



NEAS improvement journey

NENC ICB July 2024



Background

- The CQC inspected NEAS in July and September 2022, issued a Section 29A notice in October 2022, and published their first report in February 2023, and second report in July 2023 following a reinspection of Urgent Emergency Care
- The report of the independent review of NEAS into alleged failures of patient safety and governance, led by Dame Marianne Griffiths was published in December 2022
- NEAS was subsequently moved from Single Oversight Framework (SOF) segment 2 to SOF segment 3 for quality and safety, and subject to increased regulatory scrutiny, combined with additional support from NHS England and NENC ICB

NEAS response

Four Internal workstreams established to address actions with Executive sponsorship and NED assurance. Trust Improvement Group (TIG) created

'Buddy' arrangement with Northumbria Foundation Trust commenced. Board and Executive development programmes established

Independent Oversight Group (IOG) established. NEAS provides regular updates and assurance on work towards independent recommendations

Various independent assurance and analysis undertaken including:

- Aqua well led review
- Review of medicines management
- Independent Audit review of CQC actions

Four workstreams complete initial actions and move into BAU under Trust governance structure

IOG receives final evidence and Chair concludes findings. Internal TIG closed and remaining actions move to BAU

Cultural development, service improvement and change management

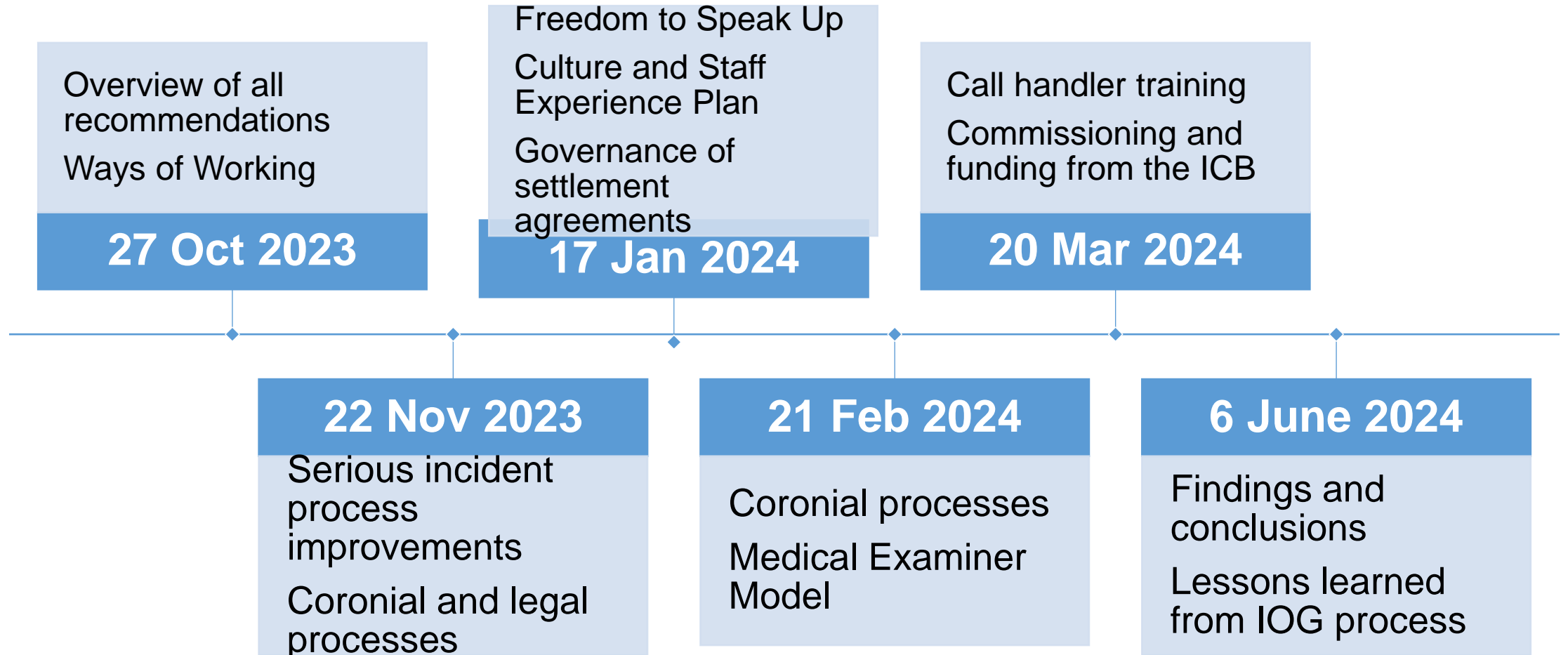
SOF Exit Criteria

- The 'exit criteria' for moving out of SOF 3 into SOF 2 was jointly agreed by relevant parties
- The six exit criteria covered CQC findings and recommendations of the Independent review, and were all linked to quality and safety
- Agendas and monthly reporting to QIG were aligned to the exit criteria, including the Independent Oversight Group (IOG)
- NEAS Board confident we are ready to exit SOF 3

Independent Oversight Group (IOG)

- Established in October 2023 with an Independent Chair
- Task to ensure all 18 recommendations of the independent review are sustainably implemented
- Provide assurance to families and regulators
- Support a high level of public confidence in NEAS services

I^{OG} timeline



Methodology

Importance of learning from the process and sharing beyond NEAS boundaries, with the system and nationally through networks

Opportunities to learn and share was a standing item

Trust wide and systematic in the context of the 2.7 million people served by NEAS

Family engagement in the process Oct – Dec 2023

Extensive review of evidence

Closing position of IOG

- Work of IOG is complete
- NEAS has delivered a significant and sustained programme of work in response to the independent review, working closely with partners
- All recommendations of the independent review have been addressed
