Executive Summary

This report describes:

- the outcome of the CQC Inspection in April 2016;
- the enforcement action advised by CQC under section 31 of the Health and Social Care Act;
- the immediate actions taken by the Trust;
- the serving of a section 29a, Health and Social Care Act, Warning Notice by CQC on the Trust, published on 20th June;
- the Safety and Quality Improvement Plan developed by the Trust in response to the findings of the section 29a Warning Notice;
- the Trust communications to staff and stakeholders in response to the Warning Notice.

Action required by the Board

The Board is asked to:

- note the actions taken since the Board meeting on 13th June;
- note the communications with staff and stakeholders;
- discuss the Quality and Safety Improvement Plan; review progress with the actions identified in the Plan; discuss risks to delivery of the Plan; and agree remedial work where progress is not on track to deliver.
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<th>Legal implications</th>
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| Appendices         | 1.CQC statement  
                      2.CEO message to staff  
                      3.Trust media statement  
                      4.Letter to stakeholders  
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CQC inspection feedback

Following the CQC inspection between 5th and 8th April, CQC provided initial verbal feedback to the Trust, further summarised in a letter to the Trust on 13th April. This letter highlighted concerns around patient safety, privacy and dignity, fire safety and a disconnection between the Board and clinical directorates. The Chief Executive responded to this letter on 15th April, detailing the immediate actions taken by the Trust following the inspection, and the further work planned to drive up quality and ensure clinical and financial sustainability.

Possible urgent enforcement action under section 31 of the Health and Social Care Act

On 25th April, CQC wrote to the Trust advising of possible urgent enforcement action under section 31 of the Health and Social Care Act. This letter advised the Trust of a number of patient safety concerns in the Emergency Departments at the Royal Sussex County Hospital and Princess Royal Hospital and required action by the Trust in 11 areas.

The Chief Executive submitted the Trust action plan in response to this letter on 29th April and has submitted weekly updates on this action plan to CQC, NHS Improvement, and the Board of Directors through the Friday Envelope.

Section 29a Warning Notice

On 6th June, CQC served the Trust with a section 29a Warning Notice.

The Warning Notice concerned:

- Systems to assess, monitor and mitigate risks to people receiving care and treatment as inpatients and outpatients
- Systems to assess, monitor and improve the care and treatment, privacy and dignity of people attending hospital as inpatients and outpatients
- Systems to assess, monitor and ensure patient treatment times were met in line with national timescales

The Warning Notice requires significant improved in the areas identified above by 30th August. CQC also criticised the effectiveness of the Board in addressing these issues. The CQC press release is at appendix 1.

The Board discussed the Warning Notice and its findings at an extraordinary Board meeting on 13th June, approved the Trust response to the Warning Notice and received the draft framework for the Quality and Safety
Improvement Plan developed to address the issues identified in the CQC Warning Notice.

Subsequent to the Board meeting a comprehensive communications plan was developed. This included a CEO message to staff (appendix 2) and Trust media statement (appendix 3) which were published on 20th June; and the individual briefing and communication with stakeholders (appendix 4).

Members of the Senior Management Team, the Chairman and Non-executive Directors undertook a comprehensive schedule of visits to sites across the Trust on 20th June to provide staff with support and to answer any questions that they or patients had.

The draft Quality and Safety Improvement Plan was discussed at the Quality and Performance Committee on 23rd June and the Plan is submitted to the Board for discussion (appendix 5).

Progress in delivering the Plan will be monitored by the weekly CQC Steering Group and supported through the PMO. It will be reported monthly to the Quality and Performance Committee and the Board. This will link to the Quality and Safety Programme being developed as one of the Trust 4 key programmes.

Recommendation

The Board is asked to:

- note the actions taken since the Board meeting on 13th June;
- note the communications with staff and stakeholders;
- discuss the Quality and Safety Improvement Plan; review progress with the actions identified in the Plan; discuss risks to delivery of the Plan; and agree remedial work where progress is not on track to deliver

Dr Gillian Fairfield  
Chief Executive

Wendy Cookson  
Improvement Director

June 2016