

CQC update Quality and Outstanding



Ros Sanderson
North East Conference
14 June 2018

Our purpose and role



- We make sure health and social care services provide people with safe, effective, compassionate, high-quality care and we encourage care services to improve



- Register
 - Monitor and inspect
 - Use legal powers
 - Speak independently
 - Encourage improvement
-
- People have a right to expect safe, good care from their health and social care services

Our current model of regulation

Register

We **register** those who apply to CQC to provide health and adult social care services

Monitor, inspect and rate

We **monitor** services, carry out expert **inspections**, and judge each service, usually to give an overall **rating**, and conduct **thematic reviews**

Enforce

Where we find poor care, we ask providers to improve and can **enforce** this if necessary

Independent voice

We provide an **independent voice** on the state of health and adult social care in England on issues that matter to the public, providers and stakeholders

Ambition for social care: The Mum Test (or Anyone You Love test)

Is it effective?

Is it responsive to people's needs?

Is it safe?

Is it well-led?



Is it caring?

Is it good enough for my Mum?

What we do:

- Set clear expectations
- Monitor and inspect
- Publish and rate
- Celebrate success
- Tackle failure
- Signpost help
- Influence debate
- Work in partnership



What do the overall ratings mean?



Outstanding

The service is performing exceptionally well.



Good

The service is performing well and meeting our expectations.



Requires improvement

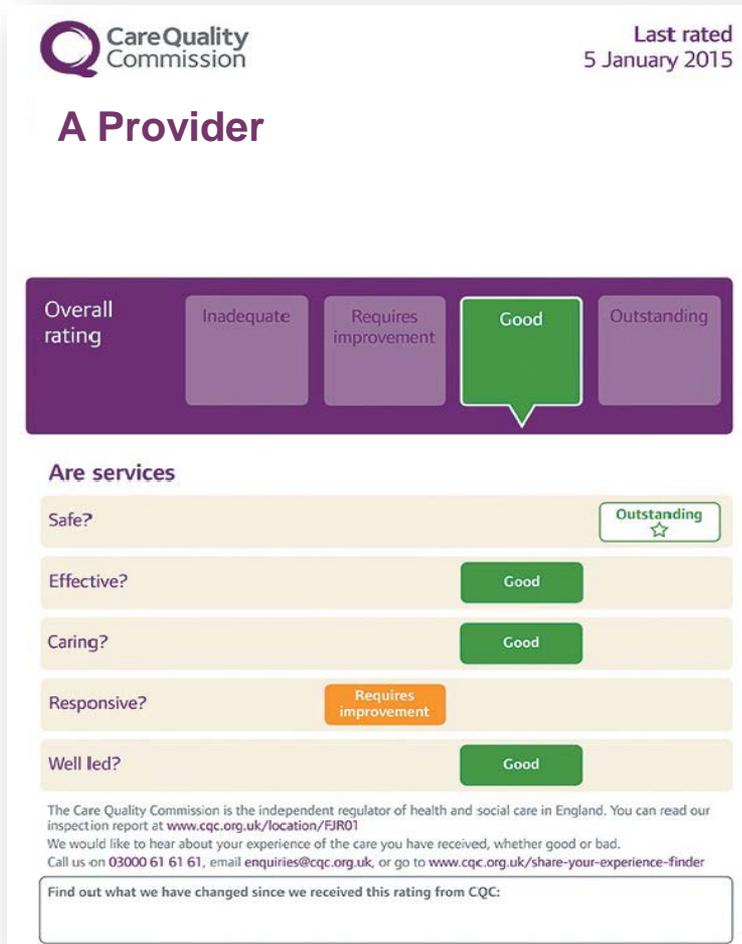
The service isn't performing as well as it should and we have told the service how it must improve.



Inadequate

The service is performing badly and we've taken action against the person or organisation that runs it.

