

Provide Community Interest Company

Inspection report

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Date of inspection visit: 23 Jan to 6 Mar 2019
Date of publication: 15/05/2019

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 organisation. 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 organisation

Outstanding 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Outstanding 

Are services responsive?

Outstanding 

Are services well-led?

Good 

Summary of findings

We rated well-led (leadership) from our inspection of the organisation's 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.

Background to the organisation

Provide is a community interest company (social enterprise), which delivers a range of health and social care services in the community. A social enterprise is a business with social objectives whose surpluses are principally reinvested in the business or community, rather than being driven by the need to maximise profit for shareholders and owners. Care is provided in a variety of community settings, including community hospitals, community clinics, schools, nursing homes and primary care settings, as well as within peoples' homes. Provide employs over 985 people and serves communities with a total population of over 4.5 million people.

Overall summary

Our rating of this organisation improved since our last inspection. We rated it as Outstanding  

What this organisation does

Provide Community Interest delivers over 50 services to children, families and adults. Hospital locations include Halstead Hospital and St Peter's hospital. Provide has 18 clinic locations across Chelmsford, Braintree, Maldon, Halstead and surrounding areas. It predominately serves the communities across Essex. However, some services are delivered across areas of Cambridgeshire, Peterborough and the London boroughs of Waltham Forest and Redbridge.

The provider has two inpatient wards based at two locations, Halstead Hospital and St Peters Hospital in Maldon. The service has 46 inpatient beds providing rehabilitation, enablement and palliative care. The services are delivered by nurse-led multidisciplinary teams. Both inpatient wards accept 'step up' patient admissions. These are patients who require additional support but do not require admission into an acute hospital and 'step down' admissions who have been transferred from an acute hospital.

The provider has a broad range of adult community services across various locations and settings in Essex. Some of these services also see children as denoted by *

Essex wide they deliver:

- *Essex Lifestyle services – Healthily living advice & Support

In Mid Essex they deliver

- Integrated Care Team (ICT – our Adult Community Nursing service)
- Out of Hours Nursing
- Home First
- ESDAAR (community nurse rapid response service)
- Podiatry
- Podiatric Surgery
- Minor Operations (carpal tunnel and minor skin surgery)

Summary of findings

- Early Supported Discharge for Stroke
- Adult Community and Inpatient Therapy
- Adult Speech & Language
- Adult Continence service
- Cardiac (Heart Failure) service
- Adult Diabetes service
- Respiratory (COPD, Pulmonary Rehabilitation & Oxygen service)
- Lymphoedema service
- Tissue Viability Service
- Parkinson's Service
- Anticoagulation service (Maldon area only)
- Blood transfusion and IV medication service (Maldon area only)
- ENT and Audiology
- Dermatology
- *Musculoskeletal Therapy
- *Wheelchair services
- Support at Home – learning disabilities. This is a new service supporting up to eight people with learning difficulties to gain living skills to optimise their independence

In Cambridgeshire & Peterborough they deliver

- *Wheelchair services
- Pulmonary Rehabilitation

In Waltham Forest they deliver

- *Wheelchair 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.

The last inspection by the hospital directorate was completed between 12-15 December 2016 with an unannounced visit on 22 December 2016. Overall the provider was rated as good. There were no requirement notices or any enforcement notices issued at this inspection.

At this inspection 23 and 24 January 2019, we inspected adult inpatient community services and adult community services.

Our comprehensive inspections of providers have shown a strong link between the quality of overall management of a provider and the quality of its services. For that reason, we look at the quality of leadership at every level. We carried out the well-led element of this inspection between 5 and 6 March 2019. What we found is summarised in the section headed Is this organisation well-led?

What we found

We found that there were no regulatory breaches and overall, we have found that the organisation was performing at a level which led to the judgement of outstanding.

