Agenda Item: 10

The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

CQC Report Findings and Development of a 2021/22 IQIP

EXCELLENCE STARTS HERE

Board of Directors (In Public)
2 February 2021

Summary

Following the Trust's unannounced CQC focused core service inspection in September 2020, it published its inspection report on 17 December 2020 (See Appendix One and Two).

The report highlights the significant improvement and progress the Trust has made over the past 12 months and validates the accuracy of the Trust's self-assessment.

Whilst the 6 core services have been re-rated, the Trust's overall rating cannot be changed until the CQC carry out a full on-site inspection. It is anticipated this will be Spring 2021.

The publication of the report was accompanied by a message from Professor Ted Baker; Chief Inspector of Hospitals noting the improvements the Trust has made over the past 12 months, highlighting a real change in culture with staff more positive and engaged and improvements in patient safety, experience and infection prevention and control (IPC).

The Trust acknowledged receipt of its formal report on the 17 December followed by a formal response on 11 January 2021.

CQC Report Key Findings

- None of the Trust's core services inspected are now rated 'inadequate' compared to 19 areas in the same services rated 'inadequate' in the Trust's 2019 inspection.

- All of the Trust's core services inspected (Medicine, Surgery, Urgent and Emergency Care, Maternity, Diagnostic Imaging and EoLC are now rated as 'Good' for caring – marking a further significant improvement.

- The Trust has 3 'Must Do' and 33 'Should Do' actions from its 2020 inspection, the majority of which already feature in the Trust's Integrated Quality Improvement Plan, compared to 206 in total in 2019 and marking a 82% reduction in 'must' and 'should do' actions.

- Particular areas of improvement noted by the CQC:
  - Patients were treated with respect and dignity
  - Staff were compassionate and include patients and their relatives in decision making
  - IPC is well managed
  - Local leadership teams are passionate about their services , visible and respected
  - Staff felt able to escalate concerns

Summary

This paper details the outcome of the mapping of the CQC findings against the existing IQIP and include next steps.

The majority of new actions map directly to the IQIP actions that remain open, providing further validation of the Trust's progress to date and identified areas of concern and focus.

Next steps have been outlined, which include the resetting and rebuilding of a 2021/22 IQIP during January and February, to incorporate the remaining 28 open actions with the Must and Should Do Actions from the December CQC report. All will require new completion trajectories and detailed Plans on a Page.

The Trust Board is asked to note:

a) The findings of the CQC Inspection Report and the significant improvement the Trust has made since the 2019 inspection

b) The accuracy of the Trust's self-assessment against the CQC findings

c) The outcome of the mapping of the December 2020 report against the current IQIP

d) The plans to reset the IQIP during January and February 2021, forming a new 2021/22 IQIP

2019 Vs 2020 Ratings

2019 CQC Ratings

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent & Emergency Care	Inadequate ↔ July 2019	Inadequate ↓ July 2019	Requires Improvement ↓ July 2019	Requires Improvement ↔ July 2019	Inadequate ↔ July 2019	Inadequate ↔ July 2019
Medical Care (including Older People's Care)	Inadequate ↔ July 2019	Inadequate ↓ July 2019	Requires Improvement ↔ July 2019	Requires Improvement ↔ July 2019	Inadequate ↔ July 2019	Inadequate ↔ July 2019
Surgery	Requires Improvement ↔ July 2019	Good ↑ July 2019	Good ↔ July 2019	Requires Improvement ↔ July 2019	Good ↑ July 2019	Requires Improvement ↔ July 2019
Critical Care	Good July 2015	Good July 2015	Good July 2015	Good July 2015	Good July 2015	Good July 2015
Maternity	Requires Improvement ↑ July 2019	Good ↑ July 2019	Good ↔ July 2019	Good ↑↑ July 2019	Requires Improvement ↑ July 2019	Requires Improvement ↑ July 2019
Gynaecology	Requires Improvement July 2019	Good July 2019	Good July 2019	Requires Improvement July 2019	Requires Improvement July 2019	Requires Improvement July 2019
Services for Children and Young People	Good ↔ July 2019	Good ↔ July 2019	Good ↔ July 2019	Good ↔ July 2019	Requires Improvement ↓ July 2019	Good ↔ July 2019
End of Life Care	Requires Improvement ↔ July 2019	Inadequate ↔ July 2019	Good ↔ July 2019	Inadequate ↓ July 2019	Inadequate ↓ July 2019	Inadequate ↓ July 2019
Outpatients	Good ↑ July 2019	Not Rated	Good ↔ July 2019	Requires Improvement ↔ July 2019	Requires Improvement ↔ July 2019	Requires Improvement ↔ July 2019
Diagnostic Imaging	Inadequate ↓ July 2019	Not Rated	Good ↔ July 2019	Requires Improvement ↔ July 2019	Inadequate ↓ July 2019	Inadequate ↓ July 2019
Overall Trust 2019	Inadequate ↔ July 2019	Inadequate ↓ July 2019	Requires Improvement ↓ July 2019	Requires Improvement ↔ July 2019	Inadequate ↔ July 2019	Inadequate ↔ July 2019

