Agenda Item: 09

The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

REPORT TO THE BOARD OF DIRECTORS

RESPONSIBLE DIRECTOR:	REPORT FOR:		IMPACT ON BUSINESS:		
Caroline Shaw; Chief Executive Officer	Decision		High	Med	Low
	Consideration		√		
	Information	√			
LEAD MANAGER:	**REPORT TYPE:**		**BAF REFERENCES & RAG:**		
Louise Notley; Associate Director of Quality Improvement	Strategic	√			
	Operational				
	Governance				
	IMPLICATIONS:		**RELATED WORK: (PREVIOUS PAPERS TO BOARD/COMMITTEE)**		
	Patient Care/Safety/ Experience	√			
	Finance	√			
	Workforce	√			
	Policy	√			
PEER ASSIST (inc. clinical engagement):	**PEER REVIEW:**				
CQC Domain: (safe, caring, effective, responsive, well-led, use of resources)	All Five Domains				

Meeting Date: Tuesday 7th April 2020

Report Title: Integrated Quality Improvement Plan Progress Update

PURPOSE:

The paper is to inform the Trust Board of:

- Overall progress against of 206 actions within the IQIP

SUMMARY:

Of the total 206 actions within the IQIP, which are a combination of Conditions, Must and Should Do actions, 82 (40%) have been approved for closure. This includes 6 actions closed in February as set out within this report.

Following the development of the plans-on-page that now clearly set out the milestones to deliver the actions, RAG rating status for the 130 outstanding actions have been applied. At present, 3 actions are currently rated 'at risk', although two of these actions are linked and form one group of actions as part of a Plan on a Page. Mitigating actions to address these risks have been detailed in this report.

3 actions are currently behind plan, two of which will be presented to the Evidence Assurance Group at the end of March. The completion of the third action has been impacted by the introduction of the new ReSPECT document across the STP, requiring a revised completion timeframe.

The current operational pressures and activation of the Pandemic Plan in response to COVID-19 presents a risk to ensuring teams have sufficient capacity to meet multiple priorities. The report confirms the resourcing of additional to mitigate this risk.

Developing the plans-on-page has been an extensive piece of work, and now enables the respective Divisions and Executive leads to monitor and report progress against agreed

deadlines. Completion of plans-on-a-page for the remaining 40 Should Do actions are due to be completed by early April. These will include revised completion timeframes to ensure work continues to focus on the Conditions and Must Do actions as the agreed priority. A revised trajectory will then be presented to the Trust Board in May 2020.

Progress against the 46 conditions within the Section Notices and GMC Conditions is slightly ahead of trajectory at Month 11 with a further 2 conditions approved for closure in February. At month 11 the Trust has approved the closure of 24 (52%) of the 46 conditions.

Implications : Financial / Quality / Workforce / Policy:

Strategic / External	Operational	Financial	Clinical	Legal/ Regulatory	Reputational / Patient Experience	Workforce
✓	✓	✓	✓	✓	✓	✓

RECOMMENDATION/S:

The Trust Board is asked to:

(a) Note the current position at Month 11 and work to address the actions currently rated 'at risk' and 'behind plan'
(b) Note the increasing operational pressures and activation of the Pandemic Plan in response to COVID-19 and the potential risk this poses to progress against the IQIP
(c) Note the increase in governance support and additional resource over the next three months to better ensure compliance with trajectory.
(d) Note the report and on-going work to complete the plans-on-a-page for the remaining 40 Should Do actions