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)

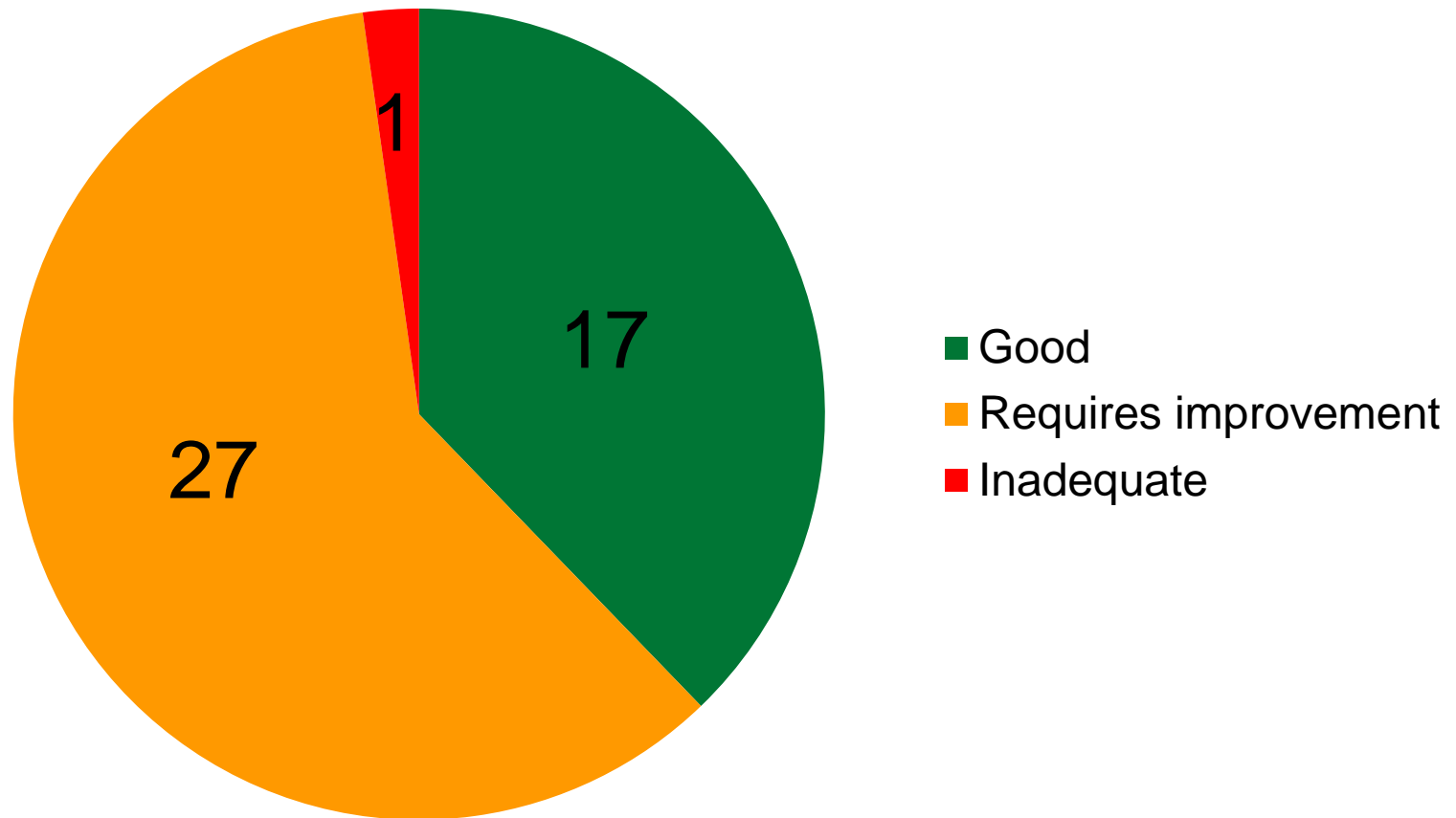- Separate mental health policy and intelligence teams

[*]ASC directorate regulates care homes
PMS directorate regulates mental health in primary care and prisons

Numbers and inspection deadlines

Care Quality Commission

	Service Type	Number of Providers	Date to complete first inspection
H9	**NHS trusts**	56	30/6/2016
H8	**Independent mental health**	286	30/6/2016
H7	**Community substance misuse**	213	31/12/2016
H10	**Residential substance misuse**	211	31/12/2016

Ratings of NHS trust that provide mental health services (n=45)

Legend:
- Good (green): 17
- Requires improvement (orange): 27
- Inadequate (red): 1

