

CQC Statement of Purpose			
Meeting	Board of Directors		
Date	08/12/2021	Agenda item	16
Lead Director	Paula Simpson, Chief Nurse		
Author(s)	Claire Wedge, Deputy Chief Nurse		
Action required (please tick the appropriate box)			
To Approve <input checked="" type="checkbox"/>	To Discuss <input type="checkbox"/>	To Assure <input type="checkbox"/>	
Purpose			
<p>The purpose of this paper is to present the updated CQC statement of purpose to the Board of Directors for approval.</p> <p>The CQC statement of purpose is a legally required document that includes a standard set of information about a provider's service. The information contained within the document must always be accurate and up to date and is therefore subject to regular review.</p>			
Executive Summary			
<p>The Trust's CQC Statement of Purpose was last approved by the Board of Directors on 4 August 2021 to include the updated Trust values; removal of the reference to delivery of podiatry services to West Cheshire and Liverpool; addition of provision of the 0-19 Healthy Child Programme (HCP) in St Helen's from 1 September 2021 and to include confirmation of bed capacity at CICC across three wards.</p> <p>The CQC Statement of Purpose is presented to Trust Board for approval of:</p> <ul style="list-style-type: none"> • Update of the grammatical tense, confirming that the Trust has provided the 0-19 Healthy Child Programme (HCP) in St Helens since 1 September 2021 • Inclusion of the intended delivery of the Knowsley 0-25 Healthy Child Programme from 1 February 2022 <p>The changes are highlighted in the updated statement of purpose in red text for ease of identification.</p>			
Risks and opportunities: None identified.			
Quality/inclusion considerations: Quality Impact Assessment completed and attached <input type="checkbox"/> No Equality Impact Assessment completed and attached <input type="checkbox"/> No Individualised care delivery is provided by the Trust ensuring compliance with equality and diversity standards for staff and people who use Trust services			
Financial/resource implications: None identified			
Trust Strategic Objectives <i>Please select the top three Trust Strategic Objectives that this report relates to, from the drop down boxes below.</i>			
<input type="checkbox"/> Our Populations - outstanding, safe care every time	<input type="checkbox"/> Our Populations – provide more person-centred care	<input type="checkbox"/> Our Populations - improving services through integration and better coordination	

Board of Directors is asked to consider the following action

The Board of Directors is asked to approve the updated CQC Statement of Purpose.

Report history

Submitted to	Date	Brief summary of outcome
Board of Directors (virtual)	09/12/2020	Approved (virtual/e-approval)
Board of Directors	03/02/2021	Approved
Board of Directors	04/08/2021	Approved

Statement of Purpose Health and Social Care Act 2008

Wirral Community Health and Care NHS Foundation Trust (RY7)

08 December 2021

The Statement of Purpose is a document which includes a standard required set of information defined by the Care Quality Commission, about the services the Trust provides.

This information includes;

- **Part 1: Provider's name, address and legal status.**
- **Part 2: Aims and objectives in providing the regulated activities and locations within the trust**
- **Part 3. Information per location (6):**
 - St Catherine's
 - Victoria Central Health Centre
 - Arrowe Park Hospital
 - Eastham clinic
 - Leasowe Primary care centre
 - Clatterbridge Hospital

The following pages outline the specific services the Trust provides, the locations of these services, the population they serve and which regulated service/s applies to them.

To ensure the accuracy of the document the Statement of Purpose it is reviewed annually or sooner if changes occur.

Statement of purpose, Part 1

Health and Social Care Act 2008, Regulation 12, schedule 3

The provider's business contact details, including address for service of notices and other documents, in accordance with Sections 93 and 94 of the Health and Social Care Act 2008

1. Provider's name and legal status

Full name¹	Wirral Community Health and Care NHS Foundation Trust					
CQC provider ID	RY7					
Legal status¹	Individual	<input type="checkbox"/>	Partnership	<input type="checkbox"/>	Organisation	<input checked="" type="checkbox"/>

2. Provider's address, including for service of notices and other documents

Business address²	St Catherine's Health Centre Church Road
Town/city	Birkenhead
County	Wirral
Post code	CH42 0LQ
Business telephone	0151 514 2160
Electronic mail (email)³	paula.simpson8@nhs.net

By submitting this statement of purpose you are confirming your willingness for CQC to use the **email address** supplied at Section 2 above for service of documents and for sending all other correspondence to you. Email ensures fast and efficient delivery of important information. If you do not want to receive documents by email please check or tick the box below. We will not share this email address with anyone else.

I/we do NOT wish to receive notices and other documents from CQC by email	<input type="checkbox"/>
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¹ Where the provider is a partnership please fill in the partnership's name at 'Full name' in Section 1 above. Where the partnership does not have a name, please fill in the names of all the partners at Section 3 below

² Where you do not agree to service of notices and other documents by email they will be sent by post to the business address shown in Section 2. This includes draft and final inspection reports. This postal business address will be included on the CQC website.

³ Where you agree to service of notices and other documents by email your copies will be sent to the email address shown in Section 2. This includes draft and final inspection reports.

Statement of purpose, Part 2

Aims and objectives in providing the regulated activities and locations within the trust

Located in Wirral in North West England, we provide high-quality primary, community and public health services to the population of Wirral and parts of Cheshire and Liverpool.

On 1 June 2017 the trust formally began to provide integrated adult health and social care services for patients and service users in their local communities. This demonstrates the trusts' continued commitment to transforming public services responding to the needs of the communities we serve.

We play a key role in the local health and social care economy as a high performing organisation with an excellent clinical reputation. Our expert teams provide a diverse range of community health care services, seeing and treating people right through their lives both at home and close to home.

Our commitment to quality underpins our determination to achieve and demonstrate the sustainability, efficiency and effectiveness of our organisation. At the heart of this we will retain our focus on delivering and developing demonstrably safe, effective and high-quality services.

Our common purpose recognises the important role we play in delivering integrated care with partners in the local health economy.

Our common purpose is:

Together...we will support you and your community to live well

Our values will help us to achieve our vision:

Compassion: supportive and caring, listening to others

Open: communicating openly, honestly and sharing ideas

Trust: trusted to deliver, feeling valued and safe

Our services are local and community-based, provided from around 50 sites across Wirral, including our main clinical bases, St Catherine's Health Centre in Birkenhead and Victoria Central Health Centre in Wallasey.

We also provide integrated 0-19 services in Cheshire East comprising health visiting, school nursing, family nurse partnership and breastfeeding support services from 13 bases.

From 1 September 2021 **the Trust has provided** the 0-19 Healthy Child Programme (HCP) in St Helens. The HCP is the early intervention and prevention public health programme that lies at the heart of universal services for children, young people and families at a crucial stage of life.

The service is delivered in individual's homes and in community venues such as

health centres, children’s centres and schools. We work with our locality partners to co-deliver services, working closely with GPs, midwives, hospitals, early years services, schools, partner agencies and voluntary services. The service is delivered from four core bases included Haydock Medical Centre, Moss Bank Children’s Centre, Billinge Health Centre and Station House Children’s Centre.

In addition, from the 1 February 2022, the Trust will deliver the 0-25 Healthy Child Programme in Knowsley.

The Knowsley HCP consists of services for children and young people aged 0-25 and their families, and is delivered by a team of Health Visitors, School Nurses, Public Health Nurses, Nursery Nurses, an Infant feeding team and screeners who will provide expert information, assessment and interventions.

The service will also include an Enhancing Families Service, who will deliver a targeted programme of support to vulnerable parents-to-be and parents, as a targeted aspect of the HCP. There will also be specialist roles, supporting Special Educational Needs and/or Disabilities (SEND), Mental Health, Early Help and Youth Offending.

The service is delivered in individuals’ homes and in community venues such as health centres, children’s centres and education settings.

