

**Scrutiny Board (Adult Social Services, Public Health, NHS)**

**19th April 2016**

**Update on Care Quality Commission (CQC)  
Compliance with Fundamental Standards and Preparations for  
Follow-Up Inspection 10-12 May 2016**

<b>Presented for:</b>	Information and Assurance
<b>Presented by:</b>	Suzanne Hinchliffe, Chief Nurse/Deputy Chief Executive
<b>Author:</b>	Craig Brigg, Director of Quality
<b>Previous Committees:</b>	None

<b>Trust Goals</b>	
The best for patient safety, quality and experience	✓
The best place to work	✓
A centre for excellence for research, education and innovation	✓
Seamless integrated care across organisational boundaries	✓
Financial sustainability	✓

<b>Key point/Purpose</b>	
1. To update Scrutiny Board on the Trust's compliance with the Fundamental Standards of Care and Care Quality Commission Registration.	For information
2. To provide an update on the actions the Trust has taken following the comprehensive inspection in March 2014.	For information

**1. Background**

The Care Quality Commission set out a new vision and direction in their strategy for 2013 -16, proposing radical changes to the way they monitor, inspect and regulate health and social care services. In 2014, the Department of Health consulted on new regulations that set out the fundamental standards of quality and safety that all providers must meet. The Care Quality Commission subsequently issued guidance for providers to help them to meet the new regulations, and on how the CQC will use their enforcement powers to take action when they fail to do so.

The new health and social care regulations came into force on 1 April 2015 setting out new Fundamental Standards for all care providers, to replace the previous standards and outcomes.

Two new regulations came into place on 27 November 2014; a fit and proper person requirement for directors, and duty of candour for NHS bodies.

A regulation has also been introduced requiring providers to display their CQC ratings, which came into force on 1 April 2015, to let the public know how care services are performing.

## **2. New Regulations and Fundamental Standards**

There are now 11 new regulations setting out the fundamental standards of quality and safety:

- Person-centred care
- Dignity and respect
- Need for consent
- Safe care and treatment
- Safeguarding service users from abuse
- Meeting nutritional needs
- Cleanliness, safety and suitability of premises and equipment
- Receiving and acting on complaints
- Good governance
- Staffing
- Fit and proper persons employed

The Trust has implemented the duty of candour regulations and provided support to clinical teams and managers in this process; the Trust introduced the fit and proper person requirement for directors and has been displaying its CQC ratings following inspection in March 2014 at its main hospital locations since May 2015.

## **3. Enforcement Powers**

The Care Act 2014 gave the CQC strengthened enforcement powers to:

- protect people who use regulated services from harm and the risk from harm, and
- hold providers and individuals to account for failures in how the service is provided.

The changes now allow them to take swifter action and use the most appropriate tool to target poor performing providers. Importantly, the CQC are able to prosecute providers for certain breaches of regulation without first issuing them a warning notice.

The CQC have not taken enforcement action against the Trust during this period.

#### **4. CQC Inspections/Visits**

There have been no planned or unannounced CQC inspections of the Trust since their visit in March 2014. There have therefore been no changes to the Trust's registration during 2014/15.

#### **5. Preparation for Follow up Inspection, May 10-12 2016**

The action plan that was developed relating to the actions the Trust must take to comply with the fundamental standards of quality and safety. The actions (17 in total) were set out under key headings:

- Staffing
- Training
- Risk and Safety
- Governance
- Communication
- Human Resources
- Mental Health
- Equipment

The actions have been reviewed and the plans discussed at the Public Board.

Report on progress against the action plans following the 2014 visit were reported to the Quality Assurance Committee and outstanding actions mainstreamed into other Trust work programmes following discussion and agreement with commissioners at NHS West Leeds CCG and the TDA.

The CQC also made a number of recommendations; actions the Trust should take to improve quality and safety (39 in total) under the headings above and also the additional headings:

- Information Technology
- Facilities
- Children's Services
- Care
- Clinical Support

Preparation for the follow-up inspection continued in 2014/15 before the Trust was notified of the date for the inspection, which will take place 10-12 May 2016.

The Trust appointed 4 Patient Safety & Quality Managers in 2014/15. These appointments were made following the comprehensive CQC inspection to work with designated CSUs and provide support to them in developing their governance arrangements. These post holders have also supported trust wide improvement programmes, including falls prevention, deteriorating patient, sepsis, pressure ulcers and acute kidney injury. They have also worked with the Clinical Leadership Fellows appointed by the Deanery on a number of quality and safety programmes, including the establishment of a Doctors in Training forum. The Patient Safety & Quality

Managers have attended a number of governance and performance meetings and they are supporting CSUs to collect evidence for inspection, including reviewing minutes of governance meetings, Terms of Reference and action plans to ensure these are robust and fit for sharing with the CQC. Support has also been provided to CSUs with incident reporting, investigation reports and complaint responses.

A programme of work was established specifically to prepare for the follow-up inspection, building on the experience of the comprehensive inspection in March 2014. This included review of evidence that was posted on the shared drive, mapping this against the 5 key lines of enquiry, refreshing the information that was provided to staff and a further review of the actions the Trust were required to take following the previous inspection. A series of engagement meetings have taken place with Clinical Directors, Heads of Nursing and General Managers and their teams and key messages included in Trust briefings relating to the fundamental standards and improvements that have been implemented. The Trust has continued to publish Quality and Safety briefings that are sent out to all staff fortnightly and also included in the Chief Executive's Start the Week bulletin, supported by the communications team.

The core services identified in the inspection framework have reviewed and focused improvement work has been undertaken to support these areas:

<b>Core service</b>	<b>Judgement March 2014</b>	<b>Rating</b>
Urgent Care		Good
Medical Care		Requires Improvement
Maternity		Good
Children		Requires Improvement
Critical Care		Requires Improvement
Surgery		Requires Improvement
End of Life Care		Good
Outpatient		Good

The programme of work to prepare for inspection has been set against the 5 key lines of enquiry, to improve on the judgements that were made following the inspection in March 2014, as follows:

<b>Overall rating for this Trust</b>	<b>Requires Improvement</b>	
Are services at this Trust safe?	Requires improvement	
Are services at this Trust effective?	Good	
Are services at this Trust caring?	Good	
Are services at this Trust responsive?	Requires improvement	
Are services at this Trust well-led?	Requires improvement	

Progress was discussed at a Trust Board time-out and the Executive Directors have met fortnightly to monitor progress.

## **6. Engagement with the Care Quality Commission**

The Trust continues to meet with the local Compliance Inspector to engage with them on the inspection process and changes to regulation. A planning meeting will be held with the CQC on 4 May 2016 in advance of the inspection visit the following week.

## **7. Routine CQC Enquiries**

The Trust has continued to receive routine enquiries from the CQC when they have been contacted by patients or their families, or members of staff to raise concerns about treatment and care. In total there have been 8 enquiries from the CQC during 2014/15. These have been resolved in conjunction with CSUs. These enquiries continue to be monitored and tracked by the Trust's Quality Team.

## **8. Intelligent Monitoring Report (IMR)**

The most recent CQC Intelligent Monitoring Report for the Trust was published in May 2015. The Trust's overall rating has remained in band 3.

## **9. Recommendations**

Scrutiny Board is asked to:

- i) Note this report and the assurance provided relating to the actions taken following the comprehensive inspection in March 2014 and the preparations for the follow-up inspection in May 2016.

**Craig Brigg**  
**Director of Quality**  
**April 2016**