Safe ratings for key sectors – location level*

Location level safety ratings

Sector	Inadequate	Requires improvement	Good	Outstanding
Community social care (4,203)	5	28	67	<0.5
GP practices (4,614)	6	27	67	1
Residential social care (15,392)	9	36	55	<0.5
NHS acute specialist (15)		47	53	
Mental health - independent (142)	9	42	49	
Community health - NHS & independent (14)		64	36	
NHS acute non-specialist (291)	14	61	25	
Mental health - NHS (46)	9	85	7	

Legend: ■ Inadequate ■ Requires improvement ■ Good ■ Outstanding
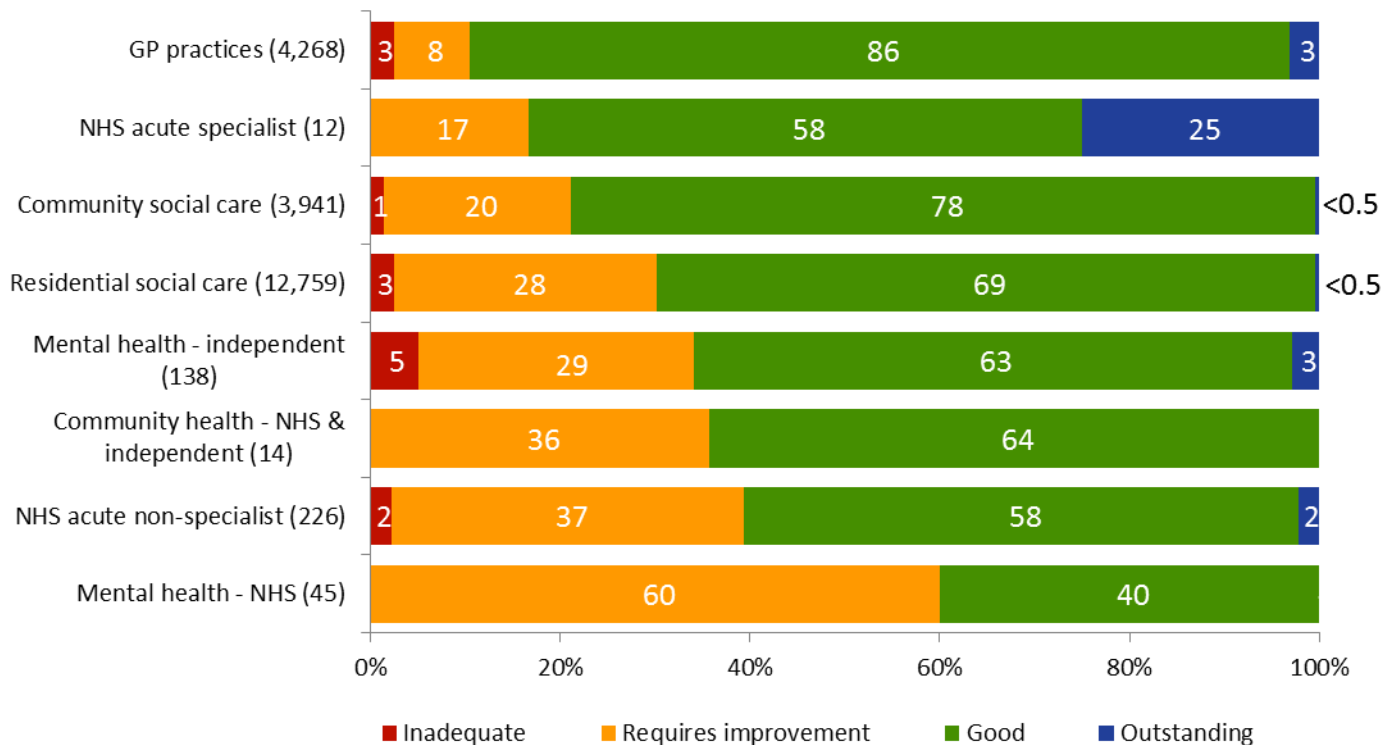
* Ratings shown are overall safety ratings at location level for each primary inspection category, except for NHS mental health and community health, which is at provider level as there are no location ratings.

