

The background of the slide is a photograph of cherry blossom branches with pink and white flowers in bloom against a clear sky. A teal-colored banner is overlaid on the left side of the image, containing the title and speaker information.

Challenging CQC Reports

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HealthInvestor
Awards 2017 

Finalist

CQC Inspection

- ➔ New inspection methodology – looking for “Good”
- ➔ Fundamental standards introduced by 2014 Regulations
- ➔ Return of ratings system
- ➔ Key Lines of Enquiry (KLOES) and ratings characteristics
- ➔ Consistency still a problem!



CQC Inspection

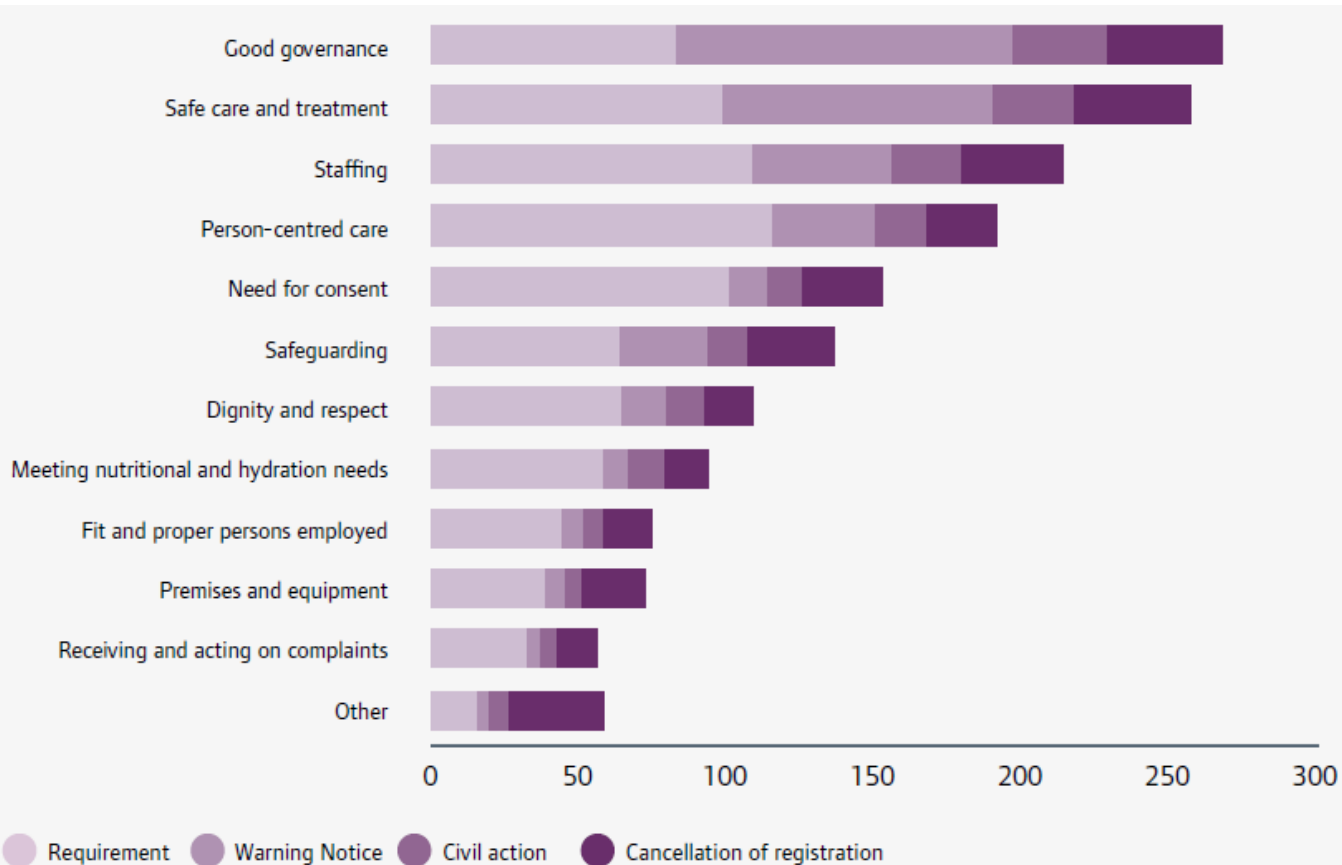
- ➔ 72% rated Good or Outstanding
- ➔ Only 2% rated Inadequate

- ➔ Good or Outstanding homes provide:
 - ➔ Personalised care planning
 - ➔ Varied and flexible activities
 - ➔ Engaging with family, carers and the wider community
 - ➔ Continuity with Hospices and other service providers
 - ➔ Maintaining community engagement

- ➔ Services excel at providing a Caring service (92%) but less successful at being Safe (68%) and Well-led (71%)

- ➔ Focusing on good leadership and management is closely linked with rating and improvement of ratings

CQC Inspection



Note: Locations may have more than one breach.
The average number of regulations breached per location was six.

