

Navigo Health and Social Care CIC

Quality Report

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Core services inspected	CQC registered location	CQC location ID
Community-based mental health services for adults of working age	Navigo Community Mental Health Services & Headquarters	1-1206855621
Community-based mental health services for older people	Navigo Community Mental Health Services & Headquarters	1-1206855621

This report describes our judgement of the quality of care at this provider. It is based on a combination of what we found when we inspected, information from our 'Intelligent Monitoring' system, and information given to us from people who use services, the public and other organisations.

Summary of findings

Ratings

We are introducing ratings as an important element of our new approach to inspection and regulation. Our ratings will always be based on a combination of what we find at inspection, what people tell us, our Intelligent Monitoring data and local information from the provider and other organisations. We will award them on a four-point scale: outstanding; good; requires improvement; or inadequate.

Overall rating for services at this Provider

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Mental Health Act responsibilities and Mental Capacity Act/Deprivation of Liberty Safeguards

We include our assessment of the provider's compliance with the Mental Health Act and Mental Capacity Act in our overall inspection of the core service.

We do not give a rating for Mental Health Act or Mental Capacity Act; however, we do use our findings to determine the overall rating for the service.

Further information about findings in relation to the Mental Health Act and Mental Capacity Act can be found later in this report.

Summary of findings

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Summary of findings

Overall summary

We rated the provider as good overall because:

- Following our inspection in January 2016, we rated the provider as good for effective, caring, responsive and well-led.
- During this most recent inspection, we found that the provider had addressed the issues that had caused us to rate safe as requires improvement following the January 2016 inspection.
- The provider was now meeting Regulation 12 of the Health and Social Care Act (Regulated Activities) Regulations 2014.

Summary of findings

The five questions we ask about the services and what we found

We always ask the following five questions of the services.

Are services safe?

We rated safe as good because:

- The service had improved security to access stored medicines at the Eleanor Centre.
- The service had implemented improved systems for medicines reconciliation at the Eleanor Centre. The pharmacist visited monthly as an additional safeguard relating to medicines management.
- There was a provision for the safe disposal of sharps bins in line with the Hazardous Waste regulations at the Eleanor Centre.
- The provider had implemented an action plan to improve training across the organisation.
- Both community adults' teams were above 75% compliant in safeguarding adults and children's training. Staff still to complete training were booked onto planned training dates.
- The provider had introduced e-learning for some mandatory training. This included information governance. The e-learning was accessible to staff from 31 October 2016. We saw that staff working in the community adults' team had increased their compliance in information governance training to above 75%.

Good



Are services effective?

At the last inspection in January 2016 we rated effective as **good**. Since that inspection we have received no information that would cause us to re-inspect this key question or change the rating.

Good



Are services caring?

At the last inspection in January 2016 we rated caring as **good**. Since that inspection we have received no information that would cause us to re-inspect this key question or change the rating.

Good



Are services responsive to people's needs?

At the last inspection in January 2016 we rated responsive as **good**. Since that inspection we have received no information that would cause us to re-inspect this key question or change the rating.

Good



Are services well-led?

At the last inspection in January 2016 we rated well-led as **good**. Since that inspection we have received no information that would cause us to re-inspect this key question or change the rating.

Good



Summary of findings

Our inspection team

One Care Quality Commission inspector Helen Gibbon inspected the service.

Why we carried out this inspection

We undertook this inspection to find out whether Navigo Health and Social Care CIC had made improvements to services since our comprehensive inspection in January 2016.

When we last inspected the provider in January 2016, we rated services as good overall. We rated the effective, caring, responsive and well-led domains as good. However, we rated the safe domain as requires improvement.

Following the inspection we told the provider that it must take the following actions to improve services:

- The provider must ensure that there is an effective process in place with regards to medicine monitoring at the Eleanor Centre
- The provider must ensure that medicine is stored safely at the Eleanor Centre
- The provider must ensure there is provision for the safe disposal of sharps at the Eleanor Centre in line with Hazardous Waste regulations.
- The provider must ensure that compliance for mandatory training is reached in the community services for adults of working age.

We issued the provider with three requirement notices that affected services. These related to:

- Regulation 12(2)(c) Health and Social Care Act (Regulated Activities) Regulations 2014 Safe care and treatment.

This was due to low training compliance for safeguarding adults, safeguarding children, and information governance.

- Regulation 12(2)(g) Health and Social Care Act (Regulated Activities) Regulations 2014 Safe care and treatment.

This was because the Eleanor Centre did not have a robust process for the reconciliation and monitoring of medicines and did not ensure medicines were stored securely.

- Regulation 12(2)(h) Health and Social Care Act (Regulated Activities) Regulations 2014 Safe care and treatment.

This was because the process in place for the disposal of the sharps box stored at the Eleanor Centre did not meet the requirements of the Hazardous Waste Regulations.

