

## Summary of board papers – statutory bodies

### Care Quality Commission board meeting: 24 February 2021

For more detail on any of the items outlined in this summary, please find the [full agenda and papers available online](#).

#### Chief executive update

- Organisational priorities and core focus of CQC activity for the first quarter of the calendar year will be to continue planned programmes of work, looking at specific things to address any ongoing risks in the system, to follow up on ad hoc risks and concerns raised by the public and whistleblowers, and to support the system in dealing with COVID-19 and future delivery
- Inspection activity has focused on ensuring residential homes have had their IPC reviewed as part of an inspection. Currently 20.6% of all registered residential homes have been inspected. CQC has prioritised activity on the basis of risk, using the Transitional Monitoring Approach

#### Chief Inspector of Adult Social Care update

- At the request of the DHSC, CQC undertook 1474 IPC inspections, which were carried out across December and January
- Where concerns around IPC policy and effective use of PPE were found, CQC would take regulatory action

#### Chief Inspector of Hospitals update

- CQC has continued to only undertake inspection activity where there is a clear risk to safety.
- CQC is completing a programme of focused inspections of emergency departments for which data and local intelligence suggest patients may be at risk of harm due to safety issues and overcrowding. To date the CQC has inspected ten departments
- The hospitals team has started to monitor trust mass vaccination centres

#### Performance report

- January 2021 recorded the highest volume of whistleblowing information that CQC had received within an 18-month period and this represented a 58% increase compared to January 2020
- As of 9 February 2021, 54% of inspections triggered by risk were in response to information of concern, and 46% of registered locations had regulatory actions

## HEE board meeting: 16 February 2021

For more detail on any of the items outlined in this summary, please find the [full agenda and papers available online](#).

### Chief executive update

- The first meeting of the National People Board was held at the start of the month. This group, co-chaired by Prerana Issar and Dr Navina Evans, will take forward work on the strategic issues and challenges facing NHS people
- During a plenary session on digital leadership at NHS Providers' annual conference Dr Evans stated her priority to encourage HEE to be a 'digital first organisation'. Since then, HEE's board has taken part in its own "digital in a day" session and has now created a Digital Task and Finish Group
- HEE worked with the Department for Health and Social Care to inform the recent White Paper on legislative proposals for a new Health and Care Bill. The White Paper proposes removing Local Education and Training Boards from legislation and encouraging more flexible local arrangements through Regional People Boards

### Mitigating Covid-19's impact on postgraduate medical education and training

- During the first wave, HEE, worked hard alongside colleges and the GMC to ensure doctors in training had the opportunity to help with the pandemic. HEE paused rotations, formalised a re-deployment process, suspended formal educational events and released trainers for service
- HEE data shows that nearly 40% of trainees in wave 2, more than in wave one, have been formally re-deployed. This has a likely impact on progression, including fewer training opportunities which may impact future GP and consultant pipelines. Potential actions to mitigate this include; 'rolling recruitment' to give trainees access to training more than once a year, thereby increasing trust 'fill-rate'; individual assessment of training needs for all final year training doctors, recognising individual experiences; and working with trusts to maximise capacity for training posts

### Nursing students update

- The Nursing and Midwifery Council (NMC) introduced a set of emergency standards enabling final year nursing students to undertake up to 100% of their time in clinical practice. HEE, in collaboration with several stakeholders, published a student guidance document, setting out arrangements for nursing students under the emergency standards
- HEE conducted a 'lost hours' survey to assess the number of students who had experienced disruption to their programme in wave one of the pandemic. Compared to July 2020, there was an increase in the number of final year students in November 2020 who have placement hours to make up and are unlikely to be able to do this without an extension of their studies