

# Cambridgeshire Community Services NHS Trust

## Inspection report

Headquarters, Unit 3  
Meadow Lane  
St Ives  
Cambridgeshire  
PE27 4LG  
Tel: 01480308222  
[www.cambscommunityservices.nhs.uk](http://www.cambscommunityservices.nhs.uk)

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We plan our next inspections based on everything we know about services, including whether they appear to be getting better or worse. Each report explains the reason for the inspection.

This report describes our judgement of the quality of care provided by this trust. We based it on a combination of what we found when we inspected and other information available to us. It included information given to us from people who use the service, the public and other organisations.

This report is a summary of our inspection findings. You can find more detailed information about the service and what we found during our inspection in the related Evidence appendix.

## Ratings

### Overall rating for this trust

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

We rated well-led (leadership) from our inspection of trust management, taking into account what we found about leadership in individual services. We rated other key questions by combining the service ratings and using our professional judgement.

# Summary of findings

## Background to the trust

Cambridgeshire Community Services NHS Trust provides a range of specialist community based services to adults and children across the East of England, and specifically in Cambridgeshire, Luton, South Bedfordshire, Peterborough, Suffolk and Norfolk. As a result, the trust holds contracts with multiple commissioners, including Cambridgeshire and Peterborough clinical commissioning group (CCG), Luton CCG, NHS England, Central Bedfordshire and Bedford Borough Councils, Norfolk County Council, Suffolk County Council, Luton Borough Council and Cambridgeshire County Council.

Cambridgeshire Community Services NHS Trust was first registered with the Care Quality Commission on 1 April 2010. The total number of staff employed by the trust is 2,118. This includes medical, dental, nursing, support staff and allied health professionals.

From 1st April 2018 the Trust was commissioned to provide a number of children's services and staff transferred to the trust under the Transfer of Undertakings (Protection of Employment) Regulations (TUPE) from the previous provider.

## Overall summary

**Our rating of this trust stayed the same since our last inspection. We rated it as Good** ● → ←

## What this trust does

Cambridgeshire Community Services NHS Trust provides a range of specialist community based services to adults and children across the East of England, and specifically in Cambridgeshire, Luton, South Bedfordshire, Peterborough, Suffolk and Norfolk. As a result, the trust holds contracts with multiple commissioners, including Cambridgeshire and Peterborough clinical commissioning group (CCG), Luton CCG, NHS England, Central Bedfordshire and Bedford Borough Councils, Norfolk County Council, Suffolk County Council, Luton Borough Council and Cambridgeshire County Council.

Services provided by this trust include:

- Community dental services
- Children and young people's services
- Community health services for adults
- Integrated contraception and sexual health services

## Key questions and ratings

We inspect and regulate healthcare service providers in England.

To get to the heart of patients' experiences of care and treatment, we ask the same five questions of all services: are they safe, effective, caring, responsive to people's needs, and well-led?

Where we have a legal duty to do so, we rate the quality of services against each key question as outstanding, good, requires improvement or inadequate.

Where necessary, we take action against service providers that break the regulations and help them to improve the quality of their services.

# Summary of findings

## What we inspected and why

We plan our inspections based on everything we know about services, including whether they appear to be getting better or worse.

Between 27 and 28 March 2018, we inspected two core services. We inspected community health services for adults and community dental services. We inspected these services as part of our continual checks on the safety and quality of health care.

Our comprehensive inspections of NHS trusts have shown a strong link between the quality of overall management of a trust and the quality of its services. For that reason, all trust inspections now include inspection of the well-led key question for the trust overall. What we found is summarised in the section headed *Is this organisation well-led?* We inspected the well led key question between 12 and 13 April 2018.

## What we found

### Overall trust

Our rating of the trust stayed the same. We rated it as good because:

- We rated safe, effective, caring, responsive and well led at core service level as good. In rating the trust, we also considered the current ratings of the other services we did not inspect. Our decision on overall ratings consider, for example, the relative size of services and we use our professional judgement to reach a fair and balanced rating. We rated well led for the trust overall as good.
- Community health services for adults remained good overall. Safe improved from requires improvement to good. Effective, caring, responsive and well led remained good. We found areas of improvement in relation to staff attendance at mandatory training. Staffing levels had improved and despite some vacancies remaining, managers proactively ensured there were sufficient staff on duty. The disposal of clinical waste in patients own homes however was not in line with the trust's policy.
- Community dental services remained good overall. Safe, effective, responsive and well led remained good. Caring improved from good to outstanding. The service had taken steps to mitigate any further risks associated with the reported never events. We saw numerous examples where dental staff demonstrated compassion and delivered patient centred care. The service considered the needs of patients and delivered a service that met the needs of the community. Complaints were fully investigated, and responded to in a timely manner.

