

Report of the Assistant Director – Legal & Governance

The Retreat Inspection Cover Report

Summary

1. This report and its annexes inform the Committee of the recent Care Quality Commission (CQC) inspection of The Retreat in York along with the hospital's quality improvement plans and a summary of the CQC action plan.

Background

2. The Retreat is a charity delivering not-for-profit specialist mental health services. It works closely with the NHS and other service commissioners and providers including the Vale of York Clinical Commissioning Group (CCG) and the Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV).
3. The Retreat was established in 1796 and is an independent specialist mental health care hospital for the treatment of up to 98 people with complex mental health needs.
4. The CQC carried out a focused inspection of The Retreat in February 2017 in response to a number of safeguarding concerns that the hospital had raised with the City of York Council and about which it had notified the CQC. As a result of this focused inspection, on a single current unit for older males, the hospital received an 'inadequate' rating.
5. The concerns related primarily to staff delivery of patient personal care, inappropriate moving and handling of patients, and staffing shortages. These concerns also contained reports of bullying within the staff team. The reported incidents had occurred during the period the 11 January 2017 to 3 February 2017 when six patients from George Jepson unit were moved to another unit, the 'Allis' unit, while refurbishment work took place on the George Jepson unit. The Retreat previously closed

Allis unit to inpatients in 2015 as they found it unsuitable for the patient group that resided there. The Retreat had not informed the CQC of their intention to move patients for a six week period. There were no patients on Allis unit when the CQC visited as the provider had closed the unit on 3 February 2017 in response to the safeguarding alerts.

6. Although there were no patients on Allis unit at the time of the inspection, the unit was dirty, damp and cold; there was limited hot water and unsuitable kitchen, toilet and bathing facilities.
7. Following the February 2017 inspection areas for improvement were highlighted along with action The Retreat **must** take to improve:
 - The provider must ensure that care and treatment is provided in a safe way for patients.
 - The provider must ensure that risks to the health and safety of patients receiving the care or treatment are assessed and mitigated.
 - The provider must ensure that all premises are clean and safe with suitable equipment and facilities.
 - The provider must ensure that patient dignity and respect are considered and acted in accordance with at all times.
 - The provider must ensure that all patient documentation is complete and filed appropriately on the George Jepson unit.
 - The provider must ensure that all safeguarding incidents are reported.
 - The provider must ensure that appropriate planning and governance processes are in place; this includes ensuring that environmental and patient risks are identified, captured, managed and communicated with patients, families and staff when making decisions that affect the service.

Options

8. Members can ask to be updated on the progress of actions in The Retreat quality improvement plan, or not.

Analysis

9. There is no analysis included in this report.

Council Plan

10. This report is linked to A Focus on Frontline Services element of the Council Plan, particularly that support services are available to those who need them, that residents are supported to live healthy lives and that residents are protected from harm.

Risks and Implications

11. There are no risks associated with the recommendations in this report. However, there is a risk the Committee would not be fulfilling its responsibility to review and scrutinise an matter relating to the planning, provision and operation of health services within the city if it were not assured that issues raised by the CQC are being addressed.

Recommendations

12. Having read and commented on this report and its annexes Member are asked to request that the Committee is updated on the progress of The Retreat quality improvement plan as and when appropriate.

Reason: So the Committee is assured that concerns raised by the CQC are being addressed

Contact Details

Author:

Steve Entwistle
Scrutiny Officer
Tel:(01904) 554279
steven.entwistle@york.gov.uk

Chief Officer Responsible for the report:

Andrew Docherty
Assistant Director – Legal & Governance
Tel: (01904) 551004

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Wards Affected:

All

For further information please contact the author of the report
Annexes

Annex 1 – The Retreat Quality Improvement Plan

Annex 2 – CQC Action Plan Summary

Annex 3 – CQC Quality Report

Abbreviations

CCG – Clinical Commissioning Group

CQC – Care Quality Commission

TEWV – Tees, Esk and Wear Valleys NHS Foundation Trust