The main service delivery base will North Huyton Primary Care Resource Centre.

The Trust are commissioned to provide inpatient beds for the purpose of rehabilitation and reablement; this service is delivered at the Clatterbridge Hospital site.

Strategic objectives and goals

Our vision and values, our assessment of population need and our understanding of local and national priorities have informed our strategic themes and priorities for 2018-2021.

Our strategic themes and objectives are highlighted below.



Statement of purpose, Part 3

Information per location

The information below is for location no.: 1 of a total of: 6 locations

Name of location	St Catherine's Health Centre
Address	Church Road Birkenhead Wirral Merseyside
Postcode	CH42 0LQ
Telephone	0151 514 2160
Email	paula.simpson8@nhs.net

Description of the location

(The premises and the area around them, access, adaptations, equipment, facilities, suitability for relevant special needs, staffing & qualifications etc)

St Catherine's Hospital is located in Birkenhead and provides services to all age groups.

It is specifically regulated for 'Treatment for disease, disorder or injury, which provides cover for all healthcare professional and provision for a wide range of community services, including community nursing, 0-19 services: Wirral, Cheshire East, St Helens and the **0-25 Healthy Child Programme in Knowsley (from 1 February 2022)**, community rehabilitation services and our community cardiology service. Our dental service and GP out of hours (GPOOH) are also covered by this regulated activity.

The site is also registered for 'Surgical procedures' which covers delivery of our dental service.

Registration for the site also covers 'Diagnostic and screening procedures' for our dental and community health services, including community nursing. The GPOOH service will also be delivered from this site on a Saturday, Sunday and Bank Holidays.

'Transport services, triage and medical advice provided remotely' covers delivery of GPOOH.

In addition, the site is registered to deliver 'Family planning services' to cover our sexual health service delivery of inter-uterine coil devices (IUCD) fitting.

No of approved places / overnight beds (not NHS)	
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CQC service user bands

The people that will use this location ('The whole population' means everyone).

Adults aged 18-65	<input type="checkbox"/>	Adults aged 65+	<input type="checkbox"/>	
Mental health	<input type="checkbox"/>	Sensory impairment	<input type="checkbox"/>	
Physical disability	<input type="checkbox"/>	People detained under the Mental Health Act	<input type="checkbox"/>	
Dementia	<input type="checkbox"/>	People who misuse drugs or alcohol	<input type="checkbox"/>	
People with an eating disorder	<input type="checkbox"/>	Learning difficulties or autistic disorder	<input type="checkbox"/>	
Children aged 0 – 3 years	<input type="checkbox"/>	Children aged 4-12	<input type="checkbox"/>	Children aged 13-18 <input type="checkbox"/>
The whole population	<input checked="" type="checkbox"/>	Other (please specify below)	<input type="checkbox"/>	

The CQC service type(s) provided at this location	
Acute services (ACS)	<input type="checkbox"/>
Prison healthcare services (PHS)	<input type="checkbox"/>
Hospital services for people with mental health needs, learning disabilities, and problems with substance misuse (MLS)	<input type="checkbox"/>
Hospice services (HPS)	<input type="checkbox"/>
Rehabilitation services (RHS)	<input type="checkbox"/>
Long-term conditions services (LTC)	<input type="checkbox"/>
Residential substance misuse treatment and/or rehabilitation service (RSM)	<input type="checkbox"/>
Hyperbaric chamber (HBC)	<input type="checkbox"/>
Community healthcare service (CHC)	<input checked="" type="checkbox"/>
Community-based services for people with mental health needs (MHC)	<input type="checkbox"/>
Community-based services for people with a learning disability (LDC)	<input type="checkbox"/>
Community-based services for people who misuse substances (SMC)	<input type="checkbox"/>
Urgent care services (UCS)	<input checked="" type="checkbox"/>
Doctors consultation service (DCS)	<input checked="" type="checkbox"/>
Doctors treatment service (DTS)	<input checked="" type="checkbox"/>
Mobile doctor service (MBS)	<input type="checkbox"/>
Dental service (DEN)	<input checked="" type="checkbox"/>
Diagnostic and or screening service (DSS)	<input type="checkbox"/>
Care home service without nursing (CHS)	<input type="checkbox"/>
Care home service with nursing (CHN)	<input type="checkbox"/>
Specialist college service (SPC)	<input type="checkbox"/>
Domiciliary care service (DCC)	<input type="checkbox"/>
Supported living service (SLS)	<input type="checkbox"/>
Shared Lives (SHL)	<input type="checkbox"/>
Extra Care housing services (EXC)	<input type="checkbox"/>
Ambulance service (AMB)	<input type="checkbox"/>
Remote clinical advice service (RCA)	<input checked="" type="checkbox"/>
Blood and Transplant service (BTS)	<input type="checkbox"/>

Regulated activity(ies) carried on at this location		
Personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Surgical procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Transport services, triage and medical advice provided remotely	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Maternity and midwifery services	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Termination of pregnancies	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Services in slimming clinics	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Nursing care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Family planning service	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		

The information below is for location no.:	2	of a total of:	6	locations
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Name of location	Victoria Central Health Centre
Address	Mill Lane Wallasey
Postcode	Ch44 5UF
Telephone	0151 514 2160
Email	paula.simpson8@nhs.net

Description of the location	
(The premises and the area around them, access, adaptations, equipment, facilities, suitability for relevant special needs, staffing & qualifications etc)	
<p>Victoria Central Health Centre is located in Wallasey and provides services to all age groups.</p> <p>It is specifically regulated for 'Treatment for disease, disorder or injury, which provides cover for all healthcare professional and provision for a wide range of community services, including community nursing, 0-19 services and community rehabilitation services. Urgent care services including our walk-in centre and minor injuries unit and Doctor's consultation services including GP out of hours (GPOOH). Our dental service is also covered by this regulated activity.</p> <p>'Transport services, triage and medical advice provided remotely' covers delivery of GPOOH.</p> <p>The site is also registered for 'Surgical procedures' which covers delivery of our dental service.</p> <p>Registration for the site also covers 'Diagnostic and screening procedures' for our dental service, walk-in centre, GPOOH and community health services.</p> <p>In addition, the site is registered to deliver 'Family planning services' to cover our sexual health service delivery of inter-uterine coil devices (IUCD) fitting.</p>	
No of approved places / overnight beds (not NHS)	

CQC service user bands

The people that will use this location ('The whole population' means everyone).

Adults aged 18-65	<input type="checkbox"/>	Adults aged 65+	<input type="checkbox"/>	
Mental health	<input type="checkbox"/>	Sensory impairment	<input type="checkbox"/>	
Physical disability	<input type="checkbox"/>	People detained under the Mental Health Act	<input type="checkbox"/>	
Dementia	<input type="checkbox"/>	People who misuse drugs or alcohol	<input type="checkbox"/>	
People with an eating disorder	<input type="checkbox"/>	Learning difficulties or autistic disorder	<input type="checkbox"/>	
Children aged 0 – 3 years	<input type="checkbox"/>	Children aged 4-12	<input type="checkbox"/>	Children aged 13-18 <input type="checkbox"/>
The whole population	<input checked="" type="checkbox"/>	Other (please specify below)	<input type="checkbox"/>	