Display of ratings



The screenshot shows a Care Quality Commission rating page for a provider. At the top left is the CQC logo and the text 'Care Quality Commission'. At the top right, it says 'Last rated 5 January 2015'. Below this is the heading 'A Provider'. The main section is titled 'Overall rating' and features five buttons: 'Inadequate', 'Requires improvement', 'Good', and 'Outstanding'. The 'Good' button is highlighted with a green speech bubble. Below this is a section titled 'Are services' with five rows: 'Safe?' (Outstanding), 'Effective?' (Good), 'Caring?' (Good), 'Responsive?' (Requires improvement), and 'Well led?' (Good). At the bottom, there is a text box for feedback and a link to find out what has changed since the rating.

Care Quality Commission

Last rated
5 January 2015

A Provider

Overall rating

Inadequate Requires improvement **Good** Outstanding

Are services

Safe? Outstanding

Effective? Good

Caring? Good

Responsive? Requires improvement

Well led? Good

The Care Quality Commission is the independent regulator of health and social care in England. You can read our inspection report at www.cqc.org.uk/location/EJRD1
We would like to hear about your experience of the care you have received, whether good or bad.
Call us on 03000 61 61 61, email enquiries@cqc.org.uk, or go to www.cqc.org.uk/share-your-experience-finder

Find out what we have changed since we received this rating from CQC:

Why? Public able to see rating of service quickly and easily

Where? Providers should display in prominent area in public view and on website

CQC will send a template for completion and display

CQC will check this during inspections

Ambition

Our ambition for the next five years:
A more targeted, responsive and collaborative approach to
regulation, so more people get high-quality care



Four priorities to achieve our strategic ambition

1. Encourage improvement, innovation and sustainability in care
2. Deliver an intelligence-driven approach to regulation
3. Promote a single shared view of quality
4. Improve our efficiency and effectiveness



Our priorities for 2018/19

Registration

Transformation programme

Registering the Right Support

Implications for inspection and enforcement

Quality matters

Reducing duplication for providers

Inspection and rating

Supporting relationships in residential care

What 'good' looks like in nutrition and mealtimes

Provider-level assessment

Cross-cutting work

Green Paper and other reports

Innovation and technology

Address inconsistencies and improve our approach

CQC new approach: Evolution not revolution



more integrated approach that enables us to be **flexible** and **responsive** to changes in care provision

more targeted approach that focuses on **areas of greatest concern**, and where there have been improvements in quality

greater emphasis on **leadership**, including at the level of overall accountability for quality of care

closer working and **alignment** with NHS Improvement and other partners so that providers experience **less duplication**

Implementing changes to registration



- Holding providers to account at the right level
- Redefining the definition of a registered provider and asking all entities to meet that revised criteria
- Making ownership relationships and links between providers clear to the public
- Introducing digitalised provisions to collect information, having this information available to providers and allowing them to only take action when that information changes
- Implementing in a phased by across different types of providers from 2018/19



Changes to our assessment framework

- **Co-produced** with sector & CQC staff.
- **Single Assessment Framework** for all ASC services
- Sources of evidence improved and simplified
- Characteristics for 'Outstanding', 'RI' & 'Inadequate' expanded to match the scope of those for 'Good'
- **Read across mapping** from KLOEs & Prompts to Characteristics
- **Better alignment** of Health & ASC frameworks (language & structure)
- Greater emphasis on **leadership**
- **Simplified** to reduce burden



Key changes – important themes

- Caring strengthened to include resources, time and support for staff to work with individuals in a compassionate way
- More open KLOE questions (**Do & Are?** to **How?**)
- Information sharing, governance and data security
- Technology (risks and opportunities)
- Medicines KLOE strengthened
- EDHR strengthened
- Even bigger focus on personalisation
- Support to live healthier lives



Provider Information Return



- The Provider Information Collection (PIC) service will launch soon replacing the four Provider Information Return forms with one
- Providers will be asked for key information about their service, how it is meeting the five questions, and what improvements they plan to make
- Providers will be required to update their account at least once a year but encouraged to provide certain information more frequently and will also be able to update at anytime
- The questions asked have been updated from the previous PIR and are more tailored
- PIC is the IT collection system which is a new digital solution developed using a new approach which involves regular testing with providers



