



HCMS Annual Seminar

1 May 2014

HEALTHCARE
MANAGEMENT
SOLUTIONS

Welcome!

Today's sponsors and presenters.....



Welcome!

Today's keynote speaker



Andrea Sutcliffe, Chief Inspector of Adult Social Care



HEALTHCARE MANAGEMENT SOLUTIONS

New developments in regulation



Andrea Sutcliffe
1 May 2014

Healthcare Management Solutions Limited

For people using services:

- CQC is approachable, always on their side and acts in their best interests
- CQC engages with people using services and acts on what they tell us
- CQC holds providers to account and acts swiftly on safety and quality concerns to ensure action is taken
- People have confidence in CQC and trust in our independence, expertise and judgement
- CQC provides clear, relevant and authoritative reports that focus on the needs and experiences of people

For organisations providing care:

- Respect CQC as open, professional, expert and independent and provides value for money
- CQC listens, respects and communicates clearly with providers
- CQC is proportionate, consistent, transparent and fair
- CQC shares providers commitment to improving the services they deliver and providers use CQC's ratings to drive improvement
- CQC listens to staff working in services, and acts on what they say

For local authorities and commissioners:

- Can rely upon the judgements we make to reduce burden of duplication for providers
- Work with local inspectors & inspector managers to share information to inform timing and focus of inspections
- Respond collaboratively to safeguarding issues
- Use our information to support their work

The Mum Test

**Is it
effective?**

**Is it responsive to
people's needs?**

**Is it
safe?**

**Is it
well-led?**



**Is it
caring?**

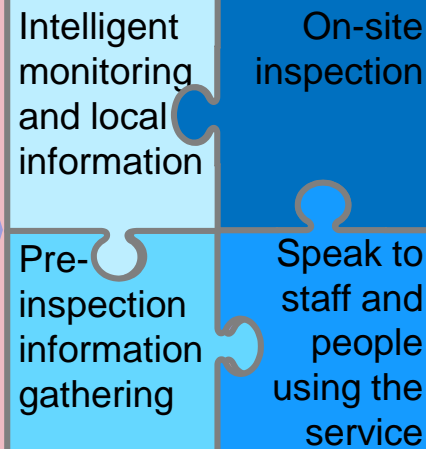
Is it good enough for my Mum?

New approach

Define the
questions to
answer

Key lines of enquiry
(mandatory plus additional KLOEs identified from information held)

