

The Board of Directors - Public 08 September 2022

Paper title:	CQC Updates and Developments	Agenda Item 21.0
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Purpose of the report		
The purpose of this report is to provide Board with an update as to proposed changes to the CQC's inspection regime and how this will impact on internal quality assurance processes. The report also provides an update on the outcomes of the recent inspection of our 0-19 services.	For approval	
	For discussion	
	For information	X

Executive summary
<p>In 2021 the Care Quality Commission (CQC) published its new strategy - A New Strategy For The Changing World of Health and Social Care. The strategy details a number of changes that the trust can expect to experience as a result of its implementation, including replacing the existing key lines of enquiry with a number of quality statements which are applicable across all care settings. The trust is currently reviewing the potential impact of this change on our own internal quality assurance framework and is seeking to identify any early learning from CQC pilots of system inspections to support work across Bradford and Craven place relating to the development of a system quality assurance framework..</p> <p>In June 2022 the CQC conducted a short notice (24 hour) inspection of the Trust's 0-19 services in Bradford and Wakefield. The report was published on 24 August 2022. The ratings for the service remain the same, with an overall rating of Requires Improvement, and services being rated as Requires Improvement for safe and responsive and good for effective, caring and well led.</p> <p>The trust is currently undertaking a review of the action plan resulting from BDCFT's internal quality assurance inspection and whether or not these actions are sufficient to address the CQC's must and should do actions and provide robust assurance of improvement. The outcomes of this review will be presented at Quality and Safety Committee for consideration once this is completed.</p>

Do the recommendations in this paper have any impact upon the requirements of the protected groups identified by the Equality Act?	State below 'Yes' or 'No'	If yes please set out what action has been taken to address this in your paper
	No	

Recommendation
<p>The Board of Directors is asked to:</p> <ul style="list-style-type: none"> Note the changes in the CQC's regulatory approach and the potential impact on the Trust Note the outcome of the recent inspection of 0-19 services and the plan to provide assurance that the Trust's response to Quality and Safety Committee in due course

Strategic vision				
Please mark those that apply with an X				
Providing excellent quality services and seamless access	Creating the best place to work	Supporting people to live to their fullest potential	Financial sustainability growth and innovation	Governance and well-led
X				X

Care Quality Commission domains				
Please mark those that apply with an X				
Safe	Effective	Responsive	Caring	Well Led
X	X	X	X	X

Relationship to the Board Assurance Framework (BAF)	<p>The work contained with this report links to the following strategic risk(s) as identified in the BAF:</p> <ul style="list-style-type: none"> SO3: Maximising the potential of services to deliver outstanding care to our communities
Links to the Supporting Organisational Risk Register	<p>The work contained with this report links to the following corporate risk(s) as identified in the Supporting Organisational Risk Register:</p> <ul style="list-style-type: none"> 2417: Ability to meeting regulatory requirements
Compliance and regulatory implications	<p>The following compliance and regulatory implications have been identified as a result of the work outlined in this report:</p> <ul style="list-style-type: none"> Regulation 9, 12, 18

The Board of Directors - Public **8 September 2022**

CQC Updates and Developments

1 Purpose

The purpose of this report is to provide Board with an update as to proposed changes to the CQC's inspection regime and how this will impact on internal quality assurance processes. The report also provides an update on the outcomes of the recent inspection of our 0-19 services.

2 Changes to the CQC strategy

In 2021 the Care Quality Commission (CQC) published its new strategy - A New Strategy For The Changing World of Health and Social Care. This strategy described a number of key ambitions aligned to 4 key areas:

- People and communities
- Smarter regulation
- Safety through learning
- Accelerating improvement

As part of implementing the strategy, the CQC has consulted on what this means in terms of its inspection activity, and how it will engage with providers of care going forwards. The key changes that the trust expects to experience are:

- A move away from relying on a set schedule of inspections to a more flexible, targeted approach.
- Stronger relationships with services and with local systems. This includes having ongoing conversations about quality to give a better insight and enable CQC to tailor their approach to be more proportionate.
- Implementing a continuous insight and monitoring activity which means less focus on data when onsite
- Ratings will be more dynamic – they will be updated when there is evidence that shows a change in quality. CQC won't always need to carry out an inspection to do this.
- CQC will work with service providers and other regulators and partners to coordinate data collections. They will only ask for the information they need and that they can't get elsewhere.
- CQC will use a clearer definition of quality as a reference for what good and poor care looks like.
- CQC will move away from long reports written after inspections

3 The CQC's new quality statements

Under the existing regime, CQC have a list of key lines of enquiry under each of their 5 domains – Safe, Effective, Responsive, Caring and Well-led. These are supported

by a suite of questions which are applied variably depending on the type of care provider being inspected.

