

Appendix 1: Process undertaken for review of services after 1 year

A comprehensive review of transferred services was undertaken using a variety of methods. The approach for each organisation was determined based on the extent of services being transferred (measured by the number of staff transferring) and the availability of evidence. The methods used were as follows:

Clinical Services Reviews (CSR) – Any organisation that received more than 70 staff was subject to a CSR. A small team visited the organisations and reviewed the transferred services. The reviewers spoke to staff and patients and assessed the physical environment. The reviewers' approach was based on the 15 Step Challenge document¹ and considered key lines of enquiry from the 'safe' and 'effective' CQC domains.

The reviewers were from all areas of the NHS. Feedback was given to trust executives on the day of the visit with a written report sent two weeks later. The teams felt that staff spoke candidly and raised concerns freely with them. Positive comments were noted as well as any areas of concern. The reviewers were informed that they could, at any point during the review, report any areas of significant concern for immediate action by the Trust. This was not considered necessary for any review.

Desk Top Review (DTR) – A review of a wide variety of data available to NHSI/E from the previous twelve months, with data separated into the CQC key lines of enquiry (safe, effective, caring, responsive and well led). Note that this data was at organisation rather than service level and was therefore not specific to transferred services. It nevertheless provided an indicator of any broader concerns on safety or effectiveness.

Review of last available CQC report – Subject to availability. Virgin Healthcare and Solutions for Health did not have any current CQC Inspection Report.

Each report was reviewed noting the overall rating, the ratings for the safe and effective domains and, if applicable, comments specific to transferred services. If there were any queries or areas of concern these were then followed up with a discussion with the CQC Relationship Manager.

2018 Staff Survey Results – The results were reviewed and compared to the previous years to determine if there was significant deterioration. As with the DTR exercise, results were on an organisation rather than service basis and therefore provided broad, rather than specific, intelligence on transferring services.

Enhanced Surveillance (ES) / Quality Risk Profile (QRP) – All transferred services were subject to enhanced surveillance by the local CCG for twelve months.

¹ <https://www.england.nhs.uk/wp-content/uploads/2017/11/15-steps-inpatient.pdf>

Any organisation (including ALBs, CCGs, CQC, NHSI, NHSE, GMC, HEENW) from across the region that attends the Regional Quality Surveillance Group (RQSG) could raise concerns about any of the transferred services or the hosting organisations.

If issues are raised via this route, organisations can be subject to a QRP analysis (a more detailed version of the DTR described above) and if necessary, this would lead to a Risk Summit in which system partners come together to discuss and agree actions to address the concerns. The CCGs may have the organisations under enhanced surveillance already due to concerns over contract performance.

Telephone Consultation – For providers that received very small numbers of staff, a telephone consultation was undertaken with a sample of transferring staff to understand their experiences post transfer and to establish whether they had any concerns relating to the safety and effectiveness of services

Process undertaken for each organisation

Provider	No. staff transferred	CSR	DTR	CQC Report Review	Staff Survey 2018 Review	ESR / QRP	Phone Consult.
Mersey Care	2170	✓	✓	✓	✓	✓	x
North West Boroughs	133	✓	✓	✓	✓	✓	x
Alder Hey	100	✓	✓	✓	✓	✓	x
Royal Liverpool	75	✓	✓	✓	✓	✓	x
Solutions for Health	10	x	x	n/a	n/a	✓	✓
Aintree	6	x	✓	✓	✓	✓	✓
Virgin Health Care	4	x	x	n/a	n/a	✓	✓
Manchester Teaching Hospitals	3	x	✓	✓	✓	✓	x
HM Prison Services	70	✓	x	✓	n/a	✓	x