Gather and record
evidence from all
sources



Make
judgements
and build
ratings

Apply consistent principles, build ratings from the recorded evidence

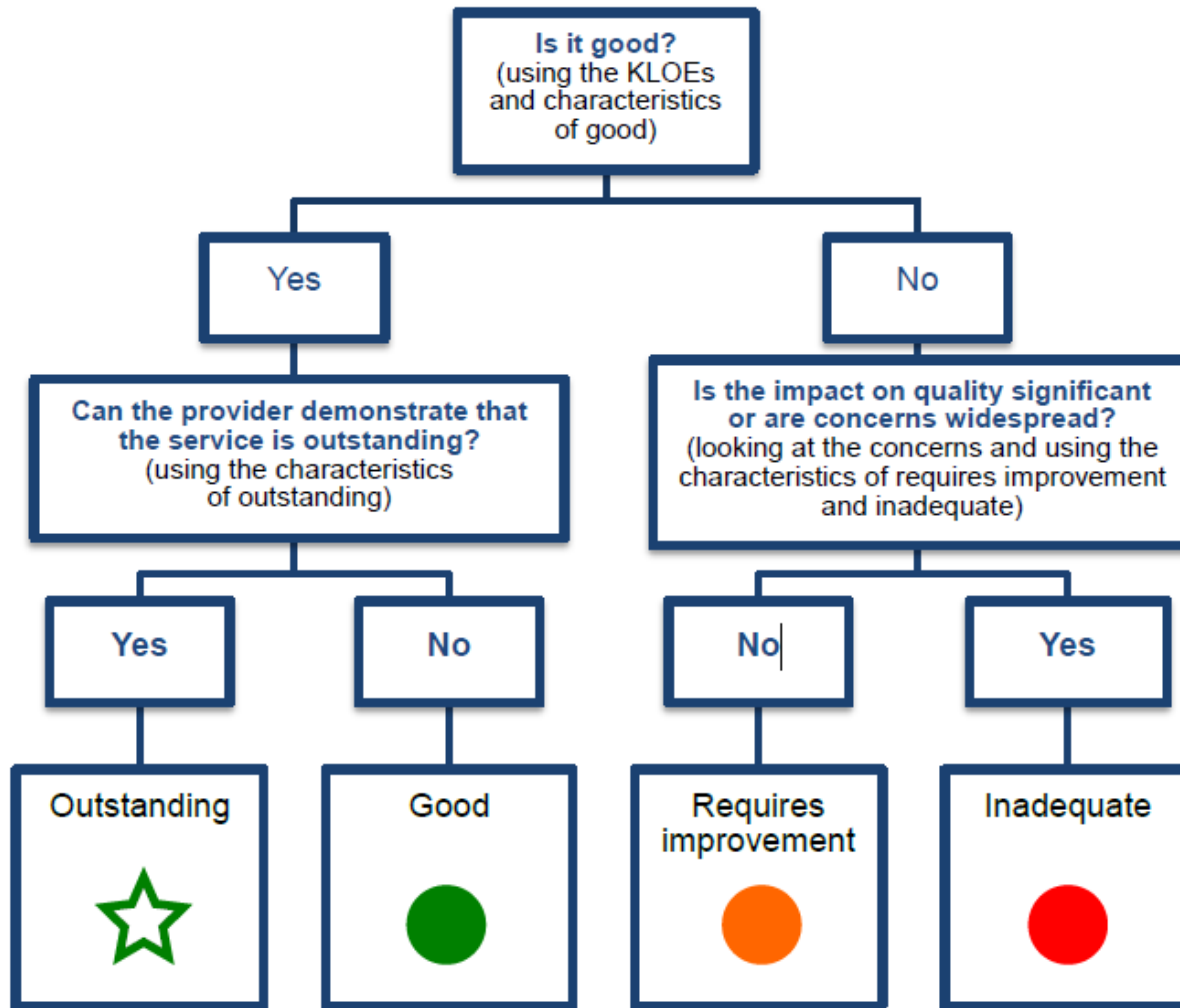
Write report and
publish alongside
ratings

Outstanding 

Good 

Requires improvement 

Inadequate 



What will be different?

Now	Future
Risk based model	More targeted
Caseloads	More manageable
Making judgements	On the 5 key questions
Enforcement when needed	Commitment to taking firm action
Publishing our findings	Clearer reports
Ongoing monitoring	Better information

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

- In adult social care, this means that people get the care they need, are listened to and have their rights and diverse circumstances respected

Key line of enquiry example:

How does the service promote a positive culture that is person centred, open, inclusive and empowering?

What does well-led: Outstanding look like?



- The management team is an efficient role model
- Management find creative ways for people to be empowered and the culture encourages people to raise concerns – which are acted upon
- The emphasis is on striving to improve
- Outstanding practice, systems and improvements
- Achieves recognised accreditation schemes
- Clear vision and strong practice are put into practice
- Management ensures they seek out and follow best practice

Timetable

**Oct 2013 –
March 2014**

Co-production and development to shape consultation proposals

**April
2014**

Consultation on regulatory approach, ratings and guidance

**April –
May 2014**

Wave 1 pilot inspections

**June
2014**

Evaluation; guidance and standards refined.

