

# Update on Care Quality Commission and independent review reports September 2023

**Mission:** Safe, effective, responsive care for all | **Vision:** Unmatched quality of care

# Latest CQC position

#### **Rating for Ambulance Headquarters, Bernicia House**

	Safe	Effective	Caring	Responsive	Well-led	Overall
Overall	Requires improvement Feb 2023	Requires improvement Feb 2023	Good Feb 2023	Requires improvement Feb 2023	Requires improvement Feb 2023	Requires improvement Feb 2023

#### **Rating for ambulance services**

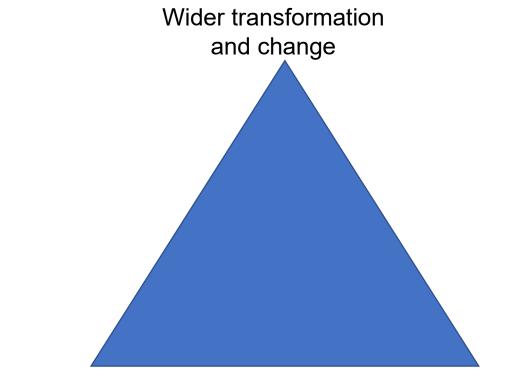
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	Safe	Effective	Caring	Responsive	Well-led	Overall
Emergency operations centre (EOC)	Requires improvement Feb 2023	Requires improvement Feb 2023	Good Feb 2023	Good Feb 2023	Requires improvement Feb 2023	Requires improvement Feb 2023
Resilience	Good Nov 2016	Good Nov 2016	Good Nov 2016	Good Nov 2016	Good Nov 2016	Good Nov 2016
Patient transport services	Good Nov 2016	Good Nov 2016	Good Nov 2016	Good Nov 2016	Good Nov 2016	Good Nov 2016
Emergency and urgent care	Requires Improvement Jun 2023	Requires improvement Feb 2023	Good Feb 2023	Requires improvement Feb 2023	Requires Improvement Jun 2023	Requires Improvement Jun 2023

Mission: Safe, effective, responsive care for all | Vision: Unma

#### **Improvement Plan Overview**

- CQC formally closed regulation 29
   warning notice
- Continued focused on 'must do' and 'should do' CQC actions and monthly reporting
- Actions from Independent Review
- Audit of actions already undertaken to ensure continued progress and 'embedded' practice
- Where appropriate, transition workstreams into BAU
- Wider transformation and change



Independent Review actions

CQC 'must do' and 'should do' actions

# **Outcome of Assurance - CQC**

#### 17 'must do' and 'should do' CQC actions:

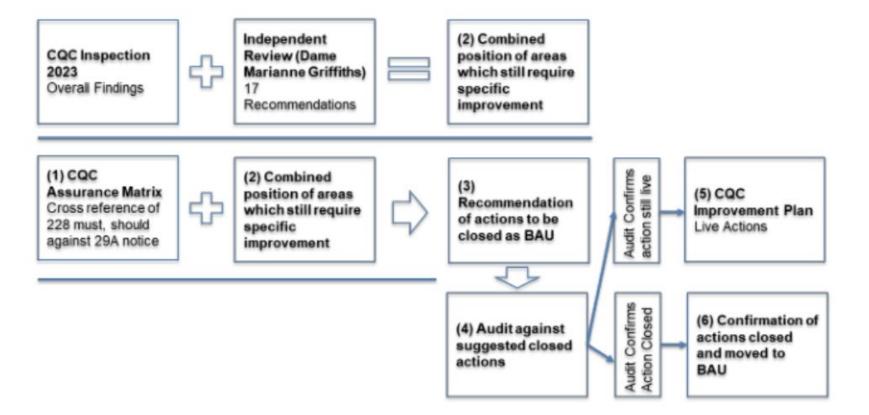
 16 assured as amber, indicating that action has progressed but there is still progress to be made. 1 action is assured as green, which the Trust has robustly addressed.

# 62 actions in Trust CQC workplan:

- 50 actions to close and move to BAU
- 12 actions to remain open and audit

### Independent assurance of NEAS progress on actions

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#### **Progress on medicines management**

- Final work completed to new system of relief shift controlled drugs (awaiting Home Office licence to start).
- Preparation for controlled drugs access for paramedics on relief shift in the central and south divisions
- Review of replacement for the medicines management system to support a station-based model for controlled drugs and full end-to-end management and tracking of drug bags and medicines.
- Continue engagement with other ambulance trusts through the Ambulance Pharmacists Network and by direct contact.

