

To:	Trust Board
From:	Michelle Rhodes
Date:	27.07.2018
Healthcare standard	

Title:	CQC 2018 Inspection										
Author:	Victoria Bagshaw										
Responsible Director:	Michelle Rhodes										
Purpose of the Report:	To provide the Board with an update following the CQC 2018 inspection and findings.										
The Report is provided to the Board for:	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 5px;">Decision</td> <td style="border: 1px solid black; width: 20px;"></td> <td style="border: 1px solid black; padding: 5px;">Discussion</td> <td style="border: 1px solid black; width: 20px;"></td> </tr> <tr> <td style="border: 1px solid black; padding: 5px;">Assurance</td> <td style="border: 1px solid black; text-align: center;">X</td> <td style="border: 1px solid black; padding: 5px;">Information</td> <td style="border: 1px solid black; text-align: center;">X</td> </tr> </table>			Decision		Discussion		Assurance	X	Information	X
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Assurance	X	Information	X								

<p>Summary/Key Points:</p> <p>CQC inspected the trust between Thursday 15 February and Thursday 8 March 2018. A separate 'well-led' assessment between Tuesday 10 and Thursday 12 April 2018.</p> <p>Not all services were inspected but all sites were attend those services inspected included:</p> <ul style="list-style-type: none"> • urgent and emergency care, • medical care, • surgery • outpatients at Lincoln and Pilgrim. • Children and young people's services inspected at Pilgrim, • medical care and surgery at Grantham • surgery at Louth.

The CQC found the Trust to have improved its overall rating to 'Requires Improvement'

The report details a mix of positive improvements and current challenges for the Trust many of which were identified within the Trust prior to the inspection and formed part of the 2018/19 Quality and Safety Improvement Plan.

There is a requirement for the trust to return its improvement plan, which addresses issues highlighted within the CQC inspection report, to the CQC by the end of July 2018.

Recommendations:

For the Board of Directors to note the information provided

Strategic Risk Register

- Ability to deliver improvements required by the CQC at pace and within challenging timescales due to capacity, finance or staff resource
- Inability to demonstrate delivery will impact on reputation and the Trust's ability to achieve a CQC rating of 'Good'

Resource Implications (e.g. Financial, HR)

- Clinical efficiencies through getting care right first time.
- Capacity implications in delivering the Quality and Safety improvements at the same time as operational business.

Assurance Implications

- Delivery of improvements are mapped to the Quality and Safety Improvement Plan with weekly Group meetings for detailed monitoring of all work programme milestones.
- Fortnightly Quality and Safety Improvement Board.
- Monthly 2021 Programme Board, Trust Board, System Improvement Board and Quality Governance Committee where a Quality and Safety Overview Progress Report is presented.

Patient and Public Involvement (PPI) Implications

Improved patient experience due to higher quality care being delivered consistently.

Equality Impact

Information exempt from Disclosure

None

Requirement for further review?