



SENT BY EMAIL

Our reference: INS2-12690215621

Tom Abell  
Chief Executive  
East of England Ambulance Service NHS Trust  
Unit 3, Whiting Way  
Melbourne  
Royston  
Hertfordshire  
SG8 6NA

Date: 6 May 2022

CQC Reference Number: INS2-12690215621

Dear Tom

**Re: CQC well led inspection of East of England Ambulance Service**

Following your feedback meeting with myself, Fiona Collier, Inspection Manager, Quentin Colley-Bontoft, Inspector, Beth Malster, interim Inspection Manager, Maureen Choong, Specialist Adviser, Steve Page, Executive Reviewer and Nick Taylor, NHSEI on 5 May 2022, I thought it would be helpful to give you written feedback of our preliminary findings as highlighted at the inspection and given to you and your colleagues Nicola Scrivings, Chair, Emma De Carteret, Director of Corporate Affairs and Performance, Melissa Dowdeswell, Director of Nursing and Kate Hall, Improvement Director at the feedback meeting.

This letter does not replace the draft report we will send to you, but simply confirms what we fed-back on 5 May 2022 and provides you with a basis to start considering what action is needed rather than waiting for the draft inspection report.

Firstly, please can you extend my thanks to all your team for being open and transparent with us during our inspection activity.

**An overview of our preliminary findings**

The preliminary findings that we fed back to you were:

- There has been a lot of investment into coaching and team development to enable the executive team to be confident as one, hold professional challenge and act as exemplars to enable change. We recognised the executive team is still relatively new, and work continues to clarify portfolios and ensure everyone has the capacity required to execute required plans. There are plans

Care Quality Commission  
Citygate  
Gallowgate  
Newcastle Upon Tyne  
NE1 4PA

Telephone: 03000 616161  
Fax: 03000 616171

[www.cqc.org.uk](http://www.cqc.org.uk)

in place for the rest of the organisation in terms of leadership development, however plans have not been enacted as yet.

- There are a number of plans ongoing, however key priorities for the change programme still need to be finalised and agreed on. For instance, the what had been identified, but it was the how will they be delivered that was not clear. The Fit for the Future Programme was in place, however we heard from staff during the core service inspections that they were unaware of this programme. There has also been an acknowledgement from some of the executive team that while engagement events have occurred, staff awareness and buy-in is not at the stage they would like it to be.
- The inspection team heard how staff were now coming forward to escalate concerns and this was the first time staff felt empowered to raise concerns. Professional codes of conduct have been developed and we heard how further work was required and planned to ensure professional behaviours met an expected standard at all levels. It was not finalised and detailed as to how the executive team will monitor and know the culture within the organisation is changing. There was, however, an acknowledgement it will get worse before they get better.
- The infrastructure was in place with reporting lines to support governance processes, but the executive team acknowledged further work was required. There was also a need to ensure governance systems were followed and effective.
- The board assurance framework was discussed at Board level and within committees of the trust board whereby committees were held to account for the relevant sections. Committee chairs spoke about the need to review the quality of papers brought to committees, as well as strengthening the robustness for controls and mitigation.
- There was a new digital structure in place with the use of statistical process charts and the introduction of integrated performance reports at board level. Further work was required around data analysis and intelligence.
- The engagement strategy has recently been developed (although not signed off) and has seen several collaborations to develop this. Executives and non-executives have been aligned to each integrated care system (ICS) to encourage integration, although integration was variable. Additional work was required to engage, involve and support staff, particularly those with protected characteristics.
- There was a recognition continuous improvement methodology was required although this was not present and embedded as yet.

A draft inspection report will be sent to you once we have completed our due processes and you will have the opportunity to check the factual accuracy of the report. I am also copying this letter to Catherine Morgan at NHS England / Improvement.

Could I take this opportunity to thank you once again for the arrangements that you made to help organise the inspection, and for the cooperation that we experienced from you and your staff.

If you have any questions about this letter, please contact me through our National Customer Service Centre using the details below:

Telephone: 03000 616161

Write to: CQC  
Citygate  
Gallowgate  
Newcastle upon Tyne  
NE1 4PA

If you do get in touch, please make sure you quote or have the reference number (above) to hand. It may cause delay if you are not able to give it to us.

Yours sincerely



Zoe Robinson

**Interim Head of Hospitals Inspection**

**c.c.** Nicola Scrivings, Chair of Trust

Catherine Morgan, NHS England / Improvement