

Review of compliance

Berkshire Healthcare NHS Foundation Trust	
Region:	South East
Address:	2nd and 3rd Floors, Fitzwilliam House Skimped Hill Lane Bracknell Berkshire RG12 1LD
Type of service:	Hospital services for people with mental health needs, and/or learning disabilities, and/or problems with substance misuse
Date the review was completed:	24 March 2011
Overview of the service:	<p>Berkshire Healthcare NHS Foundation Trust provides local specialist care for people with ongoing or complex mental health issues, substance misuse issues and some learning disabilities.</p> <p>Care is mainly provided through local community teams who offer treatment and support through a wide range of services with links to local partnerships.</p> <p>The trust is registered to provide services at seven locations across Berkshire and one in Oxfordshire.</p>

Summary of our findings for the essential standards of quality and safety

What we found overall

We found that Berkshire Healthcare NHS Foundation Trust was meeting the essential standard of quality and safety we reviewed.

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

Why we carried out this review

We carried out this review to check whether Berkshire Healthcare NHS Foundation Trust had made improvements in relation to:

- Notification of other incidents

How we carried out this review

We reviewed reports made to us by the National Patient Safety Agency (NPSA) for the period 24 February 2011 to 17 March 2011 and additional information provided by the trust for the period 18 to 24 March 2011.

What people told us

We did not speak with patients or their relatives as part of this responsive review.

What we found about the standards we reviewed and how well Berkshire Healthcare NHS Foundation Trust was meeting them

Outcome 20: The service should notify the Care Quality Commission, without delay, of important events that affect patients' welfare, health and safety.

- Overall, we found that Berkshire Healthcare NHS Foundation Trust is now meeting this essential standard and had made the improvements we had required.

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 safe*

Outcome 20: Notification of other incidents

What the outcome says

This is what people who use services should expect.

People who use services:

- Can be confident that important events that effect their welfare, health and safety are reported to the Care Quality Commission so that, where needed, action can be taken.

What we found

Our judgement

The provider is compliant with outcome 20: Notification of other incidents

Our findings

What people who use the service experienced and told us
We did not speak with patients as part of this review so cannot report what they said.

Other evidence
As part of our ongoing monitoring of compliance we monitor statutory notifications that providers are required to make to us without delay. In the case of NHS trusts, the majority of these notifications are made to the National Patient Safety Agency (NPSA), who then forward the notification details to us in a regular report.

During a previous review of the trust we found that the trust was not making these notifications without delay and we required the trust to make improvements to achieve compliance by 23 March 2011.

For this review we carried out an analysis of the reporting times for incidents notified by the trust to the NPSA between 24 February 2011 to 17 March 2011 and then forwarded to us by the NPSA (28 incidents). For the period from 18 to 24 March 2011, we used information provided by the trust (30 incidents).

We found that 100% of all incidents had been reported between 0 and 14 days after the incident.

Following our requirement for improvement, the trust told us that they had: 'enhanced our control processes to ensure any delays against our internal standard are escalated to a Director to resolve if a performance issue with a manager.'

The trust also sent us a copy of their 'Incident Reporting - Performance Monitoring Report' for the period covering 24 February to 21 March 2011. This document was developed by the trust following our requirement for improvement and forms part of the trust's new notifications monitoring system. The monitoring report showed us that the trust had taken action promptly to comply with the regulations and that an effective system had been put in place for ongoing monitoring.

Our judgement

- Overall, we found that Berkshire Healthcare NHS Foundation Trust is now meeting this essential standard and had made the improvements we had required.

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 Adult 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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