Appendix 2: Summary of Key Findings

Provider	Key findings – Safety and effectiveness of transferred services
Mersey Care FT	<p data-bbox="358 384 607 416"><u>Overall summary</u></p> <ul data-bbox="405 432 1178 687" style="list-style-type: none"> • Whilst concerns remain across the community division it has been recognised that the trust is on an improvement journey for community services. • It is acknowledged that this will take time. Our view is that the trust has the right culture and ethos to drive further improvement and the trust has a comprehensive plan in place to address the issues. <p data-bbox="358 719 712 751"><u>Clinical Services Review</u></p> <ul data-bbox="405 791 1155 1206" style="list-style-type: none"> • Some staff felt isolated and felt communication could be better • Staffing levels were not always at the right level, particularly nursing and unqualified staff. • Clinical supervision was sporadic, this led to staff being unsupported when dealing with incidents or problems with their role • Access to records was, at times, problematic • Integration of transferred services was generally viewed by staff as positive. • Staff morale perceived as increasing <p data-bbox="1211 384 1693 416">CQC report review (5th April 2019)</p> <ul data-bbox="1258 424 2024 831" style="list-style-type: none"> • Overall rating of Good. Safe and effective domains were also rated as good. • Adult community services were rated as requires improvement. • CQC were specifically concerned about staffing levels, training and equipment availability within community services. • Staff remained concerned about ‘speaking up’ due to previous experiences. • CQC stated, however, that the trust had a clear vision and plan in place to address the issues. <p data-bbox="1211 879 1541 911"><u>Enhanced Surveillance</u></p> <ul data-bbox="1258 951 2036 1278" style="list-style-type: none"> • Trust remains on enhanced surveillance for community services. Liverpool CCG monitors the performance dashboard for community services. The Trust has a full action plan to support discussions at this meeting. • Some issues have arisen but none that we deem to be significant in terms of safety or effectiveness of services. • No additional concerns for community services.

	<ul style="list-style-type: none"> • Trust has implemented a 'Just Culture'² approach has been extended to the community services but will take time to embed. • Appears to be a patient-focused organisation. • Patient feedback was positive. <p><u>Desktop review</u></p> <ul style="list-style-type: none"> • Staff sickness is consistently high. Trust has a comprehensive plan in place to address this. • Areas of concern or issue are discussed through the CCG contract performance meetings with the trust and via the Quality Meetings held with NHSI/E. • Transferred services will remain under increased surveillance due to the problems identified in the 'Kirkup' Report, as it is acknowledged this will take time to address. <p><u>Staff survey review</u></p> <ul style="list-style-type: none"> • Trust has improved scores across several areas. • There are no areas of deterioration from the previous year. <p><u>Services Transferred</u></p> <ul style="list-style-type: none"> • Community nursing services • Urgent care • Walk in centre • Health visiting, school nursing and district nursing • Meds management, meds distribution • Palliative care • Integrated Community Reablement and Assessment Service • Community ward • Skin service, treatment rooms • Prison services
--	--

² In a 'Just Culture' when things go wrong, the focus is on the wider system rather than the individual, enabling staff to learn without fear of retribution and fostering a transparent and open way of working. However, people are also held to account for gross negligence or deliberate acts.

<p>North West Boroughs FT</p>	<p><u>Overall summary</u></p> <ul style="list-style-type: none"> Trust is considered to be safe and effective for transferred services. Wider organisational concerns exist for incident management and in relation to the 2018 staff survey results. Because of this, the trust remains in enhanced surveillance. <p><u>Clinical Services Review</u></p> <ul style="list-style-type: none"> Staff perceive that the transfer of services to the trust has been beneficial. Staff feel they deliver a safe and effective service. They feel supported but would like Executive visibility to be improved <p><u>Desktop review</u></p> <ul style="list-style-type: none"> Organisationally the trust is performing reasonably well across data measurements. <p><u>Services Transferred</u></p> <ul style="list-style-type: none"> Safeguarding and Looked After Children Walk in centre Phlebotomy 	<p><u>CQC report review (Oct 2018)</u></p> <ul style="list-style-type: none"> Overall rating of good, including for safe and effective domains. Community and end of life care rated good. Some issues highlighted in the report including achieving mandatory training and ensuring staff were trained in dementia care and the mental capacity act. Hand hygiene and meds management were also raised as requiring attention. <p><u>Enhanced Surveillance</u></p> <ul style="list-style-type: none"> No issues identified with transferred services. More generally, trust is on enhanced surveillance for serious incident management. This is improving. Following a Mental Health Homicide Review, Trust has with CCGs for an Assurance Review Meeting <p><u>Staff survey review</u></p> <ul style="list-style-type: none"> The 2018 staff survey saw a deterioration across five sections. Serious Incident management and feedback was a concern.
---------------------------------------	---	--

