The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

Meeting:	Board of Directors (in Public)		
Meeting Date:	6 July 2021	**Agenda item:**	10
Report Title:	Integrated Quality Improvement Plan Programme Update		
Author:	Louise Notley; Director of Patient Safety		
Executive Sponsor:	Caroline Shaw: Chief Executive Officer		

Implications

Link to key strategic objectives
[highlight which KSO(s) this recommendation aims to support]

KSO1	KSO2	KSO3	KSO4	KSO5	KSO6
Safe and compassionate care	***Modernise hospital and estate***	*Staff engagement*	*Partnership working, clinical and financial sustainability*	*Healthy lives staff and patients*	*Investing in our staff*

Board assurance framework	The provision of safe and effective care is set out in KS01. Hospital modernisation to support delivery of optimal care is set out in KSO2. The BAF updates for KSO1 and KSO2 are received and reviewed within the Quality Committee.	
Significant risk register	Significant Risk ID 2483 (Reputational damage/CQC regulatory notices)	
	Y/N	If Yes state impact/ implications and mitigation
Quality	Y	KSO1 - Provision of safe and compassionate care KSO2 - Supporting the delivery of optimal care
Legal and regulatory	Y	Regulatory compliance/Special Measures Reputational damage
Financial	N	None identified

Assurance route

Previously considered by:	Quality Committee

Executive summary

Action required: *[highlight **one** only]*	Approval	Information	Discussion	**Assurance**	Review

Purpose of the report:	The purpose of this report is to inform the Board of Directors of: • The overall progress against the 83 actions within the Trust's 2021/22 Integrated Quality Improvement Plan (IQIP)
Summary of Key issues:	This report details progress against the 83 actions within the 2021/22 IQIP at Month 02 including the RAG status of all actions, with a narrative update by exception. 2021/22 IQIP progress as of Month 02: • 27 Actions have been closed (33%) • 12 Actions have moved to 'At Risk' • 1 Action has moved to 'Behind Plan' • 43 Actions remain 'On Plan'

	The 12 Actions 'At Risk' include 5 open Radiology actions, 4 existing Must and Should Do actions and 1, 29A Warning Condition, which incorporates 1 Must and 1 Should. Following the Trust Wide Fortnightly IQIP Review meeting the 29A Warning Condition for Palliative Care Consultant Cover moved to At Risk as the Trust has been unsuccessful in recruitment. The report notes clear 'At Risk' and 'Behind Plan' recovery actions and resubmission dates. Work continues with the Divisions to submit a formal application and supporting evidence to the CQC to request the lifting of all remaining 7, Section 31 Conditions in June 2021. The report notes the findings of the Clinical Review which took place in May with agreed actions to address areas where improvement is required.
Recommendation:	The Board of Directors is asked to note: a) Progress at Month 02 b) 12 actions RAG rated as 'At Risk' with mitigation and recovery actions c) 1 action RAG which has moved to 'Behind Plan' with recovery actions and resubmission date d) The key findings from the May Clinical Review Visit e) Collation of evidence to support the Trust's application to request the lifting of the remaining S31 Conditions
Acronyms	CQC – Care Quality Commission EAG – Evidence Assurance Group IQIP – Integrated Quality Improvement Plan MCA – Mental Capacity Assessment DoLS – Depravation of Liberty Safeguards SAU – Surgical Assessment Unit POAP – Plans on a Page MDT – Multi Disciplinary Team CoC – Continuity of Carer DoC – Duty of Candour KLOE – Key Line of Enquiry