Draft CQC Stocktake - Must Do Actions - July 2018
V1.1

NHS United Lincolnshire Hospitals NHS Trust

Must Do Actions	Regulation Number	Programme	QSIP Project	SRO/Project Lead	Report	Assurance
Overall Trust						
The trust must ensure that the governance is fit for purpose. The structure must support effective and efficient performance management, responsibility, decision making, consistency and accountability.	17	Improving quality and safety	QS02 Governance	SRO: Neill Hepburn Project Lead: Sally Sealy, Jayne Warner		
The trust must ensure the integrated performance report is fit for purpose. The data quality must be improved to provide assurance to the board. The trust must ensure that there is triangulation of data.		Improving quality and safety	QS10 Data Quality	SRO: Neill Hepburn Project Lead: To be appointed		
The trust must ensure there is an effective governance processes around the procedures to ensure locum staff are suitable to work in the organisation.	17, 19	Improving quality and safety	QS02 Corporate Governance	SRO: Karen Brown Project Lead: Martin Rayson		
The trust must ensure there is a defined governance structure to assure the board of the quality and delivery of surgical care to children and this must be overseen by a multi-disciplinary children's surgery committee which reports to the board.	17, 9, 12	Improving quality and safety	QS05 Paediatric Services	SRO: Michelle Rhodes Project Lead: Jo Wilson		
The trust must ensure there is an effective system and process in place in relation to the governance of potential carers providing direct supervisory and/or clinical care within the acute hospital.	7, 19, 12	Improving quality and safety	QS02 Clinical Governance	SRO: Neill Hepburn Project Lead: Sally Sealy		
The trust must ensure effective speciality and directorate governance meetings take place and that these are of good quality.	17	Improving quality and safety	QS02 Clinical Governance	SRO: Neill Hepburn Project Lead: Sally Sealy		
The trust must ensure that there is a suitable link to the board for the chief pharmacist and medicines safety officer to escalate safety concerns appropriately.	17, 12	Improving quality and safety	QS02 Clinical Governance	SRO: Neill Hepburn Project Lead: Sally Sealy		
The trust must ensure there are fully effective arrangements for identifying, recording, and managing risks, issues, and taking mitigating action.	17	Improving quality and safety	QS02 Clinical Governance	SRO: Neill Hepburn Project Lead: Sally Sealy		
The trust must ensure there are clear links between the board assurance framework and the corporate risk register.	17	Improving quality and safety	QS02 Clinical Governance	SRO: Karen Brown Project Lead: Jayne Warner		
The trust must implement records management processes that ensure clinical records are stored securely with controlled access.	17, 12	Productive services	Outpatient Improvement Programme	SRO: Mark Brassington project lead Yaves Lalloo	2021 Programme Board	FSID
The trust must take immediate action to address the significant levels of violence and abuse experienced by staff.	17	Improving quality and safety	QS01 Developing the Safety Culture	SRO: Martin Rayson Project Lead: Jennie Negus		
The trust must ensure it is fully compliant with the duty of candour in relation to incidents.	20	Improving quality and safety	QS02 Duty Of Candour Governance	SRO: Neill Hepburn Project Lead: Paul White		
The trust must ensure appropriate checks on prospective and current staff are carried out to ensure they are suitably fit and proper to carry out their role.	19	Improving quality and safety	QS07 Safeguarding	SRO: Michelle Rhodes Project Lead: Jenny Hinchliffe		
Lincoln County Hospital						
Urgent Emergency Care						
The trust must ensure all patients who attend the emergency department are triaged within 15 minutes of their arrival.	12	Urgent Care Improvement Programme		SRO Mark Brassington project lead Trish Dunmore		
The trust must ensure all patients brought in by ambulance are handed over to the department within 30 minutes and patients should wait no more than 1 hour from time of arrival to time of treatment.	12	Urgent Care Improvement Programme		SRO Mark Brassington project lead Trish Dunmore		