Effective ratings for key sectors – location level*

CareQuality Commission

Location or provider level effectiveness ratings

Sector	Inadequate	Requires improvement	Good	Outstanding
GP practices (4,268)	3	8	86	3
NHS acute specialist (12)		17	58	25
Community social care (3,941)	1	20	78	<0.5
Residential social care (12,759)	3	28	69	<0.5
Mental health - independent (138)	5	29	63	3
Community health - NHS & independent (14)		36	64	
NHS acute non-specialist (226)	2	37	58	2
Mental health - NHS (45)		60	40	

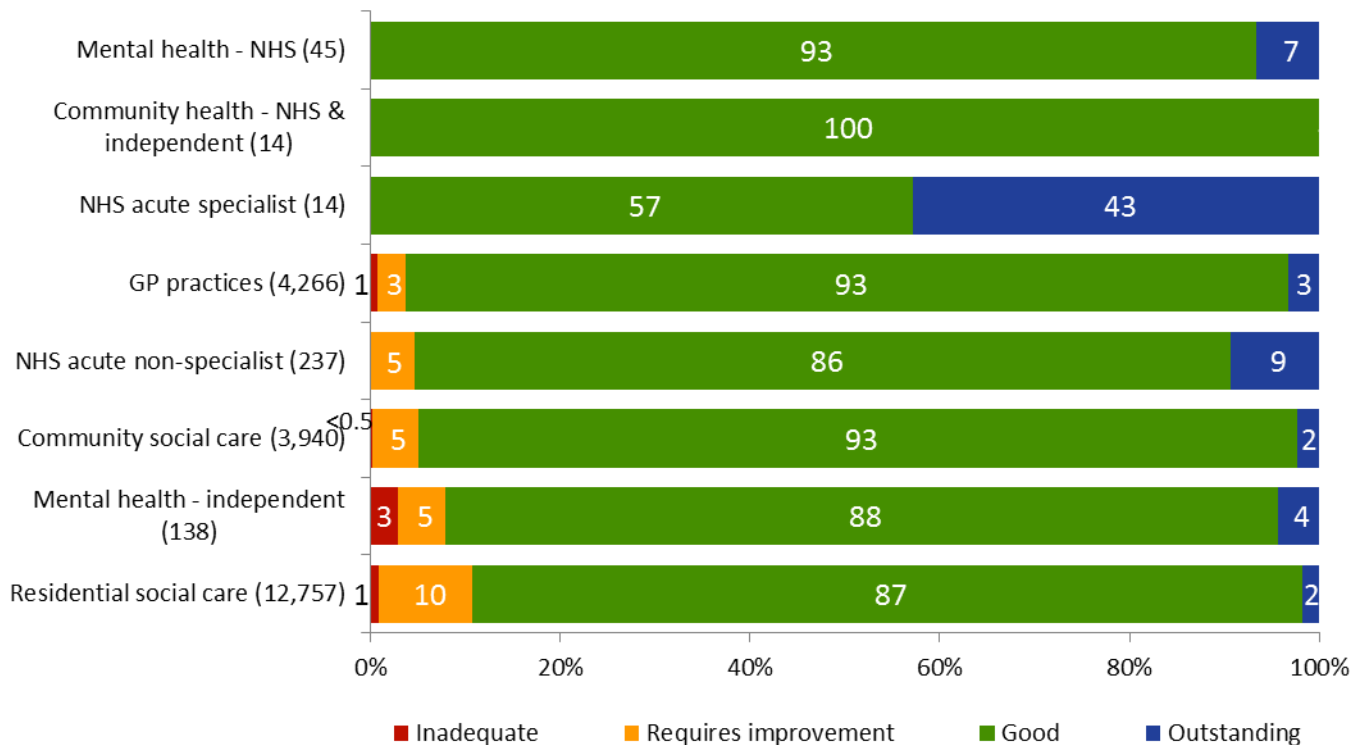■ Inadequate ■ Requires improvement ■ Good ■ Outstanding

* 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.

Caring ratings for key sectors – location level*

CareQuality Commission

Location or provider level caring ratings

Sector	Inadequate	Requires improvement	Good	Outstanding
Mental health - NHS (45)			93	7
Community health - NHS & independent (14)			100	
NHS acute specialist (14)			57	43
GP practices (4,266)	1	3	93	3
NHS acute non-specialist (237)		5	86	9
Community social care (3,940)	<0.5	5	93	2
Mental health - independent (138)	3	5	88	4
Residential social care (12,757)	1	10	87	2