The CQC service type(s) provided at this location	
Acute services (ACS)	<input type="checkbox"/>
Prison healthcare services (PHS)	<input type="checkbox"/>
Hospital services for people with mental health needs, learning disabilities, and problems with substance misuse (MLS)	<input type="checkbox"/>
Hospice services (HPS)	<input type="checkbox"/>
Rehabilitation services (RHS)	<input type="checkbox"/>
Long-term conditions services (LTC)	<input type="checkbox"/>
Residential substance misuse treatment and/or rehabilitation service (RSM)	<input type="checkbox"/>
Hyperbaric chamber (HBC)	<input type="checkbox"/>
Community healthcare service (CHC)	<input checked="" type="checkbox"/>
Community-based services for people with mental health needs (MHC)	<input type="checkbox"/>
Community-based services for people with a learning disability (LDC)	<input type="checkbox"/>
Community-based services for people who misuse substances (SMC)	<input type="checkbox"/>
Urgent care services (UCS)	<input checked="" type="checkbox"/>
Doctors consultation service (DCS)	<input checked="" type="checkbox"/>
Doctors treatment service (DTS)	<input checked="" type="checkbox"/>
Mobile doctor service (MBS)	<input type="checkbox"/>
Dental service (DEN)	<input checked="" type="checkbox"/>
Diagnostic and or screening service (DSS)	<input type="checkbox"/>
Care home service without nursing (CHS)	<input type="checkbox"/>
Care home service with nursing (CHN)	<input type="checkbox"/>
Specialist college service (SPC)	<input type="checkbox"/>
Domiciliary care service (DCC)	<input type="checkbox"/>
Supported living service (SLS)	<input type="checkbox"/>
Shared Lives (SHL)	<input type="checkbox"/>
Extra Care housing services (EXC)	<input type="checkbox"/>
Ambulance service (AMB)	<input type="checkbox"/>
Remote clinical advice service (RCA)	<input checked="" type="checkbox"/>
Blood and Transplant service (BTS)	<input type="checkbox"/>

Regulated activity(ies) carried on at this location		
Personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Surgical procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Transport services, triage and medical advice provided remotely	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Maternity and midwifery services	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Termination of pregnancies	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Services in slimming clinics	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Nursing care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Family planning service	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		

The information below is for location no.:	3	of a total of:	6	locations
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Name of location	Arrowe Park hospital
Address	Arrowe Park Road Upton Merseyside
Postcode	CH49 5PE
Telephone	0151 514 2160
Email	paula.simpson8@nhs.net

Description of the location	
(The premises and the area around them, access, adaptations, equipment, facilities, suitability for relevant special needs, staffing & qualifications etc)	
<p>Arrowe Park Hospital is located in Upton and provides services to all age groups.</p> <p>It is specifically regulated for 'Treatment for disease, disorder or injury, which provides cover for all healthcare professional and provision for a wide range of community services, including community nursing, 0-19 services and community rehabilitation services. Urgent care services including our urgent treatment centre (previously a walk-in centre) and Doctor's consultation services including GP out of hours (GPOOH). Our dental service is also covered by this regulated activity.</p> <p>'Transport services, triage and medical advice provided remotely' covers delivery of GPOOH.</p> <p>The site is also registered for 'Surgical procedures' which covers delivery of our dental service.</p> <p>Registration for the site also covers 'Diagnostic and screening procedures' for our dental, urgent treatment centre, GPOOH and community health services, including community nursing.</p> <p>In addition, the site is registered to deliver 'Family planning services' as part of our sexual health service delivery.</p>	
No of approved places / overnight beds (not NHS)	

CQC service user bands

The people that will use this location ('The whole population' means everyone).

Adults aged 18-65	<input type="checkbox"/>	Adults aged 65+	<input type="checkbox"/>	
Mental health	<input type="checkbox"/>	Sensory impairment	<input type="checkbox"/>	
Physical disability	<input type="checkbox"/>	People detained under the Mental Health Act	<input type="checkbox"/>	
Dementia	<input type="checkbox"/>	People who misuse drugs or alcohol	<input type="checkbox"/>	
People with an eating disorder	<input type="checkbox"/>	Learning difficulties or autistic disorder	<input type="checkbox"/>	
Children aged 0 – 3 years	<input type="checkbox"/>	Children aged 4-12	<input type="checkbox"/>	Children aged 13-18
The whole population	<input checked="" type="checkbox"/>	Other (please specify below)	<input type="checkbox"/>	

The CQC service type(s) provided at this location	
Acute services (ACS)	<input type="checkbox"/>
Prison healthcare services (PHS)	<input type="checkbox"/>
Hospital services for people with mental health needs, learning disabilities, and problems with substance misuse (MLS)	<input type="checkbox"/>
Hospice services (HPS)	<input type="checkbox"/>
Rehabilitation services (RHS)	<input type="checkbox"/>
Long-term conditions services (LTC)	<input type="checkbox"/>
Residential substance misuse treatment and/or rehabilitation service (RSM)	<input type="checkbox"/>
Hyperbaric chamber (HBC)	<input type="checkbox"/>
Community healthcare service (CHC)	<input type="checkbox"/>
Community-based services for people with mental health needs (MHC)	<input type="checkbox"/>
Community-based services for people with a learning disability (LDC)	<input type="checkbox"/>
Community-based services for people who misuse substances (SMC)	<input type="checkbox"/>
Urgent care services (UCS)	<input checked="" type="checkbox"/>
Doctors consultation service (DCS)	<input checked="" type="checkbox"/>
Doctors treatment service (DTS)	<input checked="" type="checkbox"/>
Mobile doctor service (MBS)	<input type="checkbox"/>
Dental service (DEN)	<input checked="" type="checkbox"/>
Diagnostic and or screening service (DSS)	<input type="checkbox"/>
Care home service without nursing (CHS)	<input type="checkbox"/>
Care home service with nursing (CHN)	<input type="checkbox"/>
Specialist college service (SPC)	<input type="checkbox"/>
Domiciliary care service (DCC)	<input type="checkbox"/>
Supported living service (SLS)	<input type="checkbox"/>
Shared Lives (SHL)	<input type="checkbox"/>
Extra Care housing services (EXC)	<input type="checkbox"/>
Ambulance service (AMB)	<input type="checkbox"/>
Remote clinical advice service (RCA)	<input checked="" type="checkbox"/>
Blood and Transplant service (BTS)	<input type="checkbox"/>

Regulated activity(ies) carried on at this location		
Personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Surgical procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Transport services, triage and medical advice provided remotely	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Maternity and midwifery services	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Termination of pregnancies	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Services in slimming clinics	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Nursing care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Family planning service	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		

The information below is for location no.:	4	of a total of:	6	locations
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Name of location	Eastham Clinic
Address	31 Eastham Rake Eastham
Postcode	CH62 9AN
Telephone	0151 514 2160
Email	paula.simpson8@nhs.net

Description of the location	
(The premises and the area around them, access, adaptations, equipment, facilities, suitability for relevant special needs, staffing & qualifications etc)	
<p>Eastham Clinic is located in South Wirral and provides services to all age groups.</p> <p>It is specifically regulated for 'Treatment for disease, disorder or injury, which provides cover for all healthcare professional and provision for a wide range of community services, including community nursing, 0-19 services and community rehabilitation services. Urgent care services including our walk-in centre.</p> <p>Registration for the site also covers 'Diagnostic and screening procedures' for our walk-in centre and community health services, including community nursing.</p>	
No of approved places / overnight beds (not NHS)	

CQC service user bands

The people that will use this location ('The whole population' means everyone).

