



Black Country Healthcare
NHS Foundation Trust

CQC Core Service Responsive Inspection

BCHFT Adult working age inpatient services. February 2023



Together with you to achieve **healthier, happier lives**

Context to inspection and report

- February 2023 the Care Quality Commission (CQC) undertook a responsive inspection of one BCHFT core service: Acute wards for adults of working age and psychiatric intensive care units
- The final report was published in May 2023.
- The Trust has seen a deterioration in the **core service** rating from Good to Requires Improvement, and a rating deterioration from Good to Requires Improvement in the key questions “Effective, Responsive and Well-Led”.
- The safe domains remains rated as Requires Improvement and the Caring domain maintains a rating of Good.
- There has been **no change** in the Trust aggregated ratings as a result of the core service rating changes.
- The trust has maintained its rating of good in the domains of Effectiveness, Caring, Responsiveness and Leadership, and has remained rated as Requires Improvement in the Safe domain.



Core service ratings

Ratings

Overall rating for this service

Requires Improvement ●

Are services safe?

Requires Improvement ●

Are services effective?

Requires Improvement ●

Are services caring?

Good ●

Are services responsive to people's needs?

Requires Improvement ●

Are services well-led?

Requires Improvement ●

BCHFT Trust ratings

Ratings

Overall trust quality rating

Good ●

Are services safe?

Requires Improvement ●

Are services effective?

Good ●

Are services caring?

Good ●

Are services responsive?

Good ●

Are services well-led?

Good ●

Are resources used productively?

Inspected but not rated ●

Identified Good Practice

- Staff treated patients with compassion and kindness, respected their privacy and dignity, and understood the individual needs of patients.
- Staff actively involved patients and families and carers in care decisions.
- Staff assessed and managed risk well and minimised the use of restrictive practices.
- The ward environments were clean.
- Managers ensured that staff received supervision and appraisal.
- Staff followed good practice with respect to safeguarding.



Identified areas for improvement

- A need to focus on the management of medication and closer working with pharmacists.
- Improve training rates in core skills.
- Consistency and quality of care-planning.
- Recruit to vacancies within ward based MDT's.
- Continue work on the physical environment, refurbishment and removal of ligature points.
- Ensure that patients receive planned 1:1's and leave.
- Focus on awareness of new systems and teams within the Trust

Must and Should do Actions

Must do actions = 10

Actions the trust MUST take are necessary to comply with its legal obligation as set out within the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

Should do actions = 5

These are actions the trust SHOULD take because it was not doing something required by a regulation but it would be disproportionate to find a breach of the regulation overall, to prevent it failing to comply with legal requirements in future, or to improve services.

Requirement notices by Regulation.

Regulation 9: Person Centered Care = 1

Regulation 12: Safe care and Treatment = 3

Regulation 15: Premises and Equipment = 2

Regulation 17: Good Governance = 3

Regulation 18: Staffing = 1

“Should do’s” by Regulation.

Regulation 12: Safe care and Treatment = 1

Regulation 15: Premises and Equipment = 2

Regulation 17: Good Governance = 1

Regulation 18: Staffing = 1

Must do Actions

Action the service **MUST** take to improve:

1. The trust must ensure that patients have an opportunity to be involved in their care plans and are offered a copy of this. (Regulation 9. Person centred care)
2. The trust must ensure that all works to the environment to reduce ligature risks are completed. (Regulation 12. Safe care and treatment)
3. The trust must ensure the seclusion room at Macarthur Centre is updated to make the environment more comfortable for patients in seclusion. (Regulation 15. Premises and Equipment)
4. The trust must ensure that sofas and flooring on Friar ward at Hallam Street are replaced to make the environment suitable and comfortable for patients. (Regulation 15. Premises and Equipment)
5. The trust must ensure that staff complete patients physical health observations following administration of rapid tranquilisation. (Regulation 12. Safe care and treatment)
6. The trust must ensure that all staff receive training in basic life support and those eligible in immediate life support. (Regulation 12. Safe care and treatment)

Must do Actions

Action the service **MUST** take to improve:

