

## **UNDERTAKINGS**

### **NHS TRUST :**

University Hospitals Coventry and Warwickshire  
Clifford Bridge Road  
Coventry  
CV2 2DX

### **DECISION:**

On the basis of the grounds set out below and pursuant to the powers exercisable by NHS Improvement under or by virtue of the National Health Service Act 2006 and the TDA Directions, NHS Improvement has decided to accept undertakings from the Trust.

### **DEFINITIONS:**

In this document:

“the conditions of the Licence” means the conditions of the licence issued by Monitor under Chapter 3 of Part 3 of the Health and Social Care Act 2012 in respect of which NHS Improvement has deemed it appropriate for NHS trusts to comply with equivalent conditions, pursuant to paragraph 6(c) of the TDA Directions;

“NHS Improvement” means the National Health Service Trust Development Authority;

“TDA Directions” means the National Health Service Trust Development Authority Directions and Revocations and the Revocation of the Imperial College Healthcare National Health Service Trust Directions 2016.

### **GROUNDINGS:**

#### 1. The Trust

The Trust is an NHS trust all or most of whose hospitals, facilities and establishment are situated in England.

#### 2. Issues and need for action

2.1. NHS Improvement has reasonable grounds to suspect that the Trust 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)(c) and FT4(6)(a) to (f).

2.2. In particular:

2.2.1. The Trust has not met the 4 hour ED standard since Quarter 2 in 2015-2016. The Trust has reported 52 week Referral to Treatment breaches in every month of 2017 so far; their latest trajectories show an average of 34 breaches per month in Q3 of 2017-2018.

2.3. These failings by the Trust demonstrate a failure of governance arrangements including, in particular, failure to establish and effectively implement systems or processes to ensure compliance with healthcare standards binding on the Trust.

2.4. Need for action:

NHS Improvement believes that the action, which the Trust 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 the Licence do not continue or recur.

## UNDERTAKINGS

NHS Improvement has agreed to accept, and the Trust has agreed to give, the following undertakings.

1. Operational performance (Urgent and Emergency Care)
  - 1.1. The Trust will take all reasonable steps to recover operational performance to meet national standards.
  - 1.2. The Trust will produce and submit to NHS Improvement an updated Internal Urgent Care Action Plan to achieve compliance with the A&E standard on a sustainable basis. The plan will be delivered in a timeframe to be decided by NHS Improvement.
  - 1.3. The updated plan will be submitted to NHS Improvement for review and approval by a date to be agreed with NHS Improvement. The Urgent Care Action Plan will include, in particular:
    - 1.3.1. A narrative of the current drivers of performance below the A&E standard;
    - 1.3.2. The Trust's planned actions to improve A&E performance at the Trust. The actions should include realistic assumptions, key performance indicators against each action, resourcing and expected impact on overall A&E performance; and
    - 1.3.3. The Trust's trajectory to deliver the headline A&E standard.

2. Operational Performance (Elective Care)

- 2.1. The Trust will take all reasonable steps to recover operational performance to meet national standards.
- 2.2. The Trust will produce and submit to NHS Improvement an updated 52 Week Breach Action Plan to achieve compliance with NHS Constitutional Standards on a sustainable basis. The plan will be produced in line with a reasonable timeframe to be decided by NHSI.
- 2.3. The updated plan will be submitted to NHS Improvement for review and approval by a date to be agreed with NHS Improvement. The 52 Week Breach Action Plan will include, in particular;
  - 2.3.1. A narrative of the current drivers of performance below the 52 week standard;
  - 2.3.2. The Trust's planned actions to improve RTT performance at the Trust. The actions should include realistic assumptions, key performance indicators against each action, resourcing and expected impact on performance.
  - 2.3.3. The Trust's trajectory to deliver the headline 52 week standard of zero breaches.
- 2.4. The Trust will implement all the actions in the 52 week plan within timescales set out in that plan, unless otherwise agreed by NHS Improvement.
- 2.5. The Trust will take all reasonable steps to work with system partners to develop a system wide action plan and recovery trajectory for addressing performance.
- 2.6. The Trust will continue to work with the Emergency Care Improvement Programme (ECIP) to provide assistance in making recommendations for improvement and will incorporate these into the Internal Urgent Care Action Plan to be submitted to NHS Improvement.
- 2.7. The Trust will report to NHS Improvement on the implementation of the updated plan each month or an alternative frequency if required by NHS Improvement.
- 2.8. The Trust will keep the 52 week breach plan and their delivery under review and provide appropriate assurance to its Board regarding progress towards meeting the requirements.

3. Leadership and governance

3.1. The Trust will co-operate with any leadership and governance review commissioned by NHS Improvement.

3.2. The Trust must ensure that it has in place:

3.2.1. Sufficient and effective Board, management and clinical leadership capacity and capability; and

3.2.2. Appropriate governance systems and processes, to enable it to address the issues specified in paragraphs 1 and 2 effectively.

4. Programme management

4.1. The Trust will implement sufficient programme management and governance arrangements to enable delivery of these undertakings.

4.2. Such programme management and governance arrangements must enable the board to:

4.2.1. obtain clear oversight over the process in delivering these undertakings;

4.2.2. Obtain an understanding of the risks to the successful achievement of the undertakings and ensure appropriate mitigation; and

4.2.3. Hold individuals to account for the delivery of the undertakings.

5. Access

5.1. The Trust will provide to NHS Improvement direct access to its advisors, programme leads and the Trust's board members as needed in relation to the matters covered by these undertakings.

6. Meetings and reports

- 6.1. The Trust will attend meetings or, if NHS Improvement stipulates, conference calls, at such times and places, and with such attendees, as may be required by NHS Improvement.
- 6.2. The Trust will provide such reports in relation to the matters covered by these undertakings as NHS Improvement may require.

Any failure to comply with the above undertakings may result in NHS Improvement taking further regulatory action. This could include giving directions to the trust under section 8 of the National Health Service Act 2006 and paragraph 6 of the TDA Directions.

**THE TRUST**

Signed (Chair or Chief Executive of Trust)

 CEO

Dated

05-11-18

**NHS IMPROVEMENT**

Signed (Member of the Regional Provider Support Group – Midlands and East)

Date



Dale Bywater - ERMD

19/11/18

