Care Quality Commission New Inspection Framework

Background

The Care Quality Commission has introduced a new system of inspection for adult social care services in England, which came into effect on October 1st.

Practice areas affected:

Commissioners of residential and community-based social care services; providers and managers of residential and community-based social care services.

Status:

Care Quality Commission Guidance.

Summary

Five ‘key lines of enquiry’ guide inspections. They are followed up by addressing the following questions:

- Is the service safe?
- Is it caring?
- Is it effective?
- Is it responsive to people’s needs?
- Is it well-led?

Within each of these key lines of enquiry there is a four-tier ratings system that is used to rank services as outstanding, good, requires improvement or inadequate. There are characteristics against which services are judged for each of the rating tiers.

The Guidance

Inspectors are expected to look for what is good in a service. The sections describing the characteristics of the ‘good’ tier for each key question have the most detail. The sections for the other three tiers (outstanding, requires improvement and inadequate) build on the description for ‘good’ and describe how the characteristics of those three tiers differ from the description of ‘good’. For example, if a service is considered ‘good’ in relation to the question is the service safe? (see below), inspectors are told to check whether they have sufficient evidence to rate it as outstanding.
If a service does not have the characteristics that describe a ‘good’ service, inspectors are told to review the evidence in order to judge whether it requires improvement or is inadequate.

An example of the characteristics used with regard to adult residential social care services to judge whether they achieve the rating tier ‘good’ for the key question ‘is the service safe?’ illustrates the Care Quality Commission’s approach:

- People’s feedback about the safety of the service describes it as consistently good and that they feel safe;
- People are safe because the service protects them from bullying, harassment, avoidable harm and potential abuse;
- The staff have a comprehensive awareness and understanding of potential abuse which helps to make sure that they can recognise cases of abuse. The service does this consistently so that people feel safe whether they are in the service itself or out in the community;
- There is a culture of learning from mistakes and an open approach. The service manages incidents, accidents and safeguarding concerns promptly and, where required, investigations are thorough. There is a consistent approach to safeguarding and matters are always dealt with in an open, transparent and objective way;
- The service has a proactive approach to respecting people’s human rights and diversity and this prevents discrimination that may lead to psychological harm;
- When people behave in a way that may challenge others, staff manage the situation in a positive way and protect people’s dignity and rights. They regularly review how they do this and work with people, supporting them to manage their behaviour. They seek to understand and reduce the causes of behaviour that distresses people or puts them at risk of harm. They make sure people are referred for professional assessment at the earliest opportunity. Staff only use restraint if they have been trained to use it and when it is safe and necessary to do so;
- There are policies and procedures for managing risk and staff understand and consistently follow them to protect people. Restrictions are minimised so that they feel safe but also have the most freedom possible – regardless of disability or other needs. Staff give people information about risks and actively support them in their choices so they have as much control and independence as possible. Risk assessments are proportionate and centred around the needs of the person. The service regularly reviews and takes note of equality and human rights legislation. There are strategies to make sure that risks are anticipated, identified and managed;
- Providers with national and regional structures make sure they keep an overview of risk and safety to inform their business planning and strategic oversight and to provide corporate direction to the organisation;
- Staff manage medicines consistently and safely. The service stores medicines correctly, disposes of them safely and keeps accurate records. People are assured they receive their medicines as prescribed. Where appropriate, the service involves people in the regular review and risk assessment of their medicines and supports them to be as independent as possible;
- To protect people with limited capacity to make decisions about their own care or treatment, the service follows correct procedures when medicines need to be given to people without their knowing, or when people require specialist medication. The service assesses the risk when people wish to manage their own medicines;
• The service keeps the premises, services and equipment well maintained. It takes all possible action to reduce the risk of injury caused by the environment people live in, and looks for ways to improve safety. Staff use equipment correctly to meet statutory requirements and to keep people safe. People say they know that the service will always keep them and their belongings safe and secure;

• The service manages the control and prevention of infection well. Staff follow policies and procedures that meet current and relevant national guidance and are kept up to date. Staff understand their role and responsibilities for maintaining high standards of cleanliness and hygiene;

• There are always enough competent staff on duty who have the right mix of skills to make sure that practice is safe and they can respond to unforeseen events. The service regularly reviews staffing levels and adapts them to people’s changing needs. Recruitment systems are robust and make sure that the right staff are recruited to keep people safe;

• Management identifies risks to the service and manages them well. Staff understand how to minimise risks and there is a good track record on safety and risk management. If action plans are required, they are monitored to make sure they are delivered. The service consistently focuses on how they can improve their safety record.

Further Reading

Care Quality Commission: Our New Inspection Model. 
http://www.cqc.org.uk/content/our-new-inspection-model

Care Quality Commission: Guidance for Commissioners and Managers of Adult Social Care Services. http://www.cqc.org.uk/content/adult-social-care#kloe-characteristics


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