### Are services safe?

Our rating of safe improved. We took into account the current ratings of services not inspected this time. We rated it as good because:

- There was a good incident reporting culture. Incidents were investigated and lessons learned were shared as appropriate.
- Compliance with mandatory training was good. This was an improvement since our last inspection when compliance with mandatory training was poor.
- Staff protected patients from abuse and the service worked well with other agencies to do so. Staff were trained on how to recognise and report abuse, knew how to respond, and were well supported by the safeguarding team.
- Staff had the right qualifications, skills, training and experience to keep people safe from avoidable harm and abuse and to provide the right care and treatment.

# Summary of findings

- There were still staff vacancies in community health services for adult teams, but this had improved since our last inspection in May 2014. Staff were flexible in their approach to work and managers proactively ensured there were sufficient staff on duty.

However:

- Within community health services for adults, staff did not always follow the trust's policy or agreement with the local authority for the disposal of clinical waste in patients' own homes.

## Are services effective?

Our rating of effective stayed the same. We took into account the current ratings of services not inspected this time. We rated it as good because:

- Care was provided in line with national guidance. Managers checked to ensure staff followed guidance as part of regular supervision and audits.
- There was effective monitoring and findings were used to improve. Findings were compared to other services to enable learning.
- Staff were competent to undertake their roles and managers appraised staff's work performance and held supervision meetings with them to provide support and monitor the effectiveness of the service.
- Staff understood their roles and responsibilities under the Mental Health Act 1983 and the Mental Capacity Act 2005. They knew how to support patients experiencing mental ill health and those who lacked the capacity to make decisions about their care.
- Staff of different kinds worked together as a team to benefit patients. Doctors, nurses and other healthcare professionals supported each other to provide good care.

## Are services caring?

Our rating of caring stayed the same. We took into account the current ratings of services not inspected this time. We rated it as good because:

- Staff cared for patients with compassion. Feedback from patients confirmed that staff treated them well and with kindness. This was particularly evident in the community dental service where dental staff took time to get to know patients holistically and provided care that was person centred.
- Staff involved patients and those close to them in decisions about their care and treatment.
- Staff provided emotional support to patients to minimise their distress.
- Feedback was consistently positive and Friends and Family Test results were good overall.

## Are services responsive?

Our rating of responsive stayed the same. We took into account the current ratings of services not inspected this time. We rated it as good because:

- Patients' individual needs were considered when planning services.
- People could access the service when they needed it. Waiting times from referral to assessment were in line with good practice.
- Concerns and complaints were taken seriously, investigated them and learned lessons from the results, the trust had acted on negative patient feedback, made changes and shared findings with all staff.

# Summary of findings

## Are services well-led?

Our rating of well-led stayed the same. We took into account the current ratings of services not inspected this time. We rated it as good because:

- Staff we spoke with talked positively about local leadership. The leadership teams understood the current challenges and pressures impacting on service delivery and patient care.
- Staff described an open and supportive culture, where they felt valued and felt safe to raise concerns if they needed to.
- Managers at all levels had the right skills and abilities to run services and provide safe patient care.
- Staff were aware of the vision and strategy for the trust and for their service.
- The trust engaged well with patients, staff, the public and local organisations to plan and manage appropriate services, and collaborated with partner organisations effectively.
- The trust and its staff were committed to improving services by learning from when things went well and when they went wrong, promoting training, research, and innovation.

However:

- Within community health services for adults there was a disconnect between one specific community nursing team and operational leads with staff expressing dissatisfaction with their work-life balance. The executive team were aware of this and were taking steps to address the concerns.
- Within community health services for adults senior managers displayed a lack of oversight in some areas such as knowledge of complaints and clinical waste disposal processes.

## Ratings tables

The ratings tables show the ratings overall and for each key question, for each service, hospital and service type, and for the whole trust. They also show the current ratings for services or parts of them not inspected this time. We considered all ratings in deciding overall ratings.

