CQC UPDATE FOR PRACTICE MANAGEMENT STAFF ALISON JOHNSON

12th March 2019

Introductions and Welcome

Housekeeping

Schedule of the day

Ice Breaker

Objectives

- To develop our understanding of the CQC Inspection Process and the recent changes
- To increase awareness of CQC documentation available to Practice Managers
- To share elements of good practice and showcase the work of your practice
- Provide time to speak with colleagues and share concerns or anxiety around CQC

Key Topics

- The CQC Inspection
- Latest Guidance
- Changes to the standards and inspection process
- How to prepare for your inspection
- Key Questions and documents

CQC – The Purpose

The Care Quality Commission is the independent regulator of health and adult social care in England.

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

Strategy for 2016-2021

- Responding to changes in health and social care
- Lessons learned from over 2 years of inspections, feedback from the public, service users and other stakeholders
- A more integrated approach that enables CQC to be responsive to changes in care provision
- A more targeted approach that focusses on areas of greatest concern
- A great emphasis on Well-Led

Ratings

- They will rate every population group for every key question
- There will then be an aggregated rating for each population group
- An aggregated rating for each key question
- An aggregated overall rating for the practice as a whole

Rating Principles

If **one or more** of the underlying ratings is "inadequate", then the aggregated rating will normally be limited to "requires improvement".

If **two or more** are inadequate, then the aggregated rating will normally be "inadequate".

At least **two of the five** key questions will normally need to be rated outstanding before a rating of "outstanding" would be awarded.

If a breach of a regulation is identified and a compliance action issued, rating would normally be limited to "requires improvement" at best.

Rating would be inadequate where a breach of a regulation has been identified and a warning notice issued.



1 Every questions for every population group		Safe	Effective	Caring	Responsive	Well Led		Overall	
	Older people		☆		*		-		2 Aggregate
	People with LTCs		•		•		->		rating for every population
	Mothers, children & young people	٠	•	•	•	•	->		group
	Working age population	٠	•	☆		☆	->		1
	Vulnerable circumstances	٠	☆		•	•	-]
	Mental health in primary care	•	•	•	•	•	→		1
3 Aggregated rating for every question		♦	¥	♦	♦	¥		Overall Location	4 Overall rating for
									the practice

*	Outstanding
	Good
•	Requires improvement
•	Inadequate

CQC New Inspection Regime April 2019

- CQC are introducing an annual regulatory review.
- Provider Information Collection
- Annual telephone call and a set of questions
- CQC encourages practices to consider the questions as part of multi-disciplinary team discussions to help reflect on what has changed over the previous 12 months".

PROVIDER INFORMATION COLLECTION (PIC)

- The purpose of the provider information collection is "to provide context to all other information CQC has access to in order to make a decision about whether they need to inspect, what they should focus on, and when this should be".
- It will give providers an opportunity to give their view of the quality of care they are providing
- What has changed about the quality of care provided since the previous year
- What plans are their to improve
- Examples of good practices
- How you provide effective and responsive care to each population group

MORE FOCUS ON WELL LED

By well-led, we mean that the leadership, management and governance of the organisation assures the delivery of high-quality and person-centred care, supports learning and innovation, and promotes an open and fair culture

Outstanding - The leadership, governance and culture are used to drive and improve the delivery of high-quality person-centred care

Good - The leadership, governance and culture promote the delivery of high-quality person-centred care.

Requires Improvement - The leadership, governance and culture do not always support the delivery of high-quality person-centred care. Regulations may or may not be met.

Inadequate - The delivery of high-quality care is no assured by the leadership, governance or culture. Normally some regulations are not met.

Key Changes To Inspection

- Practices rated INADEQUATE would be re-inspected after 6 months
- Practices rated REQUIRES IMPROVEMENT within 12 months
- Practices rated GOOD or OUTSTANDING would move to an inspection interval of upto 5 years, although a proportion would be inspected every year

Summary of changes:

- Maximum five year inspection intervals for most
- Closer working relationship with named inspector at CQC
- Concentrating on leadership and greater emphasis on "well led" domain
- More proportionate action not only inspection
- Increased emphasis on patient outcomes
- A simpler process for low risk registration changes
- More timely information about a provider's performance