Adults aged 18-65	<input type="checkbox"/>	Adults aged 65+	<input type="checkbox"/>	
Mental health	<input type="checkbox"/>	Sensory impairment	<input type="checkbox"/>	
Physical disability	<input type="checkbox"/>	People detained under the Mental Health Act	<input type="checkbox"/>	
Dementia	<input type="checkbox"/>	People who misuse drugs or alcohol	<input type="checkbox"/>	
People with an eating disorder	<input type="checkbox"/>	Learning difficulties or autistic disorder	<input type="checkbox"/>	
Children aged 0 – 3 years	<input type="checkbox"/>	Children aged 4-12	<input type="checkbox"/>	Children aged 13-18 <input type="checkbox"/>
The whole population	<input checked="" type="checkbox"/>	Other (please specify below)	<input type="checkbox"/>	

The CQC service type(s) provided at this location	
Acute services (ACS)	<input type="checkbox"/>
Prison healthcare services (PHS)	<input type="checkbox"/>
Hospital services for people with mental health needs, learning disabilities, and problems with substance misuse (MLS)	<input type="checkbox"/>
Hospice services (HPS)	<input type="checkbox"/>
Rehabilitation services (RHS)	<input type="checkbox"/>
Long-term conditions services (LTC)	<input type="checkbox"/>
Residential substance misuse treatment and/or rehabilitation service (RSM)	<input type="checkbox"/>
Hyperbaric chamber (HBC)	<input type="checkbox"/>
Community healthcare service (CHC)	<input checked="" type="checkbox"/>
Community-based services for people with mental health needs (MHC)	<input type="checkbox"/>
Community-based services for people with a learning disability (LDC)	<input type="checkbox"/>
Community-based services for people who misuse substances (SMC)	<input type="checkbox"/>
Urgent care services (UCS)	<input checked="" type="checkbox"/>
Doctors consultation service (DCS)	<input type="checkbox"/>
Doctors treatment service (DTS)	<input type="checkbox"/>
Mobile doctor service (MBS)	<input type="checkbox"/>
Dental service (DEN)	<input type="checkbox"/>
Diagnostic and or screening service (DSS)	<input type="checkbox"/>
Care home service without nursing (CHS)	<input type="checkbox"/>
Care home service with nursing (CHN)	<input type="checkbox"/>
Specialist college service (SPC)	<input type="checkbox"/>
Domiciliary care service (DCC)	<input type="checkbox"/>
Supported living service (SLS)	<input type="checkbox"/>
Shared Lives (SHL)	<input type="checkbox"/>
Extra Care housing services (EXC)	<input type="checkbox"/>
Ambulance service (AMB)	<input type="checkbox"/>
Remote clinical advice service (RCA)	<input type="checkbox"/>
Blood and Transplant service (BTS)	<input type="checkbox"/>

Regulated activity(ies) carried on at this location		
Personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Surgical procedures	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Transport services, triage and medical advice provided remotely	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Maternity and midwifery services	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Termination of pregnancies	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Services in slimming clinics	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Nursing care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Family planning service	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		

The information below is for location no.:	5	of a total of:	6	locations
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Name of location	Leasowe Primary Care Centre
Address	2 Hudson Road Wirral
Postcode	CH46 2QQ
Telephone	0151 514 2160
Email	paula.simpson8@nhs.net

Description of the location (The premises and the area around them, access, adaptations, equipment, facilities, suitability for relevant special needs, staffing & qualifications etc)	
<p>Leasowe primary care centre is located in north Wirral.</p> <p>It is specifically regulated for 'Treatment for disease, disorder or injury, which provides cover for our dental service.</p> <p>The site is also registered for 'Surgical procedures' which covers delivery of our dental service.</p> <p>Registration for the site also covers 'Diagnostic and screening procedures' for our dental service.</p>	
No of approved places / overnight beds (not NHS)	

CQC service user bands

The people that will use this location ('The whole population' means everyone).

Adults aged 18-65	<input type="checkbox"/>	Adults aged 65+	<input type="checkbox"/>	
Mental health	<input type="checkbox"/>	Sensory impairment	<input type="checkbox"/>	
Physical disability	<input type="checkbox"/>	People detained under the Mental Health Act	<input type="checkbox"/>	
Dementia	<input type="checkbox"/>	People who misuse drugs or alcohol	<input type="checkbox"/>	
People with an eating disorder	<input type="checkbox"/>	Learning difficulties or autistic disorder	<input type="checkbox"/>	
Children aged 0 – 3 years	<input type="checkbox"/>	Children aged 4-12	<input type="checkbox"/>	Children aged 13-18 <input type="checkbox"/>
The whole population	<input checked="" type="checkbox"/>	Other (please specify below)	<input type="checkbox"/>	

The CQC service type(s) provided at this location	
Acute services (ACS)	<input type="checkbox"/>
Prison healthcare services (PHS)	<input type="checkbox"/>
Hospital services for people with mental health needs, learning disabilities, and problems with substance misuse (MLS)	<input type="checkbox"/>
Hospice services (HPS)	<input type="checkbox"/>
Rehabilitation services (RHS)	<input type="checkbox"/>
Long-term conditions services (LTC)	<input type="checkbox"/>
Residential substance misuse treatment and/or rehabilitation service (RSM)	<input type="checkbox"/>
Hyperbaric chamber (HBC)	<input type="checkbox"/>
Community healthcare service (CHC)	<input type="checkbox"/>
Community-based services for people with mental health needs (MHC)	<input type="checkbox"/>
Community-based services for people with a learning disability (LDC)	<input type="checkbox"/>
Community-based services for people who misuse substances (SMC)	<input type="checkbox"/>
Urgent care services (UCS)	<input type="checkbox"/>
Doctors consultation service (DCS)	<input type="checkbox"/>
Doctors treatment service (DTS)	<input type="checkbox"/>
Mobile doctor service (MBS)	<input type="checkbox"/>
Dental service (DEN)	<input checked="" type="checkbox"/>
Diagnostic and or screening service (DSS)	<input type="checkbox"/>
Care home service without nursing (CHS)	<input type="checkbox"/>
Care home service with nursing (CHN)	<input type="checkbox"/>
Specialist college service (SPC)	<input type="checkbox"/>
Domiciliary care service (DCC)	<input type="checkbox"/>
Supported living service (SLS)	<input type="checkbox"/>
Shared Lives (SHL)	<input type="checkbox"/>
Extra Care housing services (EXC)	<input type="checkbox"/>
Ambulance service (AMB)	<input type="checkbox"/>
Remote clinical advice service (RCA)	<input type="checkbox"/>
Blood and Transplant service (BTS)	<input type="checkbox"/>

Regulated activity(ies) carried on at this location		
Personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Surgical procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Transport services, triage and medical advice provided remotely	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Maternity and midwifery services	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Termination of pregnancies	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Services in slimming clinics	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Nursing care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Family planning service	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		

The information below is for location no.:	6	of a total of:	6	locations
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Name of location	Clatterbridge Hospital
Address	Clatterbridge Road, Wirral
Postcode	CH63 4JY
Telephone	0151 514 2160
Email	paula.simpson8@nhs.net

Description of the location	
(The premises and the area around them, access, adaptations, equipment, facilities, suitability for relevant special needs, staffing & qualifications etc)	
Clatterbridge Hospital is located in mid Wirral.	
It is specifically regulated for 'Treatment for disease, disorder or injury' and 'Diagnostic and screening procedures', to provide a Community Intermediate Care Centre (CICC) across three wards accommodating up to 73 people.	
The CICC will be primarily be used to support frail and older people with rehabilitation needs that cannot be managed within their own home environment.	
No of approved places / overnight beds (not NHS)	

CQC service user bands

The people that will use this location ('The whole population' means everyone).

