



## Cover Sheet

Trust Board Meeting in Public: Wednesday 12 July 2023

TB2023.69

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**Title:** CQC Oxford Critical Care Action Plan

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**Status:** For Information

**History:** TME 29 July 2023

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**Board Lead:** Chief Assurance Officer

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Director of Nursing

**Confidential:** No

**Key Purpose:** Assurance

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## CQC Oxford Critical Care Action Plan

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### 1. Purpose

- 1.1. The paper provides the action plan (Appendix 1) developed in response to the findings of the Care Quality Commission (CQC) following their unannounced inspection of Oxford Critical Care (OCC) services on 09, 10 and 11 November 2022.
- 1.2. The process for monitoring implementation of the action plan is outlined.

### 2. Development and Implementation of Action Plan

- 2.1. The Clinical Support Services (CSS) Divisional Team and Clinical Lead and Deputy Matron for OCC have worked together to develop detailed actions to address each of the seven 'should do' recommendations.
- 2.2. The Clinical Lead and Deputy Matron have led discussions on the content of the action plan, at the OCC Consultants meeting and OCC senior nurse meeting respectively. The Trust's Head of Therapies has also been consulted on the specific recommendation relating to Speech and Language Therapist provision.
- 2.3. This plan supports the opening of the beds from 22 to 24 which is the funded establishment for 2023/24.
- 2.4. The Head of Finance for CSS has reviewed the action plan and has identified those that have cost implications, with two actions, namely increasing Speech and Language Therapist provision and providing an outreach team, not within current budget.
- 2.5. The action plan has been presented to Clinical Governance Committee, Critical Care Anaesthetics, Pre-operative, and Resuscitation CAPR Governance Committee (CAPRGC), Clinical Support Services Clinical Governance Committee (CSSCGC). The Trust Management Executive reviewed and supported the action plan at its 29 June 2023 meeting.
- 2.6. Implementation of the actions will be monitored via Trust governance processes including CAPRGC, CSSCGC, Clinical Governance Committee and Trust Management Executive.

### 3. Recommendations

- 3.1. The Trust Board is asked to **note** the draft CQC Oxford Critical Care action plan and the monitoring arrangements in place.

Concern	Action	Divisional Lead (Accountable Lead)	Service Lead (Responsible Lead)	Deadline	Status	Output	Outcome	Cost implications
<b>should do</b>								
Ensure that the staffing skill mix and agency/bank usage meets the requirements as set out in The Faculty of Intensive Care Medicine 'Guidelines for the Provision of Intensive Care Services.' (Regulation 18)	1. Increase cohort numbers for the level 6 and 7 in-house intensive care courses from September 2023 with support from Corporate Education team	Divisional Director of Nursing	Deputy Matron, Oxford Critical Care	30 September 2023	In progress	Aim to at least double cohort numbers from 9 to 18/20	GPICS standards of 50% of staff to have completed post-graduate intensive care course by September 2024. This will facilitate safe expansion of capacity	Cost for backfill: 18 days x 9 NHS shifts x twice a year: Sept & Jan (12 days)
	2. Recruit to four band 6 clinical educator posts to increase educational support to learners at the bedside, particularly with assessing step 2 and 3 competencies			31 July 2023	In progress	Successful recruitment to budgeted establishment for educators		In budget
	3. Implement three different band 6 role pathways, namely unit co-ordination, education and quality improvement, as a retention initiative			30 September 2023	In progress	Reduction in band 6 vacancies and reducing % turnover		In budget
	4. Develop individual personal development plans to progress band 5 nurses to band 6s within two to three years			31 July 2023	In progress	Completed appraisals for all band 5s and objectives set within PDP to outline plan for progression		N/A
	5. Review current staffing skill-mix and implications for current operating model of OCC and present options appraisal to local, directorate, divisional and corporate meetings as required			31 August 2023	In progress	Agreement on safest and most efficient model of care for patients, to maintain capacity and increase skill-mix of nurses		In current budget
	6. Contact each unit in the Shelford Group to establish % compliance with GPICS to share best practice and identify innovative ways of improving skill-mix			31 August 2023	In progress	Output of peer reviews to be presented to local, directorate and divisional meetings to identify areas for improvement		N/A
	7. Extend contracts of five experienced intensive care band 6 long-line agency nurses, known to unit, for the next three months			30 June 2023	Complete	Extension of contracts in collaboration with Trust's Temporary Staffing Manager		Current cost of Soleus
	8. Implement robust way of advertising vacant shifts to substantive staff to reduce reliance on agency and other NHSP staff that do not usually work on the unit			30 June 2023	Complete	Unit staff to have requests to work additional shifts granted		N/A
	9. Commence development of Advanced Clinical Practitioner role within OCC			31 October 2023	In progress	Two trainee ACP roles currently being recruited to, with development programme and supervision being provided by OCC consultants		In current budget
Ensure the unit meets National Institute for Health and Care Excellence guidelines regarding intensive care access to speech and language therapists (SALT)	1. Establish current SALT staffing requirements for the unit, in line with national guidance	Divisional Director of Nursing	Head of Therapies	31 July 2023	In progress	Outline of SALT staffing requirements for 24 beds	Agreed funding to progress or risk assessment which clearly identifies impact of not progressing, with mitigation clearly communicated	Cost implications: 3 FTE Band 6/7
	2. Complete risk assessment on the impact of gap in SALT staffing provision, with an outline of current mitigation in place			31 July 2023	In progress	Completed risk assessment and escalation of risk, recorded on local, Directorate, Divisional risk registers as required		N/A
	3. Develop business case to address gap in SALT staffing provision			31 August 2023	In progress	Completed business case		N/A
	4. Present business case to Divisional and Trust business planning meetings and the required committees to seek approval			30 September 2023	Not yet started	Decision on how business case will be funded or if not, mitigation clearly outlined and communicated with OCC team		N/A
Consider progressing their plans to introduce a critical care outreach team.	1. Analyse data collected from referrals team to characterise the role of outreach.	Divisional Director	Clinical Lead for Oxford Critical Care	31 August 2023	In progress	Analysis to inform requirements for outreach	Develop an outreach team bespoke to OUH over 24-48 months	N/A
	2. Examine outreach models in other trusts			31 August 2023	In progress	Best practice identified and recommended team structure		N/A
	3. Outline resource requirements for developing ACP programme to facilitate delivery of a high quality outreach service.			31 December 2023	Not yet started	Development of business case and progress through local to TME		TBC
Ensure medical staff mandatory training rates meet or exceed the trust target.	1. Identify outstanding training and follow-up with colleagues to ensure completion	Divisional Medical Director	Clinical Lead for Oxford Critical Care	31 May 2023	Complete	Medical staffing training rates to meet Trust policy (85% compliance)	All medical staff remain compliant with mandatory training.	N/A
	2. Allocate administrative support for producing monthly reports on compliance with mandatory training requirements, for presentation and monitoring at local and Directorate meetings			31 July 2023	In progress	Medical mandatory training rates reported and monitored at monthly CAPR Directorate meetings		N/A
Ensure a patient prioritisation document is developed to enable staff to prioritise conflicting patient demands on the unit.	1. Establish local working group to develop patient prioritisation document, with involvement from operations team and divisional colleagues	Divisional Director	Clinical Lead for Oxford Critical Care	31 July 2023	In progress	Working group established with representation from key colleagues	OCC staff have a documented pathway to follow when managing and prioritising patient admissions	N/A
	3. Present final document to local, Directorate and Divisional meetings			31 October 2023	Not yet started	Completed patient prioritisation document		N/A