- We rated caring and responsive as outstanding, and safe, effective and well led as good.
- We rated well-led for the organisation overall as good. The rating for well-led is based on our inspection at organisation level, taking into account what we found in individual services. Ratings for other key questions are from combining ratings for services and using our professional judgement.
- At core service level we rated safe, effective and well led as good and rated caring and responsive as outstanding. This meant we rated the organisation's two services we inspected as outstanding overall. In rating the organisation, we took into account the current ratings of the one service not inspected on this occasion.

Overall organisation

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

- Community health inpatient services stayed the same as good overall. The questions of safe, effective, caring, responsive and well led stayed as good. The service understood how to protect patients from abuse and the service worked well with other agencies to do so. Staff completed and updated risk assessments for each patient. People's care and treatment is planned and delivered in line with current evidence-based guidance, standards, best practice. Staff cared for patients with compassion. The service had clear admission criteria and liaised closely with the local NHS trust.
- Community health adult services improved from good to outstanding overall. The questions of safety, effective and well led stayed the same as good. Caring and responsive improved to outstanding. 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. Staff of different kinds worked together as a team to benefit patients. Staff understood how and when to assess whether a patient had the capacity to make decisions about their care. We found examples where staff had exceeded patient expectations and staff had gone the extra mile to provide excellent care to their patients. There was a proactive approach to understanding the needs and preferences of different groups of people and to delivering care in a way that met those needs.

Summary of findings

Are services safe?

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

- Community health inpatient services stayed the same rated good for safe. The service understood how to protect patients from abuse and the service worked well with other agencies to do so. Staff completed and updated risk assessments for each patient. Staff kept detailed records of patients' care and treatment. The service managed patient safety incidents well. Staff recognised incidents and reported them appropriately. However, on one ward, the defibrillator daily checks were unclear as two pieces of equipment were checked against one record, and on the other ward, there was no formal process in place for checking oxygen cylinders.
- Community health adult services stayed the same rated good for safe. 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. Staff completed and updated risk assessments for each patient. However, mandatory training completion did not meet the provider's target for some modules.

Are services effective?

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

- Community health inpatient services stayed the same rated good for effective. People's care and treatment is planned and delivered in line with current evidence-based guidance, standards, best practice. Managers monitored the effectiveness of care and treatment and used the findings to improve them. The service made sure staff were competent for their roles. Staff understood their roles and responsibilities under the Mental Health Act 1983 and the Mental Capacity Act 2005. However, while the service was providing pain relief there was no documented pain scores. We were told that new documentation was being introduced to record pain levels. At the time of inspection, some staff had not had annual appraisals with their line manager to support their development.
- Community health adult services stayed the same rated good for effective. The service provided care and treatment based on national guidance and evidence of its effectiveness. Staff assessed and monitored patients regularly to see if they were in pain. Staff of different kinds worked together as a team to benefit patients. Staff understood how and when to assess whether a patient had the capacity to make decisions about their care.

Are services caring?

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

- Community health inpatient services stayed the same rated good for caring. Staff cared for patients with compassion. Staff provided patients with relevant information, both verbal and written, so they could make informed decisions about their care and treatment. Staff involved patients and those close to them in decisions about their care and treatment.
- Community health adult services improved rated outstanding for caring. Feedback from patients consistently confirmed that staff treated them well and with kindness. We found examples where staff had exceeded patient expectations and staff had gone the extra mile to provide excellent care to their patients. Staff provided emotional support to all patients to minimise their distress. Staff recognised that patients' emotional and social needs were as important as their physical needs. People were truly respected and valued as individuals and were empowered as partners in their care, practically emotionally, by an exceptional and distinctive service.

Are services responsive?

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

Summary of findings

- Community health inpatient services stayed the same rated good for responsive. The organisation planned and provided services in a way that met the needs of local people and took account of patients' individual needs. The service had clear admission criteria and liaised closely with the local NHS trust. The service treated concerns and complaints seriously, and learned lessons from the results, and shared these with all staff, however they did not always meet their target for responding to complaints. The service was above their target to discharge patients in a timely manner, although managers told us they were thorough with their discharge plans to prevent readmissions.
- Community health adult services improved rated outstanding for responsive. The community adult service was tailored to meet the needs of individual people and delivered in a way to ensure flexibility, choice and continuity of care. The service took account and understood the needs of individual patients. There was a proactive approach to understanding the needs and preferences of different groups of people and to delivering care in a way that met those needs. People had access to the right care at the right time, when they needed it. The service had processes in place to manage, investigate and respond to complaints effectively and treated concerns and complaints seriously, investigated them and learned lessons from the results, and shared these with all staff.