<p>Alder Hey FT</p>	<p><u>Overall summary</u></p> <ul style="list-style-type: none"> Trust is considered safe and effective for community services. The Trust was rated 'requires improvement' for the 'safe' domain due to issues identified with mandatory training, staffing in critical care, medicines management and record keeping. <p><u>Clinical Services Review</u></p> <ul style="list-style-type: none"> Evidence that communication, inclusive management and cohesive working have improved Staff report that managers listen to concerns Reduction in waiting lists due to better management <p><u>Desktop review</u></p> <ul style="list-style-type: none"> Trust performs reasonably well across most data parameters Trust had three never events in 2018 but none were associated with transferred services. <p><u>Services Transferred</u></p> <ul style="list-style-type: none"> Community matrons Dietetics and SALT Hearing impairment Continence services Physiotherapy Complex care Attention Deficit Hyperactivity Disorder Autistic Spectrum Disorder 	<p><u>CQC report review (June 2018)</u></p> <ul style="list-style-type: none"> Trust rated as 'good' overall 'Requires Improvement' overall for safe domain Community services rated as 'good' overall and in the safe domain. It was rated requires improvement for effectiveness. Issues with recording administered medicines and with knowledge of the Mental Capacity Act identified. <p><u>Enhanced Surveillance</u></p> <ul style="list-style-type: none"> No safety or effectiveness issues identified through this process. <p><u>Staff survey review</u></p> <ul style="list-style-type: none"> No areas have deteriorated Several areas have improved Survey has improved or remained the same for most areas. No significant concerns in relation to safety and effectiveness.
-------------------------	---	--

<p>Royal Liverpool and Broadgreen University Hospitals NHS Trust</p>	<p><u>Overall summary</u></p> <ul style="list-style-type: none"> No concerns identified with safety and effectiveness of community services. Wider organisational concerns remain for RTT and ED performance. Quality Risk Profile has been undertaken and results monitored via contract and performance meetings with the CCG. <p><u>Clinical Services Review</u></p> <ul style="list-style-type: none"> Line management were described as being supportive. Staff reported a smooth transition of services to the new provider Slow recruitment processes leaving vacancies to be covered with temporary staff. Safety is not compromised as bank and agency staff are utilised as necessary. <p><u>Desktop review</u></p> <ul style="list-style-type: none"> Organisationally the trust is performing reasonably well across most data measurements. No significant concerns in relation to safety and effectiveness. <p><u>Services Transferred</u></p> <ul style="list-style-type: none"> Community respiratory teams Community radiology Heart failure ECG Anticoagulation services 	<p><u>CQC report review published July 2019</u></p> <ul style="list-style-type: none"> Deterioration from 'good' to 'Requires Improvement'. Community Services rated as 'good'. Responsive and well led domains were 'Requires Improvement'. Wider organisational concerns re safeguarding, risk and governance. <p><u>Enhanced Surveillance</u></p> <ul style="list-style-type: none"> The CCG has issued Contract Performance Notices to the Trust following enhanced surveillance for areas outside of community. These are not specific to community services but are for the trust as a whole. Quality Risk Profile was undertaken for whole organisation in June 2019. No specific concerns re community services. <p><u>Staff survey review</u></p> <ul style="list-style-type: none"> Survey has improved or remained the same for most areas. No significant concerns in relation to safety and effectiveness.
--	--	--