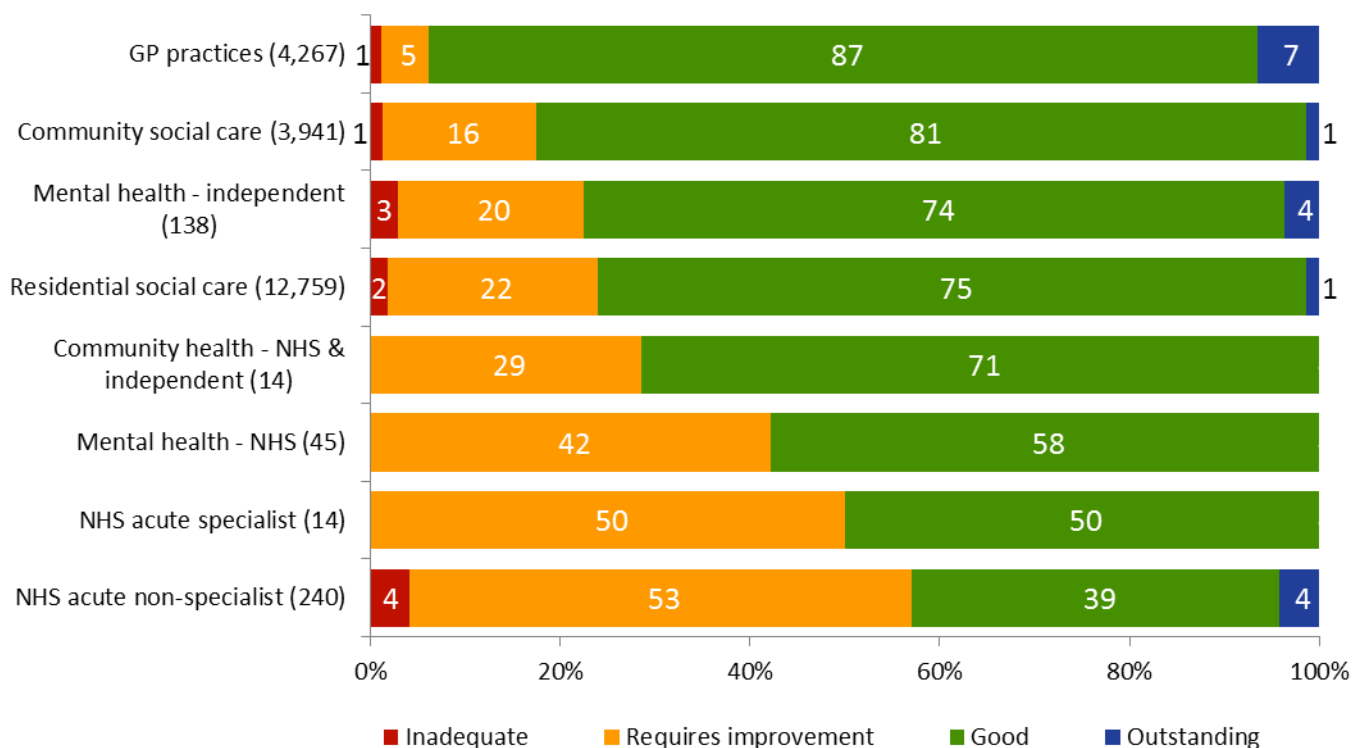Legend: ■ Inadequate ■ Requires improvement ■ Good ■ Outstanding

* 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.

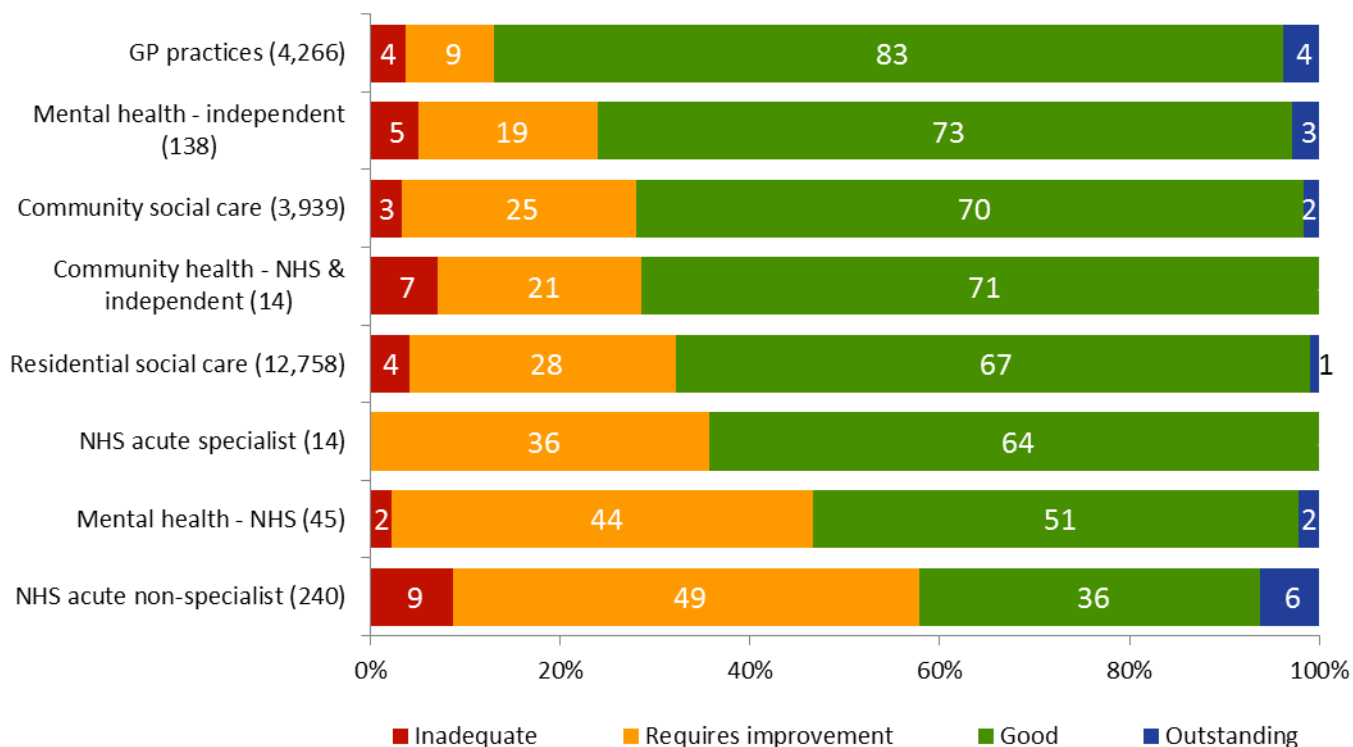# Responsiveness ratings for key sectors – location level*

