

Board of Directors

Meeting

Report

Subject: Care Quality Commission (CQC)
Date: Thursday 25th September 2014
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Lead Director: Susan Bowler

Executive Summary

The Care Quality Commission carried out its planned inspection in April 2014. Following the Quality Summit and receipt of the report, the Trust agreed the main principles and created an action plan and milestone planner which was shared with Monitor and the CQC.

On Thursday 11th September the Trust submitted an action plan for upload on NHS Choices.

The Improvement Director, Gill Hooper, commenced her role on Wednesday 10th September, 2014. This gives the Trust a great opportunity to develop and implement a credible turnaround plan to improve the quality and safety of our services, whilst also utilising Gill's constructive challenge, expertise and knowledge to improve our performance. Working with Gill, we will strengthen the existing CQC plan, using and adopting innovative work from other special measure Trust's, whilst ensuring there is a focus on the broader aspects of quality improvement and the Trust quality priorities. Two recent considerations posed include; 'how are the various plans 'Better Together' and 'Transformation' relating seamlessly with the developing quality improvement plan and 'what do we need to do to urgently step up the existing focus from learning to establish greater rigour and communication to all. These are challenges we will discuss as part of a presentation but also within a planned Quality Summit on 26th September with senior clinical leaders

A milestone planner has been utilised since the visit of the CQC to ensure tasks. The Quality Improvement Group has continued to meet weekly to ensure actions are completed according to agreed timescales. Actions have been completed; however a large group do require completion by the end of September.

A number of assurance visits have commenced, including an out of hours visit on Monday 23rd September.

Recommendations : The Trust Board will receive a CQC presentation on progress to date and next steps

Relevant Strategic Objectives (please mark in bold)	
Achieve the best patient experience	Achieve financial sustainability
Improve patient safety and provide high quality care	Build successful relationships with external organisations and regulators
Attract, develop and motivate effective teams	

Links to the BAF and Corporate Risk Register	BAF 1.3, 2.1, 2.2 2.3, 5.3, 5.5 Quality & Mortality on corporate risk register
Details of additional risks associated with this paper (<i>may include CQC Essential Standards, NHSLA, NHS Constitution</i>)	Failure to meet the Monitor regulatory requirements for governance- remain in significant breach. Risk of being assessed as non-compliant against the CQC essential standards of Quality and Safety
Links to NHS Constitution	Principle 2, 3, 4 & 7
Financial Implications/Impact	Potential contractual penalties for failure to deliver the quality schedule
Legal Implications/Impact	Reputational implications of delivering sub-standard safety and care
Partnership working & Public Engagement Implications/Impact	CCG are part of the quality assurance process.
Committees/groups where this item has been presented before	Clinical Governance & Quality Committee, Quality Committee and TMB
Monitoring and Review	Monitoring via the quality contract, CCG Performance and Quality Committee& internal processes
Is a QIA required/been completed? If yes provide brief details	No