Are services well-led?

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

- Community health inpatient services stayed the same rated good for well-led. Managers at all levels in the organisation had the right skills and abilities to run a service providing high-quality sustainable care. The organisation had a vision for what it wanted to achieve and workable plans to turn it into action developed with involvement from staff. Managers across the organisation promoted a culture that supported and valued staff, creating a sense of common purpose based on shared values. The organisation had effective systems for identifying risks, planning to eliminate or reduce them, and coping with both the expected and unexpected.
- Community health adult services stayed the same rated good for well-led. The organisation used a systematic approach to continually improve the quality of its services and safeguarding high standards of care by creating an environment in which excellence in clinical care would flourish. The organisation collected, analysed, managed and used information well to support all its activities, using secure electronic systems with security safeguards. The organisation was committed to improving services by learning from when things went well and when they went wrong, promoting training, research and innovation.

Ratings tables

The ratings tables show the ratings overall and for each key question, for each core service. We took all ratings into account in deciding overall ratings. They also show the ratings for services not inspected this time. We took all ratings into account in deciding overall ratings. Our decisions on overall ratings also took into account factors including the relative size of services and we used our professional judgement to reach fair and balanced ratings.

The rating for well-led is based on our inspection at organisation level, taking into account what we found in individual services.

Ratings for other key questions are from combining ratings for services and using our professional judgement

Outstanding practice

We found examples of outstanding practice. See the outstanding practice section below for details.

Areas for improvement

We found nine things that the organisation should improve to comply with a minor breach that did not justify regulatory action, to prevent breaching a legal requirement, or to improve service quality.

Summary of findings

Action we have taken

We did not take any regulatory action against the organisation. We did not find any breaches of the legal requirements in any of the two services we inspected.

What happens next

We will continue to monitor the safety and quality of the organisation and services through our continuing relationship with the organisation and our inspection methodology.

Outstanding practice

- Staff worked in partnership with patients to set treatment goals. People were truly respected and valued as individuals and were empowered as partners in their care, practically and emotionally.
- Personalised shared care plans empowered patients to take an active role in their own care and promoted their independence.
- Patients consistently praised staff for the care they provided and often felt the care had exceeded their expectations.
- Integrated care teams felt at the centre of the communities where they worked. Nursing staff bought food for patients when they found they had no food in their homes.
- Nursing staff had worked in collaboration with outside agencies to organise presents for children where families could not afford to buy Christmas presents and to provide Christmas food parcels for patients that were alone during the Christmas period.
- The service reviewed new patients in a timely way by exceeding their referral to assessment targets.
- The early supported discharge, admission avoidance and repatriation (ESDAAR) team had saved the local health economy £2,461,703 in supporting patients with early discharge and avoiding admissions.

Areas for improvement

- The organisation should ensure that each defibrillator has a separate check sheet.
- The organisation should ensure that a formal process is in place to check the oxygen levels of the cylinders.
- The organisation should ensure that clinicians within the service have access to the incident reporting system.
- The organisation should utilise the pain tools and formally document the patients pain score.
- The organisation should ensure they respond to complaints within the target set by the organisation.
- The organisation should ensure they Improve the patient discharge process so patients are not unduly delayed.
- The organisation should ensure that staff complete all mandatory training components in line with the organisation's internal target.

Summary of findings

Is this organisation well-led?

Our comprehensive inspections of providers have shown a strong link between the quality of overall management of a organisation 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 provider 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.