<p>Solutions for Health</p>	<p><u>Overall summary</u></p> <ul style="list-style-type: none"> No issues identified with safety or effectiveness of transferred services 	<p><u>Telephone consultation</u></p> <ul style="list-style-type: none"> Staff confirmed they felt able to deliver an effective service. They did not have any concerns and felt they were well supported. <p><u>Services Transferred</u></p> <ul style="list-style-type: none"> Small community team, Cardiac Rehabilitation team
<p>Aintree FT</p>	<p><u>Overall summary</u></p> <ul style="list-style-type: none"> The Trust has been on extended enhanced surveillance but this was for areas outside of the scope of this report. Transferred services were small, with only three of the original transferring staff remaining in the organisation. Trust consider the provided services as excellent and has been recognised nationally as an example of good practice and care. <p><u>Services Transferred</u></p> <ul style="list-style-type: none"> Diabetic services 	<p><u>CQC report review (September 2019)</u></p> <ul style="list-style-type: none"> 'Good' for the whole organisation Requires improvement for the safe and effective domains. This was due to high use of bank and agency, risk assessments not being completed in a timely manner, mandatory training compliance. There wasn't anything specific to the transferred services. <p><u>Telephone Consultation</u></p> <ul style="list-style-type: none"> Staff felt supported by the Trust Their transfer to Aintree was already in progress prior to the Kirkup Review Staff did not have any concerns

<p>Virgin Health</p>	<p><u>Overall summary</u></p> <p>No issues identified with safety or effectiveness of transferred services</p>	<p><u>Telephone consultation</u></p> <ul style="list-style-type: none"> • Staff have seen very little change by moving over to Virgin Healthcare • They were always based remotely from LCH so did not feel part of that team. • They believe it is a better working environment since transferring over and believe they provide a good service. <p><u>Transferred Services</u></p> <ul style="list-style-type: none"> • Small community team, Cardiac Rehabilitation team
<p>Manchester FT</p>	<p><u>Overall summary</u></p> <ul style="list-style-type: none"> • No issues identified with safety or effectiveness of transferred services 	<p><u>CQC report review (March 2019)</u></p> <ul style="list-style-type: none"> • Overall rating of 'good'. • Good' in both the safe and effective domains.
<p>HM Prison Services</p>	<p><u>Overall summary</u></p> <ul style="list-style-type: none"> • There has been considerable improvement in the service delivered to patients which has been triangulated with evidence from quality schedule, Health and Justice Indicators of Performance (HJIPs) complaints, CQC visit and service user feedback. • Staff spoken to indicated that they know how to raise concerns and feel supported if they do. 	<p><u>CQC report review</u></p> <ul style="list-style-type: none"> • Inspection imminent. <p><u>Enhanced Surveillance</u></p> <ul style="list-style-type: none"> • Identified the need to increase staff compliance to mandatory training figures which was completed. • HMPs were asked to review the environment to increase availability of 'controlled drug' compliant accommodation. A review has taken place and a business case has been submitted for approval. • A review of ligature incidents was requested to ensure that all incidents meeting the NHS England.

Clinical Services Review

- Significant improvements have been implemented to the healthcare service in HMP Liverpool to the benefit of both patients and staff.
- Staff spoken to during the visit described a shared vision based on improvements to patient care and well-being. This has improved safety and effectiveness.

Desktop review

- Mandatory training has increased from 65% in March to 89% in June 2019.
- Staff are aware of incident reporting and receive feedback.
- Lessons learnt bulletin produced monthly.
- Increase reporting for ligature incidents noted following improved processes.

definition are captured on StEIS. A review of the ligature incidents has taken place and a new process has been implemented.

Staff 1-1 discussions Feedback

- Level of support to staff has improved.
- Can speak out without fear of reprisals.
- Clinical supervision is in place and practiced.
- Visible senior leadership.