How we carried out this inspection

To fully understand the experience of people who use services, we always ask the following five questions of every service and provider:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

Before the inspection, we reviewed information that we held about Navigo Health and Social Care CIC and requested information from the provider. This information suggested that the ratings of good for effective, caring, responsive and well led, that we made following our January 2016 inspection, were still valid. Therefore, during this inspection, we focused on those issues that had caused us to rate the provider as requires improvement for safe. We also made a few recommendations at the last inspection which will be followed up at the next comprehensive inspection.

Summary of findings

During the inspection visit, the inspector:

- Visited the clinic room at the Eleanor Centre and looked at the storage of medicines.
- Spoke with two managers for community older people's services.
- Looked at six medicine records of patients.
- Carried out a specific check of the medicine management.

- Looked at a range of policies, procedures and other documents relating to the running of the service.
- Reviewed training compliance for community based mental health services for adults of working age.
- Spoke to the Head of Workforce for the provider.
- Spoke with four other staff working in community based mental health services for adults of working age.

Information about the provider

Navigo Health and Social Care CIC are a non-profit making community interest company that provides all local mental health and associated services in North East Lincolnshire.

The population of North East Lincolnshire is approximately 170,000 and areas within the authority rank within the 10% most deprived areas of England.

Navigo is registered to provide the following:

- transport services, triage and medical advice provided remotely
- treatment of disease, disorder or injury
- diagnostic and screening procedures
- assessment or medical treatment for persons detained under Mental Health Act 1983.

It provides the following services:

- Acute wards for adults of working age (including Home treatment team)
- Older People inpatients and community services (including admiral nurses)
- Crisis resolution and home treatment services
- Health based place of safety
- Eating disorder services

- Forensic community services
- Early intervention services
- Personality disorder community services
- Housing and rehabilitation
- Family therapy
- Volunteer opportunities

Navigo Health and Social Care CIC locations have been registered with CQC as below:

- Harrison House since 15 September 2011
- Navigo Community Mental Health Services and Headquarters since 29 January 2014
- Rharian Fields since 11 May 2015
- The Gardens since 15 September 2015.

There have been six inspections carried out at Navigo Health and Social Care CIC prior to this inspection, the most recent being in January 2016. In January 2016, we rated the provider as requiring improvement in the safe domain. This was because we identified non-compliance in the safe domains in the community adults and community older peoples services. We rated the provider as good in the effective, caring, responsive and well-led domains. This gave an overall provider rating of good.

What people who use the provider's services say

We did not speak with patients during this inspection as the focus was on particular concerns in particular services

that were identified at the comprehensive inspection in January 2016. During the inspection in January 2016 there was significant patient engagement and we received considerable feedback from patients and carers.

Navigo Health and Social Care CIC

Detailed findings

Mental Health Act responsibilities

We did not focus on Mental Health Act responsibilities during this inspection as the focus was on particular concerns in particular services that were identified at the comprehensive inspection in January 2016.

Mental Capacity Act and Deprivation of Liberty Safeguards

We did not focus on Mental Capacity Act and Deprivation of Liberty Safeguards during this inspection as the focus was on particular concerns in particular services that were identified at the comprehensive inspection in January 2016.

Are services safe?

By safe, we mean that people are protected from abuse* and avoidable harm

* People are protected from physical, sexual, mental or psychological, financial, neglect, institutional or discriminatory abuse

Summary of findings

We rated safe as good because:

- The service had improved security to access stored medicines at the Eleanor Centre.
- The service had implemented improved systems for medicines reconciliation at the Eleanor Centre. The pharmacist visited monthly as an additional safeguard relating to medicines management.
- There was a provision for the safe disposal of sharps bins in line with the Hazardous Waste regulations at the Eleanor Centre.
- The provider had implemented an action plan to improve training across the organisation.
- Both community adults' teams were above 75% compliant in safeguarding adults and children's training. Staff still to complete training were booked onto planned training dates.
- The provider had introduced e-learning for some mandatory training. This included information governance. The e-learning was accessible to staff from 31 October 2016. We saw that staff working in the community adults' team had increased their compliance in information governance training to above 75%.

were low for both teams working in the community-based mental health service for adults of working age. This specifically related to training for safeguarding adults, safeguarding children and information governance.

The provider recognised training compliance was low and informed us of the actions they planned to take to improve this. This included recruiting a head of workforce whose role would be to ensure mandatory training compliance increased across the organisation. Their expected date of compliance was 31 December 2016.

During our recent inspection in November 2016, we reviewed the actions the provider had taken to see if they had addressed our previous concerns.

The organisation had introduced the new role responsible to oversee training. They had reviewed previous training information to ensure reporting was accurate and that staff were competent in recording the information. The provider had revised their mandatory training to recognise the specific needs of each role. Further external training providers had been sourced to meet the needs of staff and e-learning had been introduced for many of the training units. This had been made available for staff from 31 October 2016. At the time of this inspection, the organisations overall compliance had increased to 87%.