- Focus is now on sustaining these as BAU with effective governance and oversight

Opportunities



Future engagement and involvement of patients, communities and members of the public in the work and development of NEAS



Enhanced triangulation between change and impact on staff and patients and the difference it has made to patient and staff experience



Greater visibility of feedback across the Trust to reinforce and support cultural change.

Next steps



Offered to meet the families to discuss my findings



Draft final report shared with NHS England and NEAS for comments of a factual nature



Today's ICB Board overview of progress



NEAS Trust Board to discuss the report and make the report available publicly through its papers

Current CQC ratings

Rating for ambulance services

	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 ↑ Jul 2023	Requires improvement Feb 2023	Good Feb 2023	Requires improvement Feb 2023	Requires improvement ↑ Jul 2023	Requires improvement ↑ Jul 2023

CQC 'Must do' and 'Should do' key actions

Medicines Management

- Significant investment in infrastructure (CCTV, abloy system), and staffing resource
- Improved governance in relation to external supply of medicines
- Sustained improvement in medicines management compliance demonstrated in assurance reporting
- Road map for further future improvements in place

Governance

- Comprehensive re-design of Board to front line governance structures
- New Executive Risk Management Group established supported by revised BAF and risk management arrangements
- Enhanced performance management structures via Executive Integrated Quality Performance Review
- Continue delivery of actions from well-led review

Patient Safety

- Full revision of clinical, quality, and safety and governance structures
- Significant improvements noted in time taken to report an incident, enactment of duty of candour and quality of investigations
- Transition to new PSIRF on 1st April
- Road map for further implementation of PSIRF in place

Culture

- 3 Freedom to Speak Up (FTSU) guardians in place, equivalent to 1 WTE
- 9 FTSU champions spread across the Trust
- 'Green shoots' of improvement in staff survey
- Ongoing implementation of staff culture plan (inclusive of sexual safety, civility and respect and cultural gap analysis)

Key messages

- NEAS initiated a significant improvement programme and has a high level of confidence that we have met the thresholds to exit SOF 3.
- We have requested independent assurance, independent audit, and peer review for several workstreams to ensure full compliance and learning from best practice
- We have remaining work to do as part of our continuous improvement journey.
- Our focus now is on maintaining and improving our performance whilst embedding actions and transforming our services as part of an agreed Trust improvement trajectory

Any Questions?