Adults aged 18-65	<input checked="" type="checkbox"/>	Adults aged 65+	<input checked="" type="checkbox"/>		
Mental health	<input type="checkbox"/>	Sensory impairment	<input type="checkbox"/>		
Physical disability	<input type="checkbox"/>	People detained under the Mental Health Act	<input type="checkbox"/>		
Dementia	<input type="checkbox"/>	People who misuse drugs or alcohol	<input type="checkbox"/>		
People with an eating disorder	<input type="checkbox"/>	Learning difficulties or autistic disorder	<input type="checkbox"/>		
Children aged 0 – 3 years	<input type="checkbox"/>	Children aged 4-12	<input type="checkbox"/>	Children aged 13-18	<input type="checkbox"/>
The whole population	<input type="checkbox"/>	Other (please specify below)		<input type="checkbox"/>	

The CQC service type(s) provided at this location	
Acute services (ACS)	<input type="checkbox"/>
Prison healthcare services (PHS)	<input type="checkbox"/>
Hospital services for people with mental health needs, learning disabilities, and problems with substance misuse (MLS)	<input type="checkbox"/>
Hospice services (HPS)	<input type="checkbox"/>
Rehabilitation services (RHS)	<input checked="" type="checkbox"/>
Long-term conditions services (LTC)	<input type="checkbox"/>
Residential substance misuse treatment and/or rehabilitation service (RSM)	<input type="checkbox"/>
Hyperbaric chamber (HBC)	<input type="checkbox"/>
Community healthcare service (CHC)	<input type="checkbox"/>
Community-based services for people with mental health needs (MHC)	<input type="checkbox"/>
Community-based services for people with a learning disability (LDC)	<input type="checkbox"/>
Community-based services for people who misuse substances (SMC)	<input type="checkbox"/>
Urgent care services (UCS)	<input type="checkbox"/>
Doctors consultation service (DCS)	<input type="checkbox"/>
Doctors treatment service (DTS)	<input type="checkbox"/>
Mobile doctor service (MBS)	<input type="checkbox"/>
Dental service (DEN)	<input type="checkbox"/>
Diagnostic and or screening service (DSS)	<input type="checkbox"/>
Care home service without nursing (CHS)	<input type="checkbox"/>
Care home service with nursing (CHN)	<input type="checkbox"/>
Specialist college service (SPC)	<input type="checkbox"/>
Domiciliary care service (DCC)	<input type="checkbox"/>
Supported living service (SLS)	<input type="checkbox"/>
Shared Lives (SHL)	<input type="checkbox"/>
Extra Care housing services (EXC)	<input type="checkbox"/>
Ambulance service (AMB)	<input type="checkbox"/>
Remote clinical advice service (RCA)	<input type="checkbox"/>
Blood and Transplant service (BTS)	<input type="checkbox"/>

Regulated activity(ies) carried on at this location		
Personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Surgical procedures	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Transport services, triage and medical advice provided remotely	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Maternity and midwifery services	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Termination of pregnancies	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Services in slimming clinics	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Nursing care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Family planning service	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		

Statement of purpose, Part 4

Registered manager details

Including address for service of notices and other documents

The information below is for manager number:		of a total of:		Managers working for the provider shown in part 1
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1. Manager's full name	Mrs Paula Simpson
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2. Manager's contact details	
Business address	St Catherine's Health Centre
Town/city	Church Road
County	Birkenhead
Post code	Wirral
Business telephone	CH42 0LQ
Manager's email address¹	
paula.simpson8@nhs.net	

¹ Where the manager has agreed to service of notices and other documents by email they will be sent to this email address. This includes draft and final inspection reports on all locations where they manage regulated activities.

Where the manager does not agree to service of notices and other documents by email they will be sent by post to the provider postal business address shown in Part 1 of the statement of purpose. This includes draft and final inspection reports on all locations.

Please note: CQC can deem notices sent to manager(s) at the relevant email or postal address for service in this statement of purpose as having been served, as described in Sections 93 and 94 of the Health and Social Care Act 2008. The address supplied must therefore be accurate, up to date, and able to ensure prompt delivery of these important documents to registered managers.

3. Locations managed by the registered manager at 1 above	
(Please see part 3 of this statement of purpose for full details of the location(s))	
Name(s) of location(s) (list)	Percentage of time spent at this location

4. Regulated activity(ies) managed by this manager		
Personal care	<input type="checkbox"/>	
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Surgical procedures	<input checked="" type="checkbox"/>	
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Transport services, triage and medical advice provided remotely	<input checked="" type="checkbox"/>	
Maternity and midwifery services	<input type="checkbox"/>	
Termination of pregnancies	<input type="checkbox"/>	
Services in slimming clinics	<input type="checkbox"/>	
Nursing care	<input type="checkbox"/>	
Family planning service	<input checked="" type="checkbox"/>	

5. Locations, regulated activities and job shares

Where this manager does not manage all of the regulated activities ticked / checked at 4 above at all of the locations listed at 3 above, please describe which regulated activities they manage at which locations below.

Please also describe below any job share arrangements that include or affect this manager.

N/A

Mortality Report: Learning from Deaths Framework Quarter 2: 01 July 2021 - 30 September 2021			
Meeting	Board of Directors		
Date	08/12/2021	Agenda item	17
Lead Director	Nick Cross, Medical Director		
Author(s)	Nick Cross, Medical Director		
Action required (please tick the appropriate box)			
To Approve <input checked="" type="checkbox"/>	To Discuss <input type="checkbox"/>	To Assure <input type="checkbox"/>	
Purpose			
The purpose of this paper is to seek approval from Public Board in relation to the implementation of the Learning from Deaths framework and subsequent publication on the Trust website.			
Executive Summary			
This quarterly report provides evidence that learning from deaths is firmly embedded as a priority across the Trust, ensuring full adherence to the NQB Learning from deaths framework. It provides anonymised details of the numbers of unexpected deaths which have occurred within the Trust throughout Q2 2021/22, along with a summary of thematic learning identified during investigation into these cases. Attached as an appendix is a report detailing this information for purposes of publication of the Trust website.			
Risks and opportunities:			
Not applicable			
Quality/inclusion considerations:			
Quality Impact Assessment completed and attached <input type="checkbox"/> No Equality Impact Assessment completed and attached <input type="checkbox"/> No A QIA and EIA is not applicable in this particular case			
Financial/resource implications:			
Not applicable			
Trust Strategic Objectives			
<i>Please select the top three Trust Strategic Objectives that this report relates to, from the drop down boxes below.</i>			
<input type="checkbox"/> Our Populations - outstanding, safe care every time	<input type="checkbox"/> Our Populations – provide more person-centred care	<input type="checkbox"/> Our Populations - improving services through integration and better coordination	
Board action			
The Board of Directors is asked to be assured that 1: processes are in place to meet our statutory obligations surrounding Learning From Deaths 2: that processes are in place to engagement with families and meet our Duty of Candour obligations.			
Report history			
Submitted to	Date	Brief summary of outcome	
Quality and Safety Committee	10/11/2021	Committee was assured.	

Mortality Report: Learning from Deaths Quarter 2: 01 July 2021 - 30 September 2021

Purpose

1. The purpose of this paper is to provide assurance to the members of the Board of Directors in relation to the implementation of the Learning from Deaths framework.

Executive Summary

2. Wirral Community Health and Care NHS Foundation Trust (WCHC) Board recognises that effective implementation of the Learning from deaths framework (National Quality Board, March 2017), is an integral component of the Trusts' learning culture, driving continuous quality improvement to support the delivery of high-quality sustainable services to patients and service users.
3. In December 2016, the Care Quality Commission (CQC) published its report: Learning, candour and accountability: A review of the way NHS trusts review and investigate the deaths of patients in England. The recommendations of this report were accepted by the Secretary of State and incorporated into a Learning from Deaths framework by the National Quality Board (NQB) in March 2017.
4. The Learning from Deaths framework aims to address the key findings of the CQC report, ensuring a consistent approach to learning from deaths across the NHS, assuring a transparent culture of learning by delivering a commitment to continuous quality improvement, particularly in relation to the care of vulnerable people.
5. The key findings of the CQC report were as follows:
 - Families and carers are not treated consistently well when someone they care about dies.
 - There is variation and inconsistency in the way that trusts become aware of deaths in their care.
 - Trusts are inconsistent in the approach they use to determine when to investigate deaths.
 - The quality of investigations into deaths is variable and generally poor.
 - There are no consistent frameworks that require boards to keep deaths in their care under review and share learning from these.
6. This quarterly report provides evidence that learning from deaths is firmly embedded as a priority across the Trust, ensuring full adherence to the NQB Learning from deaths framework.
7. WCHC compliance with the NQB framework has been self-assessed by an internal review of the Board Leadership requirements as outlined in the National Guidance on Learning from Deaths (NQB, March 2017). The RAG rating for this process has been included in the inaugural Learning from Deaths report.