TABLE TOP DISCUSSION

KEY QUESTIONS IN YOUR PRACTICE



Data Gathering – GP Insight Report



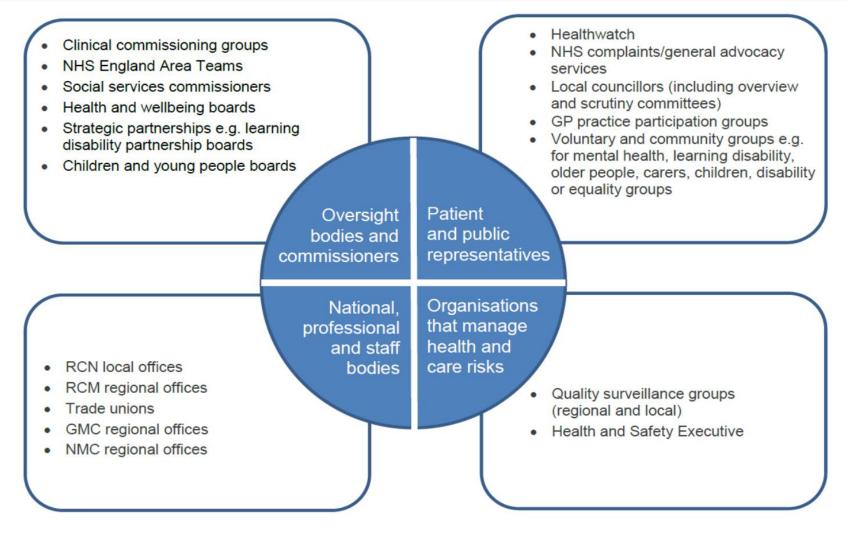
Used in conjunction with information from CCG

 Available on CQC Website

https://www.cqc.org.uk/s ites/default/files/201901 23 GP insight faq evide nce tables.v2.0.pdf

- Replaces previous data pack
- Patient surveys
- Safeguarding incidents
- Whistleblowing

CQC Intelligent Monitoring



Regulation 20A Display Assessments

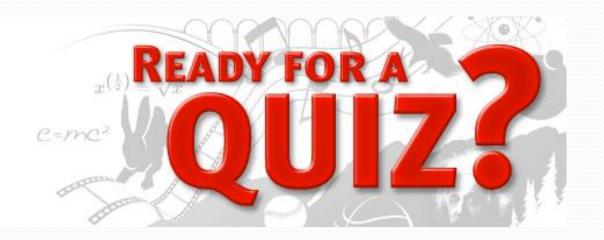
- Website
- CQC website address and location of latest reports and ratings
- The most recent rating
- Practice
- At least one sign with the ratings at each premises
- Conspicuous and legible
- Dated

Registered Manager

- Are you registered correctly inc. Statement of Purpose
- Regulation 4: Requirements where the service provider is an individual or partnership
- Regulation 5: Fit and proper persons: directors
- Regulation 7: Requirements relating to registered managers
- Regulation 14: Being without a Registered Manager for 28 days or more

HOW WELL DO YOU KNOW YOUR PRACTICE PROCEDURES ?

DO YOUR STAFF KNOW AS MUCH AS YOU ?



LUNCH TIME

TOGETHER LUNCHTIMES CAN BE HAPPY TIMES"

JUST A QUICK QUESTION

How many managers take time to have lunch with their staff ??

WELCOME BACK WHAT DO YOU DO WELL FOR YOUR PATIENTS ?



Five Questions

- Is it Safe ?
- Is it Caring ?
- Is if Responsive ?
- Is it Effective?
- Is it Well Led ?



Is it safe ?

People are protected from abuse and avoidable harm :

- Safe patient care
- Safeguarding
- Monitoring safety and responding to risk
- Equipment
- Medicines Management
- Cleanliness and infection control
- Incident recording, reporting and learning taken
- Staffing and recruitment
- Effective emergency preparedness

Is it caring ?

- Staff involve and treat people with compassion, kindness, dignity and respect
- Do people who use services and those close to them receive the support they need to cope emotionally with their care and treatment ?
- Are people involved as partners in their care ?

Is it responsive ?

Services are organised so that they meet people's needs :

- People get treatment and care at the right time, without excessive delay and that they are listened to in a way that responds to their needs and concerns
- Assesses and responds to the needs of the local population
- Access to appointments
- Referral and patient information
- Premises accessible/baby changing facilities
- Equality
- Patient participation and feedback
- Complaint procedure
- Raising concerns
- Open and honest culture

Is it effective ?

People's care, treatment and support achieves good outcomes, promotes a good quality of life and is based on the best available evidence :

- National evidence-based best practice
- Working with other services
- Care tailored to meet the needs of patients who are involved in decisions about their care
- Staff induction, training, CPD, supervision, appraisal, performance management and skill mix
- Referrals
- Managing, monitoring and improving outcomes for patients
- Health promotion and primary prevention

Is it well led ?

The leadership, management and governance of the practice assure the delivery of high quality, person centred care, supports learning and innovation and promotes an open and fair culture

- Vision and strategy
- Systems to monitor and improve quality and improvement
- Patient experience and involvement
- Whistleblowing
- Governance arrangements
- Staff training, supervision, engagement and involvement
- Identification and risk management
- Registration
- Leadership communication

HOT TOPICS!

