NHS Trusts that provide mental health services

Dr Paul Lelliott, Deputy Chief Inspector: 12 July 2016
CQC purpose and role

Our purpose

We make sure health and social care services provide people with safe, effective, compassionate, high-quality care and we encourage care services to improve

Our role

We monitor, inspect and regulate services to make sure they meet fundamental standards of quality and safety and we publish what we find, including performance ratings to help people choose care
Mental health at the CQC

• The hospitals directorate regulates inpatient and community, secondary and tertiary mental healthcare – including learning disabilities and substance misuse*

• Led by a deputy chief inspector who also oversees CQC’s Mental Health Act functions

• c35% of hospitals directorate’s resources allocated to mental health (eight regional teams with c220 staff)

• Separate mental health policy and intelligence teams

*ASC directorate regulates care homes
PMS directorate regulates mental health in primary care and prisons
### Numbers and inspection deadlines

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Number of Providers</th>
<th>Date to complete first inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>NHS trusts</td>
<td>56</td>
<td>30/6/2016</td>
</tr>
<tr>
<td>Independent mental health</td>
<td>286</td>
<td>30/6/2016</td>
</tr>
<tr>
<td>Community substance misuse</td>
<td>213</td>
<td>31/12/2016</td>
</tr>
<tr>
<td>Residential substance misuse</td>
<td>211</td>
<td>31/12/2016</td>
</tr>
</tbody>
</table>
Ratings of NHS trust that provide mental health services (n=45)

- Good: 17
- Requires improvement: 27
- Inadequate: 1

Care Quality Commission
Safe ratings for key sectors – location level*

* Ratings shown are overall safety ratings at location level for each primary inspection category, except for NHS mental health and community health, which is at provider level as there are no location ratings.

Source: CQC ratings published up to 26 June 2016. Figures in chart are percentages.
Effective ratings for key sectors – location level*

Location or provider level effectiveness ratings

- **GP practices (4,268)**
  - Inadequate: 3
  - Requires improvement: 8
  - Good: 86
  - Outstanding: 3

- **NHS acute specialist (12)**
  - Inadequate: 17
  - Requires improvement: 58
  - Good: 25
  - Outstanding: <0.5

- **Community social care (3,941)**
  - Inadequate: 1
  - Requires improvement: 20
  - Good: 78
  - Outstanding: <0.5

- **Residential social care (12,759)**
  - Inadequate: 3
  - Requires improvement: 28
  - Good: 69
  - Outstanding: <0.5

- **Mental health - independent (138)**
  - Inadequate: 5
  - Requires improvement: 29
  - Good: 63
  - Outstanding: 3

- **Community health - NHS & independent (14)**
  - Inadequate: 36
  - Requires improvement: 36
  - Good: 64

- **NHS acute non-specialist (226)**
  - Inadequate: 2
  - Requires improvement: 37
  - Good: 58
  - Outstanding: 2

- **Mental health - NHS (45)**
  - Inadequate: 60
  - Requires improvement: 40

* Ratings shown are overall effectiveness ratings at location level for each primary inspection category, except for NHS mental health and community health, which is at provider level as there are no location ratings.

Source: CQC ratings published up to 26 June 2016. Figures in chart are percentages
Caring ratings for key sectors – location level*

* Ratings shown are overall caring ratings at location level for each primary inspection category, except for NHS mental health and community health, which is at provider level as there are no location ratings.

Source: CQC ratings published up to 26 June 2016. Figures in chart are percentages.
Responsiveness ratings for key sectors – location level*

* Ratings shown are overall responsiveness ratings at location level for each primary inspection category, except for NHS mental health and community health, which is at provider level as there are no location ratings.

Source: CQC ratings published up to 26 June 2016. Figures in chart are percentages
Well-led ratings for key sectors – location level*

Location or provider level well-led ratings

- **GP practices (4,266)**
  - Inadequate: 4%
  - Requires improvement: 9%
  - Good: 83%
  - Outstanding: 4%

- **Mental health - independent (138)**
  - Inadequate: 5%
  - Requires improvement: 19%
  - Good: 73%
  - Outstanding: 3%

- **Community social care (3,939)**
  - Inadequate: 3%
  - Requires improvement: 25%
  - Good: 70%
  - Outstanding: 2%

- **Community health - NHS & independent (14)**
  - Inadequate: 7%
  - Requires improvement: 21%
  - Good: 71%
  - Outstanding: 1%

- **Residential social care (12,758)**
  - Inadequate: 4%
  - Requires improvement: 28%
  - Good: 67%
  - Outstanding: 1%

- **NHS acute specialist (14)**
  - Inadequate: 36%
  - Requires improvement: 28%
  - Good: 64%
  - Outstanding: 2%

- **Mental health - NHS (45)**
  - Inadequate: 2%
  - Requires improvement: 44%
  - Good: 51%
  - Outstanding: 2%

- **NHS acute non-specialist (240)**
  - Inadequate: 9%
  - Requires improvement: 49%
  - Good: 36%
  - Outstanding: 6%

• Ratings shown are overall well-led ratings at location level for each primary inspection category, except for NHS mental health and community health, which is at provider level as there are no location ratings.