Focused inspections based on risk



- ASC will use focused inspections based on risk
- Inspections will consider Well-Led alongside any other Key Questions where there are risks, concerns or improvement
- The 6-month limit for a focused inspection to change an overall rating will, be abolished
- Overall ratings will be calculated using
 - ratings for Key Questions looked at during the focused inspection
 - ratings for Key Questions not looked at in the focused inspection but brought forward from the last comprehensive inspection
- Focused inspections will retain flexibility to expand to become comprehensive inspections where this is necessary

State of Care 2014-2017

- The majority of **people are receiving good quality care**. This is something to celebrate.
- Over 80% of inadequate services improve on re-inspection but for services that require improvement nearly 40% don't improve and 5% get worse
- We are focusing on encouraging improvement in services rated RI
- We will do this **flexibly and proportionately**, using inspector judgement and existing risk and enforcement frameworks
- We will monitor these services more closely to identify changes in quality (up or down) and respond more quickly, as required



Are adult social care services closer to the tipping point?

People receiving publicly funded services

Public funding of adult social care similar in 2016/17 to the previous year: budget 15/16 = £19.6bn, 16/17 = £19.7bn.

An extra £2bn has been made available through the Better Care Fund and changes to the precept.

Quality of care

78% of services are rated as good and many services have improved on re-inspection.

However, 23% of good services have deteriorated on re-inspection.

Are adult social care services closer to the tipping point?

Home care agencies handing back contracts

ADASS survey found 43 councils reporting homecare contracts handed back in 2016/17, affecting 3,135 people.

Unmet need

Age UK estimate nearly 1.2m older people have unmet care needs – up from 1.0m last year.

Nursing home bed numbers

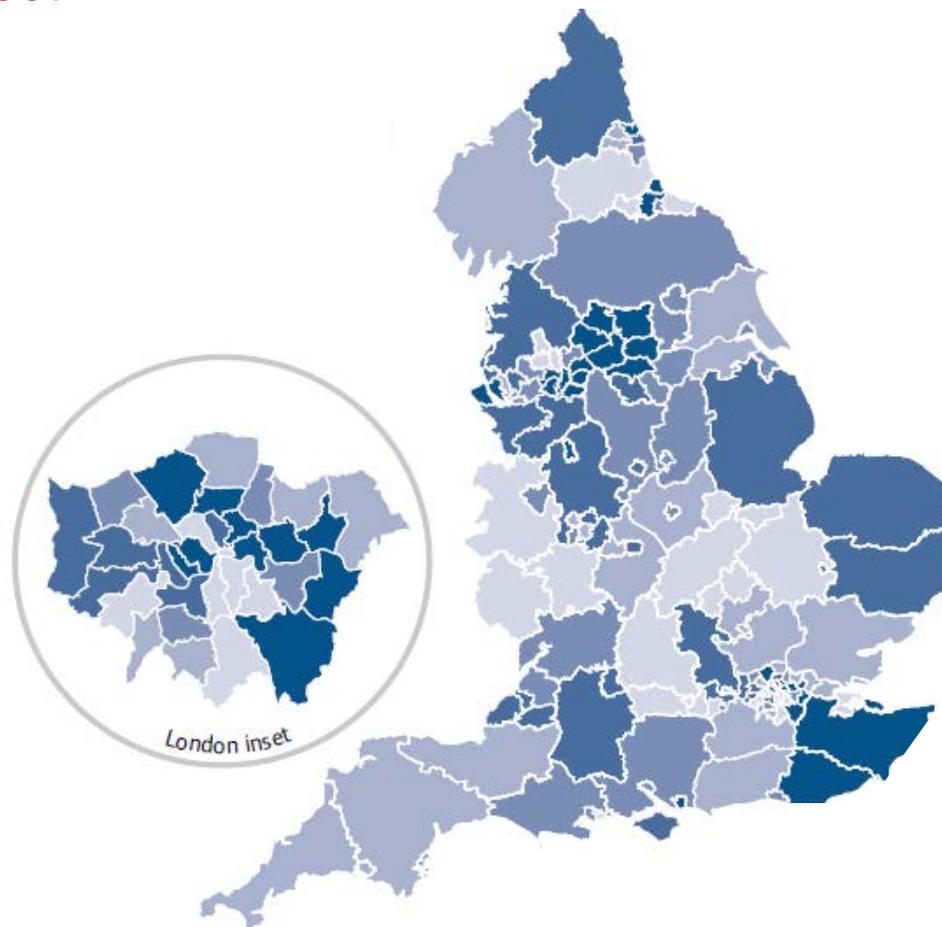
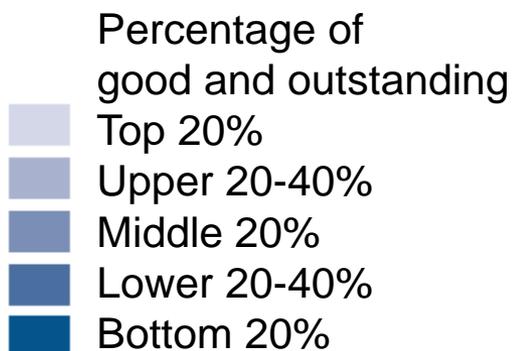
Stopped rising in March 2015 and 4,000 fewer since then, with regional variation.

