

The Queen Elizabeth Hospital King's Lynn NHS Foundation Trust
Care Quality Commission Report – February 2022
Frequently Asked Questions

Q What is the Care Quality Commission (CQC)?

The Care Quality Commission (CQC) is the independent regulator of health and social care quality in England. It makes sure health and social care services provide people with safe, effective, caring, well-led and responsive care, and it encourages care services to improve. The CQC monitor, inspect and regulate services to make sure they meet fundamental standards of quality and safety and it publishes what it finds to help people choose and make decisions about their care.

Q How did the Care Quality Commission (CQC) rate QEH when they visited?

The CQC found significant progress has been made at The Queen Elizabeth Hospital in just three years between 2019 and 2022 and rated the Trust as 'Good' in all of the areas they inspected.

The CQC inspected three core services during their unannounced visit in December 2021 – Medicine, Urgent and Emergency Care (including the Emergency Department) and Critical Care. All three services were rated 'Good' overall.

The inspection team returned in January 2022 to complete a well-led inspection, which has resulted in a 'Good' rating for the Trust, as well as being rated as 'Good' for being effective and caring.

We are delighted to confirm that the Trust has been recommended to be lifted out of special measures. QEH is one of the first Trusts in the country to be recommended to be lifted out of segment 4 of the System Oversight Framework, meaning we no longer require 'mandated intensive support' from our Regulator.

From 23 February you can read more on our [website](#) and download the [CQC's full report](#).

Q What did the CQC find at QEH?

The Deputy Chief Inspector of Hospitals, Fiona Allinson, said: "I am pleased to see significant improvements have been made right across the Trust in the care given to patients resulting in a number of its services being rated 'Good'. More importantly there's been a significant increase in the quality of care being given to people in Norfolk using these services.

"The Covid-19 pandemic brought a number of additional challenges to the NHS, so staff are to be commended for the progress made at this particularly difficult time.

"The leadership team clearly understood the priorities and issues facing the Trust and were focused on making continual and sustained improvements, which is why the rating for how Well-Led the Trust is moves from 'Inadequate' to 'Good'.

"CQC will continue to monitor the Trust, to ensure these fantastic improvements are embedded and further improvements are made."

The CQC report described that: “Staff treated patients with compassion and kindness, respected their privacy and dignity and took account of their individual needs.” It went on to say: “staff felt respected, supported and valued” and “there was a strong focus on quality improvement to improve patients’ care and outcomes” with “the Trust committed to improving services by learning when things went well, and when they went wrong.” It also said that: “communication, inclusion and partnership working were some of the biggest improvements within the Trust.”

Q Where did the CQC find room for further improvement?

There is learning to take from every inspection and this will inform the next stage of our improvement journey.

There are 4 ‘must dos’ and 9 ‘should dos’ in our 2022 report (compared to 206 ‘must’ and ‘should dos’ and condition and warning notices after our 2019 inspection).

The ‘must dos’ for QEH from our latest inspection relate to the timeliness of care for our emergency and elective patients, maintenance of resuscitation equipment and safe and secure storage of patient records and medicines. This is about consistency in each of these areas.

The ‘should dos’ relate to mandatory and safeguarding training compliance for medical staff, consistently recording specialist equipment checks and further improving the physical environment in our Emergency Department (ED), which we already have a plan to address as part of our work to modernise QEH, recognising we now see double the patients each year than our ED was originally designed for.

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Q If we have made so much progress, why aren’t we rated ‘Good’?

The CQC did not inspect several core services that had previously been rated as ‘Requires Improvement’ because this inspection was focused on services where it had previous concerns.

As the CQC inspected three out of nine core services, this meant due to aggregation, the rating of ‘Requires Improvement’ at location level would not have changed. This wasn’t technically possible during this inspection, as you will see is detailed at the front of the report.

We know we have so much more to show the CQC, and we’re aware that not every team had the opportunity to show them just how much we have improved. This is why we have invited the CQC to return to QEH as soon as they are able to inspect the remainder of our services.

We know we have to keep up the momentum and use this as a platform for becoming a ‘Good’ and ultimately an ‘Outstanding’ organisation.

Q What happens next?

We are extremely proud of the way that Team QEH welcomed the CQC when they came to inspect our services, and delighted that the CQC found every area they inspected to be 'Good.'

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We know we have to keep up the momentum and use this as a platform for becoming a 'Good' and ultimately an 'Outstanding' organisation. QEH is an organisation that is very much on the up and well on the way to achieving our vision of being the best rural District General Hospital for patient and staff experience.