WCHC Learning from deaths governance framework

8. All reported deaths that occur whilst in receipt of our services that are provided within the places we serve (for clarity, this includes Wirral, Cheshire East, St Helens) are discussed at both the Quality and Governance Multi-disciplinary Safety Huddle and at the weekly Clinical Risk Management Group (CRMG). Further investigations are commissioned on the basis of the events surrounding the death and on the results of the Mortality Screening Tool. The principles around Duty of Candour are also overseen within this group.

9. Pending investigations are monitored against progress and timelines and expediated where necessary. Any reports (ie Root Cause Analysis - RCA) and associated action plans are quality assured at CRMG. This includes cases which are under investigation by the coroner.
10. Lessons learnt and learning themes from Learning from Deaths cases are reviewed at the Trust's quarterly Mortality Review Group which is chaired by the Executive Medical Director and who is responsible for the Learning from Deaths agenda.
11. Minutes from the Mortality Review Group are submitted to the Standards Assurance Framework for Excellence (SAFE) Steering Group, which in turn reports directly to the Quality and Safety Committee and finally to the Board.
12. A report is produced which summarises the details of the unexpected deaths which have occurred within the preceding quarter, along with details of any thematic learning. This is ratified by the Quality and Safety Committee prior to being presented to Public Board, again on a quarterly basis.
13. In accordance with the Learning from Deaths framework, the Trust ratified and published a Learning from Deaths Policy during September 2017.
14. The policy provides a framework for how the Trust will evaluate those deaths that from part of our mortality review process, the criteria for review and quarterly and annual reporting mechanisms.
15. The Trust's Datix incident reporting system has been aligned to the Learning from Deaths Policy to ensure prompt communication to the Executive Medical Director, Director and Deputy Director of Nursing for all reported unexpected deaths. This includes integrating the Mortality Screening Tool with Datix.
16. The Incident Management Policy - GP08 has been updated during January 2018 and cross references the newly implemented Learning from Deaths Policy, ensuring a consistent approach to implementation. The revised policy contains arrangements for staff to follow in the event of an unexpected death of an adult and in the event of an unexpected death of a child.
17. The Trust continues to work with our system partners to devise systems whereby Learning from Deaths can take place in a consistent way across all major health and social care providers. This includes working with Public Health England and the Local Authority to analyse the effect of COVID-19 by utilising a population-based approach to identify areas of inequality and its association with deaths due to this disease.
18. The Learning from Deaths report is based on the template devised by the National Quality Board. This report will be published on the Trust's website in keeping with our statutory obligations.

Bereaved Families

19. Families will be treated as equal partners following a bereavement and will always receive a clear, honest, compassionate and sensitive response in a supportive environment and receive a high standard of bereavement care which respects confidentiality, values, culture and beliefs, including being offered appropriate support.
20. Families are informed of their right to raise concerns about the quality of care provided to their loved one and their views help to inform decisions about whether a review or investigation is needed.
21. Families will receive timely, responsive contact and support in all aspects of an investigation process, in line with duty of candour and with a single point of contact and liaison.
22. Families are partners in an investigation to the extent, and at whichever stages, that they wish to be involved and voice their experiences of the death of their loved one, as they offer a unique and equally valid source of information and evidence that can better inform

investigations; bereaved families and carers who have experienced the investigation process help us to embed the learning to continually improve patient safety.

Q2 2021/22 WCHC Reported deaths (Datix incident reporting)

23. During Q2 there were a total of 5 reported deaths of which only 1 was within scope.

24. During Q2 there were no deaths which met the criteria for StEIS reporting.

Recording data on Structured Judgement Reviews:		
Total Number of Deaths in scope	1	
<p>July – nil return</p> <p>August – nil return</p> <p>September (1)</p> <p>W44029 – 0-19, no care provided by the trust, SUDIc process followed, no learning for the trust,</p> <p>There is one outstanding case from the previous quarter (Q1)</p> <p>W41919 – Safeguarding, rapid learning review, learning identified for the trust, not StEIS reportable</p> <p>There were no unexpected deaths which were associated with a positive diagnosis of Covid-19.</p>		
Total Number of Deaths considered to have more than 50% chance of being avoidable	0	
Recording data on LeDeR reviews: - Please note that these are undertaken by the mental health trust		
Total Number of Deaths in scope	0	
Total Deaths reviewed through LeDeR methodology	0	
Total Number of deaths considered to have been potentially avoidable	0	
Recording data on SUDIC reviews:		
Total Number of Child Deaths	1	
Total Deaths reviewed through SUDIc methodology	1	

Summary of Thematic Learning

25. Each unexpected death reported during Q2 has been analysed and investigated as appropriate, to identify any relevant learning points for the Trust and the wider health and social care system.

26. Of the one case reported in Q2, after investigation, there were no lessons identified which the Trust and system partners could learn from.

27. From the outstanding case in Q1, there was learning which was identified for the trust. The learning themes include:

- Recognition of the importance of multi-disciplinary and multi-agency team working to assess risk and enable a co-ordinated approach to effective health and care management
- Promotion of the importance of professional curiosity in practice across the Trust. The outcome of this learning has resulted in educational resources being placed on the Trust intranet and changes to bespoke training course content to now include Professional Curiosity in Practice.

Recommendations

28. The Board of Directors is asked to be assured that quality governance systems are in place to ensure continuous monitoring and learning from deaths in accordance with Trust policy.
29. The Board of Directors is asked to be assured the Trust is actively involved in supporting the system-wide development of processes reporting and learning from deaths.
30. The Board of Directors is asked to approve **Appendix 1**.

Dr Nick Cross
Executive Medical Director

3 November 2021

Learning from Deaths Q2 21/22 Report

The following data represents the high-level reporting of deaths which occurred within our services over the period of Quarter 2 2021/22.

A more detailed report has been ratified and approved by the Quality and Safety Committee as per the Learning from Deaths Policy.

There were five deaths reported to the Trust of which one was within scope during this period and has been reviewed in accordance with Trust policy. Duty of Candour was not applicable on this occasion. This death was not deemed attributable to the care received by our Trust.

There was one case outstanding from Q1 which did reveal learning for the Trust. The learning themes consisted of:-

- Recognition of the importance of multi-disciplinary and multi-agency team working to assess risk and enable a co-ordinated approach to effective health and care management
- Promotion of the importance of professional curiosity in practice across the Trust. The outcome of this learning has resulted in educational resources being placed on the Trust intranet and changes to bespoke training course content to now include Professional Curiosity in Practice.

There was one child death, which was appropriately reported, scrutinised, and followed the SUDIc process. There was no learning for the Trust identified following the investigative process.

We continue to promote shared learning across the health and care sectors and work collaboratively with our system partnership to identify and address the impact of Covid-19 on the Wirral and Cheshire East populations, focusing on addressing health inequalities on a population-based approach.