Variation and the tipping point

Some areas closer to the tipping point, others further away
Factors affecting the tipping point vary geographically – ratings variation is one aspect

Source: CQC ratings data, 31 July 2017

ADULT SOCIAL CARE RATINGS BY LOCAL AUTHORITY



Adult social care: stats and facts

Diverse needs

- Older people and people living with dementia, long term physical conditions, mental health needs, physical and learning disabilities

Significant Sector

- **£20 billion** contribution to economy
- **1.4 million** staff
- Public, private and voluntary providers

Residential Care

- **16,000** locations caring for **c.460,000** people in care homes, nursing homes and specialist colleges

Community Care

- **8,500** community services providing personal care for **500,000+** people at home or Shared Lives schemes, supported living and extra care housing



Quality matters - a joint commitment to improve adult social care



- Agreed priorities to improve quality
- No single person or organisation can improve the quality of adult social care on their own
- Everyone who uses, provides, commissions, oversees or supports care and support services must play their part
- Avoid duplication – a common approach to information



Our single shared view of quality

Quality
matters

What is Quality matters?

A shared commitment for everyone using, working and supporting adult social care.

Co-produced with:

- People who use services, their families and carers
- Professionals and staff
- Providers
- Commissioners
- National bodies that oversee and support adult social care



Why is this important?

The quality and sustainability of adult social care is at risk:

- More people with complex needs
- The cost of care is rising
- More people paying for their own care
- Serious challenges in recruiting and retaining staff
- No shared view of what quality means



Our single shared view of quality

Quality
matters



What does quality mean to people?

By following these principles and encouraging others to do the same, we enable people using services to say:

"I am in control of my support, in my own way"

"I have considerate support delivered by competent staff"

"I feel in control and safe"

"I have the information I need when I need it"

"I can decide the kind of support I need"

"I have access to a range of support that helps me live my life"



What people told us they wanted

Quality matters



www.penmendonca.com



People who use services: What does Quality matters mean for me?

Quality
matters

- Set the bar for what you should expect of high-quality care and support
- Focus on what matters most to you and everyone who uses care
- How sharing your experiences can help improve adult social care
- ‘If everyone does their bit’ – we can all see improvements if we work together



Staff in adult social care: What does Quality matters mean for me?

Quality
matters

- It will set out what high-quality care and support should look like
- Help define what well-led means
- Asking employers to support and empower you to deliver high quality care
- How you can help to improve adult social care for everyone



Providers of adult social care: What does Quality matters mean for me?

