

ENFORCEMENT UNDERTAKINGS

LICENSEE:

North West Anglia NHS Foundation Trust (the Licensee)
Peterborough City Hospital
Edith Cavell Campus
Bretton Gate
Peterborough
PE3 9GZ

DECISION

On the basis of the grounds set out below, and having regard to its Enforcement Guidance, NHS England has agreed to accept from the Licensee varied undertakings in the form of the updated enforcement undertakings specified below, pursuant to its powers under section 106 of the Health and Social Care Act 2012 (“the Act”) and paragraph 11 of Schedule 11 of the Act. The undertakings relating to Operational Performance in Urgent and Emergency care (U&EC) and Cancer Care, replace and supersede the previous document.

GROUNDINGS:

1.0 Licence

1.1 The Licensee is the holder of a licence granted under section 87 of the Act.

2.0 Issues and Need for Action

2.1 NHS England has reasonable grounds to suspect that the Licensee has provided and is providing health services for the purposes of the health service in England while failing to comply with the following conditions of the Licence FT4(5) (a) to (h), FT4(6) (a) to (f).

3.0 Urgent and Emergency Care

- 3.1 It is recognised that the Licensee operates in a system facing significant demand and flow challenges, reflected nationally and regionally. Likewise Urgent and emergency care standards have been greatly affected by the Covid-19 pandemic.
- 3.2 The Licensee continues to breach the 4-hour Access Standard despite targeted support and regional and national escalation. For the period December 2020 to December 2021, the Licensee was consistently in the bottom quartile for Accident and Emergency (A&E) 4-hour performance (with the exception of April 2021) with performance ranging 57-80%; the bottom quartile for Ambulance handovers >30mins (bottom 7% or below) and Ambulance handovers >60mins (bottom 13% or below) showing a deteriorating trend across these metrics since May 2021. 12-hour decision to admit (DTA) performance has also deteriorated since July 2021.
- 3.3 Throughout 2022, the Licensee did not meet the required performance threshold and delivered a performance ranging 46% to 58%.
- 3.4 An unannounced visit was made by the Care Quality Commission (CQC) to the emergency department (ED) in December 2020, following a requirement notice issued in July 2019. Although improvements were noted, the CQC did not undertake a formal reinspection, therefore the notice and 'Requires Improvement' rating remain.

4.0 Cancer Care

- 4.1 It is recognised that cancer standards have also been greatly affected by the Covid-19 pandemic, however the Licensee has remained in the bottom quartile for 2 week waits, from December 2020 to December 2021, with a worsening position (bottom 10% or below) since May 2021. Whilst 62-day performance remained relatively stable until July 2021, it has also deteriorated, with the Licensee being in the bottom quartile and bottom 10% since September 2021.
- 4.2 Throughout 2022, the Licensee did not meet the required performance threshold and delivered 2 week wait performance ranging from 47% to 65% (national standard: 93%), and 62-day performance ranging from 18% to 58% (national standard: 85%).

5.0 Need for Action

- 5.1 NHS England believes that the action which the Licensee has undertaken to take pursuant to these undertakings, is action required to secure that the failures to comply with the relevant requirements of the conditions of Licence do not continue or recur.

UNDERTAKINGS

NHS England and the Licensee has agreed to vary the undertakings previously agreed pursuant to section 106 of the Act:

6.0 Urgent and Emergency Care

- 6.1 In alignment with 2023/24 Operational Planning¹, the Licensee will improve A&E waiting times so that no less than 76% of patients are seen within 4 hours by March 2024 with further improvement in 2024/25. To measure improvement and progress through 2023/24, the April 2023 baseline performance of the Licensee of 63% will be the reference point.
- 6.2 The Licensee will consolidate all existing UEC plans to prioritise the key areas of work and specific actions, understanding the critical path and quantifying the improvement in outcomes expected and associated trajectories (including key delivery milestones) all of which are to be agreed with Cambridgeshire and Peterborough Integrated Care Board (C&P ICB) and NHS England by 31st May 2023.
- 6.3 The plan will specify actions that will be completed by the Licensee to deliver sustainable improvements in operational performance for urgent and emergency care services including the Licensee's performance in relation to 2023/24 planning guidance priorities. Specifically, the Licensee undertakes to consistently improve performance against the standards set out below and meet these standards for four consecutive months:
- the 4-hour standard of patients attending A&E should be admitted to hospital, transferred to another provider, or discharged within four hours;
 - the 12 hours from arrival standard, achieving the national average (for Type 1 admitted patients);
 - the median time in department in line with the national average position (for admitted and non-admitted patients); and,
 - to achieve the national expectation of zero Ambulance handovers of 60mins (or more).
- 6.4 The Licensee should also demonstrate sustained improvement against their own performance for the metrics outlined above for the same period.
- 6.5 The Licensee will keep the plan and its delivery under review and provide appropriate assurance to the Board, System Oversight and Assurance Group and to the C&P ICB through agreed governance arrangements. Any changes to the plan are subject to approval of the agreed governance arrangements.

7.0 Cancer care

- 7.1 In alignment with 2023/24 Operational Planning², the Licensee will continue to reduce the number of patients waiting over 62 days and meet the cancer faster diagnosis standard by March 2024 so that 75% of patients who have

¹ [PRN00021-23-24-priorities-and-operational-planning-guidance-v1.1.pdf \(england.nhs.uk\)](#)

² [PRN00021-23-24-priorities-and-operational-planning-guidance-v1.1.pdf \(england.nhs.uk\)](#)

been urgently referred by their GP for suspected cancer are diagnosed or have cancer ruled out within 28 days. To measure improvement and progress through 2023/24, the April 2023 baseline performance of the Licensee of 63% will be the reference point.

- 7.2 The Licensee will provide a cancer improvement plan, prioritising the key areas of work and specific actions, understanding the critical path and quantifying the improvement in outcomes expected and associated trajectories (including key delivery milestones) all of which are to be agreed with Cambridgeshire and Peterborough ICB (C&P ICB) and NHS England by 31st May 2023.
- 7.3 The plan will specify actions that will be undertaken by the Licensee to deliver sustainable improvements in cancer services including the Licensee's performance in relation to 2023/24 planning guidance priorities. Specifically, the Licensee is expected to achieve progress against the delivery of agreed 62-day backlog plan and to meet the Faster Diagnostic Standard for two consecutive quarters.
- 7.4 The Licensee will keep the plan and its delivery under review and provide appropriate assurance to the Board, System Oversight and Assurance Group and to the C&P ICB through agreed governance arrangements. Any changes to the plan are subject to approval of the agreed governance arrangements.

8.0 Senior Leadership and Programme Management

- 8.1 The Licensee will continue to ensure there is improvement support in place, agreed jointly between the Trust, ICB and Regional team.
- 8.2 The Licensee will implement sufficient programme management and governance arrangements to enable delivery of these undertakings.
- 8.3 Such programme management and governance arrangements must enable the Board to:
 - obtain clear oversight over the process in delivering these undertakings.
 - obtain an understanding of the risks to the successful achievement of the undertakings and ensure appropriate mitigation; and
 - hold individuals to account for the delivery of the undertakings.

9.0 Access

- 9.1 The Licensee will provide NHS England direct access to its advisors, programme leads, and the Licensee Board members as needed in relation to the matters covered by these undertakings.

10.0 Meetings and Reports

- 10.1 The Licensee will:

- attend meetings or, if NHS England stipulates, conference calls, at such times and places, and with such attendees, as is required by NHS England; and
- provide such reports in relation to the matters covered by these undertakings as NHS England may require.

THE LICENSEE

Signed (Chief Executive of the Trust)



Dated: 4 August 2023

NHS ENGLAND

Signed (Chair or member of the RSG)



/Adam Cayley/

Dated: 4 August 2023