

# Review of compliance

## Lincolnshire Partnership NHS Foundation Trust Witham Court

<b>Region:</b>	East Midlands
<b>Location address:</b>	Fen Lane North Hykeham Lincoln Lincolnshire LN6 8UZ
<b>Type of service:</b>	Hospital services for people with mental health needs, learning disabilities and problems with substance misuse
<b>Date of Publication:</b>	November 2011
<b>Overview of the service:</b>	Witham Court is one of nine locations that form Lincolnshire Partnership NHS Foundation Trust. This location provides services for up to 41 older people with mental health needs such as dementia, depression and psychotic disorders. Younger people with dementia needs

	can also be provided with a service if appropriate.
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# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Witham Court was meeting all the essential standards of quality and safety.**

The summary below describes why we carried out this review, what we found and any action required.

### Why we carried out this review

We carried out this review to check whether Witham Court had made improvements in relation to:

Outcome 13 - Staffing

### How we carried out this review

We reviewed all the information we hold about this provider.

### What people told us

We did not speak to people who use the service as part of this inspection process. We spoke to them as part of our inspection in July 2011 and they told us that they were satisfied with the services they were receiving.

### What we found about the standards we reviewed and how well Witham Court was meeting them

#### **Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs**

There are systems in place to ensure that people's needs are met with appropriate staffing levels.

### Other information

Please see previous reports for more information about previous reviews.

**What we found  
for each essential standard of quality  
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

**Compliant** means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

## Outcome 13: Staffing

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are safe and their health and welfare needs are met by sufficient numbers of appropriate staff.

### What we found

#### Our judgement

The provider is compliant with Outcome 13: Staffing

#### Our findings

##### What people who use the service experienced and told us

We did not speak to people who use the service as part of this inspection process. We spoke to them as part of our inspection in July 2011 and they told us that they were satisfied with the services they were receiving.

##### Other evidence

During our inspection of this location in November 2010 we said that some areas of people's needs and wishes were not being fully met because there was not enough staff. When we visited again in July 2011 we saw that some improvements had been made. For example a new system had been put in place so that managers could keep a check on staffing levels, and the trust was conducting a review of staffing levels based on people's needs. However we saw that there were still times when staff had to leave people to take telephone calls for example.

Since then the trust has confirmed to us that they have made more improvements to the way in which they manage staffing levels. For example, one ward area has reduced the number of people it can admit at any one time, new staff were being recruited for each ward area, and wards have increased the amount of staff that work on each day shift. We know that ward areas can also use agency staff to cover for absences amongst their permanent staff.

##### Our judgement

There are systems in place to ensure that people's needs are met with appropriate

staffing levels.

# What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

**Improvement actions:** These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

**Compliance actions:** These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

**Enforcement action:** These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

## Information for the reader

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