

## CQC Registration Annual Assurance

**Trust Board**  
**28 September 2023**

<b>Presented for:</b>	Information and assurance
<b>Presented by:</b>	Lucy Atkin, Head of Quality Governance
<b>Author:</b>	Lucy Atkin, Head of Quality Governance
<b>Previous Committees:</b>	None

<b>Our Annual Commitments for 2023/24 are:</b>	
Effectively develop and deploy new assets (buildings, equipment, IT)	
Reduce healthcare associated infections	
Improve staff retention	
Deliver the financial plan	
Reduce average length of stay by 0.5 days per patient	
Achieve the Access Targets for Patients	
Support a culture of research	

<b>Risk Appetite Framework</b>				
<b>Level 1 Risk</b>	<b>(✓)</b>	<b>Level 2 Risks</b>	<b>(Risk Appetite Scale)</b>	<b>Impact</b>
Workforce Risk				
Operational Risk				
Clinical Risk	✓	Patient Safety & Outcomes Risk - We will provide high quality services to patients and manage risks that could limit the ability to achieve safe and effective care for our patients.	Minimal	Moving Towards
Financial Risk				
External Risk	✓	Regulatory Risk - We will comply with or exceed all regulations, retain its CQC registration and always operate within the law.	Averse	Moving Towards

<b>Key points</b>	
1. This report provides an annual update on compliance with CQC standards and the outcomes of CQC visits, inspections and engagement during the year 2022/23.	Assurance
2. The Trust's current registration status is registered with the CQC without conditions (compliant).	Assurance
3. There has been no routine (planned) or responsive (unannounced) visits by the CQC in 2022/23.	Information
4. The Trust continues to engage with CQC through monthly engagement meetings and regular enquiries.	Information

## 1. Summary

This report provides an annual update on compliance with CQC standards, and the outcomes of CQC visits, inspections and engagement during the year 2022/23.

## 2. Background

Leeds Teaching Hospitals NHS Trust was required to register with the Care Quality Commission (CQC) under Section 10 of The Health and Social Care Act 2008 from 1 April 2010. The Trust is required to be compliant with the fundamental standards of quality and safety.

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.

### 2.1 CQC new strategy for the changing world of health and social care

In 2021 the CQC set out its 'new strategy for the changing world of health and social care'. The CQC's revised methodology includes a single assessment framework. This will replace the current four separate frameworks. It will be used to assess all service types and as the basis for assessing local authorities and integrated care systems.

CQC have confirmed that ratings and five key questions will stay central to our approach and they will replace existing key lines of enquiry and prompts with 'quality statements'. They will move away from separate 'monitor', 'inspect' and 'rate' steps and assess providers in a more flexible way to provide an up-to-date view of quality.

On 31 July 2023 CQC announced key dates for the roll-out of our new provider portal and regulatory approach. The following changes will take place:

#### Provider portal

In August, CQC will invite the first group of health and social care providers to log onto a new provider portal. They'll be able to explore its functionality as part of a new and updated range of digital services that make it easier to interact with CQC.

The new portal will be rolled out to all providers in phases from September. Each provider will be invited onto the portal with their login details and guidance on how to use it.

Getting digital services right is important to CQC. The aim is to streamline how data is collected to support the new approach to regulation, this will help CQC assess in a smarter, more consistent way. The new portal plays a large part in helping to make that a reality and will make it easier for providers to share information.

### New regulatory approach

In November 2023, CQC will start to use [their new assessment framework](#). This will be rolled out regionally, starting with providers in the South of England. Any assessments from November onwards for providers in the South will be carried out using the new assessment framework. CQC will still schedule assessments by considering the level of risk, so not all providers will need to have an immediate assessment.

In other regions, they will continue to use the current assessment framework for now. The new assessment framework will be rolled out to other regions by the end of March 2024, and we will provide further updates as each region moves over to using the new framework. The link below will provide further detail:

[\(147\) Find out how CQC is changing - YouTube](#)

### 3. Trust position 2022/23

The Trust's current registration status is registered with the CQC without conditions (compliant).