**July –
Sept 2014**

Wave 2 pilot inspections and initial ratings of some services

**Oct
2014**

New approach fully implemented and indicative ratings confirmed

**March
2016**

Every adult social care service rated



**4 June:
Consultation
closes**

- Starts April 2015 (pending passage of Care Bill)
- Targeted, proportionate and risk-based
- Purpose:
 - Spot if a “Southern Cross” could happen again
 - Protect vulnerable people, ensure continuity of care
- Action:
 - Monitoring finances of ‘difficult to replace’ providers
 - Provide early warning to local authorities
 - Co-ordinate the system response if failure occurs



- Issues to address:
 - Providers to include – regulations will specify criteria on size, geographic concentration and specialism
 - Information to collect – methods will not be defined in the regulations
 - CQC powers to access information from groups
 - Sharing intelligence, learning from other industries
 - Responding to identified risks

Market oversight timetable



Date	Activity
May- July 2014	Department of Health consultation on draft regulations
Oct 2014	Draft regulations laid before Parliament
Jan – Dec 2014	Development of CQC approach and methodology
Oct – Nov 2014	CQC consultation on proposed methods
Jan / Feb 2015	Identify providers that meet the market oversight entry criteria as specified in the regulations
April 2015	Start to undertake financial assessments of providers in the scheme

- Consultation: 9 April to 4 June 2014

Get involved:

- Web form on **CQC website**
- Twitter **@CareQualityComm**
- **CQCchanges.tellus@cqc.org.uk**
- Provider and public events – 21 events from 25 April to 4 June



<https://registration.livgroup.co.uk/cqcconsultsprovider2014/>

Thank you



www.cqc.org.uk

Andrea Sutcliffe
Chief Inspector of Adult Social Care



@CrouchEndTiger7

What will be different?



Intelligent monitoring

- Provider information return
- Questionnaires - community services
- Sharing information with external partners

Inspections

- 6 months – 2 years
- Tailored inspection teams
- Increased use of experts
 - Experts by Experience
 - Specialist Advisors

Our purpose and role

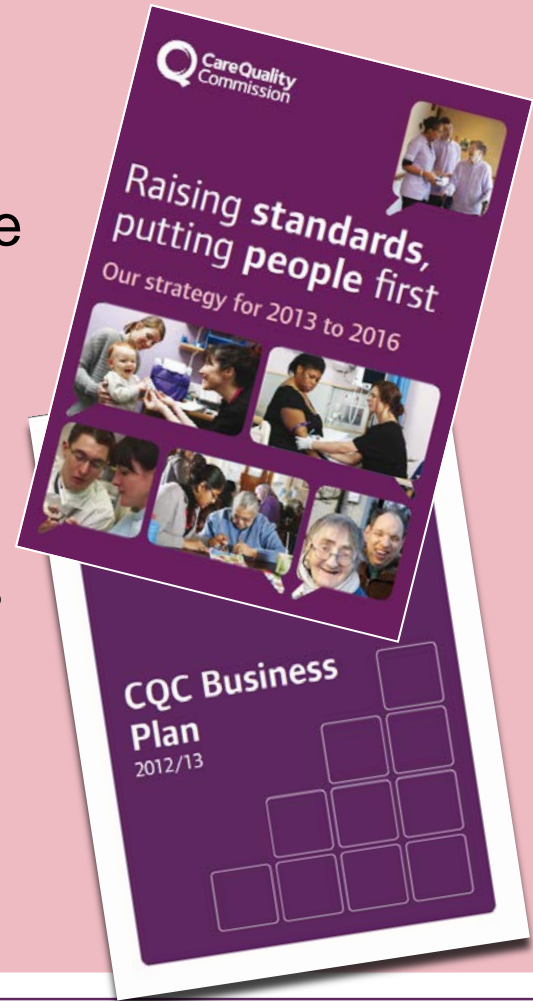


Our purpose

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

Our role

We monitor, inspect and regulate services to make sure they meet fundamental standards of quality and safety and we publish what we find, including performance ratings to help people choose care





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