Our decisions on overall ratings also considered factors including the relative size of services and we used our professional judgement to reach fair and balanced ratings.

## Outstanding practice

We found examples of outstanding practice in community adult services, dental services and in well led.

For more information, please see the outstanding practice section of this report.

## Areas for improvement

We found areas for improvement. We found five things the trust should improve to comply with a minor breach that did not justify regulatory action, to prevent breaching a legal requirement, or to improve the quality of services.

For more information, please see the areas for improvement section of this report.

## What happens next

We will make sure that the trust takes the necessary action to improve its services. We will continue to monitor the safety and quality of services through our continuing relationship with the trust and our regular inspections.

# Summary of findings

## Outstanding practice

- Each board meeting included a patient story, to set the tone of the meeting and staff were invited to have lunch with the board following the meeting. This meant the board were fully focused on both patients and staff experience. There was a patient experience and involvement strategy in place that supported the continued focus of capturing patient experience.
- Within the community dental services, staff learned Makaton and simple British sign language (BSL) to improve interactions with patients with communication difficulties.
- The Luton respiratory team interventions have reduced the prevalence of TB locally by 10% per year in the last three to four years and purchased a mobile x-ray machine to enable homeless service users who found it difficult to attend normal clinics to access diagnostic tests and treatment.
- The Think Pink campaign was invented by one of the service nurses and introduced a pink wristband for patients known to the service who were admitted to the local hospitals. This highlighted that the patient was already known to the service and enabled staff to be proactive about resuming care.
- The Oliver Zangwill Centre for Neuropsychological Rehabilitation were involved in a number of innovative practices including the development of an external memory aid 'NeuroPage', which sent specific reminders regarding important tasks to patients' individual pagers. The NeuroPage service expanded to send messages to mobile phone, as well as pagers and a randomised control study trial resulted in a PhD being awarded. They also published 'The Brain Injury Rehabilitation' workbook and held subsequent workshops at the centre for therapy staff.
- The community discharge team in Luton had increased their activity working with the local hospital and liaising with GPs to anticipate patients who may need additional support before they were they were discharged and also to triage GP referrals to help avoid unnecessary admissions.

## Areas for improvement

Action a trust SHOULD take is to comply with a minor breach that did not justify regulatory action, to prevent it failing to comply with legal requirements in future, or to improve services.

### Action the trust SHOULD take to improve

#### Trust wide

- The trust should improve the time taken to resolve complaints in line with its own policy.

#### In Adult community services

- The trust should ensure it revises its clinical waste disposal policy and that staff follow the correct procedure for the disposal of clinical waste in patient's homes.
- The trust should ensure that community nursing staff have time scheduled for daily handover meetings.

#### In community dental services

- The trust should review the storage of patients' dental care records to ensure they are held securely and confidentially at the Brookfields location.
- The trust should review the process around medicine management and daily medicine fridge temperature monitoring to improve consistency across the whole service.

# Summary of findings

## Is this organisation well-led?

Our comprehensive inspections of NHS trusts have shown a strong link between the quality of overall management of a trust and the quality of its services. For that reason, we look at the quality of leadership at every level. We also look at how well a trust manages the governance of its services – in other words, how well leaders continually improve the quality of services and safeguard high standards of care by creating an environment for excellence in clinical care to flourish.

We rated well led as good because:

- The board had the skills, knowledge, experience and integrity to lead the trust. The trust board members were a group of individuals with a wide range of experience, knowledge and skills who displayed transparent accountability at decision making levels.
- The executive team were a stable cohesive team, focused on patient safety and quality of care. They were dedicated leaders with clear strategic vision and commitment to staff engagement.
- The board and senior leadership team recognised the training needs of managers at all levels, including themselves, and worked to provide development opportunities for the future of the organisation.
- The board and senior leadership team had set a clear vision and values that were at the heart of all the work within the organisation. They worked hard to make sure staff at all levels understood them in relation to their daily roles.
- The board were aware of the continuing pressures on the health system and the challenges this presented to quality and sustainability. There was a strong focus on working collaboratively with local partners, acute and social services and external organisations to move forward sustainability and transformation plans.
- Board members were visible across the trust and without exception, staff fed back that senior leaders were visible and approachable.
- The board reviewed performance reports that included data about the services, which service leads could challenge.
- Staff throughout the core services we inspected told us the trust promoted a ‘no blame’ culture and they were encouraged to raise concerns and report incidents without fear of retribution.
- The trust's overall staff engagement score was the best for community trusts and ninth best nationally at 3.97 compared to the 3.78 as the national average for community trusts.
- The trust was committed to improving services by learning from when things go well and when they go wrong, promoting training, research and innovation.
- Leadership development opportunities were available, including opportunities for staff below team manager level. The trust actively supported leadership development through further training and planned for career succession.
- Leaders across the trust generally promoted a positive culture that supported and valued staff, creating a sense of common purpose based on shared values. Staff we spoke with throughout our core service and well led inspection told us they felt positive and proud about working in the trust and their team. Staff told us they felt empowered to make decisions and to make changes.