CareQuality Commission

Location or provider level responsiveness ratings

Sector	Inadequate	Requires improvement	Good	Outstanding
GP practices (4,267)	1	5	87	7
Community social care (3,941)	1	16	81	1
Mental health - independent (138)	3	20	74	4
Residential social care (12,759)	2	22	75	1
Community health - NHS & independent (14)		29	71	
Mental health - NHS (45)		42	58	
NHS acute specialist (14)		50	50	
NHS acute non-specialist (240)	4	53	39	4

■ Inadequate   ■ Requires improvement   ■ Good   ■ Outstanding

* 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.

Well-led ratings for key sectors – location level*

CareQuality Commission

Location or provider level well-led ratings

Sector	Inadequate	Requires improvement	Good	Outstanding
GP practices (4,266)	4	9	83	4
Mental health - independent (138)	5	19	73	3
Community social care (3,939)	3	25	70	2
Community health - NHS & independent (14)	7	21	71	
Residential social care (12,758)	4	28	67	1
NHS acute specialist (14)		36	64	
Mental health - NHS (45)	2	44	51	2
NHS acute non-specialist (240)	9	49	36	6

Legend: ■ Inadequate ■ Requires improvement ■ Good ■ Outstanding

- 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.

Variation between Mental Health Trusts

CareQuality Commission

Nottinghamshire Healthcare NHS Trust
July 2014

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

Norfolk & Suffolk NHS FT
February 2015

	Safe	Effective	Caring	Responsive	Well-led	Overall
Adult acute wards & PICU's	Inadequate	Requires Improvement	Good	Inadequate	Inadequate	Inadequate
Adult long stay / rehabilitation wards	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable
Forensic inpatient / secure wards	Inadequate	Requires Improvement	Requires Improvement	Requires Improvement	Inadequate	Inadequate
CAMHS	Requires Improvement	Good	Good	Good	Good	Good
Wards for older people	Requires Improvement	Requires Improvement	Good	Inadequate	Requires Improvement	Requires Improvement
Wards for people with a learning disability or autism	Inadequate	Requires Improvement	Good	Requires Improvement	Inadequate	Inadequate
Adult community-based services	Requires Improvement	Requires Improvement	Good	Requires Improvement	Inadequate	Requires Improvement
Community-based crisis services & HBPoS	Requires Improvement	Requires Improvement	Good	Requires Improvement	Inadequate	Requires Improvement
Specialist community-based services for children & young people	Requires Improvement	Requires Improvement	Good	Requires Improvement	Requires Improvement	Requires Improvement
Community-based services for older people	Requires Improvement	Good	Good	Inadequate	Requires Improvement	Requires Improvement
Community-based services for people with a learning disability or autism	Good	Good	Good	Good	Good	Good
Overall	Inadequate	Requires Improvement	Good	Requires Improvement	Inadequate	Inadequate

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

The future (2016-2021)

**CareQuality
Commission**

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)

CareQuality Commission

- 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.

The future (2016-2021)

CareQuality Commission

- 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

Engagement with the wider system: 2

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