NHS England

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Our Ref: Your Ref:

Date: 14 January 2016

By Email

Albert Chelliah Group Operations Director Inmind Healthcare Group Unit 7 The Quadrant Upper Culham Farm Cockpole Green Berkshire RG10 8NR

Dear Albert

As you are aware a single item Quality Surveillance meeting was held yesterday with regard to the progress being made at Waterloo Manor in relation to concerns raised by the CQC. The purpose of the meeting was to consider the current views of stakeholders in relation to those concerns, and agree what further oversight is required as part of the Quality Surveillance procedures. To this end representatives at the meeting included NHS England commissioners and case managers, CCG commissioners, Leeds City Council Safeguarding, and NHS England Nursing Directorate. The CQC representative was unable to attend the meeting but a verbal update was provided.

Documentation circulated to the group prior to the meeting included Waterloo Manor's Compliance Action Plan, together with the SMART action plan toolkit and a copy of Waterloo Manor's Vision, Mission and Values. These were considered very helpful in providing a clear outline of how the actions are being taken forward by Inmind as an organisation, and at Waterloo Manor hospital.

The key points noted at the meeting are summarised below:

- A close relationship with Leeds safeguarding has now been established with monthly meetings taking place with Lucy Cockerham, training has been provided to staff and an invite has been extended to join the next governance meeting being held at WM on the 25th January. There are three current safeguarding cases each relating to overdosing of self-administered medication.
- Leeds CCG's and LYPFT have become more closely involved in relation to the nonspecialist elements of the service, and there is an intention that this will be built on via LYPFT's case manager.

- The updated action plan provided by WM is much more detailed and focused than earlier drafts which increases stakeholder confidence that WM understand the concerns and have clear plans to rectify the key issues. The document provides some level of assurance that the service are making progress and that this progress will continue.
- Changes in staffing across the company were seen as positive and instrumental in ensuring that new governance procedures, Board level oversight and scrutiny, clinical leadership and development, would be embedded across the organisation. Notable changes include Non-Executive appointment to the Board, Director of Nursing, Head of Compliance, Hospital Director and Clinical Lead roles.
- At ward level some level of concern remains in relation to care planning documentation, staffing resources and nursing compliment and leadership.
- At a corporate level there remain some concerns in relation to transparency of the Board meetings, the new governance structures and staffing roles that need further time to embed, and the lack of clarity over the future provision at WM if the current level of occupancy continues.

In summarising the discussion it was agreed that WM have made significant progress and that there is a high level of confidence that this progress will be maintained. Discussion and agreement is needed on how the current level of support and scrutiny is to be reduced over the coming months which ensures that progress will continue to be monitored, but with a reduced level of oversight and scrutiny. This 'exit' strategy needs to be agreed and in place prior to reducing the current level of Quality Surveillance.

A further meeting of the QSG is to be organised for the end of March 2016 to further review progress, particularly in relation to the embedding of new governance processes and key staff appointments.

Please do not hesitate to contact myself if you would like to discuss any of the issues raised above.

Yours sincerely

JULIE FINCH Deputy Director of Nursing & Quality