



**The Queen Elizabeth  
Hospital King's Lynn**  
NHS Foundation Trust

# Section and Warning Notice Update Reporting for April 2022

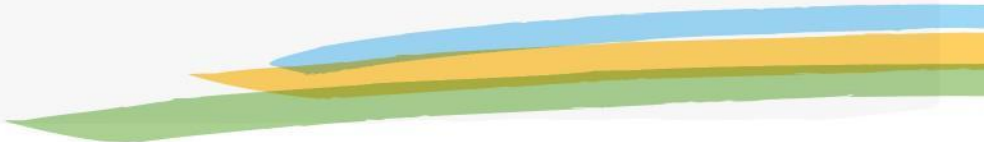


Quality Improvement Board  
10 May 2022

# Summary of Progress

- This report details the progress against the Section and Warning Notices during April 2022 as the Trust transitioned from its 2021/22 IQIP to the new 2022/23 Compliance Plan which went live April 2022.
- The total number of remaining Section & Warning Notice Conditions on the Trust's Certificate of Registration has reduced from 23 to 4.
- All 4 Section 31 Conditions have been closed internally by the Trust Evidence Assurance Group and moved to business as usual.
- The remaining 4 Section 31 Conditions have been incorporated into the 2022/23 Compliance Plan and monitored as part of business as usual at both Divisional and Corporate level. The Quality Improvement Board, chaired by Caroline Shaw; CEO, will also monitor confirmation of no breaches of these conditions.
- **4/4 = 100% of all Section and Warning Notice conditions have been approved and moved to Business as Usual.**
- Following the outcome of the Trust's most recent application to lift the remaining Section 31 conditions, additional evidence is being collated to ensure that the Trust has the most up-to-date data against 3 of the 4 remaining conditions, ready for submission to the CQC to support the lifting of these conditions. Sustained operational pressures has delayed the submission of this application. It is anticipated the Trust will submit its application around July 2022 and include refreshed data.
- Regarding the 4th condition – whilst changes were put in place and improvements noted earlier this year, the consistent triage of patient within 15mins has been adversely impacted by the increasing pressures on the NHS as a result of the COVID-19 pandemic. However, the CQC noted in its unannounced inspection in December 2021 that although triage times and the four hour target were not met, patients were reviewed and safeguards in place. It was also noted that all risk assessments reviewed were completed in full with compassionate care observed by the inspection team.

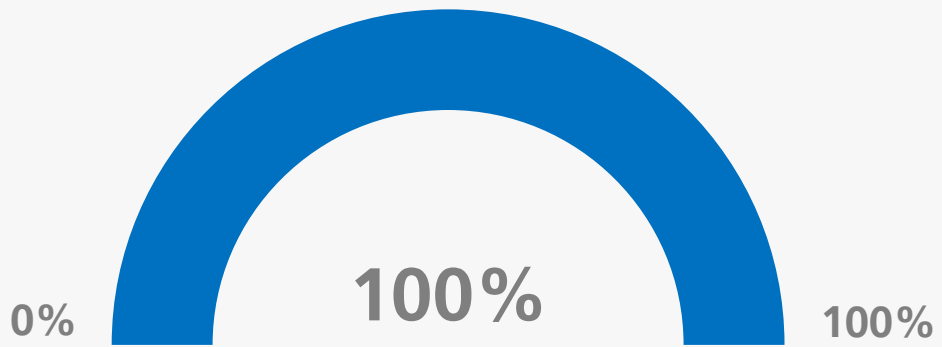
## **The Quality Improvement Board is asked to note:**

- The 2022/23 Compliance Plan live April 2022
  - The reduction in Section & Warning Notice Conditions from 23 to 4
  - The current 2022/23 Compliance Plan position as at Month 01
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# Summary of Progress

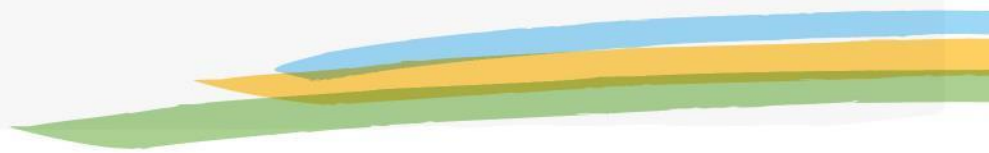
- 4 = 100% of all Section and Warning Notice conditions have been approved and moved to Business as Usual

## CQC Conditions & Notices



4  
Total Complete

4  
Total Planned



## Section 31 Condition – Formal Application Outcome

- All of the four remaining Section 31 conditions have been closed internally by the Trust and ongoing compliance is monitored as part of business as usual at Divisional and Corporate level.

### Section 31 Condition Status:

Core Service	Date Received	Total Section 31 Conditions Received	Date Lifted	Number of S31 Lifted	Total Section 31 Conditions Remaining
Maternity & Midwifery Services	July 2018	10	Jan 2021	5	1
			April 2021	2	
			October 2021	2	
Urgent & Emergency Care	March 2019	8	April 2021	6	1
			October 2021	1	
Diagnostic Imaging	May 2019	4	April 2021	2	2
<b>Total Section 31 Conditions</b>		<b>22</b>		<b>18</b>	<b>4</b>

# Section 31 Condition – Conditions that remain on the Trust's Certificate of Registration

## **Maternity & Midwifery Services**

- The Registered Provider will ensure that there is appropriate escalation of deteriorating patients in line with current guidelines and best practice. With full medical handover at 9am and 7pm, with ward rounds at 12.30pm and 5pm.

## **Urgent & Emergency Care**

- The registered provider must ensure that there is an effective system in place to robustly assess all patients who present to the ED in line with relevant national clinical guidelines within 15 minutes of arrival.

## **Diagnostic Imaging**

- The registered provider must ensure that an effective system is in place for the regular oversight of the appropriate escalation of significant findings. This should include diagnostic imaging undertaken out of hours to ensure that any patients at risk are escalated appropriately.
- The registered provider must ensure that there is robust system in place to facilitate effective clinical governance within the diagnostic imaging department. This is to include oversight of training, compliance to scope of practice, learning from incidents and escalation processes. The registered provider must ensure that there is a systematic approach to audit to measure compliance with protocols, processes and professional standards. The registered provider must ensure that there are processes in place for effective communication within the diagnostic imaging department.

## Section 29A Warning Notices

- Following the CQC's recent on-site inspection, Fiona Collier and Alison Smith; CQC Inspection Managers, carried out a review of the 16 remaining Section 29A Conditions and confirmed all 16 had been approved for formal closure and removed from the Trusts Certificate of Registration. There are no 29A Warning Notice Conditions on the Trusts Certificate of Registration.

### Section 29A Warning Notices Status:

Section / Warning Notice	Date Received	Total Section 29A Warning Notices Received	Closed by CQC in 2020	Closed by CQC in 2022
29A Maternity	May 2018	10		10
29A Medicine	March 2019	8	3	5
29A Diagnostic Imaging	May 2019	3	2	1
<b>Total Section 29A Warning Notices</b>		<b>21</b>	<b>5</b>	<b>16</b>