However:

- There were some inconsistencies in leadership and approach across localities within the community adult services. The trust was aware of this and was working to address the concerns.

# Summary of findings

- The trust did not always meet their target of 25 days to investigate and respond to complaints, but were working to improve this.



# Community dental services

Good ● → ←

## Key facts and figures

The trust provides community dental services including minor oral surgery, sedation and emergency dental care as well as clinical dentistry for children and adults with special needs on referral from a health professional.

A small dental team deliver oral health promotion to patients in the community. The team visit care homes, schools and nurseries promoting good oral health.

During our inspection, we visited community dental access centres based in Cambridge, Huntingdon, and Peterborough. We observed routine dentistry across three sites in addition to the paediatric general anaesthetic day surgery at a local NHS trust. We spoke with nine patients, six relatives and 19 members of staff including the service lead, managers, dental surgeons, dental nurses and reception staff. We reviewed a selection of relevant documents, policies and four patient care records.

## Summary of this service

Our rating of this service stayed the same. We rated it as good because:

- There was a patient-centered culture. Staff were highly motivated and offered care that was kind and promoted patients' dignity. Relationships between people who used the service, those close to them and staff were strong, caring and supportive.
- Staff cared for patients based on national guidance and evidence, monitored the effectiveness of care and treatment and used the findings to improve them. Staff delivered care with kindness and compassion and involved patients in their care planning. Feedback from patients confirmed staff treated them well and with kindness. Patients told us that staff went the extra mile and the care they received exceeded their expectations.
- Staff understood their roles and responsibilities under the Mental Health Act 1983 and the Mental Capacity Act 2005. They knew how to support patients experiencing mental health issues and those who lacked the capacity to make decisions about their care. Staff consistently strived to ensure patients had all the information they required in any format they wanted to enable them to make an informed decision about their care.
- The service managed patient safety incidents and used safety monitoring results well. Staff recognised and reported incidents and managers investigated them and shared lessons learned. Staff apologised and gave patients honest information and suitable support when things went wrong.
- Staff understood how to protect patients from abuse and the service worked well with other agencies to do so. Staff of different services worked together as a team to benefit patients. All staff had access to up-to-date, accurate, and comprehensive information on patients' care and treatment.
- The service had appropriate staff with the right qualifications, skills, training, and experience to keep people safe and to provide the right care and treatment. This was an improvement on our last inspection where the trust did not have the appropriate establishment for dental nurses. Staff were competent for their roles and managers provided supervision, appraisal, and support.

# Community dental services

- The service treated concerns and complaints seriously, investigated them, learned lessons from the results and shared them with all staff. The service had improved the way it acted on negative feedback from patients since our last inspection. The service was committed to improving patient care by learning when things went well and when they went wrong.
- The service had managers at all levels with the right skills and abilities to run a service providing safe care. Managers across the trust promoted a positive culture that supported and valued staff.
- The service collected, analysed, managed, and used information well to support all its activities, using secure electronic systems where possible. The service identified risks and developed ways to eliminate or reduce them. .

However:

- Staff stored paper based patient dental records at Brookfield's in unsecured filing cabinets in areas accessible by patients.
- Staff did not secure the clinical waste bin at the Brookfield's location and it was accessible to the public.
- Staff did not manage controlled drugs and fridge monitoring consistently across all the trust sites we visited.

