

# Public Trust Board – 26<sup>th</sup> October 2021

# **Care Quality Commission Update**

The Trust continues to prioritise quality improvement, patient care and compliance with the Care Quality Commission (CQC) fundamental standards in all care delivery.

## **Purpose of the report**

This report provides assurance on our compliance with the CQC fundamental standards and an update on the CQC inspection of the Trust over May/ June/ July 2021.

### Analysis of the issue

## **CQC Core and Well Led Inspection**

Over the months of May, June and July 2021 the CQC carried out core and well led inspections of the trust. The inspection was well received and the trust was provided with positive feedback on being patient safety focused, values driven with good governance and leadership and having fostered partnership working.

The trust has since received a draft report for factual accuracy checking on the 6<sup>th</sup> September and the final report is now anticipated.

Once received, the trust will enter the action planning phase, to address any areas of concern highlighted within the report.

### Quality Surveillance Tracker (QST)

The QST continues to capture emergent trust quality issues and intelligence to ensure there is oversight, grip and pace on improvement. Progress is monitored by the compliance team, a weekly report is provided to the Executive Team with highlighted concerns and successes.

#### Foundations for Great Patient Care

The Foundations for Great Patient Care meeting continues to meet on a monthly basis and throughout July, August and September 2021 have covered topics in relation to:

- Action planning and providing good evidence.
- Administration Staff developing and valuing our staff
- CQC brief guide on call bells and how the trust is responding to ensure compliance.
- Responsiveness to CQC enquiries and concerns

### **Focus Groups**

Following a brief and temporary suspension of Focus Group meetings, due to the period of inspection, the meetings re-commenced in September 2021. The compliance team have planned in a schedule of these.

#### 15 Steps Challenge - quality from a patient's perspective

The Trust is commencing a period of carrying out unannounced 15 Steps Challenge visits to inpatient wards over October, November and December 2021. As the trust is committed to improving the quality of care, involving patients is pivotal to this process.

This approach was originally the idea of a mother whose daughter was a patient and required frequent visits to hospital. She identified that she was aware of what kind of care her daughter would receive within 15 steps of walking onto a ward, highlighting how important it is to understand what good quality care looks and feels like from a patient and carer's perspective. This was then further developed into The 15 Steps Challenge toolkits in 2012 by the NHS Institute of Innovation and Improvement. The approach uses observational methods to understand what service users and carers experience when they first arrive in a healthcare setting. They are aligned to the CQC fundamental standards of care.

There are 8 visits planned to wards across the trust between October and December 2021. The observational tool will be used and feedback given to the wards directly following the exercise.

### **Proposal**

- Continued weekly governance of the Quality Surveillance Tracker.
- Continue Focus group activity and engagement meetings whilst awaiting the CQC inspection report.
- Compliance team engagement with ward quality initiatives.
- Preparation for the receipt of the report and developing an action and improvement plan.

## **Decision required**

• For information.

# **Governance table**

For Board and Board Committees:	Public Trust Board 26 <sup>th</sup> October 21
Paper sponsored by:	Anne Scott, Director of Nursing, AHP's and Quality
Paper authored by:	Jane Howden Head of Quality,
	Compliance and Regulation
Date submitted:	5 <sup>th</sup> October 2021
State which Board Committee or other forum	None
within the Trust's governance structure, if	
any, have previously considered the	
report/this issue and the date of the relevant meeting(s):	
If considered elsewhere, state the level of	
assurance gained by the Board Committee or	
other forum i.e. assured/ partially assured /	
not assured:	
State whether this is a 'one off' report or, if	Each meeting
not, when an update report will be provided	
for the purposes of corporate Agenda	
planning	Web Chandenda
STEP up to GREAT strategic alignment*:	High Standards Yes Transformation Yes
	Environments Yes
	Patient Involvement Yes
	Well <b>G</b> overned Yes
	Single Patient Record Yes
	Equality, Leadership, Yes
	Culture
	Access to Services Yes
	Trust wide Quality Yes Improvement
Organisational Risk Register considerations:	List risk number and title Risk 5
organisational hisk hegister considerations.	of risk
Is the decision required consistent with LPT's	Yes
risk appetite:	
False and misleading information (FOMI)	None
considerations:	
Positive confirmation that the content does	Confirmed
not risk the safety of patients or the public	
Equality considerations:	None