

EAST KENT HOSPITALS UNIVERSITY NHS FOUNDATION TRUST

REPORT TO: **COUNCIL OF GOVERNORS**

DATE: **8 MAY 2015**

SUBJECT: **CQC ACTION PLAN**

REPORT FROM: **CHAIR OF IMPROVEMENT PLAN DELIVERY BOARD**

PURPOSE: **Discussion
Information**

CONTEXT / REVIEW HISTORY / STAKEHOLDER ENGAGEMENT

- The Trust was put into special measures following a CQC inspection in March 2014.
- In response the Trust developed an action plan based on the 21 Key Findings and 26 Must Do areas that were identified in the CQC report.
- Detailed action plans were developed at Divisional level. These feed into the High Level Improvement Plan (HLIP) to give an overall picture of progress.
- The Improvement Plan Delivery Board (IPDB) monitors progress against the HLIP and associated action plans. The IPDB is chaired by David Hargroves, Consultant Physician (who commenced in December). It has met monthly since 29 Oct 2014. The terms of reference for the IPDB were approved by the Board on 30 October 2014.
- A Programme Management Office has been established to oversee delivery of the action plans.
- Sue Lewis has been appointed by Monitor as the Improvement Director.
- Progress towards achievement of the HLIP is recorded monthly in the Special Measures Action Plan. This is submitted to Monitor via Sue Lewis. It is then uploaded to the NHS Choices website and EKHUFT staff and public websites.
- CQC have announced that that the Trust will be re-inspected in the w/c July 13th 2015. This will be a full re-inspection with around 50 inspectors. It is expected that half the inspectors will be based at QEQM and half at WHH. These teams will then travel to K&C and Dover sites as necessary.
- The inspection is expected to cover the following services: urgent and emergency services, medical care (including older people's care), surgery, critical care, maternity and gynaecology, services for children and young people, end of life care, outpatients and radiology.

PROGRESS TO DATE

Progress towards achievement of the HLIP is recorded monthly in the Special Measures Action Plan. This is submitted to Monitor and is then uploaded to the NHS Choices website and EKHUFT staff and public websites.

The submission made on 13th April 2015 is attached.

Monthly meetings, chaired by Monitor, take place to review performance against the HLIP. The agenda covers both achievements and areas of risk.

Achievements discussed at the last two meetings with Monitor, which took place on 18th March and 15th April, included:

- The number of staff who would recommend the Trust to friends and family if they need treatment has increased by 2%;
- Clinical Education in EKHUFT have been awarded a certificate by the South Thames Foundation School in recognition of its exceptional work in supporting our Foundation Doctors during 2013/2014;
- We have opened medical equipment libraries at K&CH and at WHH;
- We have held a third Schwartz Round, a meeting to provide an opportunity for staff from all disciplines to reflect on the emotional aspects of their work. These are proving very successful with over 100 staff attending each event;
- We have held a second 'Perfect Week'. This aims to smooth the patient pathway through the hospital from a better understanding of the bottlenecks of flow. The result was improved A&E performance from 87.6% to 89.8%;
- We received over 5,800 compliments in February and March from patients and relatives;
- We have organised staff learning events covering: dementia and end of life care, pressure damage and skills for lifelong learning;
- We have seen improved staff engagement with some of our staff and their relatives actively raising funds for hospital charities;
- We won the Kent, Surrey, Sussex (KSS) EXPO award for Most Improved Acute Provider. The KSS EXPO is a new event which is focused on accelerating healthcare innovation, enhancing the quality of care, and improving patient safety;
- We introduced a 'Respecting each other plan' which will include a confidential helpline, workplace buddies and a staff charter;
- We have had 120 staff volunteer to become 'workplace buddies';
- We have commenced a comprehensive outpatients service at the state-of-the-art Medical Centre in Whitstable which offers a one-stop shop for outpatient services and diagnostics;
- We have appointed a consultant anaesthetist as Senior Clinical Lead for clinical strategy;
- We have appointed a consultant surgeon as Senior Trust-wide lead for Governance, Patient Safety and Quality in the surgical division;
- We have introduced weekly theatre meetings to give theatre staff time to discuss operational items, patient safety issues and improvement plans;

- Responded to all patients and relatives who phone with issues within 24 hours.

Areas of risk that were discussed at the last meetings Included:

- recruitment and retention of staff (A&E, paediatrics, general);
- outpatient booking system;
- mandatory training;
- patient flow; and
- cleaning at K&CH.

PREPARATION FOR CQC RE-VISIT

Preparations are now well underway for the CQC re-inspection which will take place w/c 13 July 2015.

