

CQC Presentation SECHA Conference November 2017

Movement of KLOEs

- **Safe** – support for people when behaviour challenges: *Moved from Effective*
- **Effective** – processes to ensure no discrimination
- *Moved from Safe*
- **Effective** – organisations working together
- *Moved from Responsive*
- **Effective** – staff working together across organisations *Moved from Responsive*
- **Responsive** – supporting people at the end of their life *Moved from Caring*

NEW KLOEs

- **S1** How do systems, processes and practices safeguard people from abuse?
- **S6** Are lessons learned and improvements made when things go wrong?
- **E1** Are people's needs and choices assessed and care, treatment and support delivered in line with current legislation, standards and evidence-based guidance to achieve effective outcomes?
- **W2** Does the governance framework ensure that responsibilities are clear and that quality performance, risks and regulatory requirements are understood and managed?
- **W3** How are the people who use the service, the public and staff engaged and involved?

Key wording changes

- **S2** How are risks to people assessed and their safety monitored and managed so they are supported to stay safe and their freedom is respected?
- **S4** How does the provider ensure the proper and safe use of medicines?
- **E2** How does the service make sure that staff have the skills, knowledge and experience to deliver effective care and support?
- **E5** How are people supported to have healthier lives, have access to healthcare services and receive ongoing healthcare support?
- **E6** How are people's individual needs met by the adaptation, design and decoration of premises?
- **C1** How does the service ensure that people are treated with kindness, respect, and compassion, and that they are given emotional support when needed?
- **C2** How does the service support people to express their views and be actively involved in making decisions about their care, support and treatment as far as possible?

- **C3** How is people's privacy, dignity and independence respected and promoted?
- **R2** How are people's concerns and complaints listened and responded to and used to improve the quality of care?
- **W1** Is there a clear vision and credible strategy to deliver high-quality care and support, and promote a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people?
- **W4** How does the service continuously learn, improve, innovate, and ensure sustainability?

Inspecting and monitoring services with continued Requires Improvement Ratings

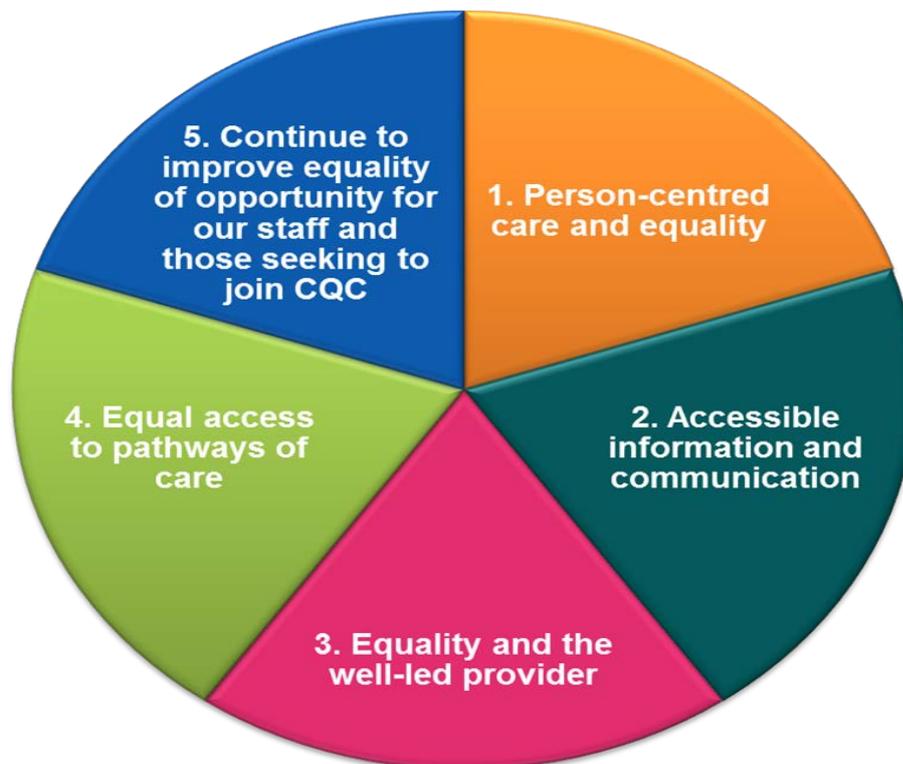
- Scope of requires improvement services is very broad:
 - From 'nearly good' to 'nearly inadequate'
 - Services with some or no breaches of legal requirements
- We can only use our enforcement policy to respond when services are breaching legal requirements
- Our focus will be on services that:
 - Can't sustain a comprehensively good service (e.g. fluctuate between RI and Good)
 - Never improve (e.g. don't have capacity, capability or will to improve)