Ratings tables

Key to tables					
Ratings	Not rated	Inadequate	Requires improvement	Good	Outstanding
Rating change since last inspection	Same	Up one rating	Up two ratings	Down one rating	Down two ratings
Symbol *	→←	↑	↑↑	↓	↓↓
Month Year = Date last rating published					

* Where there is no symbol showing how a rating has changed, it means either that:

- we have not inspected this aspect of the service before or
- we have not inspected it this time or
- changes to how we inspect make comparisons with a previous inspection unreliable.

Ratings for the whole organisation

Safe	Effective	Caring	Responsive	Well-led	Overall
Good →← Jan 2019	Good →← Jan 2019	Outstanding →← Jan 2019	Outstanding ↑ Jan 2019	Good →← Jan 2019	Outstanding ↑ Jan 2019

The rating for well-led is based on our inspection at organisation level, taking into account what we found in individual services. Ratings for other key questions are from combining ratings for services and using our professional judgement.

Rating for acute services

	Safe	Effective	Caring	Responsive	Well-led	Overall
End of life care	Good Mar 2017	Good Mar 2017	Good Mar 2017	Good Mar 2017	Good Mar 2017	Good Mar 2017
Community Health Inpatient services	Good →← May 2019	Good →← May 2019	Good →← May 2019	Good →← May 2019	Good →← May 2019	Good →← May 2019
Community Health Adults Community	Good →← May 2019	Good →← May 2019	Outstanding ↑ May 2019	Outstanding ↑ May 2019	Good →← May 2019	Outstanding ↑ May 2019
Overall organisation	Good →← May 2019	Good ↑ May 2019	Outstanding →← May 2019	Outstanding ↑ May 2019	Good →← May 2019	Outstanding ↑ May 2019

Ratings for the organisation are from combining ratings for hospitals. Our decisions on overall ratings take into account the relative size of services. We use our professional judgement to reach fair and balanced ratings.

Community health services for adults

Outstanding  

Key facts and figures

Provide Community Interest Company, community adult services deliver a broad range of adult community services across various locations and settings in Essex. Services are provided to people over the age of 18 and include community nursing and therapy services and outpatient clinics, including continence clinics and musculoskeletal physiotherapy and occupational therapy clinics, among others. The service focuses on the care of all adults who live in the localities where Provide Community Interest Company is commissioned to deliver services. The community adults service provides care to young people during their transition from children's services to adult services.

During the inspection, we visited three locations, as follows:

- Halstead Hospital Integrated Care Team base and outpatient department
- Braintree Community Hospital, outpatient department
- St Peter's Hospital Integrated Care Team base and outpatient department

The last comprehensive inspection of the service took place in December 2016. We rated the service as good for all key questions of safe, effective, caring, responsive and well-led. This resulted in a rating of good overall.

At this inspection, we re-inspected all key questions. We rated safe, effective, and well-led as good. We rated caring and responsive as outstanding, providing a rating of outstanding overall.

Our inspection was announced at short notice to ensure that everyone we needed to talk to was available.

Before the inspection visit, we reviewed information that we held about the service and information requested from the organisation.

During the inspection visit, the inspection team spoke with 11 patients who were using the service. We spoke with 35 members of staff including clinical and operational service leads, nursing staff, allied health professionals, and support staff. We reviewed 12 patient care records.

We also observed patient care, staff handovers and reviewed information including meeting minutes, audit data, action plans and training records.

Summary of this service

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

- 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 maintained equipment and facilities well. Staff knew their roles and responsibilities in protecting patients from healthcare associated infections and to control the spread of these infections.
- The service managed their staffing to safely care for patients despite local recruitment issues. They had regular bank and agency staff to fill any gaps in rotas and reviewed their staffing needs on a weekly basis.
- The service planned for emergencies and staff understood their roles if one should happen.