The re-inspection will be a full inspection covering K&CH, QEQM, WHH and Dover. It is expected that there will be around 25 inspectors based at WHH and 25 based at QEQM; members of these teams will also cover Dover and K&CH.

In addition there will be unannounced visits - probably in the two weeks prior to 13 July 2015.

A short-term steering group has been set up to oversee preparations for the CQC re-inspection. The membership of the group is very wide and includes staff from all Divisions and all sites. This group 'CQC re-visit steering group' meets weekly and reports into the Improvement Plan Delivery Board chaired by David Hargroves. The preparation for the Inspection, and the inspection itself, is seen as a key milestone in our improvement journey which is going to take much longer to ensure that effective clinical leadership and cultural change is embedded.

The steering group has agreed the approach to preparing for inspection and has focussed efforts on developing site based teams and developing materials to support the site-based hospital teams in preparing for inspection. An external independent consultant expert (Gill Hooper) has been engaged to support the preparation.

The focus for the preparation will be the key lines of enquiry associated with the domains of safe, effective, caring, responsive and well-led for each of the services to be visited.

The external independent consultant expert has facilitated preparation sessions with the senior leadership team, and the hospital based site teams at KCH, QEQM and WHH. She will also provide support for the 'mock inspection' taking place on the 8th May 2015.

At the preparation sessions, Gill explained the inspection process and gave tips on how to prepare. For example, she said that each site should consider the most appropriate place to locate the CQC comments boxes. The session was reassuring in that Gill emphasised that it wasn't necessary for everything to be perfect but that hospital teams and ward/department teams should consider how to represent their hospital in the 'best light', emphasising recent innovations, improvements in their departments/areas and what the plan is for further improvements, for example what has been recent learning from local incidents, complaints, feedback from patients and how has this been reflected on by the team and what improvements are being made as a result.

The CQC re-visit steering group has established three site based teams, each of which will be led by a clinician and two senior nurses. (Dover will be covered by the K&C team.)

QEQM

Dr Neil Goldsach, Consultant Respiratory Physician
Sally Moore, Senior Matron
Alanda Tofte, Senior Matron

Plus a team of leaders from a variety of departments and wards.

K&C and Dover

Dr Gustav Standvik, Consultant Anaesthetist
Paula Brogan, Senior Matron
Elisa Steele, Senior Matron

Plus a team of leaders from a variety of departments and wards.

WHH

Mr Thanesan Ramalingam, Consultant Colorectal Surgeon
Andy Schofield, Senior Matron
Wilma Deatcher, Senior Matron

Plus a team of leaders from a variety of departments and wards.

These teams are leading the local preparations for the re-visit by:

- talking to staff about the re-inspection process and explaining how they can best portray the service they provide;
- carrying out mini / mock-inspections;
- being a 'pair of eyes' to spot issues that can quickly be addressed.

In addition to the site based teams, distinct work streams have been established to oversee communications, information requirements etc.

The teams have been given clear guidelines on what needs to be done each week and are tasked with feeding back to the CQC re-visit steering group each week on an exception basis.

Communication will play a key part in preparations for the revisit.

News of the revisit was sent out via Trust News and regular updates will continue. Posters are being produced for display around the Trust.

In addition a staff presentation and a staff booklet have been produced explaining the re-inspection process and advising how staff can best prepare. These were distributed to Divisions in late April and will be discussed at team meetings, staff forums, focus groups etc. It will be important that line managers and team leaders use these tools and discuss the approach with their teams as part of the cascade and preparation process.

All staff (including the staff governors) are being encouraged to support our improvement journey and the preparations for CQC inspection.

ENGAGEMENT WITH GOVERNORS

The support of the governor's - both now as we prepare for the CQC inspection and in the longer term, as we continue our improvement journey - is vital.

The Chief Nurse, Director of Quality and the Clinical Lead for the CQC Improvement Programme wrote to all governors on Monday 20th April inviting them to support preparations for the re-inspection by joining one of the site based teams. Two governors have responded: Jane Burnett (who volunteered to join the WHH team) and Sarah Andrews (who volunteered to join the K&C team). In addition David Bogard (staff governor) has volunteered to be part of the site based team at K&C.

RECOMMENDATIONS:

The Council of Governors is invited to note the report and the progress to date.

NEXT STEPS:

Preparations for the CQC re-inspection will gather pace with regular, targeted mini inspections taking place in the weeks ahead.

The findings of the mock inspection (taking place on May 8th) will be analysed and discussed at an away day of the Improvement Plan Delivery Board that will take place on Monday 11th May. A plan will then be put in place to address issues identified.