

**Report to:** East Sussex Health Overview and Scrutiny Committee (HOSC)

**Date of meeting:** 29 June 2023

**By:** Assistant Chief Executive

**Title:** South East Coast Ambulance NHS Foundation Trust (SECAMB) Care Quality Commission (CQC) Report

**Purpose:** To provide the Committee with an overview of progress made by South East Coast Ambulance NHS Foundation Trust (SECAMB) in the Recovery Support Programme (RSP).

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## RECOMMENDATIONS

The Committee is recommended to:

- 1) consider and comment on the report; and
  - 2) consider whether to request a further report on any of the areas covered in the report.
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### 1. Background

1.1. South East Coast Ambulance NHS Foundation Trust (SECAMB) provides emergency and urgent care services in response to calls from the public and other healthcare professionals across Brighton and Hove, East Sussex, West Sussex, Kent and Medway, Surrey, and parts of North East Hampshire. The Trust operates two emergency operations centres (EOC) that receive and triage 999 calls. The EOC provides ambulance dispatch as appropriate and provides assessment and treatment advice to callers who do not need an ambulance response, a service known as “hear and treat”. SECAMB is also the provider of the NHS 111 service for residents in Kent and Sussex who require urgent care and advice over the phone.

1.2. The Care Quality Commission (CQC) rated SECAMB as inadequate following an inspection in May 2016. The Trust subsequently made a number of improvements over the following years and was eventually rated as good overall and in all domains in August 2019.

1.3. The CQC conducted a focused inspection of the Emergency and Urgent Care services provided by SECAMB in March 2022 to assess how patient risks were being managed across health and social care services during increased and extreme capacity pressures. The CQC also inspected the EOC and 111 service, and inspected the well-led domain for the trust due to concerns about leadership quality and culture in the organisation.

1.4. The CQC published its inspection report on 22<sup>nd</sup> June 2022 and rated the Trust as inadequate in its well-led domain. The overall rating has been suspended whilst the CQC carries out further checks on all the provider’s locations.

1.5. Due to the inadequate rating in the well-led domain, the CQC recommended to NHS England that the Trust be placed into the Recovery Support Programme (RSP).

1.6. NHS provider trusts placed into an RSP by NHS England must produce an Improvement Plan that includes a target timeline for exit from the RSP. NHS England must be satisfied that the agreed exit criteria have been met in a sustainable way and any required transitional support is in place before agreeing that a trust may leave the RSP.

1.7. At its 22 September 2023 meeting, the Committee considered a report providing an overview of SECAMB's CQC report findings, and questioned SECAMB representatives on the Trust's Improvement Plan. At that meeting the Committee requested an update report be brought to this meeting on progress being made towards exiting the RSP.

1.8. This report outlines the Trust's progress in its Improvement Journey. This has been recognised by the CQC which has agreed that the four warning notices issued to the Trust did not require extending. SECAMB continues to participate in NHSE's RSP, with the Trust and the CQC jointly agreeing the two areas for priority development – continued improvement of organisational culture and development of a comprehensive strategy.

1.9. The Trust has also made a number of changes to its senior executive team, including the appointment of Simon Weldon as permanent Chief Executive after Siobhan Melia, the interim Chief Executive, returned to her substantive role as Chief Executive at Sussex Community Foundation Trust.

## **2. Supporting information**

2.1. SECAMB has produced a report for the HOSC attached as **Appendix 1**. The report covers:

- The CQC inspection in February/March 2022
- The Trust's Priorities and Improvement Journey
- Progress made in each of the key areas for improvement (pillars):
  - Quality Improvement
  - Responsive Care
  - People and Culture
  - Sustainability and Partnerships
- Executive Appointments

## **3 Conclusion and reasons for recommendations**

3.1 HOSC is recommended to consider the report and decide whether future updates are needed on any of the areas covered in the report.

**PHILIP BAKER**  
**Assistant Chief Executive**

Contact Officer: Patrick Major, Scrutiny and Policy Support Officer

Tel. No. 01273 335133

Email: [patrick.major@eastsussex.gov.uk](mailto:patrick.major@eastsussex.gov.uk)