Community health services for adults

- 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. The service used information to improve services.
- The service provided care and treatment based on national guidance and evidence of effectiveness. Managers checked to make sure staff followed guidance.
- Staff of different kinds worked together as a team to benefit patients. Nurses, therapists and support staff worked with professionals from other services to provide good care. Staff supported patients to receive enough food and drink to meet their needs and improve their health.
- The service monitored the effectiveness of care and treatment and used the findings to improve them. Staff 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 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.
- Feedback from patients was continually positive about the way staff treat people. We found examples where staff had exceeded patient expectations and staff had gone the extra mile to provide excellent care to their patients.
- There was a strong, visible person-centred culture. Staff were highly motivated and inspired to offer care that was kind and promoted people's dignity.
- Staff recognised that patients' emotional and social needs were as important as their physical needs. We observed staff asking patients open questions about the way they were feeling and gave them an opportunity to respond by actively listened to their answers.
- People were truly respected and valued as individuals and were empowered as partners in their care. Staff were committed to working in partnership with people. Staff took the time to explain and interact with patients, they were sensitive to patients' needs offering explanations and being supportive when patients expressed concerns.
- The organisation's planned and provided services in a way that met the needs of local people. The service was tailored to meet the needs of individual people and delivered in a way to ensure flexibility, choice and continuity of care.
- People's individual needs were central to the delivery of tailored services. The service took account of and understood the needs of individual patients. Services reflected the needs of the population served and staff used innovative approaches to achieve this with the resources available.
- Services were flexible, provided informed choice and ensured continuity of care.
- There was a proactive approach to understanding the needs and preferences of different groups of people and to delivering care in a way that met those needs.
- People could access services and appointments in a way and at a time that suited them. Waiting times from referral to assessment exceeded their targets and arrangements to treat and discharge patients were in line with good practice.
- The service treated concerns and complaints seriously, investigated them and learned lessons from the results, which were shared with all staff. The service demonstrated where improvements had been made as a result of learning from reviews.

Community health services for adults

- The service had managers at all levels with the right skills and abilities to run a service providing high-quality sustainable care. Managers across the service promoted a positive culture that supported and valued staff creating a sense of common purpose based on shared values.
- The organisation 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.
- The organisation had a systematic approach to continually improve quality and safeguard high standards of care and treatment by creating an environment in which excellence in clinical care would flourish.
- The service had effective systems for identifying risks and planning to eliminate or reduce them. The organisation collected, analysed, managed and used information well to support all of its activities, using secure electronic systems with security safeguards.
- The organisation engaged well with patients, staff and the public to plan and manage appropriate services and collaborated with partner organisations effectively.

Is the service safe?



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

- The service provided mandatory training in key skills to all staff and mostly made sure everyone completed it.
- Staff understood how to protect patients from abuse and the service worked well with other agencies to do so. Staff mostly had training on how to recognise and report abuse and they knew how to apply it.
- 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.
- Staff completed and updated risk assessments for each patient. They kept clear records and asked for support when necessary.
- The service mostly had enough staff with the right qualifications, skills, training and experience to keep people safe from avoidable harm and to provide the right care and treatment.
- Staff mostly kept detailed records of patients' care and treatment. Records were clear, up-to-date and easily available to all staff providing care.
- The service followed best practice when prescribing, giving, recording and storing medicines. Patients mostly received the right medication at the right dose at the right time.
- 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. Staff collected safety information and shared it with staff.

Is the service effective?

Good 

Community health services for adults

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 assessed patients to ensure they received enough food and drink to meet their needs and improve their health. They used special nutritional and hydration assessments when necessary.
- Staff assessed and monitored patients regularly to see if they were in pain. They accessed additional pain relief to ease pain where this was required.
- Managers monitored the effectiveness of care and treatment and used the findings to improve them. They compared local results with those of other services to learn from them.
- The service generally made sure staff were competent for their roles. Managers mostly 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 understood how and when to assess whether a patient had the capacity to make decisions about their care. They followed the organisation's policy and procedures when a patient could not give consent.

Is the service caring?

Outstanding ☆ ↑

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

- There was a strong, visible person-centred culture. Staff were highly motivated and inspired to offer care with kindness and they promoted the dignity of patients. Feedback from patients consistently confirmed that staff treated them well and with kindness. We found examples where staff had exceeded patient expectations and staff had gone the extra mile to provide excellent care to their patients.
- Staff provided emotional support to all patients to minimise their distress. Staff recognised that patients' emotional and social needs were as important as their physical needs. We observed staff asking patients open questions about the way they were feeling and gave them an opportunity to respond by actively listened to their answers.
- People were truly respected and valued as individuals and were empowered as partners in their care, practically emotionally, by an exceptional and distinctive service. Staff took the time to explain and interact with patients, they were sensitive to patients' needs offering explanations and being supportive when patients expressed concerns.