## Is the service safe?

Good   

Our rating of safe stayed the same. We rated it as good because:

- The service managed patient safety incidents well. Staff recognised incidents and reported them appropriately. Managers investigated incidents and shared lessons learned with the whole team and the wider service. When things went wrong, staff apologised and gave patients honest information and suitable support.
- The service used safety monitoring results well. Staff collected safety information and shared it with staff, patients and visitors. The service used information to improve the service.
- The service controlled infection risk well. Staff kept themselves, equipment and the premises clean. They used control measures to prevent the spread of infection. The service had suitable premises and equipment and looked after them well.
- In general, the trust prescribed, administered, recorded and stored medicines well. Patients received the right medication at the right dose at the right time.
- Staff kept appropriate records of patients' care and treatment. Records were clear, up-to-date and available to all staff providing care.
- Staff understood how to protect patients from abuse and the service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it.
- The service provided mandatory training in key skills to all staff and made sure everyone completed it. This was an improvement on our last inspection where the trust did not achieve compliance with its training targets.
- The service had appropriate staff with the right qualifications, skills, training, and experience to keep people safe from avoidable harm and abuse and to provide the right care and treatment. This was an improvement on our last inspection where the trust did not have the correct establishment for dental nurses.
- The service planned for emergencies and staff understood their roles if one should happen.

# Community dental services

However:

- Patient paper dental records at Brookfields were stored in unsecured filing cabinets in a patient accessible area.
- The clinical waste bin at Brookfields was not secured and was accessible to the public.
- Medicine management and fridge monitoring was not consistent across all sites we visited.

## Is the service effective?

**Good** ● → ←

Our rating of effective stayed the same. We rated it as good because:

- The service provided care and treatment based on national guidance and evidence of its effectiveness. Managers checked to make sure staff followed guidance as part of regular supervision and audits.
- The service monitored the effectiveness of care and treatment and used findings to improve. They compared local results with those of other services to learn from them.
- The service made sure staff were competent for their roles. Managers appraised staff's work performance and held supervision meetings with them to provide support and monitor the effectiveness of the service.
- Staff of different services and teams worked together as a team to benefit patients. Doctors, nurses and other healthcare professionals supported each other to provide good care.
- Staff always had access to up-to-date, accurate and comprehensive information on patients' care and treatment. All staff had access to an electronic records system that they could all update.
- Staff understood their roles and responsibilities under the Mental Health Act 1983 and the Mental Capacity Act 2005. They knew how to support patients experiencing mental ill health and those who lacked the capacity to make decisions about their care.

## Is the service caring?

**Outstanding** ☆ ↑

Our rating of caring improved. We rated it as outstanding because:

- Staff cared for patients with compassion. Feedback from patients confirmed that staff treated them well and with kindness. People told us that staff went the extra mile and the care they received exceeded their expectations. Data provided by the trust showed 100% of patients at the Hinchingsbrooke, Peterborough and Brookfields site would recommend the service to others.
- Staff involved patients and those close to them in decisions about their care and treatment and provided emotional support to patients to minimise their distress.
- There was a patient-centered culture. Staff were motivated to offer care that was kind and promoted people's dignity. Relationships between people who used the service, those close to them and staff were caring and supportive. These relationships were highly valued by staff and promoted by leaders.
- Dentists took time to get to know patients holistically and this was evident during the treatments we observed. For example, dentists knew what music their patients liked and could share appropriate humour with them.

# Community dental services

- Staff described a situation where a patient had attended the clinic with their child. Due to a family situation, the child had not had anything to eat. All the staff at the practice handed over their lunches for the child to eat before arranging a referral to the safeguarding team.
- Staff were caring towards people who were not patients of the clinic and provided sign posting information to the nearest soup kitchen for people who were sleeping rough in the doorway of one of the dental centres.
- Minutes of a trust board meeting held in September 2017 featured the account of care provided to a particular patient. The dentist involved had taken time to describe a Christmas tree in the waiting room to a partially sighted young patient, inviting them to touch the tree and feel its branches. This had delighted the patient, who was very amused to find a toothbrush hidden in the tree. The patient's parent had commented that they now looked forward to taking their child to their dental appointment as a result.
- Staff described to us a number of the practical ways they supported very nervous patients, changing out of their uniforms, treating children in the car or on their parents lap where safe to do so and reassuring them and encouraging them.
- Several dentists had learned Makaton and simple British sign language (BSL) to interact with patients who communicated by these methods to ensure patients were happy about their treatment and reassure them.
- At the trust's Peterborough site, we were shown a book of photographs that presented the patient journey from their arrival to discharge to help younger people and those with disabilities understand what would happen during their appointment. Staff used this book to reassure anxious patients.

