

Trust Board – 25th January 2022

Care Quality Commission Update

Purpose of the report

This report provides assurance on our compliance with the CQC fundamental standards and an update following the CQC inspection of the Trust over May/ June/ July 2021. The Trust continues to prioritise quality improvement, patient care and compliance with the Care Quality Commission (CQC) fundamental standards in all care delivery.

Analysis of the issue

The CQC assurance action plan accompanies this report, to accurately reflect the achievements to date against the 'must do' actions.

Scrutiny and Governance

Following consolidation of all previous high level action plans onto one single CQC assurance action plan, the governance and reporting is detailed below:

- The must and should do actions are discussed at Directorate Management Team meetings for oversight and assurance.
- Ongoing weekly meetings with key nominated leads from the Directorates and the Quality Compliance and Regulation team, to update and examine evidence on the must and should do actions. This includes evidence of embeddedness and sustained governance and oversight.
- Any action considered to have been achieved will then have the evidence examined to gain assurance of completeness and presented to the Executive Director of Nursing, AHP's and Quality for sign off.
- The Quality Compliance and Regulation team hold a repository of evidence for each action.
- Each action is coded as green, amber or red:

A green rating determines the action is complete. Once signed off and agreement reached that the action has been achieved the green rating also includes the word 'complete'. Actions that are active and progressing to plan remain amber until such time that they are achieved.

Actions with a red rating illustrate that sufficient progress has not been made or there are significant challenges to achieving the action. An explanation of being classified a red action is provided in the update on the action plan.

- Progress is being reported to Executive Board meetings for oversight and scrutiny.
- Progress against the actions is being provided to the CQC on a monthly basis, as agreed with the CQC. This is being submitted, following scrutiny at the CQC assurance meeting, sign off

- by the Director Nursing, Allied Health Professions and Quality and once shared with Strategic Executive Board.
- The actions pertaining to the well led domain are being held on an overarching CQC action plan with additional oversight by the Deputy Director of Governance and Risk and Transformation Committee.

Action Plan Summary

- 1. All actions are progressing; however there is a potential that the timescales of completion may be impacted by the current COVID-19 pandemic. Work is underway to identify the potential and actual risk and ensure these are mitigated.
- 2. Estates and Facilities work in relation to dormitories and call bells remains on track.
- 3. There is a firm grip on all actions; the groundwork and preparation required to achieve the actions has been undertaken and steady progress is being made.

Potential Risks

- The Trust is required to clearly articulate its commitment to addressing the concerns raised within the CQC inspection report and demonstrate progress against the actions. Escalation and mitigation is required should any of the improvement activities be delayed or not achieved. A risk log is being developed to ensure clear identification of potential and actual risks due to the impact of the pandemic.
- 2. The Trust is required to deliver timely responses and updates to the CQC which demonstrate achievement and compliance in meeting the regulated activities. All wards, teams, directorates, trust leaders will be required to commit to this, at a time when there are seasonal system pressures and the impact of Covid-19.
- 3. The current required Level 4 response to the Covid-19 pandemic and the stand down of level 2 and 3 committees has the potential to impact on the governance of actions in the CQC Assurance action plans. Mitigation is being put into place by the directorates to prevent delays to the actions.
- 4. The current staffing challenges due to absence relating to COVID-19 has the potential to impact on the release of staff for mandatory training. The Trust has maintained a position that all essential training will continue; however where safe staffing and patient safety ultimately is at risk this may impact on a staff member being released. The organisational risk is being regularly updated to capture the risks and identify actions to mitigate any risks.

Decision required

Trust Board is asked to note the oversight of the progress against the action plan. The paper also highlights the potential risks to impact on progress against these risks due to the current COVID -19 pandemic.

Governance table

For Board and Board Committees:	Public Trust Board 25th January, 2022	
Paper sponsored by:	Anne Scott, Director of Nursing, AHP's and Quality	
Paper authored by:	Quality Jane Howden Head of Quality, Compliance and Regulation	
Date submitted:	11/01/22	
State which Board Committee or other forum	Strategic Executive Board 13 th January 2022	
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 not,		
when an update report will be provided for the		
purposes of corporate Agenda planning		
STEP up to GREAT strategic alignment*:	High S tandards	Yes
	Transformation	Yes
	Environments	Yes
	Patient Involvement	Yes
	Well G overned	Yes
	Reaching Out	Yes
	Equality, Leadership, Culture	Yes
	Access to Services	Yes
	Trustwide Quality Improvement	Yes
Organisational Risk Register considerations:	List risk number and title of risk	Risk 62
Is the decision required consistent with LPT's risk appetite:	Yes	
False and misleading information (FOMI) considerations:	None	
Positive confirmation that the content does not risk the safety of patients or the public	Confirmed	
Equality considerations:	Yes	