Is the service responsive?

Outstanding ☆ ↑

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

Community health services for adults

- The community adult service was tailored to meet the needs of individual people and delivered in a way to ensure flexibility, choice and continuity of care. The service took account and understood the needs of individual patients. Services reflected the needs of the population served and staff used innovative approaches to achieve this with the resources available. Services were flexible, provided informed choice and ensured continuity of care.
- The service had a proactive approach to understanding the needs of different people and delivering accessible care that met those needs and took account of people in vulnerable circumstances. There was a proactive approach to understanding the needs and preferences of different groups of people and to delivering care in a way that met those needs.
- People had access to the right care at the right time, when they needed it. Waiting times from referral to assessment exceeded their targets and arrangements to treat and discharge patients were in line with good practice. People could access services and appointments in a way and at a time that suited them.
- The service had processes in place to manage, investigate and respond to complaints effectively and treated concerns and complaints seriously, investigated them and learned lessons from the results, and shared these with all staff. They demonstrated where improvements had been made as a result of learning from reviews.

Is the service well-led?

Good ● → ←

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

- Managers at all levels in the service had the right skills and abilities to run a service providing high-quality sustainable care.
- The service 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 service promoted a positive culture that supported and valued staff, creating a sense of common purpose based on shared values.
- The organisation used a systematic approach to continually improving the quality of its services and safeguarding high standards of care by creating an environment in which excellence in clinical care would flourish.
- The organisation had effective systems for identifying risks, planning to eliminate or reduce them, and coping with both the expected and unexpected.
- The organisation collected, analysed, managed and used information well to support all its activities, using secure electronic systems with security safeguards.
- The organisation engaged well with patients, staff, the public and local organisations to plan and manage appropriate services, and collaborated with partner organisations effectively.
- The organisation was committed to improving services by learning from when things went well and when they went wrong, promoting training, research and innovation.

Outstanding practice

- Staff worked in partnership with patients to set treatment goals. People were truly respected and valued as individuals and were empowered as partners in their care, practically and emotionally.

Community health services for adults

- Personalised shared care plans empowered patients to take an active role in their own care and promoted their independence.
- Patients consistently praised staff for the care they provided and often felt the care had exceeded their expectations.
- Integrated care teams felt at the centre of the communities where they worked. Nursing staff bought food for patients when they found they had no food in their homes.
- Nursing staff had worked in collaboration with outside agencies to organise presents for children where families could not afford to buy Christmas presents and to provide Christmas food parcels for patients that were alone during the Christmas period.
- The service reviewed new patients in a timely way by exceeding their referral to assessment targets.
- The early supported discharge, admission avoidance and repatriation (ESDAAR) team had saved the local health economy £2,461,703 in supporting patients with early discharge and avoiding admissions.

Community health inpatient services

Good   

Key facts and figures

Provide Community Interest Company commenced in 2013 and is based in Colchester, Essex. The service primarily serves the communities across Essex, with some service provision across areas of Cambridgeshire and Peterborough and the London boroughs of Waltham Forest and Redbridge.

The hospital has had a registered manager in post since 2013. At the time of the inspection a new manager had recently been appointed and was registered with CQC in June 2018.

The organisation has two inpatient wards based in two locations, Halstead Hospital and St Peters Hospital, based in Maldon. The service has 46 inpatient beds providing rehabilitation, enablement and palliative care. The services are delivered by nurse-led multidisciplinary teams. Both inpatient wards accept 'step up' patient admissions. These are patients who require additional support but do not require admission into an acute hospital and 'step down' admissions who have been transferred from an acute hospital. Additionally, 12 beds at St Peters are stroke rehabilitation beds and form part of the integrated stroke pathway and provides rehabilitation for people stepping down from the acute hospital.