## Is the service responsive?

Good   

Our rating of responsive stayed the same. We rated it as good because:

- The service planned and provided services in a way that met the needs of local people. Staff had learned Makaton and simple British sign language (BSL) in order to improve interactions with patients with communication difficulties.
- The service took account of patients' individual needs and preferences and staff used innovative approaches to make sure they met them. For example, dentists provided treatment to anxious patients in the car or on their parents lap where this was appropriate.
- Patients could access the service when they needed it. The service provided early, evening and weekend appointments. Waiting times from treatment were within national guidelines and arrangements to treat patients were in line with good practice. One elderly patient told us that although her husband did not meet eligibility criteria for the service, dentists saw him too when she visited, allowing them both to receive treatment at the same time, which in turn reduced pressures on their carer.
- Dentists liaised with hospital colleagues to allow patients to receive both oral and health care treatment at the same time.
- The trust had a small oral health promotion team. The team visited care homes, schools, nurseries and other vulnerable groups promoting good oral health. The team had recently undertaken a project to deliver training to care home staff in the Peterborough area in order to improve oral health care for older people living in residential care.
- All the dentists we spoke with at the Brookfields site had learned Makaton and British sign language (BSL) to meet the needs of those patients who had communication difficulties. Hearing loops were also available throughout the sites.

# Community dental services

- The service treated concerns and complaints seriously, investigated them and learned lessons from the results, the trust had acted on negative patient feedback, made changes and shared findings with all staff.

However:

- Information provided by the trust showed the three complaints received by the service were not answered in line with the trust's 25-day target.

## Is the service well-led?

Good ● → ←

Our rating of well-led stayed the same. We rated it as good because:

- The service had managers at all levels with the right skills and abilities to run a service providing safe patient care.
- The service had a vision for what it wanted to achieve and workable plans to turn it into action. The service devolved plans with involvement from staff, patients, and key groups representing the local community.
- Managers across the service promoted a positive culture that supported and valued staff.
- The service had effective systems for identifying risks and developing plans to eliminate or reduce them.
- The service collected, analysed, managed and used information well to support all its activities, using secure electronic systems with security safeguards.
- The service engaged well with patients, staff and the public to plan and manage appropriate services, and collaborated with partner organisations effectively.
- The service was committed to improving services by learning from when things went well and when they went wrong, promoting training, research, and innovation.

## Outstanding practice

We found one example of outstanding practice in this service. See the Outstanding practice section.

## Areas for improvement

We found two areas for improvement in this service. See the Areas for Improvement section above.

# Community health services for adults

Good   

## Key facts and figures

The Trust provides a range of specialist services across the East of England. As a result, they have contracts with multiple commissioners including Cambridgeshire and Peterborough CCG, Luton CCG, NHS England, Central Bedfordshire and Bedford Borough Councils, Norfolk County Council, Suffolk County Council, Luton Borough Council, Cambridgeshire County Council.

The community service for adults offers a range of services including; community nursing, specialist nurse clinics, discharge planning, musculoskeletal (MSK) physiotherapy. They also provide two specialist head injury day units for neuropsychological assessment, rehabilitation and support to adults (and their families) with an acquired or traumatic brain injury.

We inspected community health services for adults as part of our new phase of our inspection methodology. The service was given a short notice period of two working days prior to our inspection to enable us to observe routine activity and to ensure that everyone we needed to talk to was available.

The community health service for adults within this trust has undergone changes since our last inspection with all community nursing services based at, and operated around the Luton area and musculoskeletal physiotherapy care offered across the Cambridge and Peterborough area. The drugs and alcohol service is no longer provided by the trust and the sexual health clinics are now inspected as a separate core service.

During our inspection, we visited four areas including the Luton community nursing staff base, the falls assessment team based at a local ambulance station, the community discharge unit based at a local NHS trust and the community treatment centre. We observed staff providing patient care whilst accompanying community nursing staff on visits and during community outpatient clinics.

We spoke with 42 members of staff including clinical and operational service leads, nursing staff, and support staff. We spoke with four patients, two relatives and reviewed 14 sets of patient care records. We also observed handovers and multidisciplinary meetings and reviewed performance information and data from, and about the trust including meeting minutes, audit data, action plans, personnel, and training records.

We last inspected the service in May and June 2014 and rated the health services for adults as good overall, with safe rated as requires improvement. Following last the inspection there was one requirement and one recommendation for service improvement in the safe domain related to staffing and attendance at mandatory training days.