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The trust must ensure all patients who attend the department are admitted, transferred and discharged from the department within four hours.	12	Urgent Care Improvement Programme		SRO Mark Brassington project lead Trish Dunmore		
The trust must ensure all clinical and non-clinical staff receive the appropriate level of safeguarding children training: as directed in the Intercollegiate guidance: Safeguarding Children and Young People: Roles and Competencies for Health Care Staff (March 2014).	13	Improving quality and safety	QS07 Safeguarding	SRO: Michelle Rhodes Project Lead: Jenny Hinchliffe		
The trust must ensure all staff in the emergency department attend mandatory training in key skills in line with trust policy, to meet the trusts own targets.	12, 18	PRM		SRO Mark Brassington Project lead Kat Etoria		
The trust must ensure staff in the emergency department are applying the principles of antimicrobial stewardship.	12	PRM		SRO Mark Brassington Project lead Kat Etoria		
Outpatients						
The trust must ensure patients have complete and recorded outcomes to ensure there are documented decisions and actions in relation to their treatment and care.	9, 12	Productive services	Outpatient Improvement Programme	SRO: Mark Brassington project lead Yaves Lalloo		
The trust must ensure the percentage of staff completing mandatory training including safeguarding training is in line with trust targets.	13, 18	Developing the workforce to meet future needs		SRO: Martin Rayson Project Lead:	Workforce and OD Committee	
The trust must ensure there is ongoing and sufficient oversight of the risk register	17	Improving quality and safety	QS02 Corporate Governance	SRO: Neill Hepburn Project Lead: Sally Sealy		
The trust must ensure data is used in a way that drives significant improvement of the services, including constitutional standards and waiting list.	9, 12	productive services	Outpatient Improvement Programme	SRO: Mark Brassington project lead Yaves Lalloo		
Pilgrim Hospital						
Urgent and Emergency Care						
The trust must ensure that there is an effective system in place to undertake an initial assessment of all patients who present to the emergency department.	12	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure that there is an effective system to undertaken triage of patients within 15 minutes of arrival. Triage must be undertaken by a registered healthcare professional that is experienced in emergency/urgent care and has received specific triage training.	12	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure 'initial assessment' and 'triage' is undertaken in such a manner as to have regard to the guidance issued by the Royal College of Emergency Medicine titled "Initial assessment of Emergency Department Patients" (February 2017).	12	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure that there is an effective escalation process in place for staff in the streaming area at the front door of the emergency department, and in the ambulance waiting areas of Pilgrim Hospital, to fast track patients who clinically present as unwell, are unstable, deteriorating or have a recognised early warning trigger scores through to the main department to receive clinical intervention within an appropriate timeframe.	9, 10, 12	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure an effective process is operating to ensure there is a senior doctor assessment, rapid assessment and treatment or early senior assessment process in place for patients brought in by ambulances, and those who are waiting in the corridors and in the ambulances	9, 10, 12, 18	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		

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The trust must ensure that there is an effective system in place to assess and monitor the ongoing care and treatment to patients whilst in the emergency department. This includes, but is not exclusive to, the monitoring of pain, administration of medicines, tissue viability assessments, nutrition and hydration and early warning scores with regular ongoing monitoring.	9, 10, 12	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure that there are sufficient numbers of suitably qualified staff competent to care for children on duty in the emergency department at all times. In accordance with the 'Intercollegiate Committee for Standards for Children and Young People in Emergency Care Settings' document titled, "Standards for Children and Young People in Emergency Care Settings" (2012).	18	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure that there are a sufficient number of suitably qualified, skilled and experienced nurses and Healthcare Assistants (HCAs) deployed throughout the emergency department to support the care and treatment of patients.	18	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure that there is an effective system in place for providing an induction to the department for locum, agency and bank staff, including nurses, allied health professionals and healthcare assistants.	17, 18	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure all staff in the emergency department has attended mandatory training in key skills in line with the trust target.	12, 18	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure medical staff, in the emergency department, has attended safeguarding training in line with the trust target.	13	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure the environment in the emergency department accommodates the needs of children, young people and accompanying families in line with the Intercollegiate Committee for Standards for Children and Young People in Emergency Care Settings (2012).	15	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure resuscitation equipment in the emergency department is safe and ready for use in an emergency.	15	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure an appropriate early warning scoring system is used during the initial assessment process of children admitted to the emergency department.	12	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure consultant presence in the emergency department (ED) meets the Royal College of Emergency Medicine (RCEM) recommendation of 16 hours per day.	18	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure medical staff, looking after children in the emergency department, are appropriately trained in paediatric immediate life support (PILS) and advanced paediatric life support (APLS).	18	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure the learning from incidents is shared with all staff in the emergency department to make sure that action is taken to improve safety.	12, 17	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure staff in the emergency department report all clinical and non-clinical incidents appropriately in line with trust policy.	17	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure pain assessments for children are carried out in the emergency department in line with the Royal College of Emergency Medicine guidelines.	9, 12	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure patient audit outcomes are routinely shared with all staff in the emergency department and appropriate actions taken where results do not meet national standards.	17	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		