Concern	Action	Divisional Lead (Accountable Lead)	Service Lead (Responsible Lead)	Deadline	Status	Output	Outcome	Cost implications
<b>should do</b>								
Consider reviewing how teams communicate across the trust structure and implement an improvement plan.	1. Recruit to OCC Head of Improvement role	Divisional Director and Divisional Director of Nursing	Clinical Lead for Oxford Critical Care and Deputy Matron for OCC	30 June 2023	Complete	Offer made to one of three candidates due to be interviewed on 14th June, with provisional start date agreed.	Staff will recognise improvements based on their feedback, recommendations from external reviews will be addressed and effective communication will be evident	In current budget
	2. Terms of reference for Improvement Programme developed and approved by Trust Management Executive			31 July 2023	In progress	Approved Terms of Reference		N/A
	2. Improvement Plan developed in collaboration with OCC staff with information used from exit and stay interviews, staff survey and stakeholder focus groups, as well as recommendations from external reviews such as GIRFT and Thames Valley Critical Care Network			31 July 2023	In progress	Improvement plan informed by feedback from staff and external reviews		N/A
	3. Establish key workstreams from Improvement Plan and prioritise one focused on communication across Trust structure which includes risk management			31 August 2023	Not yet started	Each workstream will have identified lead with clearly defined scope		N/A
	4. Regularly report progress with Improvement Plan to local, Directorate, Divisional and Trust meetings			30 October 2023	Not yet started	Progress reported and escalation if item not on track or further support required		N/A
Ensure local audits are completed in line with the audit schedule and used to assess the quality and safety of the service	1. Recruit to band 6 audit lead nurse	Divisional Director of Nursing	Deputy Matron for OCC	30 June 2023	Complete	Identified lead will co-ordinate audit activity and ensure compliance with schedule	Completion of audits and presentation of results to local, directorate and divisional meetings, to routinely form part of monitoring the quality and safety of the unit	In current budget
	2. Allocate monthly administration time on roster for audit lead to complete monthly audits in line with audit schedule			31 July 2023	In progress	Audit lead to be allocated a minimum of 7.5 hours/month administration time on Healthroster		In current budget
	3. Rationalise and prioritise audits within schedule during transition period from MyAssure to Ulysses			30 June 2023	Complete	Agreed Audit Schedule in place		N/A
	4. Results from audits to be presented to local, Directorate and Divisional clinical governance meetings, with actions to address non-compliance			30 September 2023	In progress	Monthly reporting of audit results and associated actions, to local, Directorate and Divisional governance meetings		N/A