Quality
matters

- It will set out what high-quality care and support should look like
- Empowering you to drive quality for people using services, their families and staff
- Highlights the critical role you play in improving adult social care
 - Celebrating good practice
 - Highlighting areas for improvement



Commissioners and funders: What does Quality matters mean for me?

- It will set out what high-quality care and support should look like
- Empowering you to work with providers in your area to drive quality
- Highlights the critical role you play in improving adult social care
 - Commissioning for high quality outcomes
 - Funding new services and placements only if they offer high-quality care

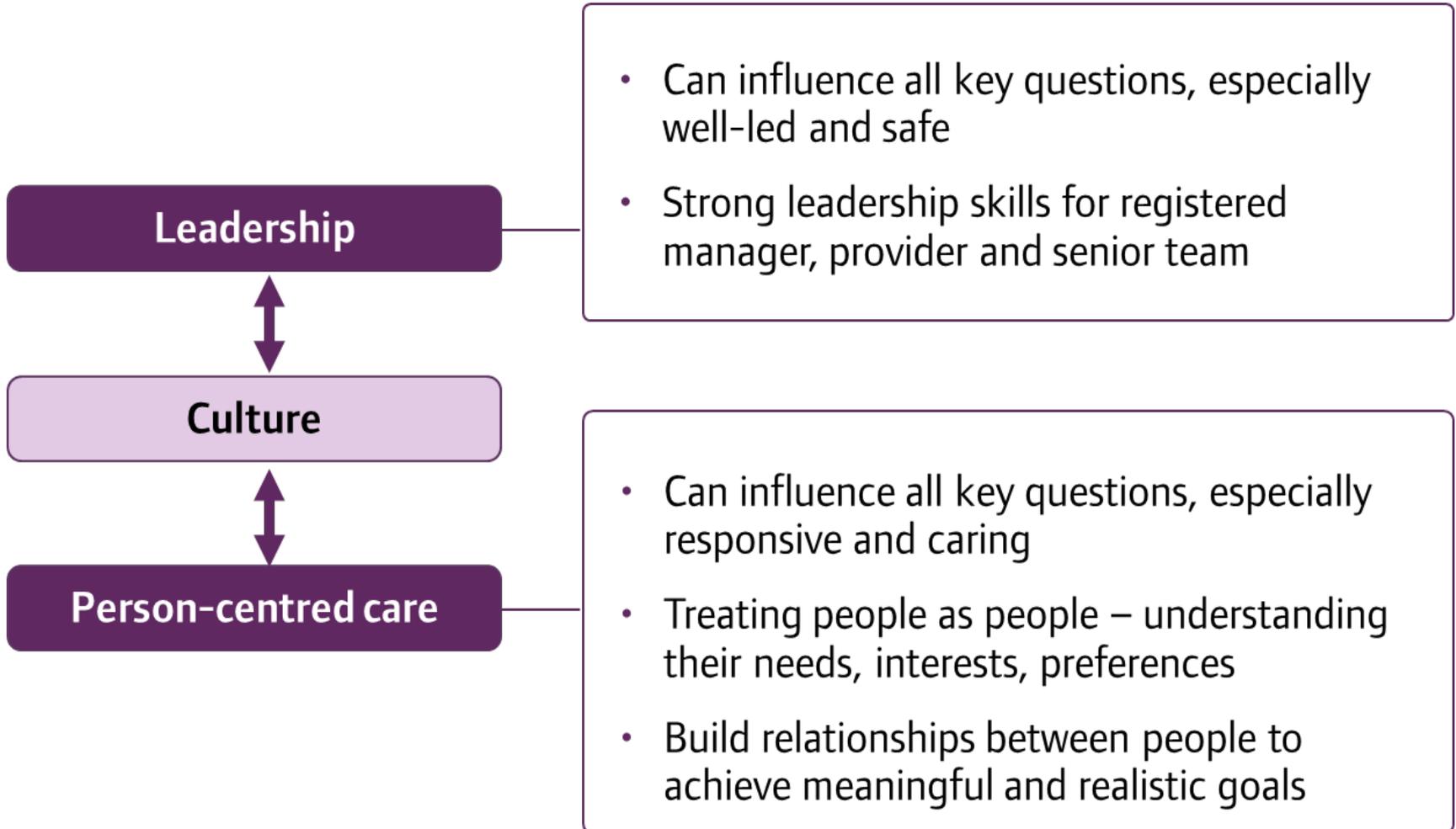


National bodies: What does Quality matters mean for me?

- It will set out what high-quality care and support should look like
- Highlights the critical role you play in improving adult social care
 - Working to reduce duplication, together
 - Improve alignment in the way we define and measure quality
- ‘If everyone does their bit’ – we can all see improvements if we work together



How good and outstanding providers meet The Mum Test



Themes from Well-Led– Inadequate



Overall Inadequate

- Unawareness of best practice and notifications not being made to CQC
- Lack of supervision and training opportunities
- Ineffective systems to identify and manage risks / no process to assess lessons learned
- Regular management changes / no registered manager
- Poor care planning / lack of personalised care
- Closed culture – views not listened to or acted on
- Underdeveloped partnership working and community links

Themes from Well-Led– Outstanding



Overall Outstanding



- People who use services, relatives and staff speak highly of the service
- Effective monitoring and quality assurance
- 75% of services had a registered manager in post consistently
- Open culture – people who use services/ staff/ relatives shared views and issues
- A can do, will do attitude
- Strong links with local community

Outstanding characteristics

Overall
Outstanding



- People are at the centre and staff want to give them a life not just a service
- Good leadership extends beyond the manager and those values are cascaded to inspire staff
- Open culture – people who use services/ staff/ relatives shared views and issues
- 75% have registered manager in post consistently
- Safe care actively promoted – effective oversight of care and staff communication