#### Ratings for the whole trust

Safe	Effective	Caring	Responsive	Well-led	Overall
Requires improvement ↔ Feb 2019	Good ↔ Feb 2019	Good ↔ Feb 2019	Good ↔ Feb 2019	Good ↔ Feb 2019	Good ↔ Feb 2019

#### Rating for acute services/acute trust

	Safe	Effective	Caring	Responsive	Well-led	Overall
St James's University Hospital	Requires improvement ↔ Feb 2019	Good ↔ Feb 2019	Good ↔ Feb 2019	Requires improvement ↔ Feb 2019	Good ↔ Feb 2019	Requires improvement ↔ Feb 2019
Leeds General Infirmary	Requires improvement ↔ Feb 2019	Good ↔ Feb 2019	Good ↔ Feb 2019	Good ↑ Feb 2019	Good ↔ Feb 2019	Good ↑ Feb 2019
Chapel Allerton Hospital	Good ↔ Feb 2019	Good ↔ Feb 2019	Good ↔ Feb 2019	Good ↔ Feb 2019	Good ↔ Feb 2019	Good ↔ Feb 2019
Leeds Dental Institute	Good Feb 2019	Outstanding Feb 2019	Good Feb 2019	Good Feb 2019	Outstanding Feb 2019	Outstanding Feb 2019
Wharfedale Hospital	Good Sept 2016	Good Jul 2014	Good Jul 2014	Good Jul 2014	Good Jul 2014	Good Sept 2016
<b>Overall trust</b>	Requires improvement ↔ Feb 2019	Good ↔ Feb 2019	Good ↔ Feb 2019	Good ↔ Feb 2019	Good ↔ Feb 2019	Good ↔ Feb 2019

#### 4. CQC Inspections/Visits 2022/23

There has been no routine (planned) or responsive (unannounced) visits by the CQC in 2022/23.

#### 5. CQC Engagement

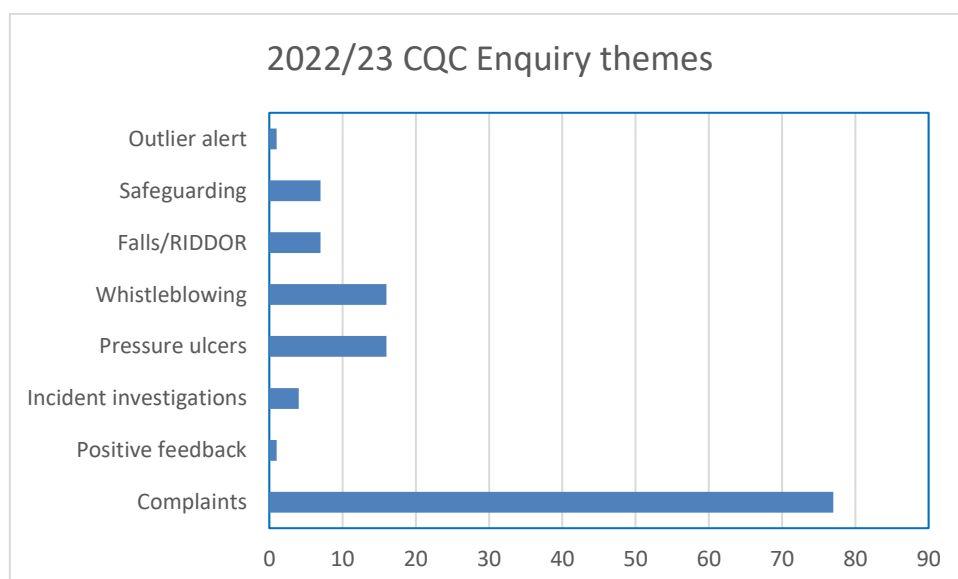
The Trust continues to engage with the CQC through monthly meetings to discuss a range of topics and themes identified by the Trust CQC Inspector. These have included, but not limited to, Reason to Reside Patients, Infection Prevention and Control, Patients Awaiting Treatment, Learning from Incidents, Exception Surge Area Plan, Maternity Services, Freedom to Speak Up annual survey. The meetings are attended by the Trust Deputy Chief Nurse, Director of Quality and Head of Quality Governance, others are invited to attend as required.

In August 2022 CQC conducted an in-person engagement meeting and visited the Emergency Department and Wards J09, J21 and J34 at St James University Hospital whilst on site. As part of the visit to the Emergency Department CQC conducted unplanned focus groups with staff. During these staff raised concerns regarding staffing and skill mix and capacity within the department. The Trust provided evidence of staffing and capacity planning, incident reporting and an engagement plan with staff in the Emergency Department. CQC closed the enquiry following the Trust response.