Dr Nick Cross
Executive Medical Director
Wirral Community Health and Care NHS Foundation Trust

3 November 2021

Controlled Drug Accountable Officer's Annual Report 2020/21			
Meeting	Board of Directors		
Date	08/12/2021	Agenda item	18
Lead Director	Nick Cross, Medical Director		
Author(s)	Nick Cross, Medical Director Lisa Knight, Lead Pharmacist		
Action required (please tick the appropriate box)			
To Approve <input type="checkbox"/>	To Discuss <input type="checkbox"/>	To Assure <input checked="" type="checkbox"/>	
Purpose			
This report from the Trust's Controlled Drugs Accountable Officer (CDAO) covers the period 1 April 2020 to 31 March 2021 and provides assurance that the Trust is compliant with updated controlled drug legislation and that controlled drugs systems, procedures and incidents are regularly reviewed and actions are taken as necessary to strengthen controlled drugs safety and governance.			
Executive Summary			
This Controlled Drug Annual Report is required as the Trust Board is accountable for the safe management of controlled drugs via the CDAO			
The report outlines: <ul style="list-style-type: none"> • Standard operating procedures are in place and based on best practice surrounding the management and control of Controlled Drugs (CDs) • CD prescribing is audited and appropriate challenges are in place • Incidents involving CDs are investigated and learning is put in place • Incidents are reported to the regional CDAO via the local intelligence network to which the Trust is an active member 			
Risks and opportunities:			
There are no risks currently on the CD register that relate to Controlled Drugs			
Quality/inclusion considerations:			
Quality Impact Assessment completed and attached <input type="checkbox"/> No Equality Impact Assessment completed and attached <input checked="" type="checkbox"/> Yes This report does not fulfil the criteria for completion of a quality impact assessment. An equality impact assessment is not required, because optimising the use of controlled drugs is of equal benefit to all patients, including those in protected groups			
Financial/resource implications:			
There are no financial implications associated			
Trust Strategic Objectives			
<i>Please select the top three Trust Strategic Objectives that this report relates to, from the drop down boxes below.</i>			
<input type="checkbox"/> Our Populations - outstanding, safe care every time	<input type="checkbox"/> Our Populations – provide more person-centred care	<input type="checkbox"/> Our People - enhancing staff development	

Board of Directors is asked to consider the following action		
To consider this annual report and be assured that controlled drugs are handled safely throughout Trust services.		
Report history		
Submitted to	Date	Brief summary of outcome
Quality and Safety Committee	10/11/2021	Committee was assured

Controlled Drug Accountable Officer's Annual Report 1 April 2020 - 31 March 2021

Introduction

1. Accountability for the safe management of controlled drugs sits with the Trust Board via the Controlled Drugs Accountable Officer (CDAO).
2. This report from the Trust's CDAO provides assurance that the Trust is compliant with updated controlled drugs legislation and that controlled drugs systems, procedures and incidents are regularly reviewed and actions are taken as necessary to strengthen controlled drugs safety and governance.

Responsibilities

3. The 2013 Controlled Drugs (Supervision of Management and Use) Regulations outlined the requirement for NHS Trusts to appoint a Controlled Drug Accountable Officer. The Controlled Drug Accountable Officer (CDAO) is a statutory role responsible for ensuring the following:
 - Standard operating procedures are in place, based on current legislation and best practice surrounding the management and use of controlled drugs (CDs).
 - Adequate destruction and disposal arrangements are in place for CDs.
 - CDs are used safely and effectively throughout the Trust.
 - The management and use of CDs is audited.
 - Relevant individuals receive appropriate training surrounding the use and handling of CDs.
 - A system is in place to assess and investigate incidents regarding the use and handling of CDs and appropriate action is taken.
 - CD incidents are reported to the regional CDAO via the local intelligence network to which the Trust is an active member.
4. The next sections will describe activity relating to each of these duties.

Standard operating procedures are in place, based on current legislation and best practice surrounding the management and use of controlled drugs (CDs)

5. The policy for the Safe Handling and Administration of Medicines (GP11) is applicable to all Trust services that are involved in the handling of medicines. This policy includes sections outlining safe handling of CDs within Trust Services.
6. In addition, the Trust has a suite of procedures that outline expected standards for handling of CDs within Community Nursing, GP Out of Hours, Community Dental Service, Community Integrated Care Centre (CICC) and the Community Specialist Palliative Care Team.

7. The procedures incorporate best practice as outlined by NICE guidance NG46, Controlled Drugs: Safe Use and Management 2016. This guidance outlines expected standards for storing, transporting, disposal, prescribing, supply and administration of CDs.
8. A full list of Trust procedures relating to CDs can be found in **Appendix 1**.

Current legislation surrounding safe handling of CDs is considered and incorporated into Trust guidance if applicable

9. The Trust is required to comply with current legislation surrounding safe use and handling of CDs.
10. The Controlled Drugs (Supervision of Management and Use) Regulations 2013, outlines how CDs should be handled throughout the organisation. (NICE Guidance NG46, Controlled Drugs: Safe Use and Management 2016 is in line with these regulations.)
11. The regulations were amended April 2020, to the Controlled Drugs (Supervision of Management and Use) (Amendment) Regulations 2020. The amendment removed the statutory expiry date and inserted a review clause to ensure the provisions of the regulations remained in force beyond 31 March 2020.
12. The Misuse of Drugs Act was also amended in April 2020. The Misuse of Drugs (Coronavirus) (Amendments Relating to the Supply of Controlled Drugs During a Pandemic etc.) Regulations 2020 gives government ministers emergency powers for the supply of CDs in specific circumstances during a pandemic. The regulations are enabling, so they may only be used if “activated” by ministers and apply in very limited circumstances none of which are applicable to the Trust.
13. There were no changes in legislation during the reporting period that required amendment to Trust policies or procedures.

Adequate destruction and disposal arrangements are in place for CDs

14. The Trust has two current procedures specifically for disposal of CDs:
 - MMSOP28 - Standard Operating Procedure for Witnessing the Destruction of Controlled Drugs within Community Trust Services
 - MMSOP17 - Destruction of Patients’ Own Controlled Drugs in the Community
15. In addition MMSOP56- Safe handling and administration of medicines within Community Intermediate Care Centre includes specific guidance on disposal of patients’ own CDs that are no longer required and have not been returned to the patient on discharge.
16. These procedures ensure CDs are denatured prior to appropriate destruction and are compliant with current legislation and best practice.
17. In addition, guidance for removal and destruction of illicit substances, is included in the Trust’ security management policy HS18.

The Management and Use of CDs is Audited to Evidence the Safe Use of CDs

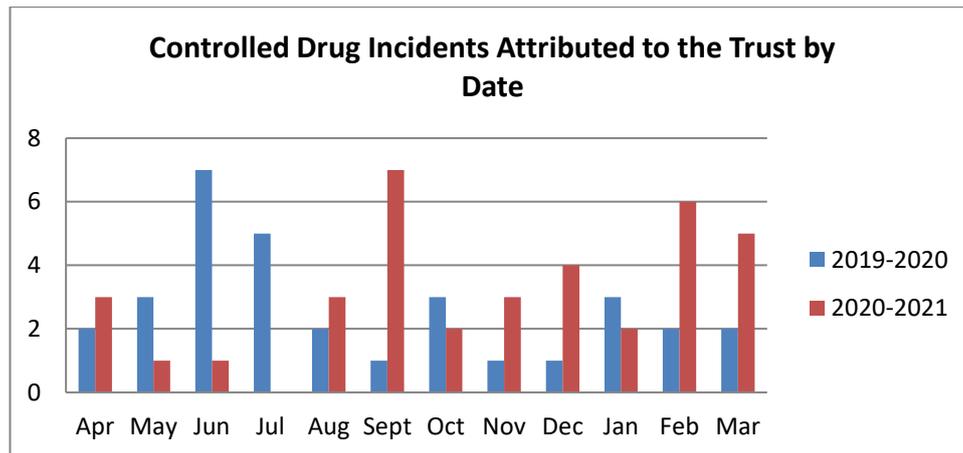
18. Due to the need for social distancing, during the reporting period there were no face to face audits of controlled drug handling and storage within services undertaken by the Medicines Management Team. Controlled drug audits have now resumed and a representative of the Team will audit all services holding CDs during 2021 2022.
19. Controlled drug prescribing continued to be audited. This information was presented each quarter at the Medicines Governance Group. The majority of controlled drug prescribing occurred within GP Out of Hours. Trust procedures dictate that quantities should be sufficient only to allow the patient time to obtain further supplies from their own GP.
20. Large quantity prescribing was therefore challenged and fed back to the prescriber via line management. Unusual patterns of prescribing were also investigated by the Medicines Management Team. Where there were no available explanations as to why a CD was prescribed, a copy of the prescription was requested from NHSBSA.
21. Examples of prescribing anomalies noted during 2020 2021
 - A prescription for methadone solution 540ml was queried as methadone is not routinely prescribed within GP Out of Hours, this was investigated and found to have been incorrectly attributed to the Trust.
 - Prescriptions for quantities greater than required were identified and fed back to the prescriber, including a prescription for 500ml of codeine solution
 - Various strengths of Elvanse capsules (used to treat attention deficit disorder) were investigated by NHSBSA and found to be prescribed by an Extended Hours GP working on the GPOOH site. Extended Hours GPs have been informed that they must not use GPOOH prescription forms.