Common themes from 'well-led': Outstanding



Cooperation

Integrity

Excellence

Passion

“This place is brilliant,
management care so much, as
do the staff, everybody knows
their role and the atmosphere
is amazing.”

“I’m made to feel important, I’m
constantly encouraged to
always better myself.”

What does this mean for individuals?



“I feel safe, I can live the life I want and I am supported to manage any risks”

“I am in control of planning my care and support”

“I have care and support that is directed by me and responsive to my needs”

“I can plan ahead and keep control in a crisis”

'Outstanding' can be achieved

"We didn't think we were outstanding. And perhaps that's why we were – I think it's because we see every single person as an individual. It is our privilege to support them to live the last years of

their life with as much happiness, love and security as we can give them."



Suzanne, Prince of Wales
House, Ipswich

innovative and creative

*commitment by managers
to continually improve*

*'My Story' booklets give detailed
biography of a person – with the
clear message that their lives do
not stop when they move into
care*

vibrant and friendly environment

**staff are motivated by a
strong culture of inclusivity**

care is person-centred

*considers individuals and their
views and preferences*

**management inspire confidence
and lead by example**

**strong and visible
leadership**

Outstanding care at home

- ‘Staff were given the opportunity to build meaningful relationships with people and ample time to meet people’s needs and provide companionship’
- ‘People felt care workers treated them with kindness and respect’
- ‘The registered manager delivered dementia training to the public – including bank and shop staff – to help them understand how to help people with dementia’

Home Instead Senior Care,
West Lancashire and Chorley



An outstanding care home



‘Staff were passionate about the care they provided and were able to recognise when people were feeling distressed.’



‘Staff said the registered manager went out of their way to make people feel special and their door was always open.’

Jack Dormand Care
Home
County Durham₄₁

An outstanding and creative care home



‘The provider was creative in seeking people's feedback and people were actively involved in making decisions about the care that they received. Their opinions were respected and listened to. The service was run very much around the needs of those living there.’