Source: CQC ratings and enforcement data

- Total of 901 enforcement actions in 2015/16
- Top 3 reasons for enforcement action:
 - Leadership
 - Safe care
 - Staffing

CQC Inspection

- ➔ 77% of care homes improved from Inadequate on re-inspection

- ➔ Local authorities and clinical commissioning groups can be key influencers
 - ➔ beyond funding role
 - ➔ additional support

- ➔ Other thoughts – prevention is better than cure:
 - ➔ Signposting
 - ➔ Evidencing assessments
 - ➔ Written evidence – “if its not written it didn’t happen”
 - ➔ Handovers
 - ➔ Up to date care plans
 - ➔ Inquest issues - learning

CQC Inspection

- Factual accuracy response:
 - challenge accuracy and completeness of evidence
 - 10 working days to review draft reports and submit comments to CQC

- R. (SSP Health Ltd) v Care Quality Commission [2016]
 - Fairness of fact finding
 - Objective evidence
 - Independent CQC review

Factual Accuracy

- Typographical errors (category A)
- Information the provider considers to be factually incorrect – provider should be able to produce further evidence in support of assertion of inaccuracy (category B)
- Additional evidence regarding position at time of inspection (for “completeness”) – items not currently included in draft report but provider thinks they should be as should impact on rating – copies must be provided (category C)

- CQC to consider requesting further evidence

- A factual accuracy response will be reviewed by another member of commission staff from relevant Inspection Directorate who is independent from original inspection unit

Rating Review





- Rating reviews:
 - Only grounds for requesting review is that the inspector did not follow the process for making ratings decisions and aggregating them
 - Provider must inform CQC of their intention to request a review within five working days of report publication
 - Must request review within 15 working days of publication, stating which rating(s) they want to be reviewed and all relevant grounds.
 - One chance to request review with 500 word limit
- Providers cannot request rating reviews just because they disagree with judgements made by CQC – such disagreement to be dealt with through factual accuracy response and any representations
- Final CQC process for challenging rating

Case Study

- ① Safe: 'The lack of safe care was a breach of Regulation 12 HSCA 2008 (regulated Activities) Regulation 2014'
- ② Caring: 'We recommend the registered provider ensures people are provided with care in a way that demonstrates that they matter.'
- ③ Responsive: 'We recommend the registered provider reviews the activities available to people to make them more person-centred and individualised'
- ④ Well-led: 'A lack of good governance was a breach of Regulation 17 of the HSCA 2008 (Regulated Activities) 2014'
- ⑤ 5 breaches of regulations

Case Study

Ratings

Overall rating for this service	Requires Improvement 
Is the service safe?	Inadequate 
Is the service effective?	Requires Improvement 
Is the service caring?	Requires Improvement 
Is the service responsive?	Requires Improvement 
Is the service well-led?	Requires Improvement 

Case Study

Ratings

Overall rating for this service	Good 
Is the service safe?	Good 
Is the service effective?	Requires Improvement 
Is the service caring?	Good 
Is the service responsive?	Good 
Is the service well-led?	Good 

Case Study

- ➔ Safe: No mention of breach of regulations
- ➔ Caring: 'We found that staff interacted with people in a kind, caring and compassionate manner.'
- ➔ Responsive: 'A range of activities were provided to people and those who remained in their rooms received one to one visits from staff.'
- ➔ Well-led: No mention of breach of regulations
- ➔ Only one breach of regulation

CQC Enforcement

- ➔ Special Measures
 - ➔ If Inadequate = Special Measures
 - ➔ Up to six months to improve
 - ➔ If still Inadequate in any key question = cancellation proceedings

- ➔ More urgent enforcement action – urgent variations etc

- ➔ CQC prosecutions – safe care and treatment
- ➔ Health and safety incidents

Avoiding Problems

- ④ Governance
- ④ Quality assurance
- ④ Management oversight
- ④ Staff knowledge / training
- ④ External expertise
- ④ Risk Assessments
- ④ Joined-up thinking
- ④ Evidencing decisions
- ④ Take appropriate action re staff
- ④ Agency staff
- ④ Follow up actions

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Laura advises health and social care providers on a range of matters. She regularly acts for providers in relation to disputes and enforcement action taken by CQC, including appeals to the Tribunal. She also advises and represents providers in safeguarding investigations, inquests and police investigations, including representing clients in police interviews. In addition, Laura undertakes regulatory due diligence on sales, acquisitions and refinancing of health and social care services, including many of the leading national providers.

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