#### 6. 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. These have been discussed with the local CQC engagement lead and have been resolved in conjunction with CSU's. These enquiries continue to be monitored and tracked by the Trusts Quality Team in conjunction with the CQC engagement lead.

In 2022/23 there have been 129 enquiries received from the Trust CQC Inspector. A response and evidence has been provided to the CQC and all enquiries have been closed. The Quality and Safety assurance group receives a quarterly report on CQC activity.



## 7. Preparation for Future Inspection Visits

**Quality Framework Review process** - The Trust has continued to support CSU's in core services in preparation for future inspections. The revised specialty and CSU governance framework has been implemented, set out within the framework of the 5 key domains (lines of enquiry): Safe, Effective, Caring, Responsive and Well-led. This framework has also been applied to the quality and performance report to the Board and sub-committees, as well as to ward-level metrics (perfect ward).

A quality and safety framework has been developed and embedded to support CSUs in their preparations for the next CQC visits. This is reviewed twice yearly with each CSU in a Quality Framework Review meeting led by the Medical Director (Quality and Risk) and the Director of Quality with the CSU Tri-Team. The reviews include a self-assessment against each of the 5 quality domains (Safe, Effective, Caring, Responsive and Well-led) undertaken by CSUs together with a review of performance against a range of quality metrics.

**Nursing Quality and Safety Review annual programme** – The Trust continues to support CSU's in preparation for CQC Inspection through an annual programme of nursing quality and safety reviews which aim to provide assurance that nursing quality and safety standards are being met or where key performance indicators fall outside parameters a firm recovery plan is in place. The programme is coordinated by the Associate Director of Nursing with support from the Head of Nursing Professional Practice and Safety Standards. Each bed holding CSU will attend a biannual Nursing Quality and Safety Review meeting chaired by the Deputy Chief Nurse with support from the Director of Nursing and Associate Director of Nursing (Corporate). The Head of Nursing and representatives from the CSUs will be invited to attend the meeting.

Part of this is the Quality and Safety review programme developed with the aim of improving the quality of care on inpatient wards. To date 64 wards across six CSUs have been reviewed and measured against a standardised toolkit designed to support the Quality and Safety Review aligned to the five core domains used by the Care Quality Commission (CQC) to determine. The service receives an outcome rating and good practice themes and trends and areas for improvement are identified and shared

In 2023/24 the Nursing Quality and Quality Framework meetings will combine to ensure the process remains lean and supportive to CSUs.

### **CQC inspection and Domain presentations at Quality Governance Forum**

As part of the Quality Teams standard work programme a series of presentations have been delivered to the Quality Governance Forum which has membership from all CSUs Quality Leads. An overview of each domains key lines of enquiry and common points of note for CQC reports have been shared along with presentations of preparing staff for inspection and inspection processes.

### **National Maternity Inspection programme**

In Summer 2022 the CQC announced they were commencing a new maternity inspection programme aimed to help Maternity Services improve both at local and national levels and give an overview of the quality and safety of maternity services across England.

The Maternity Services Team, supported by the Corporate Teams, commenced a programme of informal visits to review wards, units and departments and to ask staff key questions that CQC would ask on Inspection.

In December 2022 the CSU commenced gathering evidence against a mock maternity focused data request in preparation of inspection.

## **8. Financial Implications**

There are no financial implications detailed within this paper.

## **9. Risk**

The Quality Assurance Committee (QAC) provides assurance oversight of the Trust's most significant risks, which cover the Level 1 risk categories (see summary on front sheet). Following discussion at the QAC meeting there were no material changes to the risk appetite statements related to the Level 2 risk categories and the Trust continues to operate within the risk appetite for the Level 1 risk categories set by the Board.

## **10. Communication and Involvement**

Not applicable.

## **11. Equality Analysis**

Not applicable.

## **12. Publication Under Freedom of Information Act**

This paper has been made available under the Freedom of Information Act 2000

## **13. Recommendation**

The Trust Board is asked to note the annual report on CQC registration and the assurance provided.

**Lucy Atkin**  
**Head of Quality Governance**  
**August 2023**