

ASC Trade Association Meeting



3 July 2020

ASC Trade Association Meeting



No:	Time	Agenda Item	Lead
1.	15.30	Welcome and Introductions	MC
2.	15.35	Strategy 2021 Smarter Regulation for a Safer Future	TE/ MP
3.	16.00	Principles for Innovation in Health and Social Care	DI
4.	16.15	General update and COVID Update	DI
5.	16.35	COVID Q&A	All
6.	16:55	AOB Next TA meeting – 13 July 2020	All
7.	17:00	Close	All

Welcome and Introductions

Strategy 2021

Smarter regulation for a safer future

Tansy Evans and Matt Plummer
Strategy Managers, CQC

*Adult Social Care Trade Association
3 July 2020*



Purpose

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

Vision

A world-class regulator, able to drive improvements in how people experience health and care services, working towards a safer future.



The world of health and social care continues to change



To keep delivering our **purpose** to make sure people get high-quality care, we need to change. We know that:

- We don't always get it right.
- We must be more relevant and responsive.
- We don't have a full picture of care quality across an area, system or pathway.



Our people need the right tools and capabilities.

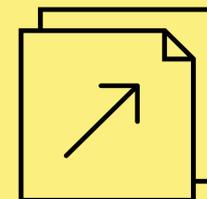
- **What's important?**
 - Information sharing
 - Voice of people
 - Voice of care providers
- **Local systems** have an impact beyond providers of care, and into the public health and commissioning response – critical to the response of people who use services
- **Transparency** promotes learning – one doesn't happen without the other



What we've heard so far

Our engagement with you, people who use services, providers and strategic partners so far found that:

- Commitment and belief in our purpose and role should remain central to what we do
- Reviewing the scope of regulation and our approach is vital
- We must keep pace with changes in how health and social care are delivered
- Ensuring we respond to changing public expectations is crucial
- We must reaffirm our commitment to safety
- Building on our use of intelligence is fundamental

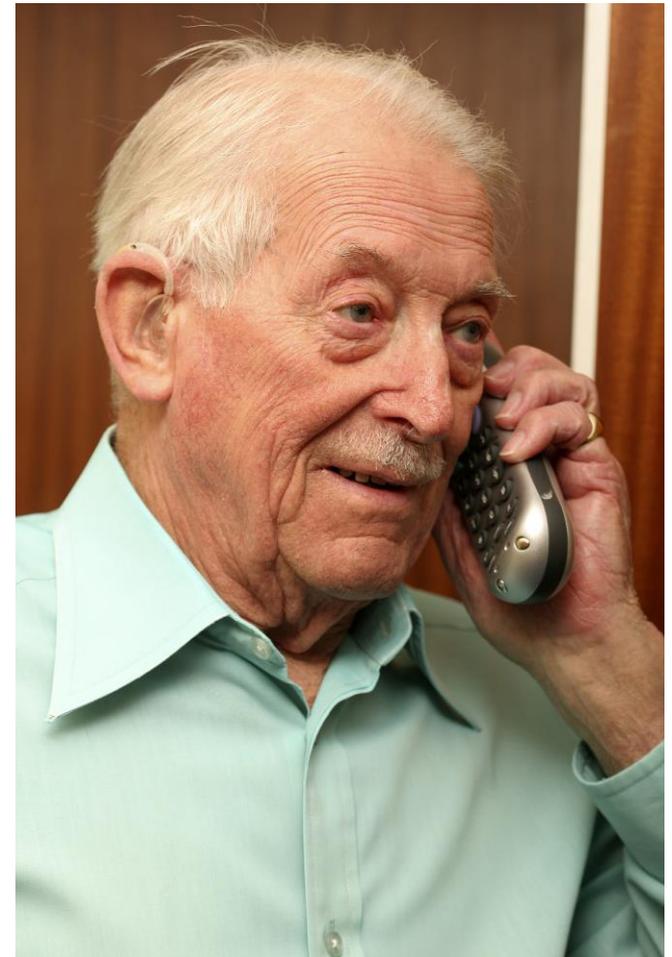


**Creating
our future**

How will we change?

We have developed four emerging strategy themes:

1. Meeting people's needs
2. Smarter regulation
3. Promoting safe care for people
4. Driving and supporting improvement



- What do you think our top priority should be for our next strategy (2021 onwards)?
- What could we do to help address inequalities in health and care?
- What should our role be in supporting improvement in the adult social care sector?