2020 CQC Ratings

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent & Emergency Care	Requires Improvement ↑ December 2020	Requires Improvement ↑ December 2020	Good ↑ December 2020	Requires Improvement ↔ December 2020	Requires Improvement ↑ December 2020	Requires Improvement ↑ December 2020
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Overall Trust 2020	Requires Improvement ↑ December 2020	Requires Improvement ↑ December 2020	Good ↑ December 2020	Requires Improvement ↔ December 2020	Requires Improvement ↑ December 2020	Requires Improvement ↑ December 2020

Self Assessment Vs 2020 Ratings

2020 Self Assessment

	Safe	Effective	Caring	Responsive	Well-led	Overall
Urgent & Emergency Care	Requires Improvement ↑ July 2020	Requires Improvement ↑ July 2020	Good ↑ July 2020	Requires Improvement → July 2020	Requires Improvement ↑ July 2020	Requires Improvement ↑ July 2020
Medical Care (including Older People's Care)	Requires Improvement ↑ July 2020	Requires Improvement ↑ July 2020	Requires Improvement → July 2020	Requires Improvement → July 2020	Requires Improvement ↑ July 2020	Requires Improvement ↑ July 2020
Surgery	Requires Improvement → July 2020	Good → July 2020	Good → July 2020	Requires Improvement → July 2020	Requires Improvement ↓ July 2020	Requires Improvement ↓ July 2020
Critical Care	Good → July 2020	Good → July 2020	Good → July 2020	Good → July 2020	Good → July 2020	Good → July 2020
Maternity	Requires Improvement → July 2020	Good → July 2020	Good → July 2020	Good → July 2020	Requires Improvement → July 2020	Requires Improvement → July 2020
Gynaecology	Requires Improvement → July 2020	Good → July 2020	Good → July 2020	Requires Improvement → July 2020	Requires Improvement → July 2020	Requires Improvement → July 2020
Services for Children and Young People	Good → July 2020	Good → July 2020	Good → July 2020	Good → July 2020	Good ↑ July 2020	Good → July 2020
End of Life Care	Requires Improvement → July 2020	Requires Improvement ↑ July 2020	Good → July 2020	Requires Improvement ↑ July 2020	Requires Improvement ↑ July 2020	Requires Improvement ↑ July 2020
Outpatients	Good → July 2020	Requires Improvement July 2020	Good → July 2020	Requires Improvement → July 2020	Requires Improvement → July 2020	Requires Improvement → July 2020
Diagnostic Imaging	Requires Improvement ↑ July 2020	Requires Improvement July 2020	Good → July 2020	Requires Improvement → July 2020	Requires Improvement ↑ July 2020	Requires Improvement ↑ July 2020
Overall Trust 2020	Requires Improvement ↑ July 2020	Requires Improvement ↑ July 2020	Good ↑ July 2020	Requires Improvement → July 2020	Requires Improvement ↑ July 2020	Requires Improvement ↑ July 2020

2020 CQC Ratings

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Surgery	Good ↑ December 2020	Good July 2019	Good July 2019	Requires Improvement July 2019	Requires Improvement ↓ December 2020	Requires Improvement → December 2020
Critical Care	Good July 2015	Good July 2015	Good July 2015	Good July 2015	Good July 2015	Good July 2015
Maternity	Requires Improvement → December 2020	Good July 2019	Good July 2019	Good July 2019	Requires Improvement → December 2020	Requires Improvement → December 2020
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Diagnostic Imaging	Requires Improvement ↑ December 2020	Not Rated	Good July 2019	Requires Improvement July 2019	Requires Improvement ↑ December 2020	Requires Improvement ↑ December 2020
Overall Trust 2020	Requires Improvement ↑ December 2020	Requires Improvement ↑ December 2020	Good ↑ December 2020	Requires Improvement → December 2020	Requires Improvement ↑ December 2020	Requires Improvement ↑ December 2020

2019 v 2020 Trust Rating Breakdown

	Inadequate	Requires Improvement	Good	Not Rated
2019 Report	19	22	23	2
2020 Report	Nil	36	28	2

December 2020 Must Do Actions

MUST DO ACTIONS – TOTAL 3	
Maternity (1)	The trust must ensure that anaesthetists complete PROMPT (Practical Obstetric Multi- Professional Training) training.
Diagnostic imaging (2)	The trust must ensure that staffing levels are adequate to provide safe care and treatment to patients in a timely way.
	The trust must be assured that the out of hours staffing arrangement is sustainable and robust to provide safe care and treatment to patients.

