Regulatory Assessment Statement 2009/2010

Vision MH
Cornerstone House, Barnet Lane, Elstree, Hertfordshire, WD6 3QU

Introduction

The Care Standards Act 2000 sets out those Independent healthcare providers in England that must be registered with the Care Quality Commission. To register, they need to demonstrate compliance with the Care Standards Act 2000 and associated regulations. The Care Quality Commission tests providers' compliance by assessing each registered establishment against a set of *National Minimum Standards,* which were published by the Government and set out the minimum standards for different types of independent health services.

Background

Vision MH is situated in a large detached house with one independent flat within the grounds. There are a number of facilities available including a library, gymnasium/games room, therapy studios and the gardens. The establishment is situated approximately one mile from the local high street, shopping, leisure activities and a rail link.
The service has 19 registered beds and provides treatment for both informal patients and persons liable to be detained under the Mental Health Act 1983 as amended by the Mental Health Act 2007. The establishment offers a treatment and recovery based psychiatric service that provides assessment and active, intensive and comprehensive multidisciplinary treatment for individuals suffering from mental illness.
At registration, the premises were inspected and deemed appropriate to the client group and fit for the intended purpose, documentation provided has indicated that the required level of standards has been maintained.

Registration Categories

This registration is granted within the following categories only

Description	Service Category
Independent Hospital	IH
Mental health establishment taking people liable to be detained	MH (D)

Conditions of registration

This registration is subject to the following conditions.

Condition of Registration:
The establishment is registered as an independent hospital (IH) to provide care for persons who may have a mental health condition and mental health services to persons liable to be detained under the Mental Health Act 1983 MH(D)
To provide care for patients from 18 to 65 years only
Female patients may not share the same sleeping accommodation as male patients.

Condition of Registration:
The prior written approval of the Healthcare Commission must be obtained at least one month prior to providing any treatment or service not detailed in the Statement of Purpose
The establishment may provide care for a maximum of nineteen patients at any one time

Assessments

The Care Quality Commission only carries out on site inspections to make assessments of standards where we do not have sufficient evidence that the required level of performance is being achieved. The Care Quality Commission is required to inspect establishments at least once every five years and this report reflects the assessment of the establishment or agency at a given point in time.

This establishment has been assessed as not needing an inspection during the period 1 April 2009 to 31 March 2010.

We have reviewed a range of information about this establishment during the year, including information provided by the establishment and information about it from other sources. When we reviewed all of this information we did not identify any serious issues that indicated that we should inspect the establishment. The establishment will continue to provide information to us during the year from 1 April 2009 to 31 March 2010, to help us identify any risks to its compliance with the National Minimum Standards. If during the year we identify serious risks that the establishment is not meeting the National Minimum Standards, we may decide to inspect it to check compliance with the standards.

Below are some of the sources of information we considered that underlies our decision not to inspect this establishment in 2009/10.

Where the Care Quality Commission has carried out on-site inspections, these are available on our web site. This service has not not been inspected since registration on 23rd September 2008.

Information reviewed		What this tells us
Self-Assessment	☒	The first stage in the annual assessment process is for registered providers to complete a comprehensive self-assessment against all the National Minimum Standards that relate to their service. We ask providers to describe what systems and evidence they have to assure themselves they are complying with these. We look at their responses and judge whether we feel confident that the systems and evidence they have is sufficient to demonstrate compliance. Where we find gaps we may ask the provider to submit more evidence to us, where no such evidence can be provided we may undertake an inspection to check for ourselves.
Previous year's report	☐	☒ Not applicable as no previous report We look back to the assessment process for last year. Where issues were identified with the provider's performance we will, this year, look at the evidence they submit about these, in some detail. We are looking to see if the same problems seem to continue. Where this is the case we may inspect to decide whether more formal action is required to bring about improvement..

Action Plan	☐	☒ Not applicable as no previous action plans requested Wherever we write a report about a provider's performance, that contains requirements, we ask the provider to develop an action plan setting out how the requirements will be met. We will look at this during the annual assessment process to see how progress is being made. Where a provider was asked to write an action plan but failed to do so, we will assess whether the issues they were asked to cover should be inspected instead. This will not always be the case and sometimes providers will address the issues in the Self Assessment form making the action plan, itself, less important.
Previous 12 month history of notifications	☒	Regulations 8,11,14,28,29,30,31,32 and 41require the registered provider to notifiy the Commission of certain events. Most events that must be notified through the provisions of these regulations are in connection with the registration of an establishment or agency, to ensure that the business is operated and managed so that it does not compromise the health, safety and welfare of patients. These notifications may include events such as a patient death or a serious untoward incident. The notifications are reviewed at the time we receive them and the Care Quality Commission may have already taken action. However, during the annual assessment process we review these notifications again, looking for trends or patterns that may require us to ask for further information or carry out an inspection.
Registered provider visit reports	☒	Regulation 26 of the Private and Voluntary Healthcare [England] Regulations 2001 requires any registered provider, who is not in day-to-day charge of the establishment, to make visits to the establishment on an unannounced basis, once every 6 months. The regulations set out areas that they must review and these include discussing the quality of care with patients, reviewing complaints and discussing the management of the establishment with the staff. The provider is then required to compile a report regarding the visit and submit this to the Care Quality Commission. These reports are reviewed at the time we receive them and the Care Quality Commission may have already followed issues up. However, during the annual assessment process we review these reports again, looking for trends or patterns that may require inspection. Failure to submit these reports may also be a cause for inspection.
Concerning Information & Local intelligence	☒	Whilst the Care Quality Commission is not a complaints handling or arbitration service, we welcome any feedback from patients and the public on the performance of providers as they found it. This may include information about complaints raised with the provider or general concerns about things they saw or experienced. This information is reviewed at the time we receive it and the Care Quality Commission may have already taken action. However, during the annual assessment process we review this information again, looking for trends or patterns that may require inspection.

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