

Mountain Healthcare Limited

Solace Centre SARC

Inspection report

Cobham Community Hospital 168 Portsmouth Road Cobham KT11 1HT Tel: 03302230099

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Overall summary

We carried out this focused announced inspection on 2 October 2023 under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions to follow up on concerns that had been identified in a previous inspection which was undertaken on 29 November 2022. We planned the inspection to check whether the registered provider was meeting the legal requirements in the Health and Social Care Act 2008 and associated regulations. The inspection was led by a CQC inspector. The inspection was a desk-based review and did not include a site visit. We focused on a specific part of the service that is offered to patients under 13 years of age, and who had been affected by recent sexual abuse and sexual assault ('recent' means less than 72 hours from when the incident took place). Services provided to children under 13, and who had been affected by non-recent sexual abuse and sexual assault are undertaken by a different provider and were not inspected as part of this inspection ('non-recent' means more than 72 hours since the incident took place). To get to the heart of patients' experiences of care and treatment, we always ask the following five questions; is the service safe, effective, caring, responsive and well-led? This targeted inspection only looked at parts of the following key question: Is it well-led? This question forms the framework for the areas we look at during the inspection.

Background

The Solace Centre is based in Cobham and offers a range of support services to anyone across all ages, living within the Surrey area who have experienced sexual abuse or sexual assault, either recently or in the past. For those patients aged 13 and under, forensic medical examiners employed by Mountain Healthcare led on recent cases. They were supported by paediatricians from a local NHS trust, however, no joint working arrangements for this had been formalised at the time of our visit in November 2022. This service is available between Monday and Friday (9am-5pm). Referrals are made to an alternative provider outside of these hours when needed. The service is provided by Mountain Healthcare Limited and as a condition of registration they must have a person registered with the Care Quality Commission as the registered manager. Registered managers have legal responsibilities for meeting the requirements of the Health and Social Care Act 2008 and associated regulations about how the service is run. At the time of our inspection the registered manager was the SARC regional contracts manager. The service is located on the first floor of Cobham

Summary of findings

Community Hospital and has full access for people who use wheelchairs and those with pushchairs. Car parking spaces are available at the hospital including a number of spaces for blue badge holders. On the day of the inspection, we looked at policies and procedures and other records about how the service is managed. We reviewed all information through a desk-based review. This inspection did not include a site visit.

Our key findings were:

- The service had systems to help them manage risk.
- The service had systems and processes which informed their governance arrangements.

There was one area where the provider should make improvements. They should:

• Develop a standardised procedure to ensure oversight of the disclosure and barring service status for any paediatrician employed by the local NHS trust working in the SARC. This should include a policy which outlines the frequency of checks to be undertaken.

Summary of findings

The five questions we ask about services and what we found

We asked the following question(s).

Are services well-led?

No action



Are services well-led?

Our findings

Leadership capacity and capability

Since our last inspection (November 2022) a new SARC manager had been appointed. The newly recruited SARC centre manager was supported by Mountain Healthcare peer networks (meetings with managers from other SARCS) and the regional contracts director.

Governance and management

During our November 2022 inspection, we found that leaders understood their responsibilities to oversee all the services provided at the Solace Centre. Clear plans had been written which identified the roles and responsibilities of both providers. However, leaders informed us that there had been some delays in finalising these arrangements. Leaders had not always acted to mitigate the risks posed by this delay. Some action had been taken to reduce the risks posed while waiting for the new arrangements to be formalised, such as retrospective case notes reviews. There remained, however, a lack of oversight of other important areas, such as mandatory training as well as disclosure and barring (DBS) checks. During the October 2023 inspection we saw that the roles and responsibilities of both providers (Mountain Healthcare and Surrey and Borders Partnership NHS Foundation Trust) were clear, and the service had developed a working partnership document that outlined the agreed responsibilities in the journey of children under 13 years. We saw that an understanding of the contractual obligations and roles was now in place within the service. There were standing agenda items at regular bi-monthly meetings which included governance and oversight, audit, sharing of good practice and peer reviews. We saw that DBS checks were in place, but we did not find evidence of a system which supported the checking of DBS status for paediatricians employed by the local NHS trust working into the SARC.

Processes for managing risks, issues and performance.

Following our November 2022 inspection, a full review of forensic cleaning standards was completed by the provider and a new protocol was implemented to provide assurance on cleaning standards. This included improved record keeping, the implementation of weekly manager checks and a refresher for all staff on the cleaning standards, and the expectations for recording and quality checking these. We reviewed evidence from partnership meetings. These are meetings attended by clinicians and managers from Mountain Healthcare and Surrey and Borders Partnership NHS Foundation Trust. The minutes indicated agencies worked well together to ensure joint governance arrangements were in place. We reviewed training records which demonstrated the provider had oversight of the completion of mandatory training by the paediatricians who were not directly employed by the provider. All mandatory training requirements had been completed at the time of the inspection. We saw effective arrangements for identifying, recording and managing risks, issues and mitigating actions at the SARC. This included progress and review dates and gave responsibility for the risk to a nominated manager. Therefore, the provider had effective oversight of risk processes. The provider had introduced a programme of audit to monitor quality at the SARC.