Willersley House, Hull



‘There was a strong culture within the service of treating people with dignity and respect. People and the staff knew each other well and these relationships were valued by people who used the service.’

Map of care home ratings in England



- When we inspect care homes, we give them a rating to help you choose care
- Search for care homes in your area, compare ratings and read inspection reports
- Created February 2016

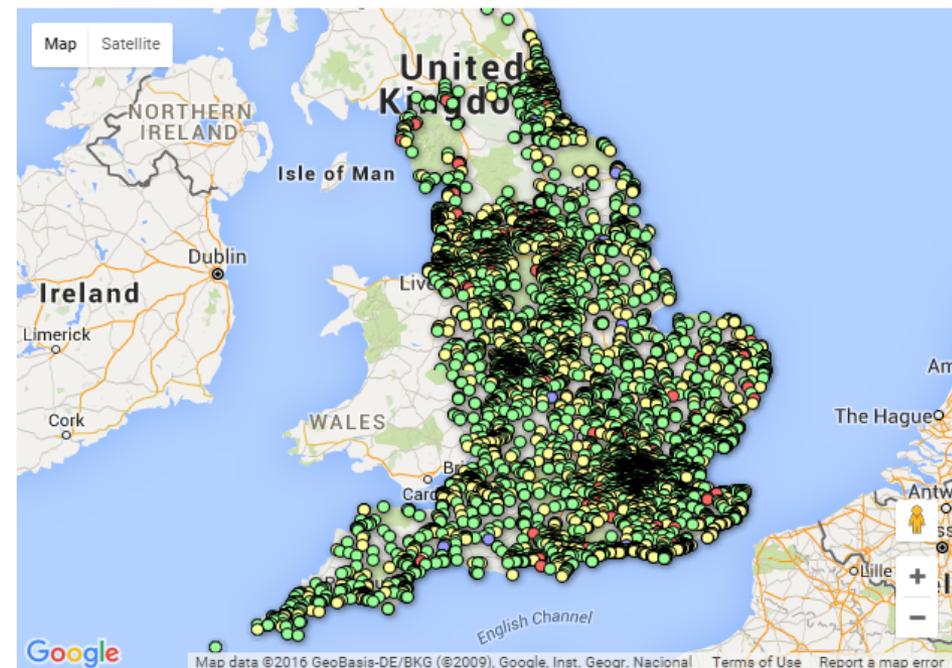
This map gives a picture of how we've rated care homes across England*. You can search by postcode to find services near you. Click on the coloured dots for more information and to read inspection reports.

We last updated the map on 22 February 2016.

Full postcode:

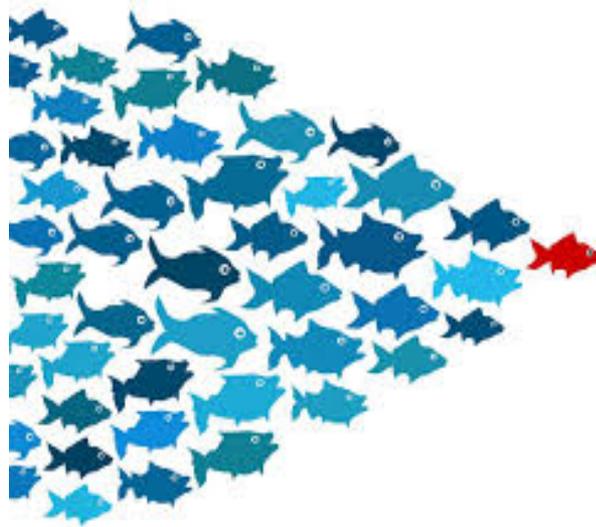
Key

- Outstanding
- Good
- Requires improvement
- Inadequate



> Stand up for adult social care

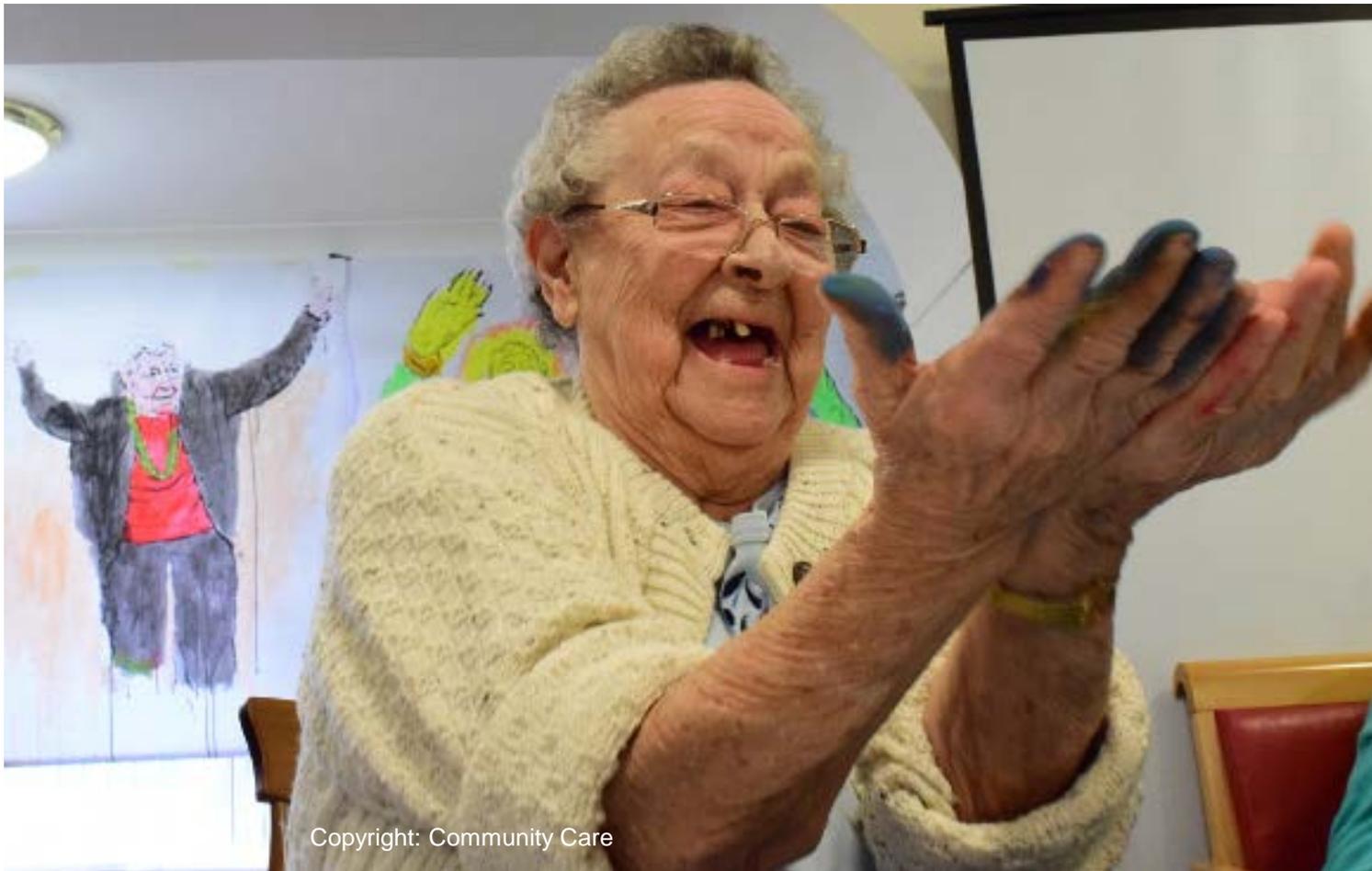
- > Celebrate the good
- > Challenge the bad



- > Be positive and honest
- > Work together

> And...always remember why we do this

Remember why we do this.....



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Remember why we do this.....



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Thank you



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