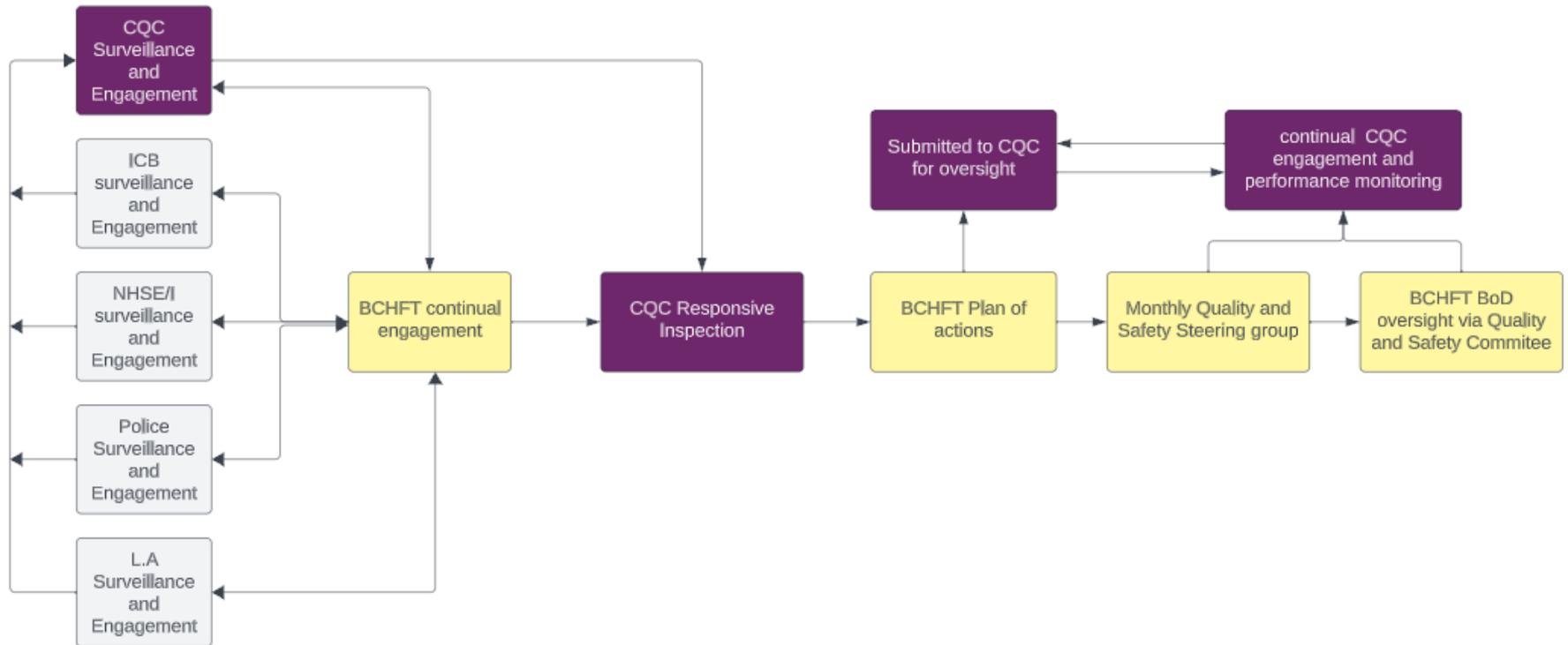
7. The trust must ensure that the rapid tranquilisation policy informs staff clearly of the maximum dose of anti-psychotic medicines to be administered and what action to take if administering medicines off the manufacturer's license. (Regulation 17. Good Governance)
8. The trust must ensure that there are systems and processes in place to manage patients' restricted items. (Regulation (17. Good Governance)
9. The trust must ensure that there are sufficient staff so that a) patients have their escorted leave, regular one to one sessions with their named nurse and b) have access to psychology during their stay in hospital. (Regulation 18. Staffing).
10. The trust must ensure that all staff are aware of the teams available within the trust and the community to facilitate safe discharge from hospital for patients. (Regulation 17. Good Governance)

Should do Actions

Action the service **SHOULD** take to improve:

1. The trust should ensure that the environment at Ambleside ward is redecorated and comfortable for patients. (Regulation 15. Premises and Equipment)
2. The trust should consider investing in the outside spaces and gardens on all wards to enable patients to enjoy time outside of the ward. (Regulation 15. Premises and Equipment)
3. The trust should consider having photographs on patients' medicine administration records so that all staff can easily identify patients. (Regulation 12. Safe care and Treatment)
4. The trust should consider how they manage daily rotas to ensure staff get sufficient breaks each shift. (Regulation 18. Staffing)
5. The trust should ensure that all staff have an opportunity to know about learning from complaints and incidents and the trust are assured that staff understand these. (Regulation 17. Good Governance)

BCHFT Governance framework



Update on Actions. Q2 23-24