Under the new regime these will be replaced with a number of quality statements which are applicable across all care settings. Details of the new statements are provided at Appendix 1.

4 Impacts on the Trust

The CQC are currently undergoing an internal reorganisation process in order to support their teams being better aligned to the new Integrated Care System (ICS) geographies. Whilst inspection managers will retain a specialist focus (for example mental health and community, or acute secondary care), their operational manager will be more generalist in nature and will bring together a multi-specialist team to support regulatory activity across an ICS footprint. The exact number of these teams in each ICS will depend on the size and complexity of the ICS.

These teams are currently being established and the initial impact has been that both our relationship manager and inspection manager have changed as portfolios are rearranged.

The local team have indicated it is unlikely that there will be any significant impact on regulatory activity until early 2023, as these teams are established and new processes come into place. However, in the meantime certain ICS footprints will be undergoing pilot inspections using the new quality statements across place footprints.

As the Board of Directors will be aware, we have been piloting our own internal Quality Assurance Framework which was developed and aligned to the CQC key lines of enquiry. Whilst the majority of this remains of relevant and use in assessing the quality of services, we are currently undertaking a review to see if any of the learning supporting the move to the CQC's quality statements are applicable to the QAF. We are also looking to identify any early learning from local CQC pilot sites that we can take into the work being done at Bradford and Craven place to establish a system quality assurance framework.

5 Inspection of 0-19 services

In June 2022 the CQC conducted a short notice (24 hour) inspection of the Trust's 0-19 services in Bradford and Wakefield. This was done in the context of the recent publication of a significant child safeguarding review and inspections of children's services across Bradford.

The report was published on 24 August 2022. The ratings for the service remain the same, with an overall rating of Requires Improvement, and services being rated as Requires Improvement for safe and responsive and good for effective, caring and well led.

The CQC fed back that teams were clearly enthusiastic and passionate about their work, despite the challenges they faced, including the move of the Wakefield service to a new provider. The particular strengths they identified in the report included:

- Staff teams worked collaboratively and were encouraged to share ideas and give feedback on service development.
- Staff supported people to live healthier lives and thought of different ways to engage harder to reach service users.
- Staff treated children, young people and their families with compassion and kindness. Staff were passionate about the roles they performed and wanted to provide high quality care. Service users were encouraged to give feedback, which was largely positive. Staff recognised the importance of mental and emotional health as well as physical health and offered appropriate support and information to families.
- The service was beginning to consider and introduce some innovative ways of working to meet the needs of the local population.
- Leaders at all levels of the service were knowledgeable and passionate and sought to drive improvement. Strategies and development plans reflected the needs and challenges of the service and there were clear action plans in place detailing how improvement would be made. Staff were satisfied with their roles in the service and felt valued and supported.

However, there were a number of areas for further development and learning identified, including:

- The service did not have enough staff, there were several unfilled vacancies and staff were holding caseloads much larger than recommended by national guidance. Staff sickness and turnover levels were high. The service was unable to meet mandated contacts for children and young people. Aspects of the service were in business continuity which meant that not all services were being provided. There were waiting lists in place in the looked after children's team which meant that children waited for individual health assessments longer than they should, and this was not in line with national guidance.
- CQC reviewed 29 records during the inspection. Whilst the majority of records were detailed and consistent, they had concerns that five of the records did not meet the trust's standard in evidencing what action had been taken to address concerns in relation to risks such as domestic violence or mental health concerns. Managers were aware that this was an area of improvement for the service and were undertaking a records audit at the time of the inspection.
- The service worked on a risk-based approach whereby children were placed into four tiers dependent on need. CQC were concerned that in some cases late identification of health conditions and disabilities could occur for those children in lower tiers of need due to lower levels of oversight for these families.

5 Inspection next steps

The CQC identified a number of actions that the trust must do (ie breaches in regulations) or should do (to avoid future breaches in regulation. These are noted in Appendix 2.

The areas for improvement identified largely correlate to the findings of our own internal quality assurance inspection carried out earlier this year. The full details of this comparison will be presented to Quality and Safety Committee in due course.

The trust is currently undertaking a review of the action plan resulting from BDCFT's internal quality assurance inspection and whether or not these actions are sufficient to address the CQC's must and should do actions and provide robust assurance of improvement. The outcomes of this review will be presented at Quality and Safety Committee for consideration once this is completed.