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The trust must ensure an individual and/or team within the emergency department is responsible for antimicrobial stewardship and the said individual and/or team monitor data and provide feedback on prescribing practice at prescriber and/or team level.	12	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure all frontline clinical staff are trained in key skills such as, blood monitoring, fit testing of respiratory protective equipment face pieces, electronic blood tracking systems, basic life support and mentorship.	18	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure band seven sisters in the emergency department work in line with the trust's values and behaviours at all times.	18	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure the level of risk in the emergency department is identified, recorded and managed appropriately.	17	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure that patients receive person centred care and treatment at all times.	9	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
The trust must ensure that patients are treated with dignity and respect at all times.	10	Improving quality and safety	QS04 Pilgrim Emergency Department	SRO: Mark Brassington Project Lead: Simon Dejonge		
Medical Care						
The trust must urgently address the ongoing failure of staff to always follow care pathways and national requirements, in relation to serious incidents.	12, 17	Improving quality and safety	QS02 Clinical Governance	SRO: Neill Hepburn Project Lead: Sally Sealy		
Children and young people						
The trust must ensure investigation of incidents happen in a timely manner.	17	Improving quality and safety	QS05 Paediatric Services	SRO: Michelle Rhodes Project Lead: Jo Wilson		
The trust must ensure there is a robust system for learning from incidents.	17	Improving quality and safety	QS05 Paediatric Services	SRO: Michelle Rhodes Project Lead: Jo Wilson		
The trust must ensure there is a robust audit plan which is carried out to ensure evidence-based care is applied.	12, 17	Improving quality and safety	QS05 Paediatric Services	SRO: Michelle Rhodes Project Lead: Jo Wilson		
The trust must ensure care and treatment is delivered in line with evidence based practice.	12	Improving quality and safety	QS05 Paediatric Services	SRO: Michelle Rhodes Project Lead: Jo Wilson		
The trust must ensure evidence based care and treatment tools are consistently used.	12, 17	Improving quality and safety	QS05 Paediatric Services	SRO: Michelle Rhodes Project Lead: Jo Wilson		
The trust must ensure there are defined governance structures in place to assure the board of the quality and delivery of surgical care to children.	7, 12	Improving quality and safety	QS05 Paediatric Services	SRO: Michelle Rhodes Project Lead: Jo Wilson		
The trust must ensure there is multi-disciplinary children's surgery committee which report to the board.	17	Improving quality and safety	QS05 Paediatric Services	SRO: Michelle Rhodes Project Lead: Jo Wilson		
The trust must ensure there is a formalised mechanism for instigating paediatric morbidity and mortality reviews across children's services.	17	Improving quality and safety	QS05 Paediatric Services	SRO: Michelle Rhodes Project Lead: Jo Wilson		
The trust must ensure there is ongoing clinical risk assessment undertaken to ensure that children waiting surgery are clinically triaged and prioritised.	9, 12, 17	Improving quality and safety	QS05 Paediatric Services	SRO: Michelle Rhodes Project Lead: Jo Wilson		
The trust must ensure there is an effective process for clinically prioritising patients for admission.	9, 12	Improving quality and safety	QS05 Paediatric Services	SRO: Michelle Rhodes Project Lead: Jo Wilson		
Outpatients						
The trust must ensure patients have complete and recorded outcomes to ensure there are documented decisions and actions in relation to their treatment and care.	9, 12	Productive services	Outpatient Improvement Programme	SRO: Mark Brassington project lead Yaves Lalloo		
The trust must ensure the percentage of staff completing mandatory training is in line with trust targets.	18	Developing the workforce to meet future needs		SRO: Martin Rayson Project Lead:		
The trust must ensure there is ongoing and sufficient oversight of the risk register	17	Improving quality and safety	QS02 Corporate Governance	SRO: Kevin Turner Project Lead: Sally Sealy		
The trust must ensure data is used in a way that drives significant improvement of the services, including constitutional standards and waiting list.	9, 12	productive services	Outpatient Improvement Programme	SRO: Mark Brassington project lead Yaves Lalloo		