December 2020 Should Do Actions

SHOULD DO ACTIONS – TOTAL 33	
Trust wide (1)	The trust should ensure that mandatory training compliance meets the trust target for all staff groups.
Urgent and Emergency Care (8)	The service should ensure that all staff complete mandatory training in key skills.
	The service should ensure that all staff complete safeguarding adults and children's' training.
	The service should ensure that the design, maintenance, use of facilities, premises and equipment are suitable to ensure patient safety. This includes the needs of those patients presenting with mental health illnesses.
	The service should ensure that staff have completed the relevant life support training for their clinical roles.
	The service should ensure that staffing levels are maintained to ensure patients safety.
	The service should ensure that performance in national and local audits is in line with targets.
	The service should ensure that nursing appraisal rates are in line with trust targets.
	The service should ensure that care and treatment are accessible at the time of need and referral to treatment times and waiting times are in line with national standards.
Medicine (7)	The trust should ensure staffs mandatory and safeguarding training compliance meets the trust target.
	The trust should ensure staff complete appropriate resuscitation equipment checks.
	The trust should ensure the service has enough support staff on all wards to provide the right care and treatment.
	The trust should ensure staff store patient records securely.
	The service should ensure that performance in national and local audits is in line with targets.
	The service should ensure that nursing appraisal rates are in line with trust targets.
	The service should ensure that staff take appropriate action for patient safety alerts.
Surgery (2)	The service should ensure that staff complete mandatory training.
	The service should improve medical staff compliance with safeguarding training.

December 2020 Should Do Actions

SHOULD DO ACTIONS – TOTAL 33	
Maternity (6)	The service should ensure that all staff complete mandatory training to improve compliance in line with the trust target.
	The service should ensure that safeguarding adults and children's training compliance is in line with the trust target.
	The service should ensure that there are enough maternity staff with the right qualifications, skills, training and experience to provide the service.
	The service should work towards achieving 100% labour ward co-ordinator supernumerary status at all times.
	The service should continue to work on the culture within the department.
	The service should ensure that there is midwifery representation at cardiotocography (CTG) meetings.
End of Life Care (5)	The trust should continue to address specialist palliative consultant staffing to put measures in place to improve in line with national standards.
	The trust should ensure all patient care records are completed in line with national standards.
	The trust should continue to ensure completion of mental capacity assessments for all patients in end of life care.
	The trust should ensure that compliance with national and local audits is in line with targets
	The trust should ensure that waiting times from referral to achievement of preferred place of care and death are timely.
Diagnostic Imaging (4)	The trust should continue to embed the governance and risk management processes.
	The trust should ensure that staff are up to date with mandatory training.
	The trust should continue to improve staff engagement.
	The trust should develop a formalised vision and strategy in radiology.

December 2020 Must & Should Do Themes

3 Must Do & 33 Should Do actions spanning the 6 Core Services Inspected

Whilst the CQC has identified a combination of 36 actions in the 2020 report these can be largely themed into 7 categories and highlight a degree of duplication across more than one core service.

Mandatory Training	11
Workforce	7
Audit	3
Appraisals	3
Record Keeping	2
Culture / Engagement	2
ED Performance	1
Other	7
Total	36

Of the 36 Must and Should Do actions, 19 are currently captured within the IQIP as open actions. Findings from the 2020 report will now inform a review and strengthening of the current Plans on a Page (POAP) for these actions within the 2021/22 IQIP.

17 actions are not captured within the existing IQIP. POAP will be developed with the relevant teams for these actions and form part of the 2021/22 IQIP.

Current IQIP Actions		New Actions	
Mandatory Training	4	Workforce: (ED, DI, MAT)	6
ED Performance	1	Audit	3
Record Keeping	2	Culture / Engagement	2
Appraisals	3	Other	6
Palliative Consultant	1		
MCA Assessments	1		
Total	19	Total	17

Next Steps

Development of the 2021/22 Integrated Quality Improvement Plan (IQIP)	Date for Completion
Mapping December 2020 CQC findings against the existing IQIP	07/01/21- completed
Review, revise and rebuild the IQIP to include: • Removing all closed actions on the existing IQIP, leaving open actions only to be moved across to a new 2021/22 IQIP • Restructure 2021/22 IQIP to incorporate the Trust's Corporate Strategic Objectives • Align December 2020 Must and Should Do Actions and existing open actions with the Strategic Objectives, Section and Warning Notices and Divisional Plans	19/01/21 - completed
Work with the relevant Divisional teams and Action Owners to develop Plans on a Page (POAP) for the 17 new actions	05/02/21
Align the 19 new Should Do Actions to the existing open actions and strengthen the POAP to ensure delivery of improvement, including measurement and outcome.	05/02/21
Develop 2021/22 IQIP reporting functionality to ensure the existing reporting format and standards are maintained	12/02/21
Present 2021/22 IQIP to the February Quality Committee and March Trust Board	23/02/21 02/03/21

To support the development and ongoing tracking of the IQIP, dedicated PMO support is being secured.