

SUMMARY REPORT



Plymouth Health and Adult Social Care Overview and Scrutiny Committee

25th October 2018

Subject	University Hospitals Plymouth NHS Trust CQC Action Plan: Update on actions related to the two Warning Notices
Prepared by	Julie Morgan, Head of Audit, Assurance and Effectiveness
Approved by	Kevin Baber, Chief Operating Officer
Presented by	Kevin Baber, Chief Operating Officer and Julie Morgan, Head of Audit, Assurance and Effectiveness

Purpose

An overview of the key findings of the 2018 Care Quality Commission (CQC) Inspection Report and the action being taken in response was presented to the September meeting of the Plymouth Health and Adult Social Care Overview and Scrutiny Committee. Further to this presentation, the Committee requested a progress update on the CQC Action Plan and the two Warning Notices at its October meeting in advance of the CQC's 26th October deadline for achieving significant improvement.

Decision	
Approval	
Information	
Assurance	●

Corporate Objectives

Improve Quality	Develop our Workforce	Improve Financial Position	Create Sustainable Future
●			

Executive Summary

University Hospitals Plymouth NHS Trust was inspected by the CQC in April – May 2018. In addition to the Inspection Report which contained a number of Requirement Notices, the Trust received two Warning Notices, one for Pharmacy and one for Diagnostic Imaging. These Warning Notices state that:

- Significant improvement is required to ensure that patients suspected of having cancer have timely access to initial assessment, test results and diagnosis in diagnostic imaging.
- Significant improvement is required to ensure that systems and processes for safely managing medicines are operating correctly both within the pharmacy services and across the Trust, and are effectively governed so that people are given the medicines they need, when they need them and in a safe way.

We are required to make these significant improvements by Friday 26th October 2018. The key work streams to address these areas of concern had already started before receipt of the report, and in a number of cases had started before the inspection itself.

An Action Plan was developed in response to the Inspection Report and Warning Notices and submitted to the CQC. Delivery of the Action Plan is subject to a process of internal and external monitoring and reporting. Progress against the actions required to address the two warning notices is being reviewed weekly. Delivery of the remainder of the Action Plan is being overseen by a CQC Post Inspection Project Group monthly. Ongoing assurance is reported internally to Safety and Quality Committee at each meeting and externally to the CQC, NEW Devon Clinical Commissioning Group and to NHS Improvement.

This assurance is now in the form of a Performance Monitoring report. The first report detailing progress for the two Warning Notices was submitted to CQC, NEW Devon Clinical Commissioning Group and to NHS Improvement at the end of September. This has been further updated and is appended at Annex 1.

Quality Impact Assessment

Failure to comply with the Health and Social Care Act 2008 results in the provision of services to patients that fails to meet essential standards of quality and safety.

Financial Impact Assessment

Failure to maintain compliance may incur financial penalties as part of any regulatory action taken by the CQC.

Regulatory Impact Assessment

Failure to comply with the Health and Social Care Act 2008 may result in the issuing of a warning notice, imposition of a condition of registration, suspension or cancellation of registration, or under criminal law, a caution or prosecution.

Equality and Diversity Impact Assessment

Any equality and diversity issues identified in the report will be addressed in our action plan.

Environment & Sustainability Impact Assessment

Not applicable.

Conclusion and Recommendations

The first full update on progress against the CQC action plan in its entirety is due for submission to CQC, NHS Improvement and NEW Devon CCG by 31 October. This update is currently in development.

Improvements have been made in both Pharmacy and Diagnostic Imaging and 44% of the planned actions have now been completed. The programme of improvement for both services continues and will do so beyond the 26th October CQC deadline.

It is recommended that the Committee takes assurance from the progress that we have made and our plans to make further improvement.