Relevant individuals receive appropriate training surrounding the use and handling of CDs

22. Clinicians within GP Out of Hours received regular updates and virtual training facilitated by the Clinical Director, Urgent and Primary Care Services, this training includes the safe prescribing and handling of CDs within the Service.
23. Community Nurses when joining the Trust attended end of life training, updates on palliative care were also available to staff.
24. Prior to delivering care to end of life patients via a syringe driver, nurses and second checkers were required to pass competencies designed to ensure they had the necessary knowledge and numerical skills to deliver care via syringe drivers.
25. The Lead Pharmacist attended Mersey Regional Local Intelligence Network (LIN) meetings on behalf of the Trust's CDAO. This meeting is a forum for different health care providers to meet and discuss controlled drug incidents with a view to implement lessons learnt throughout the region. The Trust was therefore kept up to date with current best practice surrounding the handling of CDs. During the reporting period, these meetings were virtual.

A system is in place to assess and investigate incidents regarding the use and handling of CDs and appropriate action is taken

26. All medication incidents including controlled drug incidents are monitored via the Medicines Governance Meeting, any outstanding actions following investigations were also monitored via this group.
27. The graph overleaf indicates the number of controlled drug incidents reported as being attributed to Trust Services during 2020-2021. Incidents reported 2019-2020 are included for comparison.



28. During the reporting period there were 37 controlled drug incidents reported as attributable to the Trust all of which were low or no harm. This compares to 32 controlled drug incidents reported during 2019 2020. Incidents were investigated in partnership with the Local Security Management Officer and learning circulated throughout the organisation. In the small number of incidents where stocks of CDs were not accounted for, the Medicines Management Team maintained a tracker of names of staff involved. On investigation of the tracker, there appeared to be no suspicious activity.
29. The incidents reported in February and March 2021 include incidents that occurred within the newly opened Community Integrated Care Centre, learning from these incidents resulted in new processes and the procedure for handling of medicines within CICC (MMSOP56) was updated accordingly.

CD incidents are reported to the regional CDAO via the local intelligence network to which the Trust is an active member

30. The Trust pharmacists reported all controlled drug incidents to the local intelligence network. During the reporting period, the system of reporting changed from quarterly reports to reporting high risk incidents immediately and reporting low or moderate incidents on a 28 day cycle. There were no high risk incidents submitted during the reporting period.
31. Thematic learning relating to the management of controlled drugs across Cheshire and Mersey is distributed at regional level so that Trusts can be made aware of possible issues and learn lessons from other trusts incidents or errors. This is then distributed internally to our clinical services.

National Recommendations from CQC

32. The Safe Management of Controlled Drugs Annual Update 2020 was published by CQC August 2021. CQC highlighted challenges due to the COVID-19 pandemic and areas of potential concern:

- **There was a continued need for services to have ready access to end of life medicines.** In the initial wave of the pandemic, there were real concerns that end of life patients would not have timely access to medicines. Pharmacists throughout Wirral worked collaboratively to preserve stocks of key end of life medicines. For example, pre-packs of 20ml morphine sulphate 5mg in 5ml were prepared by the acute hospital. These were stocked by GP Out of Hours and the Rapid Response team, to enable access to the NICE recommended treatment for cough, breathlessness and pain, symptoms experienced by patients dying of COVID. Once the stocks of palliative care medicines within community pharmacies normalised the pre-packs were withdrawn.
- **Governance surrounding controlled drugs in Schedules 4 and 5:** CDs in these lower schedules, for example, medicines containing codeine and dihydrocodeine can lead to dependence. CQC continue to hear about instances involving inappropriate prescribing of these medicines leading to individual deaths. WCHC do not prescribe more than 4 days' supply of these medicines within GP Out of Hours. In line with recommendations from LIN meetings, the stock balances of any drug of potential abuse are monitored.

Conclusion

33. This report provides an overview of how the Trust has engaged fully with the local healthcare community and the Mersey Regional Local Intelligence Network, ensuring the governance arrangements surrounding the handling of controlled drugs comply with best practice.

Nick Cross
Medical Director & Trust Controlled Drugs Accountable Officer

Lisa Knight
Lead Pharmacist

October 2021

Appendix 1

STANDARD OPERATING PROCEDURES (SOPS) AND POLICIES OUTLINING HANDLING OF CONTROLLED DRUGS

The following procedures and policies are available to all staff via the Staff Zone of the Wirral Community NHS Foundation Trust's website.

General Policies:

- GP11 Policy for the Safe Handling and Administration of Medicines is applicable to all trust services who are involved in the handling of medicines. The policy includes sections on the following:
 - Administration of Controlled Drugs
 - Disposal of Controlled Drugs
 - Ordering Controlled Drugs from Wirral University Teaching Hospital
 - Receipt of Controlled Drugs
 - Storage of Controlled Drugs
 - Controlled Drugs stock reconciliation
 - Procedure for missing Controlled Drugs

Community Nursing Procedures:

- MMSOP04 Standard Operating Procedure for McKinley Syringe Driver for Administration of Palliative Care Medicines
- MMSOP09 Standard Operating Procedure for Transport of Prescribed Controlled Drugs
- MMSOP17 Standard Operating Procedure for Destruction of Patients' Own Controlled Drugs in the Community
- MMSOP18 Standard Operating Procedure for Administration of Opioid Medicines

GP Out of Hours

- MMSOP34 Standard Operating Procedure for the Management of Controlled Drugs within Primary Care Division
- MMSOP22 Standard Operating Procedure to facilitate the setting up of syringe drivers for Community Nursing
- SOP10 GP Out of Hours Prescribing Policy (This procedure outlines appropriate prescribing of controlled drugs within GP Out of Hours)

Specialist Palliative Care Team

- MMCP07 Clinical Protocol for Providing Specialist Palliative Care Medicines Advice from the Integrated Specialist Palliative Care Team
- MMCP13 Clinical Protocol for Non-Medical Prescribing within Palliative Care

Community Dental Services

- MMSOP21 Standard Operating Procedure for the Administration of Intravenous Midazolam for Conscious Sedation.
- MMSOP41 Procedure for the Administration of Oral, Buccal or Intranasal Midazolam for Premedication prior to Dental Conscious Sedation
- MMSOP37 Standard Operating Procedure for the safe and secure management of Midazolam within Community Dental Services

Community Integrated Care Centre (CICC)

- MMSOP56 Standard Operating Procedure for safe handling and administration of medicines within Community Intermediate Care Centre. This procedure includes a section on the management of controlled drugs within the centre. All controlled drugs are prescribed for individual patients, there are no stock controlled drugs held on the unit.

Trust Wide

- MMSOP28 Standard Operating Procedure for witnessing the destruction of Controlled Drugs within Community Trust Services.