Source: CQC ratings published up to 26 June 2016. Figures in chart are percentages
### Variation between Mental Health Trusts

#### Nottinghamshire Healthcare NHS Trust
**July 2014**

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Safe</th>
<th>Effective</th>
<th>Caring</th>
<th>Responsive</th>
<th>Well-led</th>
<th>Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health Inpatient Services</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
</tr>
<tr>
<td>Services for adults</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Good</td>
</tr>
<tr>
<td>Services for Children &amp; Young People and Families</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
</tr>
<tr>
<td>End of Life Care</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
</tr>
<tr>
<td>PICU &amp; Health Based Places of Safety</td>
<td>Good</td>
<td>Good</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
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<tr>
<td>Rapid Response Liaison Psychiatry</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
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<tr>
<td>Services for Older People</td>
<td>Good</td>
<td>Good</td>
<td>Outstanding</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
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<tr>
<td>Services for people with LD or Autism</td>
<td>Requires Improvement</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Requires Improvement</td>
<td>Requires Improvement</td>
<td>Requires Improvement</td>
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<tr>
<td>Specialist eating disorder service</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
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<td>Good</td>
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<tr>
<td>Crisis Resolution &amp; Community-based crisis services</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
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<td>Perinatal services</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
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<tr>
<td>Long Stay Services</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Good</td>
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<tr>
<td>Forensic Services</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
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<tr>
<td>CAMHS</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
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<tr>
<td>Adult Community based services</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
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<tr>
<td>Acute admission wards</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
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<tr>
<td>Overall</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Outstanding</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
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</table>

#### Norfolk & Suffolk NHS FT
**February 2015**

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Safe</th>
<th>Effective</th>
<th>Caring</th>
<th>Responsive</th>
<th>Well-led</th>
<th>Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult acute wards &amp; PICU's</td>
<td>Inadequate</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Inadequate</td>
<td>Inadequate</td>
<td>Inadequate</td>
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<tr>
<td>Adult long stay / rehabilitation wards</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
<td>Not Applicable</td>
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<tr>
<td>Forensic inpatient / secure wards</td>
<td>Inadequate</td>
<td>Requires Improvement</td>
<td>Requires Improvement</td>
<td>Requires Improvement</td>
<td>Inadequate</td>
<td>Inadequate</td>
</tr>
<tr>
<td>CAMHS</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
</tr>
<tr>
<td>Wards for older people</td>
<td>Requires Improvement</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Inadequate</td>
<td>Requires Improvement</td>
<td>Requires Improvement</td>
</tr>
<tr>
<td>Wards for people with a learning disability or autism</td>
<td>Inadequate</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Requires Improvement</td>
<td>Inadequate</td>
<td>Inadequate</td>
</tr>
<tr>
<td>Adult community-based services</td>
<td>Requires Improvement</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Requires Improvement</td>
<td>Inadequate</td>
<td>Requires Improvement</td>
</tr>
<tr>
<td>Community-based crisis services &amp; HBPoS</td>
<td>Requires Improvement</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Requires Improvement</td>
<td>Inadequate</td>
<td>Requires Improvement</td>
</tr>
<tr>
<td>Specialist community-based services for children &amp; young people</td>
<td>Requires Improvement</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Requires Improvement</td>
<td>Requires Improvement</td>
<td>Requires Improvement</td>
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<tr>
<td>Community-based services for older people</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Good</td>
<td>Inadequate</td>
<td>Requires Improvement</td>
<td>Requires Improvement</td>
</tr>
<tr>
<td>Community-based services for people with a learning disability or autism</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
</tr>
<tr>
<td>Overall</td>
<td>Inadequate</td>
<td>Requires Improvement</td>
<td>Good</td>
<td>Requires Improvement</td>
<td>Inadequate</td>
<td>Inadequate</td>
</tr>
</tbody>
</table>
Common themes

- Quality and safety of ward environments
- Nurse staffing levels on wards and high use of agency/bank
- Risk assessment
- Practice and recording of restrictive interventions
- Staff training, supervision and appraisal
- Waiting times; especially for CAMHS and psychological therapies
- Availability of adult admission beds, PICUs and CAMHS
- Adherence to MHA code of practice
CQC will focus on four priorities:

1. Encouraging improvement, innovation and sustainability in care.

2. Delivering an intelligence-driven approach to regulation.

3. Promoting a single shared view of quality.

4. Improving our efficiency and effectiveness.
The future (2016-2021)

• Smaller, focused inspections of core services, particularly those that require improvement or are inadequate.

• More use of unannounced inspections.

• Update core service ratings on the basis of these inspections.

• Hold an annual review of each provider to determine where to focus our inspection activity for the year ahead.
• Expect providers to describe their own quality against our five key questions, and feed this information into the annual review.

• Produce shorter reports, more quickly, that make clear how we have come to our decisions.

• Develop approaches to inspect services that cross our current core service boundaries, like mental health services in an acute hospital.
Engagement with the wider system: 1

Transforming Care
• Inspection to drive up quality and inform commissioning decisions
• Registration to ensure that new providers adhere to the new service model for learning disabilities (‘Registering the right support’)

Five Year Forward View
• Better assessment of quality of mental healthcare in acute hospitals and primary care
• Inspection to support implementation of objectives eg. incorporation of access and waiting time targets into assessment methodologies

Substance misuse
• Work with PHE to promote best practice in detox/withdrawal
NHS Improvement
• Identifying ‘challenged providers’ and joint work with specific providers

Review of how trusts investigate deaths
• In response to events at Southern Health
• Involves mental health, community health and acute NHS trusts
• Due to report in December 2016