014</i>	New Indicator
CMHS_PREV	<i>Occurrence of errors and/or non-submission of data relating to the previous iteration of the Community Mental Health Survey</i>	Well-led	<i>01 Sep 2013 to 30 Nov 2013</i>	New Indicator
MONITOR_MH02	Monitor: continuity of service rating - Monitor	Well-led	17 Nov 2015 to 17 Nov 2015	Yes
SYEMH	Negative comments submitted to Share Your Experience - CQC	Cross-cutting	01 July 2014 to 30 June 2015	New Indicator
P_OPINION_MH	Negative comments submitted to Patient Opinion sources	Cross-cutting	01 July 2014 to 30 June 2015	New Indicator
MHRES12	Proportion of new IAPT referral requests received where people have waited more than 28 days for first assessment - IAPT	Responsive	removed item	n/a
MHRES13	Proportion of new IAPT referral requests received where people have waited more than 28 days for first treatment - IAPT	Responsive	removed item	n/a