Using Regulation 17

- Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 relates to a provider's good governance
- Providers must establish effective systems and processes to:
 - Under Reg 17(2)(a) enable the provider to "assess, monitor and improve the quality and safety of the services provided in the carrying on of the regulated activity" and that also includes the quality of the experience of the person using the service
 - Under Reg 17(2)(b) enable the provider to "assess, monitor and mitigate the risks relating to the health, safety and welfare of service users" and others at risk due to the carrying on of the regulated activity
- Reg 17(3) requires the provider to give information to CQC in a written report (when asked) about how and to what extent they are meeting the requirements of the above Regs

Using our powers under section 64 of the Act

- Section 64 of the Health and Social Care Act 2008 relates to CQC’s powers of entry and inspection
- Under this section, CQC has powers to require “persons” to provide it with:
 - Documents; Information; Records (including personal and medical records); or any other items CQC considers necessary to have to carry out its regulatory functions
- “persons” is defined including
 - A person who carries on or manages a regulated activity
 - A person providing adult social services commissioned by an English Local Authority
 - An English Local Authority
- **CQC’s Equality Objectives for 2017-19 – How they will be implemented in ASC inspections**



- Person-centred care and equality - There is strong evidence that person-centred care is the cornerstone of good equality practice and good care, but that leadership is needed to make person-centred care a reality for people in some equality groups.
- Accessible information and communication - All publicly-funded providers must now meet the Accessible Information Standard. This aims to improve the lives and life expectancy of people who need information to be communicated in a specific way.

- Equality and the well-led provider - The link between equality for health and care staff and providing good quality care is now well established. Research shows that good workforce equality practice has financial benefits to health and social care organisations, so is having a positive impact on the use of resources.
- Equal access to pathways of care - People using health and social care services often need to use more than one service, known as a 'pathway of care'. However, people in some equality groups may have difficulty accessing particular care pathways, which could lead to poorer outcomes for them.
- Continue to improve equality of opportunity for our staff and those seeking to join CQC- As the regulator, we assess provider organisations on the way they meet people's diverse needs and how they pay attention to their workforce equality data. It is essential that we invest energy in getting this right for our own workforce, so that we are able to benefit from a diverse staff and in doing so, set an example to those we regulate and ensure high-quality care.
- More information on all the objectives:
<http://intranetplus.cqc.local/Working%20for%20CQC/Equality%20and%20diversity%20for%20staff/Pages/REO2017-19.aspx>

KEY LINKS

Key Lines of Enquiry and Rating Characteristics

<http://www.cqc.org.uk/guidance-providers/adult-social-care/key-lines-enquiry-adult-social-care-services>

How the CQC inspect services, what you see is what we use:

To the page:

<http://www.cqc.org.uk/guidance-providers/adult-social-care/how-we-monitor-inspect-regulate-adult-social-care-services>

To the document:

<http://www.cqc.org.uk/sites/default/files/20171020-how-cqc-regulates-adult-social-care-october-2017.pdf>

Registering the right support

http://www.cqc.org.uk/sites/default/files/20170612_registering_the_right_support_fin al.pdf