During this inspection, we looked at changes the community health services for adults had made to address these concerns.

## Summary of this service

Our rating of this service stayed the same. We rated it as good because:

- The service managed patient safety incidents well. Staff recognised incidents and reported them appropriately. Lessons were shared and staff apologised and gave patients honest information and suitable support when things went wrong.
- The service monitored safety, shared information with staff, patients and visitors and used it to improve the service.
- The service had suitable premises and equipment and looked after them well.

# Community health services for adults

- Staff kept clear appropriate records of patients' care and treatment that were available to all staff providing care.
- Staff protected patients from abuse and the service worked well with other agencies to do so. Staff were trained on how to recognise and report abuse, knew how to respond, and were well supported by the safeguarding team.
- The service ensured that staff completed mandatory training in key skills. This had improved since the last inspection.
- All staff had the right qualifications, skills, training and experience to keep people safe from avoidable harm and abuse and to provide the right care and treatment.
- The service generally controlled infection risk well. Staff kept themselves, equipment and the premises clean. They used control measures to prevent the spread of infection when caring for patients.
- The service provided care and treatment based on national guidance and monitored evidence of its effectiveness.
- Staff of different kinds worked together to benefit patients. Support staff, nurses and other healthcare professionals supported each other to provide good care.
- Staff had access to electronic, up-to-date, accurate and comprehensive information on patients' care and treatment.
- Staff understood their roles and responsibilities under the Mental Health Act 1983 and the Mental Capacity Act 2005. They knew how to support patients experiencing mental ill health and those who lacked the capacity to make decisions about their care.
- Staff treated patients with dignity, respect and compassion. Feedback from patients confirmed that staff treated them well and with kindness.
- Staff involved patients and those close to them in decisions about their care and treatment.
- Staff provided emotional support to patients to minimise their distress.
- The trust planned and provided services to meet the needs of local people. It provided access to the service when they needed it and took account of the patients' individual needs.
- The service treated concerns and complaints seriously, investigated them and learned lessons from the results, which were shared with all staff.
- The trust had managers at all levels with the right skills and abilities to run a service providing high-quality sustainable care.
- The trust had a vision for what it wanted to achieve and workable plans to turn it into action.
- Managers across the trust promoted a positive culture that supported and valued staff.
- The trust engaged well with patients, staff, the public and local organisations to plan and manage appropriate services, and collaborated with partner organisations effectively
- The trust collected, analysed, managed and used information well to support its activities to continually improve the quality of its services.
- The trust had effective systems for identifying risks, planning to eliminate or reduce them, and coping with both the expected and unexpected.
- The trust was committed to improving services by learning from when things go well and when they go wrong, promoting training, and innovation.
- The service had clinical staff vacancies (12% qualified nurses and 13% allied health professionals) but staff were flexible in working practice to support colleagues.

# Community health services for adults

- NHS safety thermometer data indicated the service performed marginally below its own targets and the national average in delivering harm free care.

However:

- Community nursing handover meetings were meant to be held daily but they often only happened twice a week due to pressures within the service.
- There was inconsistent knowledge and practice around the disposal of clinical waste (including contaminated material) at patient's homes.
- Complaints were not always resolved in line with the trust target of 25-days.
- Senior managers displayed a lack of oversight in some areas such as knowledge of complaints and clinical waste disposal processes.
- There was a disconnect between one specific community nursing team and operational leads with staff expressing dissatisfaction with their work-life balance. The executive team were aware of this and were taking steps to address the concerns.

## Is the service safe?

Good  

Our rating of safe improved. We rated it as good because:

- The service managed patient safety incidents well. Staff recognised incidents and reported them appropriately. Managers investigated incidents and shared lessons learned with the whole team and the wider service. When things went wrong, staff apologised and gave patients honest information and suitable support. This had improved since the last inspection.
- The service had suitable premises and equipment and looked after them well.
- The service prescribed, gave, and recorded administered medicines well.
- Staff kept appropriate records of patients' care and treatment. Records were clear, up-to-date and available to all staff providing care.
- Staff understood how to protect patients from abuse and the service worked well with other agencies to do so. Staff had training on how to recognise and report abuse, knew how to apply it, and were well supported by the safeguarding team.
- The service provided mandatory training in key skills to all staff and made sure everyone completed it. This had improved since the last inspection.
- All staff had the right qualifications, skills, training and experience to keep people safe from avoidable harm and abuse and to provide the right care and treatment.
- The service still had vacancies (13% qualified allied health professionals and 12% nursing staff) but staff were flexible in working practice to support colleagues. This had improved since the last inspection.
- NHS Safety thermometer data indicated that the service performed marginally below the national average in delivering harm free care. Between April 2017 and February 2018, the service met its 96% target on three out of 11 occasions. The average for the period was 93.2%, which was below the national average of 94.2% for the same period.