- Focussing a lot of attention on Medicines Management
- Monitoring antimicrobial use
- Sepsis training and awareness
- Identification of pain and how this is assessed
- Identification of frailty reviews/falls assessment
- Evidence of use of guidelines in consultations and practice (eg BTS/GOLD/NICE/JBS2 etc)
- Monitoring of training of other practitioners and how the service provides quality assurance on their ability/prescribing etc
- Also more about how you are working with other agencies and how sharing of information occurs (OOH's, SW, HV etc)

Patient Feedback

Share your experience

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Inspections		Click for key 🗸 🗙	Ø ☆●●●
Safe	Good 🔵	CQC inspections & ratings of specific services	
Effective	Good 鱼		
Caring	Outstanding 🕁		Good •
Responsive	Outstanding 🕁	term conditions	
Well-led	Good 🔵	Families, children and young people	Good 🌒
lescription of this service		Working age people (including those recently retired and students)	Good ●
tion report		People whose circumstances may make them	Outstanding 🟠
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Patient Participation Group

In practice, PPGs can play a number of roles, including:

- Advising the practice on the patient perspective
- Organising health promotion events
- Communicating with the wider patient body
- Running volunteer services and support groups to meet local needs
- Carrying out research into the views of those who use the practice (and their carers)
- Influencing the practice or the wider NHS to improve commissioning
- Fundraising to improve the services provided
- https://www.napp.org.uk/



Patient Participation Group

Your Visit

- Will usually last one day a long day
- Meet with the registered manager/senior member of staff
- KLOE's used to collect evidence
- Talk to patients experts by experience
- Talk to staff
- Reviewing records / policies / documents
- Pathway tracking
- Observing care
- End of visit high level feedback

Initial Presentation

At the start of the visit, GP practices are asked to **present to the inspection team** their own view of their performance, particularly in relation to the five key questions and six population groups and to **include any examples of outstanding care and practice**. There is no specified format or media for this briefing – the provider can choose whichever format suits them.

It is ideal to use staff from all disciplines and where possible, include a member of the PPG

This should take no longer than 30 minutes.



Let's hear from you

FEEDBACK FROM PRACTICE MANAGERS IN DERBYSHIRE AREA FROM RECENT INSPECTIONS

ARE YOUR CONFIDENT ?

HOW DO YOU FEEL YOU WOULD DO?

The Report

- Under the new inspection process the report will be shorter
- Follows quality checks and evidence
- Draft to be sent to practices for factual accuracy 10 days to respond
- Final report and publishing within 50 days

Enforcements & Actions

What are **Warning Notices** and when does CQC use them? We can serve Warning Notices when:

- Regulations have been breached.
- A section of the Health and Social Care Act 2008 has been breached
- A 'relevant enactment' (another Act with requirements relevant to the fundamental standards) has been breached.
- A condition placed on a registration has been breached.

USEFUL LINKS

- LMC's and your CCG will offer support to practices where physical help is needed
- CQC help and advice go to Nigel's Surgery tips and mythbusters on the CQC website
- Royal College of General Practitioners

practicesupport@rcgp.org.uk

Primary Care Web Tool

https://www.primarycare.nhs.uk/default.aspx

• **QOF** NHS Digital

https://qof.digital.nhs.uk/search/index.asp

Public Health England: immunisation data

https://digital.nhs.uk/data-andinformation/publications/statistical/childhood-imunisation-ccg-gp-practicelevel-coverage-statistics

Cervical screening

https://www.gov.uk/government/publications/cervical-screening-coverageand-data

<u>https://digital.nhs.uk/data-and-information/publications/statistical/cervical-screening-programme/cervical-screening-programme-coverage-statistics-management-information</u>

- Prescribing-open prescribing: https://openprescribing.net
- Public Health Indicators (OOF, demographics, 2ww can be obtained) <u>https://fingertips.phe.org.uk/profile/general-practice/data#page/8</u>
- GP Survey

https://gp-patient.co.uk/

• Friends and Family

<u>https://www.nhs.uk/using-the-nhs/about-the-nhs/friends-and-family-</u> test-fft

USEFUL DOCUMENTS 2019

 How CQC Monitors, Inspects and Regulates GP Practices (Feb 2019)

https://www.cqc.org.uk/sites/default/files/20190225 how CQC regulates primary medical services gp practices.pdf

• Keylines of Enquiry for Healthcare Services

https://www.cqc.org.uk/sites/default/files/20190225 how CQC regulates primary medical services gp practices.pdf

SUMMARY

- Start preparing now !
- If you only read one document, read How CQC Monitors, inspects and regulates NHS GP Practices
- Make sure ALL practice staff are prepared
- Organise your documentation so it is easy to access on the day
- Make your every day practice an outstanding practice
- Think like a CQC inspector !





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