The services are delivered by nurse-led multidisciplinary teams with medical support from GP's and consultant geriatricians.

We inspected this service at both sites using our comprehensive inspection methodology. We carried out our unannounced inspection on 23 and 24 January 2019.

At this inspection, we re-inspected all key questions safe, effective, caring responsive to people's needs and well-led and rated all domains as good, providing a rating of good overall

During the inspection we visited both inpatient wards. We spoke with 23 members of staff including matrons, registered nurses, health care assistants, administrative, medical and therapy staff, a dietician and a pharmacist. We spoke with six patients and one relative. During our inspection we observed episodes of care and reviewed 12 sets of patient medical records, 10 medication charts and meeting minutes, audit data, action plans and training records.

There were no special reviews or investigations of the organisation ongoing by the CQC at any time during the 12 months before this inspection. The service has been inspected four times, and the most recent inspection took place in December 2016 which found that the service was meeting all standards of quality and safety it was inspected against.

Summary of this service

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

- The service had enough staff with the right qualifications, skills, training and experience to keep people safe from avoidable harm and to provide the right care and treatment.
- Staff understood how to protect patients from abuse and the service worked well with other agencies to do so.
- Staff kept detailed patients' records and these records were clear, up-to-date and easily available to all staff providing care.

Community health inpatient services

- The service followed best practice when prescribing, giving, recording and storing medicines. Patients received the right medication at the right dose at the right time.
- Staff assessed patients to ensure they received enough food and drink to meet their needs and improve their health. They used special nutritional and hydration assessments when necessary.
- The service provided care and treatment based on national guidance and evidence of its effectiveness. Managers checked to make sure staff followed guidance.
- Staff treated patients with compassion and respect. Privacy and dignity was maintained when treating the patient. Staff also provided emotional support to patients, relatives and those close to patients to minimise distress.
- The service treated concerns and complaints seriously, investigated them and learned lessons from the results, which were shared with all staff.

However, we also found:

- A lack of a formal checking process for defibrillators and oxygen cylinders.
- Not all clinicians could access to the incident reporting system
- Whilst the service was providing pain relief to patients, pain scores were not being formally recorded in patient records in a systematic way.

Is the service safe?

Good   

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

- The organisation provided mandatory training in key skills to all staff and these were mostly completed. In community inpatient services met the 90% target for 15 of the 18 mandatory training modules for which all staff were eligible.
- Staff understood how to protect patients from abuse and the service worked well with other agencies to do so. Staff mostly had training on how to recognise and report abuse, and they knew how to apply it. All staff received information and training about female genital mutilation (FGM) within mandatory safeguarding adults and children training levels one and two. All staff received information about sexual exploitation within safeguarding adults and children mandatory training levels one and two.
- The service had suitable premises and equipment and looked after them well.
- The service generally controlled infection risk well. Staff kept themselves, the equipment and the premises were clean. They used control measures to prevent the spread of infection.
- Staff completed and updated risk assessments for each patient. They kept clear records and asked for support from their colleagues when necessary.
- Staff kept detailed records of patients' care and treatment. Records were clear, up-to-date and easily available to all staff providing care.
- The service followed best practice when prescribing, giving, recording and storing medicines. Patients received the right medication at the right dose at the right time.

Community health inpatient services

- The service managed patient safety incidents well. Staff recognised incidents and reported them appropriately. Managers investigated incidents and shared lessons learned with the team and the wider service. When things went wrong, staff apologised and gave patients information and suitable support.
- The service used safety monitoring results well. Staff collected safety information and shared it with staff, patients and visitors. Managers used this to improve the service.

However, we also found:

- On St Peters ward, the defibrillator daily checks were unclear as two pieces of equipment were checked against one record and on Halstead ward, there was no formal process in place for checking oxygen cylinders.
- Not all clinicians could access to electronic incident reporting.

Is the service effective?