# Community health services for adults

- The service generally controlled infection risk well. Staff kept themselves, equipment and the premises clean. They used control measures to prevent the spread of infection when caring for patients

However:

- Community nursing handover meetings were meant to be held daily but they often only happened twice a week due to pressures within the service.
- Staff did not follow the trust's policy or agreement with the local authority on the disposal of clinical waste (including contaminated material) at patient's homes.

## Is the service effective?

Good   

Our rating of effective stayed the same. We rated it as good because:

- The service provided care and treatment based on national guidance and evidence of its effectiveness. Managers checked to make sure staff followed guidance.
- Staff ensured that patients nutritional needs were assessed to improve their health. They referred to specialist dietician services when appropriate.
- The service monitored the effectiveness of care and treatment and used the findings to improve them.
- The service ensured staff were competent for their roles. Managers appraised staff's work performance and held supervision meetings with them to provide support and monitor the effectiveness of the service.
- Staff of different kinds worked together as a team to benefit patients. Doctors, nurses and other healthcare professionals supported each other to provide good care.
- Staff had access to up-to-date, accurate and comprehensive information on patients' care and treatment. Staff had access to an electronic records system that they could all update.
- Staff understood their roles and responsibilities under the Mental Health Act 1983 and the Mental Capacity Act 2005. They knew how to support patients experiencing mental ill health and those who lacked the capacity to make decisions about their care.

## Is the service caring?

Good   

Our rating of caring stayed the same. We rated it as good because:

- Staff cared for patients with compassion. Feedback from patients confirmed that staff treated them well and with kindness.
- Staff involved patients and those close to them in decisions about their care and treatment.
- Staff provided emotional support to patients to minimise their distress.
- Friends and Family Test results were good with overall average of 97.8% of patients who would recommend community services.

# Community health services for adults

## Is the service responsive?

Good   

Our rating of responsive stayed the same. We rated it as good because:

- The trust planned and provided services in a way that met the needs of local people.
- People could access the service when they needed it. Waiting times from referral to assessment were in line with good practice.
- The service took account of patients' individual needs.
- The service planned for patients' religious, cultural and other preferences.
- The service treated concerns and complaints seriously, investigated them and learned lessons from the results, which were shared with all staff.

However:

- Complaints were not always resolved in line with the trust target of 25-days.

## Is the service well-led?

Good   

Our rating of well-led stayed the same. We rated it as good because:

- The trust had managers at all levels with the right skills and abilities to run a service providing high-quality sustainable care.
- The trust had a vision for what it wanted to achieve and workable plans to turn it into action developed with involvement from staff, patients, and key groups representing the local community.
- Managers across the trust promoted a positive culture that supported and valued staff, creating a sense of common purpose based on shared values.
- The trust used a systematic approach to improve the quality of its services and safeguard high standards of care by creating an environment in which excellence in clinical care would flourish.
- The trust had effective systems for identifying risks, planning to eliminate or reduce them, and coping with both the expected and unexpected.
- The trust collected, analysed, managed and used information well to support its activities, using secure electronic systems with security safeguards.
- The trust engaged well with patients, staff, the public and local organisations to plan and manage appropriate services, and collaborated with partner organisations effectively.
- The trust was committed to improving services by learning from when things go well and when they go wrong, promoting training, and innovation.

However:

# Community health services for adults

- There was a disconnect between one specific community nursing team and operational leads with staff expressing dissatisfaction with their work-life balance. The executive team were aware of this and were taking steps to address the concerns.
- Senior managers displayed a lack of oversight in some areas such as knowledge of complaints and clinical waste disposal processes.

## Outstanding practice

We found four examples of outstanding practice in this service. See the Outstanding practice section.

## Areas for improvement

We found two areas for improvement in this service. See the Areas for Improvement section above.