The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

Meeting:	Board of Directors (in Public)		
Meeting Date:	1 February 2022	**Agenda item:**	13
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 on 25 January 2022

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 new Trust's 2021/22 Integrated Quality Improvement Plan (IQIP) following publication of the Trust's December 2020 CQC inspection report.
Summary of Key issues:	This report details progress against the 83 actions within the 2021/22 IQIP, with all deadlines built into the IQIP's Forward Plan and include a RAG status and narrative update by exception. 51 (61%) of the 2021/22 IQIP actions have been approved for closure as of Month 09. IQIP Status: • 08 actions are On Plan • 02 Actions are At Risk • 22 actions are Behind Plan - all have recovery actions in place or resubmission dates agreed

	The report details the recovery actions and agreed submission dates for all actions 'Behind Plan' and additional and broader measures to be taken to ensure long term improvement is achieved, but resulted in a delay to a number of actions as a consequence. In turn, unrelenting operational pressures as a result of the COVID-19 pandemic with the move to Opel 4 across the N&W system and the National Level 4 incident being declared in December, may also impacted on the delivery of a number of actions against recovery timeframes. The report notes an update on the revised timeframe for the Internal Audit taking place by Grant Thornton against the IQIP process. The report notes that the Monthly Clinical Review Programme was cancelled in December and January to ease pressures on clinical teams in light of the surging COVID-19 cases and subsequent demand and operational pressures across the NHS.
Recommendations	The Board of Directors is asked to note: a) Progress at Month 09 b) The potential impact of the significant operational pressures on action progress c) Revised timeframe for the Grant Thornton Internal Audit
Acronyms	CQC – Care Quality Commission EAG – Evidence Assurance Group IQIP – Integrated Quality Improvement Plan EoLC – End of Life Care