

Meeting Title	Board of Directors		
Date	13.9.18	Agenda item	Bo.9.18.13

CQC Compliance Actions: Update

Presented by	Tanya Claridge, Director of Governance and Corporate Affairs		
Author	Tanya Claridge, Director of Governance and Corporate Affairs		
Lead Director	Tanya Claridge, Director of Governance and Corporate Affairs		
Purpose of the paper	This paper has been written to provide an update to the Board of Directors in relation to the Trust’s response to the compliance actions required by the CQC following their unannounced and well led inspections		
Key control	This paper is a key control for the strategic objectives to provide outstanding care for patients and to be in the top 20% of NHS employers		
Action required	To note and gain assurance		
Previously discussed at/ informed by			
Previously approved at:	Committee/Group	Date	
Key Options, Issues and Risks			
The CQC published the report relating to its inspection of services at Bradford Teaching Hospitals NHS Foundation Trust on 15 th June 2018. The CQC identified a number of compliance actions that the Trust was required to take, and required the submission of an action plan. This action plan was provided to the Board of Directors at its July meeting and subsequently provided to the CQC on the 12 th July.			
Analysis			
The CQC compliance action plan is being implemented across the Trust. The compliance actions identified in the inspection report were core service specific, but a decision was made by the Executive Management Team Operational Meeting to implement the related objectives across the Trust.			
Recommendation			
The Board of Directors is asked to note the content of this report and gain assurance in relation to the progress with the action plan.			
The Board of Directors should receive a full report relating to general Trust progress and its approach to assuring compliance with fundamental standards across the Trust at the November meeting			

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Risk assessment						
Strategic Objective	Appetite (G)					
	Avoid	Minimal	Cautious	Open	Seek	Mature
To provide outstanding care for patients		g				
To deliver our financial plan and key performance targets			g			
To be in the top 20% of NHS employers			g			
To be a continually learning organisation				g		
To collaborate effectively with local and regional partners					g	
The level of risk against each objective should be indicated. Where more than one option is available the level of risk of each option against each element should be indicated by numbering each option and showing numbers in the boxes.	Low		Moderate	High	Significant	
	Risk (*)					
Explanation of variance from Board of Directors Agreed General risk appetite (G)	This paper provides positive assurance that the Trust is addressing the compliance actions identified by the CQC in a timely way. The risk posed in relation to the relevant strategic objectives has been assessed in this context					

Risk Implications (see section 4 for details)	Yes	No
Corporate Risk register and/or Board Assurance Framework Amendments	▪	
Quality implications	▪	
Resource implications		▪
Legal/regulatory implications	▪	
Diversity and Inclusion implications		▪

Regulation, Legislation and Compliance relevance
NHS Improvement: Risk assessment framework, quality governance framework, code of governance , annual reporting manual
Care Quality Commission Domain: <i>Safe, caring, effective, responsive, well led</i>
Care Quality Commission Fundamental Standard: All
Other (please state):

Relevance to other Board of Director's Committee:					
Workforce	Quality	Finance & Performance	Partnerships	Major Projects	Other (please state)
▪	▪				

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1 PURPOSE/ AIM

This paper has been written to provide an update to the Board of Directors in relation to the Trust's response to the compliance actions required by the CQC following their unannounced and well led inspections

2 BACKGROUND/CONTEXT

The Care Quality Commission (CQC) monitor, inspect and regulate services to make sure they meet fundamental standards of quality and safety and then publish what they find, including performance ratings to help people choose care. The CQC sets out what good and outstanding care looks like and they make sure services meet fundamental standards below which care must never fall. The CQC have a wide set of powers that allow them to protect the public and hold registered providers and managers to account. The CQC have an enforcement policy that:

- Protects people who use regulated services from harm and the risk of harm, and to ensure they receive health and social care services of an appropriate standard.
- Hold registered providers and managers to account for failures in how the service is provided.

In January 2018 the CQC undertook an unannounced inspection of the following core services: maternity, urgent and emergency care, medicine and care of older people and surgery. This unannounced inspection was followed by an announced well led inspection in February 2018. The CQC published the report relating to its inspection of services at Bradford Teaching Hospitals NHS Foundation Trust on 15th June 2018. The CQC identified a number of compliance actions that the Trust was required to take, and required the submission of an action plan. This action plan was provided to the Board of Directors at its July meeting and subsequently provided to the CQC on the 12th July.

3 PROPOSAL

The CQC compliance action plan is being implemented across the Trust. The compliance actions identified in the inspection report were core service specific, but a decision was made by the Executive Management Team Operational Meeting to implement the related objectives across the Trust. The action plan, together with a progress update is attached as Appendix 1 to this paper.

4 RISK ASSESSMENT

There are currently no risks identified with the conduct, effectiveness or outcome of the implementation of the action plan. Delivery of this action plan is key to the mitigation of a number of risks on the Trust's risk register.

5 RECOMMENDATIONS

The Board of Directors is asked to note the content of this report and gain assurance in relation to the progress with the action plan.

The Board of Directors should receive a full report relating to general Trust progress and its approach to assuring compliance with fundamental standards across the Trust at the November meeting

6 Appendices

Appendix 1: CQC Compliance action plan update August 2018