Good   

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

- People's care and treatment is planned and delivered in line with current evidence-based guidance, standards, best practice. This is monitored to ensure consistency of practice.
- Managers monitored the effectiveness of care and treatment and used the findings to improve them. 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 kinds worked together as a team to benefit patients. Doctors, nurses and other healthcare professionals supported each other to provide good care.
- Staff assessed patients to ensure they received enough food and drink to meet their needs and improve their health. They used special nutritional and hydration assessments when necessary.
- Staff understood how and when to assess whether a patient had the capacity to make decisions about their care. They followed the organisation's policies and procedures when a patient could not give consent.
- 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 illness and those who lacked the capacity to make decisions about their care.
- Staff generally had access to up-to-date, accurate and comprehensive information on

patients' care and treatment. However, not all staff had access to an electronic records system that they could all update.

However, we also found:

- While the service was providing pain relief there was no documented pain scores. We were told that new documentation was being introduced to record pain levels.
- At the time of inspection, some staff had not had annual appraisals with their line manager to support their development.

Community health inpatient services

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. We witnessed positive patient interactions between staff and patients. We observed staff speaking to patients politely and with a smile. We observed staff introducing themselves when meeting patients or relatives and responding.
- Staff provided emotional support to patients to minimise their distress. We observed staff demonstrating a caring attitude towards all patients and relatives. Staff offered emotional support

to patients to reduce their anxiety and distress as much as possible.

- Staff provided patients with relevant information, both verbal and written, so they could make informed decisions about their care and treatment.
- Staff involved patients and those close to them in decisions about their care and

treatment. All patients and relatives we spoke with told us they had felt involved in the care delivered and had been given sufficient time to ask questions if they did not understand something.

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.
- The service took account of patients' individual needs.
- The service had clear admission criteria and liaised closely with the local NHS trust. Patients who presented at the local acute NHS trust were assessed by the organisation's staff and transferred to the appropriate inpatient ward.
- People could access the service when they needed it. Waiting times from referral to treatment and arrangements to admit, treat and discharge patients were in line with good practice.
- Patients and relatives had access to a wide range of specialist nurses, for example diabetic, tissue viability and palliative care nurses.
- The service had developed partnerships with several services, including but not limited to the local hospices, the local university, the voluntary sector, Health Education East England and the Leadership Academy.
- The service treated concerns and complaints seriously, and learned lessons from the results, and shared these with all staff.

However, we also found:

- The service did not meet the organisation's target for responding to complaints.
- The service had a number of delays when discharging patients home.

Community health inpatient services

Is the service well-led?

Good  → ←

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

- Managers at all levels had the right skills and abilities to run a service providing high-quality sustainable care.
- The organisation had a vision for what it wanted to achieve and workable plans to turn it into action developed with involvement from staff.
- Managers across the service promoted a culture that supported and valued staff, creating a sense of common purpose based on shared values.
- The organisation had effective systems for identifying risks, planning to eliminate or reduce them, and coping with both the expected and unexpected.
- The organisation 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, the public and local organisations to plan and manage appropriate services and collaborated with partner organisations effectively.
- The organisation was committed to improving services by learning from when things went well and when they went wrong, promoting training, research and innovation.

Areas for improvement

- The organisation should ensure that each defibrillator has a separate check sheet.
- The organisation should ensure that a formal process is in place to check the oxygen levels of the cylinders.
- The organisation should ensure that clinicians within the service have access to the incident reporting system.
- The organisation should utilise the pain tools and formally document the patients pain score.
- The organisation should ensure that all staff receive an appraisal and have an appropriate personal development plan in place, with individualised objectives and goals.
- The organisation should respond to complaints within the target set by the provider.
- The organisation should improve the patient discharge process so patients are not delayed.

Our inspection team

The team included a Head of Hospitals Inspector, an Inspection manager, an Inspector, one executive reviewer and one specialist adviser.

Executive reviewers are senior healthcare managers who support our inspections of the leadership of trusts. Specialist advisers are experts in their field who we do not directly employ. Experts by experience are people who have personal experience of using or caring for people who use health and social care services.