New webinars for your members



Help shape our future strategy

- We are holding webinars on each strategic theme
- Live with **Chief Inspectors from 13 July**
- Opportunity to answer questions
- 1000 places on each webinar

Places nearly gone – recording will be on the website after the series

Thank you and questions?



www.cqc.org.uk
enquiries@cqc.org.uk

Principles for Innovation in Health and Social Care

We need to consult on two new pieces of guidance

Digital care records

Principles for
enabling successful
innovation and
adoption in health
and social care

We have developed six principles that enable innovation to happen

- Develop a culture where innovation can happen
- Support your people
- Adopt the best ideas and share your learning
- Focus on outcomes and impact
- Develop and deploy innovations with the people that will use them
- Be flexible when managing change

General updates

Podcasts are back



- **CQC Connect is back!** First episode launched last week on the ESF – experience between a provider and inspector
- Episodes about our **2021 strategy coming soon**
- We will be sharing a short survey following each episode where you can rate the episode and suggest future topics.



Importance of communicating about deaths in care homes



- **Communication shared in last weeks provider bulletin**
- Highlighted the joint statement issued by R&RA and NCF
- Encouraged providers to be as open as possible in keeping family members informed about the situation in a service

Our closed cultures work and new guidance for Inspectors



- **Published guidance** to support our inspection teams to continue to improve how we identify and respond to services that might be at risk of developing closed cultures
- **Question from NCF on how this relates to ESF?**
- If inspector is using ESF and they have any concerns about a potential closed culture - **MRM would be held**
- MRM to decide what action to take, which could include, **increase monitoring, visiting or enforcement** depending on the circumstances
- As soon as any decision is made inspectors would move away from using the ESF process

Covid Update

Debbie Ivanova – Deputy Chief Inspector

ESF Data

- 9864 individual locations assessed (19.89% of all registered locations) – From launch on 4 May to date.
- Adult Social Care have now assessed 36% of locations
- The priority was where potentially very high due to Covid – in ASC 86% of those locations have had an ESF

Principles

The following principles have been agreed, upon which we will base our increasing use of assessment, including inspection, as the Covid-19 situation eases:

1. We will continue to put people who use services at the centre of what we do, taking necessary action to protect them and their rights and gathering their views where this is appropriate.
2. We will increase inspections as the risk from Covid-19 decreases.
3. The inspection frequency rules remain suspended.
4. We will minimise additional burden on providers at this time recognising the pressure placed on them due to the pandemic.
5. We will assess, including where we visit, only the aspects of care that we need to, being clear on the scope of our assessment and proportionate to risks presented.

6. Where assessment activity can take place remotely, and where this is appropriate and proportionate to the risk and assessment trigger, it will.
7. Site visits will only take place where required and time on site will be kept to a minimum.
8. We will take all necessary precautions to safeguard our staff, people using services, providers and their staff from infection control and prevention risks.
9. We will aim for cross-sector consistency and collaboration wherever possible.
10. We will re-establish a programme of regular, planned inspections and reviews with methodologies adapted for Covid-19 as soon as it is safe to do so.

Triggers for assessing providers during COVID-19 lockdown easing



- Inspectors will continue to use all existing sources of information and our standard risk assessment processes to come to their decisions
- The key change is that we can now assess, including through inspection, where services exhibit a level of risk lower than “extreme”.

The information we use to inform risk will vary slightly by sector, but may include:

- Risk tool and ESF conversations
- Whistleblowing
- Safeguarding
- ‘Give Feedback on Care’
- Current rating and inspection history
- Enforcement activity
- Absence of information
- Notifications (including deaths and serious injury)
- Information from other organisations (e.g. LA, CCG, Coroner)
- Indicators of closed culture
- Inherent risks of particular service types and groups of people receiving care
- Insight dashboards and other intelligence
- Complaints

- The social care taskforce has asked CQC to consider an enhanced yet currently unspecified role in infection prevention and control **(IPC) in care homes.**
- We are looking at our current approach to IPC in care homes and related plans to build on this in the short term – **piece of work just starting**
- Plan to share findings in our COVID-19 independent voice document towards the end of the year
- **Will keep the group updated as plans progress**

- We will be carrying out some rapid reviews – which we're calling **Provider Collaboration Reviews** – of how providers have worked collaboratively in response to COVID-19
- Initial reviews will focus on the interface between health and adult social care for the over-65 population group
- Findings will be published in our September COVID Insight Report and in State of Care
- **We will keep the group updated**

COVID-19 Q&A

AOB

Next TA Meeting – 13 July 2020