We reviewed compliance for staff working in community-based mental health services for adults of working age. Staff compliance in safeguarding children and adults had increased to over 75% as follows:

Safeguarding Adults – East team 77%, West team 75%

Safeguarding Children – East team 100%, West team 83%

Staff working within the service were able to give us detailed examples to demonstrate their understanding of safeguarding and the processes they were required to take.

The newly employed head of workforce had arranged 21 additional safeguarding adults training courses up to December 2016 and ongoing monthly courses throughout 2017. This was in addition to continued training sessions

Our findings

Safe staffing

Staff were required to complete mandatory training in specific topics. Navigo Health and Social Care CIC set their target at 85% compliance for staff completion of this required training. The CQC would expect providers to achieve a minimum of 75% compliance for staff completion of mandatory training units. During our previous inspection in January 2016, we were concerned that completion rates

Are services safe?

for safeguarding children. Staff that had still not completed this training were booked onto these courses. The provider was confident this would achieve compliance in safeguarding by the end of December 2016.

Following the inspection in January 2016, the provider had sourced an external organisation to develop e-learning packages for many of their mandatory training units. This included information governance. The provider offered the e-learning packages to staff from 31 October 2016. At the time of this inspection, information governance compliance had increased in the East team to 77% and increased in the West team to 54%. Staff had dedicated time scheduled to complete e-learning to ensure the organisation met the compliance target. Classroom sessions, where staff could complete the units as a group and with the assistance of a trainer for additional support for those less confident, were also available.

We then followed this up in January 2017 to see if the provider had met the compliance target within the timescale they set. Staff compliance in the above training had improved to the following:

Safeguarding Adults - East team 86% West team 88%

Safeguarding Children - East team 100% West team 96%

Information Governance - East team 86% West team 83%

This meant they had exceeded CQC's minimum standards.

Assessing and managing risk to patients and staff

Most patients accessing the services of the community mental health team had their medicines managed in the community through their own GP and pharmacy. However, the service managed initial titration of medicine for some patients and the memory service had some patients who had their medicine delivered to the Eleanor Centre from the pharmacy. Staff then delivered the medicine to patients as part of their routine visits.

On our previous inspection, we were concerned that medicines were not being stored securely. All medicines were stored in a locked cabinet in a locked room. However, the keys to access these were stored in a key cabinet and the key to the key cabinet was accessible in an open drawer.

Since our last visit, the service had strengthened the security to access the medicines. The service relocated the medicines cabinet to another room. Keys to the cabinet and to the room containing the cabinet were stored in separate key safes. This meant authorised staff were required to enter a combination code to access the key to the room and then a further combination code to access the key to the medicines cabinet.

During the January 2016 inspection, we were also concerned that staff did not check the medicines delivered from the pharmacy to the Eleanor Centre. At the time they were delivered in sealed paper bags. Staff did not check the contents of the bags against the outer labels and were therefore unable to confirm they had received the correct medicines. The pharmacy had since changed the paper bags to clear sealed bags. This meant that staff were able to check that the service received the correct medicines. Additionally, the service had improved the processes used for medicine reconciliation. Staff used individual medicine cards to effectively record prescription information. This included information relating to prescription requests, delivery, medicine checks, returns and changes. We checked six patient medicine records during this inspection, all evidenced accurate reconciliation.

Some patients using the service required prescribed depot injections. When we inspected in January 2016, we found that staff had to transport full sharps boxes containing used equipment to a different location for disposal. At the time, the Eleanor Centre did not have provisions in place for the safe disposal of sharps as required by the Hazardous Waste regulations. The service had since set up a contract with an external company for the monthly collection of sharps containers directly from the base.

During this inspection, we observed that the service had relocated the medicines cabinet to a room that had temperature controls. This meant that there was now a system to control, monitor and record the room temperature to ensure medicines were stored at the required temperatures.

The service received monthly visits from the pharmacist. This was an additional safeguard relating to medicines management and to support both patients and staff with literature and new information regarding medicines.

Are services effective?

By effective, we mean that people's care, treatment and support achieves good outcomes, promotes a good quality of life and is based on the best available evidence.

Summary of findings

Our findings

At the last inspection in January 2016 we rated effective as **good**. Since that inspection we have received no information that would cause us to re-inspect this key question or change the rating.

Are services caring?

By caring, we mean that staff involve and treat people with compassion, kindness, dignity and respect.

Summary of findings

Our findings

At the last inspection in January 2016 we rated caring as **good**. Since that inspection we have received no information that would cause us to re-inspect this key question or change the rating.

Are services responsive to people's needs?

By responsive, we mean that services are organised so that they meet people's needs.

Summary of findings

Our findings

At the last inspection in January 2016 we rated responsive as **good**. Since that inspection we have received no information that would cause us to re-inspect this key question or change the rating.

Are services well-led?

By well-led, we mean that the leadership, management and governance of the organisation assure the delivery of high-quality person-centred care, supports learning and innovation, and promotes an open and fair culture.

Summary of findings

Our findings

At the last inspection in January 2016 we rated well-led as **good**. Since that inspection we have received no information that would cause us to re-inspect this key question or change the rating.