

Board of Directors Meeting

Report

Subject: Care Quality Commission (CQC)
Date: Thursday 27th February 2014
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Executive Summary

The CQC inspection of the Trust in June (26th) and July (8th, 9th, 10th, 17th, 18th) 2013 resulted in five compliance judgements, of which one indicated a 'warning notice' in respect of Outcome 16, *assessing and monitoring of the quality of service provision*.

The Trust received a CQC follow up visit on the same day as the Keogh follow up. This CQC visit **only** assessed the warning notice.

The Trust currently has compliance actions against 5 of the CQC outcomes.

The Trust has received confirmation the Trust will be inspected under the new CQC regime. Provisional soundings are indicating this visit may be undertaken week commencing 21st April 2014.

The CQC will use the new inspection to assess the Trust. It will be a comprehensive visit, spanning over a number of days: team of 20+ inspectors and in hours and out of hours visits.

Following the visit the Trust will receive a CQC rating: outstanding; good; requires improvement; or inadequate. A report will be submitted to Monitor and the Secretary of State. The Trust will have an opportunity to respond to the draft report.

The Trust are preparing for a re-inspection around the new system and are currently developing a peer review process which will involve the Board and senior managers frequently visiting clinical and non-clinical environments to obtain their own assurance prior to a re-inspection. This will build upon our successful IAT programme. Assessing compliance against the Keogh / CQC actions will be facilitated by the PMO.

Recommendation

To discuss and decide upon further assurance mechanisms (over and above what is currently in place) that will be required by Board members prior to the visit.

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
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. This will change when Fundamental Standards of Care are published.
Links to NHS Constitution	Principle 2, 3, 4 & 7
Financial Implications/Impact	Implications in relation to the staffing outcome >£4 Million
Legal Implications/Impact	Reputational implications of delivering sub-standard safety and care. Risk of civil and/or criminal action if further compliance issues are noted.
Partnership working & Public Engagement Implications/Impact	This paper will be shared with the CCG Performance and Quality Group as requested.
Committees/groups where this item has been presented before	TMB
Monitoring and Review	The CQC warning notice has being monitored through the Board of Directors. The delivery action plan is being monitored weekly at the operational working group and monthly at the PMO
Is a QIA required/been completed? If yes provide brief details	No

TRUST BOARD OF DIRECTORS – FEBRUARY 2014

CARE QUALITY COMMISSION (CQC)

1. Introduction

The July 2013 CQC inspection resulted in five compliance judgements, of which one indicated a ‘warning notice’ in respect of Outcome 16, *assessing and monitoring of the quality of service provision*. The table below sets out the judgment the Trust received for the outcomes assessed.

2.0 Summary of the CQC findings

Standard ‘Outcome’	Judgement
Care and Welfare of people who use the service	Minor impact to patients
Meeting Nutritional needs	Moderate impact to patients
Cooperating with other providers	Standard met
Cleanliness and infection control	Standard met
Staffing	Moderate impact to patients
Supporting Workers	Standard met
Assessing and monitoring the quality of service provision	Moderate impact ‘Enforcement Action’ A ‘warning notice’ was issued with a specific deadline for meeting the standard by the 31 st October 2013
Complaints	Moderate impact to patients

The judgements were issued to the Trust in September 2013 in the CQC formal report, with a separate issue of a ‘warning notice’.

The Trust was revisited on 4th December 2013 to assess the Trusts position against the warning notice.

3.0 New Judgement

The CQC felt that sufficient improvements had been made to enable the warning notice to be reduced to a compliance action. *Note: the CQC only formally assessed Outcome 16 ‘Assessing and monitoring the quality of service provision’.* **The judgements against the other 4 non compliant outcomes remain unchanged.**

4.0 Forthcoming CQC Inspection

The Chief Inspector of Hospitals has recently published a list of 20 acute trusts that will be inspected between April and June 2014. SFHFT will be one of these 20 acute Trusts. The Trust had been anticipating this announcement as all trusts in 'special measures' had previously been informed they would be re-inspected under the new CQC regime by spring 2014.

The new inspection teams will be large (over 20 people) and will be headed by a senior NHS clinician or executive, working alongside senior CQC inspectors. The teams include professional and clinical staff and other experts, including trained members of the public ('experts by experience'). The teams will spend at least two full days at the trust inspecting every site that delivers acute services, and eight core service areas: A&E; acute medical pathways including the frail elderly; surgery and theatres; critical care; maternity; paediatrics; end of life care and outpatients. These services are chosen on the basis of both volume and risk.

At the start of the inspection the Trust will be invited to give a brief overview of the context for our trust, the achievements we are proud of and the challenges we are facing. The inspections are a mixture of announced and unannounced and may include inspections in the evenings and weekend.

Following the visit we will receive a CQC rating: outstanding; good; requires improvement; or inadequate. A report will be submitted to Monitor and the Secretary of State. The trust will have an opportunity to respond to the draft report.

The CQC has re-designed its collation of evidence and data streams in regards to preparing for inspections. The 'new wave' is developing its systems to have Key Lines of Enquiry (KLOE's) that are both meaningful to inspectors and those that are inspected. The CQC will assess the Trust against the CQC indicators; are they (Trusts) safe, are they effective, are they caring, are they well led and are they responsive to people's needs?

We are preparing for a re-inspection around the new system and are currently developing a peer review process which will involve the Board and senior managers frequently visiting clinical and non- clinical environments to obtain their own assurance prior to a re inspection. This will build upon our successful IAT programme.

Susan Bowler

Executive Director of Nursing and Quality