6 Recommendations

The Board of Directors is asked to:

- Note the changes in the CQC's regulatory approach and the potential impact on the Trust
- Note the outcome of the recent inspection of 0-19 services and the plan to provide assurance that the Trust's response to Quality and Safety Committee in due course

Beverley Fearnley
Deputy Director of Patient Safety, Compliance and Risk
18 August 2022

Appendix 1: CQC revised quality statements

SAFE:

Safety is a priority for everyone and leaders embed a culture of openness and collaboration. People are always safe and protected from bullying, harassment, avoidable harm, neglect, abuse and discrimination. Their liberty is protected where this is in their best interests and in line with legislation.

Where people raise concerns about safety and ideas to improve, the primary response is to learn and improve continuously. There is strong awareness of the areas with the greatest safety risks. Solutions to risks are developed collaboratively. Services are planned and organised with people and communities in a way that improves their safety across their care journeys. People are supported to make choices that balance risks of harm with positive choices about their lives. Leaders ensure there are enough skilled people to deliver safe care that promotes choice, control and individual wellbeing.

Key areas of insight are:

- Learning Culture
- Safe systems, pathways and transitions
- Safeguarding
- Involving people to manage risk
- Safe environments
- Safe and Effective Staffing
- Medicines Optimisation
- Infection Prevention and Control

EFFECTIVE:

People and communities have the best possible outcomes because their needs are assessed. Their care, support and treatment reflects these needs and any protected equality characteristics. Services work in harmony, with people at the centre of their care. Leaders instill a culture of improvement, where understanding current outcomes and exploring best practice is part of everyday work.

Everyone is supported to see what works well and not so well based on indicators of quality. Continuous improvement is always guided by this insight.

Key areas of insight are:

- Assessing needs
- Delivering evidence-based care and treatment
- How teams, staff and services work together
- Supporting people to live healthier lives
- Monitoring and improving outcomes
- Consent to care and treatment

CARING:

People are always treated with kindness, empathy and compassion. They understand that they matter and that their experience of how they are treated and supported matters. Their privacy and dignity is respected. Every effort is made to take their

wishes into account and respect their choices, to achieve the best possible outcomes for them. This includes supporting people to live as independently as possible.

Key areas of insight are:

- Kindness, compassion and dignity
- Treating people as individuals
- Independence, choice and control
- Responding to people's immediate needs
- Workforce wellbeing and enablement

RESPONSIVE:

People and communities are always at the centre of how care is planned and delivered. Their health and care needs of people and communities are understood and they are actively involved in planning care that meets these needs. Care, support and treatment is easily accessible, including physical access. People can access care in ways that meet their personal circumstances and protected equality characteristics.

People, those who support them, and staff can easily access information, advice and advocacy. This supports them in managing and understanding their care and treatment. There is partnership working to make sure that care and treatment meets the diverse needs of communities. People are encouraged to give feedback, which is acted on and used to deliver improvements.

Key areas of insight are:

- Person-centered care
- Care provision, continuity and integrity
- Providing information
- Listening to and involving people
- Equity in access
- Planning for the future

WELL-LED:

There is an inclusive and positive culture of continuous learning and improvement. This is based on meeting the needs of people who use services and wider communities, and all leaders and staff share this. Leaders proactively support staff and collaborate with partners to deliver care that is safe, integrated, person-centered and sustainable, and to reduce inequalities.

There are effective governance and management systems. Information about risks, performance and outcomes is used effectively to improve care.

Key areas of insight are:

- Shared direction and culture
- Capable, compassionate and inclusive leaders
- Freedom to speak up
- Workforce equality, diversity and inclusion
- Governance, management and sustainability
- Partnerships and communities
- Learning, improvement and innovation
- Environmental sustainability – sustainable development

Appendix 2: CQC Must and Should do actions

Action the trust **MUST** take to improve:

We told the trust that it must take action to bring this service into line with 3 legal requirements.

- The trust must ensure that there are sufficient numbers of suitably qualified staff employed to meet the needs of the service. (Regulation 18)
- The trust must ensure that waiting times are reduced and that mandated contacts and assessments are carried out in line with national guidance. (Regulation 9)
- The trust must ensure that the risk management approach considers how risks to universal children are monitored and mitigated. (Regulation 12)
- The trust must ensure that recommendations and learning from child safeguarding reviews are embedded in practice. (Regulation 12)
- The trust must ensure that staff are acting in relation to any safeguarding concerns identified. (Regulation 12)

Action the trust **SHOULD** take to improve:

- The trust should ensure that policies relating to non-medical prescribing have clearly defined supervision arrangements.
- The trust should ensure that all staff are up to date with mandatory training.
- The trust should ensure that care records are maintained to a consistent standard across the service.
- The trust should consider how staff in specialist services are able to access child and adolescent mental health service support in a timely manner.