

Update regarding the CQC Well-led inspection

Public Board
31 July 2025

Presented for:	Position statement
Presented by:	Professor Phil Wood, Chief Executive Officer
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Previous Committees:	NONE

2025/26 Commitments	Category	✓
Support our patients to get home a day sooner	Care	✓
Be in the top 25% trusts for patient experience and efficiency in outpatient	Quality	✓
Support each other to act with kindness and compassion	Team	✓
Recognise and act upon moments that matter to our patients	Compassion	✓
Support our staff to spend every pound wisely	Finance	✓
Make best use of our estate, equipment and digital assets	Resources	✓
Reduce our carbon footprint by creating greener patient pathways	Sustainability	✓

Risk Appetite Framework				
Level 1 Risk	(✓)	Level 2 Risks	(Risk Appetite Scale)	Impact
Workforce Risk	✓	Workforce Retention Risk - We will deliver safe and effective patient care, through supporting the training, development and H&WB of our staff to retain the appropriate level of resource to continue to meet the patient demand for our clinical services	Cautious	Moving Towards
Operational Risk	✓	Business Continuity Risk - We will develop and maintain stable and resilient services, operating to consistently high levels of performance.	Cautious	Moving Towards
Clinical Risk	✓	Capacity Planning Risk - We will ensure that capacity is planned to meet the demand for elective and non-elective (acute) admissions to our hospitals, managing this risk to provide safe treatment and care to our patients.	Cautious	Moving Towards
Financial Risk	✓	Financial Management & WRP - We will deliver sound financial management and reporting for the Trust, aiming to at least break even, with no material variances to forecast.	Cautious	Moving Towards
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

Key points	
1. The Trust were notified on 18 May 2025 of CQC's intention to carry out a provider level inspection of 'well-led' on 17, 18 & 19 June 2025.	Information
2. Prior to inspection the CQC requested the Trust to submit evidence to ensure they gathered all the information needed and provided a schedule of interviews. CQC also held focus groups with staff prior to the inspection.	Information
3. At the end of the onsite inspection initial feedback was provided by the CQC inspection team to the Trust Executives. Written feedback was provided on 20 June 2025, included as Blue Box 10.3(ii).	Information
4. The Trust Board are asked to note the position statement on the CQC well-led inspection and discuss areas for improvement highlighted within the feedback letter.	Discussion

1. Summary

This paper provides a position statement following the care Quality Commission (CQC) trust Wide well-led inspection. It provides an overview of activity that has taken place and a summary of initial feedback following the inspection.

2. Background

The CQC assess the well-led domain at trust-wide level for NHS trusts and foundation trusts, as well as inspecting the well-led domain within each core service level inspection.

CQC inspects Trusts well-led domain to assess the leadership, governance, and culture of the organisation, ensuring it's effectively managed and driving quality improvement. This includes evaluating the Trust's vision, strategy, governance, and how well it engages with staff and patients. The goal is to ensure a well-led organisation can deliver safe, effective, and compassionate care.

3. CQC Inspection of Trust wide well-led

The Trust were notified on 18 May 2025 of CQC's intention to carry out a provider level inspection of 'well-led' on 17, 18 & 19 June 2025.

For the purpose of the inspection, CQC requested the Trust to submit evidence in advance of the inspection to ensure they gathered all the information needed and a schedule of interviews was provided.

CQC also held focus groups with the following staff groups prior to the inspection:

- Band 5/6 registered nurses
- Band 7 & 8 registered nurses
- Resident Doctors
- Consultants

The inspection commenced on 17 June 2025, the Trust were invited to give a presentation to the well-led inspection team at the start of the on-site inspection as an opportunity to present the vision and strategy for the organisation, give an overview of performance and plans and share our self-assessment of leadership capacity and capability.

During the onsite inspection the CQC team conducted interviews, requested additional information and held a focus group with members from the different Staff Networks and attended the Clinical Directors Forum. Where members of Trust staff requested to speak with the CQC team this was also facilitated.

At the end of the onsite inspection initial feedback was provided by the CQC inspection team to the Trust Executives. Written feedback was provided on 20 June 2025, this letter is included within the Board papers as blue box 10.3 (ii).

Key points of note from the initial feedback are:

- There is a shared vision, direction and values, with a longstanding commitment to the values embodied by the Leeds Way;
- Most senior leaders demonstrated a positive compassionate culture, and most were visible within the organisation;
- There were opportunities to further develop the executive team and review the board dynamics and function with the appointment of a new chair;
- Organisational and governance structures would benefit from a review and refresh and there was a lack of consistency in escalation and reporting both from the CSU's and through executive mechanisms and associated board committees;
- Concerns were identified relating to a perceived/real culture about the organisation's balance between quality and finance, with a skew toward finance over quality;
- Interviews and a review of equality, diversity and inclusion matters are still ongoing. In particular, related to the allegations of racism and bullying that CQC have received;
- There was strong partnership working with stakeholders, particularly within place and region;
- Work on addressing health inequalities was developing, including data driven analysis to understand and improve health outcomes for both patients and staff.;
- There was an embedded improvement methodology (the Leeds Improvement Method) however, cross organisational learning could be improved;
- There was positive leadership and documented initiatives regarding a green agenda, with great examples shared with us which had been suggested from front line staff.

CQC thanked the Trust for the arrangements made to help organise the inspection, and for the co-operation that they experienced from staff, noting they were able to have open and honest conversations, which enabled both an effective dialogue between the Trust and inspection process.

The Trust are awaiting a draft inspection report, expected in early August 2025. Once received the Trust will have the opportunity to check the factual accuracy of the report before the final report is published.

4. Financial Implications

There are no financial implications within this paper.

5. Risk

The Risk Management Committee 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 Risk Management Committee 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.

However, following the publication of the Maternity and Neonatal Services reports and receipt of the regulatory breaches a corporate risk has been added to the corporate risk register.

6. Communication and Involvement

The Trust have provided regular communication to staff and stakeholders regarding the well-led inspection and initial feedback.

7. Equality Analysis

Once published the report will provide feedback on the Trust systems and processes in place to eliminate the negative impacts and maximise the positive impacts or opportunities for promoting equality. This will be used to improve and strength equality within the Trust.

8. Publication Under Freedom of Information Act

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

9. Recommendation

The Trust Board are asked to note the position statement on the CQC Well-led inspection and discuss areas for improvement highlighted within the feedback letter.

10. Supporting Information

The following papers make up this report:

- 10.3(ii) Blue Box CQC letter – feedback to Well-led review

Magnus Harrison
Chief Medical Officer
10 July 2025