### **Progress on incident reporting**

- Shared our strengthened serious incident process with ICB, NHS England and CQC to ensure it meets with considered best practice.
- Next step will be to introduce the new patient safety incident review framework by the end of 2023-24.
- Strengthened our training for staff at all levels of the organisation to support the transition to the new patient safety incident review framework.
- Patient safety syllabus is mandatory for those who carry out investigations and is Mith the introduction of ICB in 2022, we introduced new processes to ensure the
- timely reporting of serious incidents to our commissioners, and other stakeholders.
  Continue with the recruitment of additional staffing to support our teams: 90-day
- post-rapid process improvement workshop review held on 18 July
- NECS looking at past five years of incident profiles and thematic reviews to help build our patient safety and incident response plan

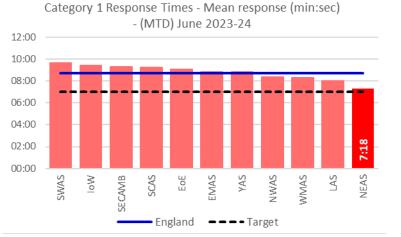
#### **Progress on governance**

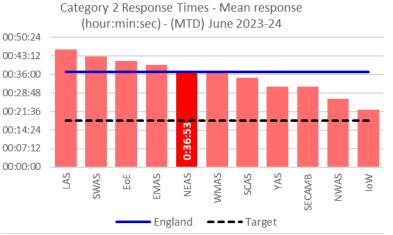
- Introduced a new governance and assurance framework along with the development of associated processes - with external specialist support.
- Clear and accountable decision-making process that improves the escalation of risk, patient safety issues and performance from our frontline teams to the Trust Board.
- Board and executive development programme implemented to facilitate team building and provide challenge and advice to develop an effective team following recruitment of new executives.
- A programme of 'buddying' with directors from Northumbria Healthcare NHS Foundation Trust, rated CQC outstanding, to support the new executive management team, to share best practice and act as a critical friend.

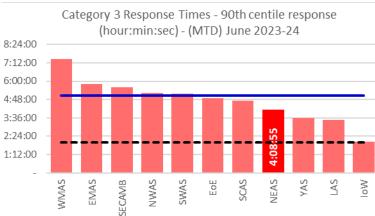
#### **Progress on culture**

- All action plans underway to address speaking up, civility & respect, and staff experience.
- Trebled the size of our Freedom to Speak Up team to ensure staff have opportunity to speak up safely
- Development programme underway with frontline teams in south division, with external specialist support
- Increased communication and engagement with teams via multiple platforms including CEO roadshows
- Colleague voice to be launched for staff have a forum to engage with managers and resolve matters
- Continued expansion of our mental maintenance support for all colleagues

### **Response Time Benchmark Performance June 2023**

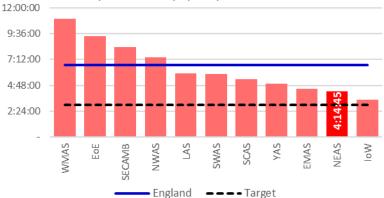






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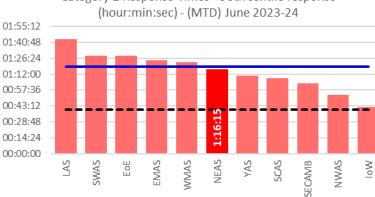
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England ====Target

Category 2 Response Times - 90th centile response

#### Traft June 2023 position



C2 Mean was 36min 53sec for June 2023 and above the plan position. The current annual forecast for C2 mean is 38m 42s, linked to higher than planned demand and handover times.

The capacity plan continues to be achieved. Vehicle hours in Q1 reports an increase of 7% compared to Q1 2022/23.

This has helped to mitigate higher than planned demand including HCP demand.

Average handover times have shown improvements from February 2023 onwards, however, remain higher than planned.

999 mean call answer increased slightly to 13 seconds in June 2023, but continues to achieve the plan position.



# **Independent Review**

# Independent Review – NEAS Assurance Statement

- NEAS Board have fully accepted the findings of the review and wholly commit to deliver on the improvements outlined in the recommendations
- We reiterate again our unreserved apology for the distress caused to the families who have lost loved ones.
- Recommendation 1 unreserved apology to families

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- Recommendation 2 review of governance and SI management (underway / aligned to CQC)
- Recommendation 3 ensure reports are not changed (complete continuous focus)
- Recommendation 4 training for call handlers to escalate to clinicians (complete continuous focus)
- Recommendation 5 coherence and confidence of Quality & Safety directorate (underway new posts/team members, development, RPIWs etc)

# Independent Review – NEAS Assurance Statement

- Recommendation 6 Oversight Committee with family involvement to be arranged by NHS England
- Recommendation 7 senior doctor to support review of deaths

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- Recommendation 8 clear process for coroners team to liaise with HM Coroner (complete since Feb-21)
- Recommendation 9 coroners team processes are separate to internal governance processes (complete

   further enhanced in recent governance review)
- Recommendation 10 settlement agreement process via Remuneration Committee to be followed (complete since Jul-22)
- Recommendation 11 settlement agreements to be scrutinised to ensure best practice (in place via Remuneration Committee since Jul-22)

# Independent Review – NEAS Assurance Statement

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- Recommendation 12 Remuneration Committee to consider requesting a report of settlement agreements prior to April 2020 (will be discussed at next meeting)
- Recommendation 13 external support to be commissioned to support Board and new Directors (executive director development programmes commenced May-23 and Board development commenced July-23)
- Recommendation 14 revised F2SU plans to be implemented ASAP (this commenced in Nov-22 progress previously shared with QIG)
- Recommendation 15 culture plan to be prioritised (underway / aligned to CQC)
- Recommendations 16 / 17 commissioning framework and funding (links to ICB assurance statement)

### **Outcome of Assurance – independent review**

#### 17 actions identified in Independent Review:

 Nine are assured as amber, indicating that action has progressed but there is still progress to be made. Eight are assured as green which the Trust has robustly addressed

 A new combined action plan has been agreed by the Trust Improvement Group



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