



Next Phase and Kent Overview 27th March 2018

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Registered Active Locations In Kent = 800
564 residential 233 community based 3
hospice

So what does that look like across the
County?

Ratings by service type for Kent

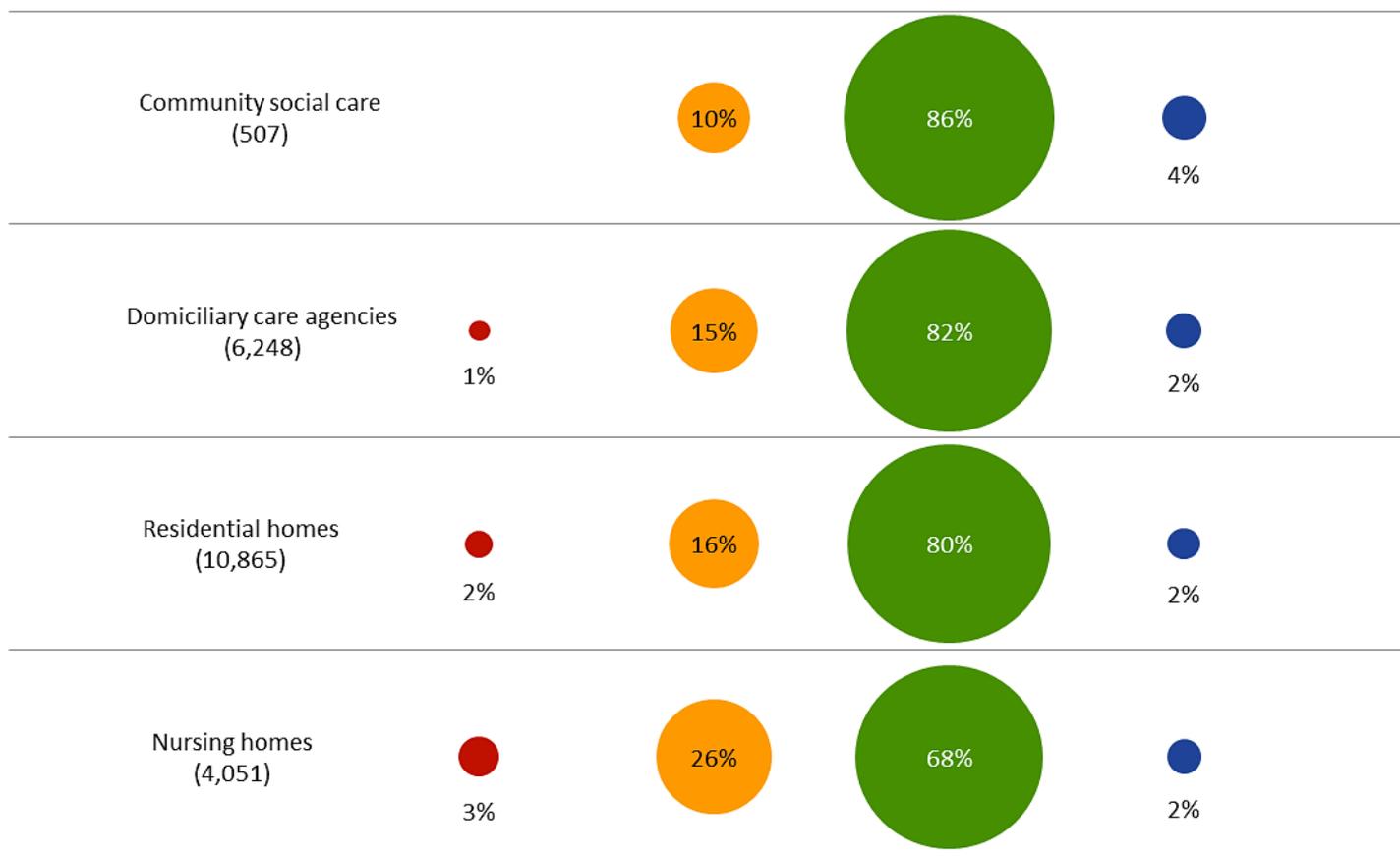
Ratings by type of service (Kent)



Note: not all percentages add up to 100 due to rounding

Ratings by service type for England

Ratings by type of service (All England)

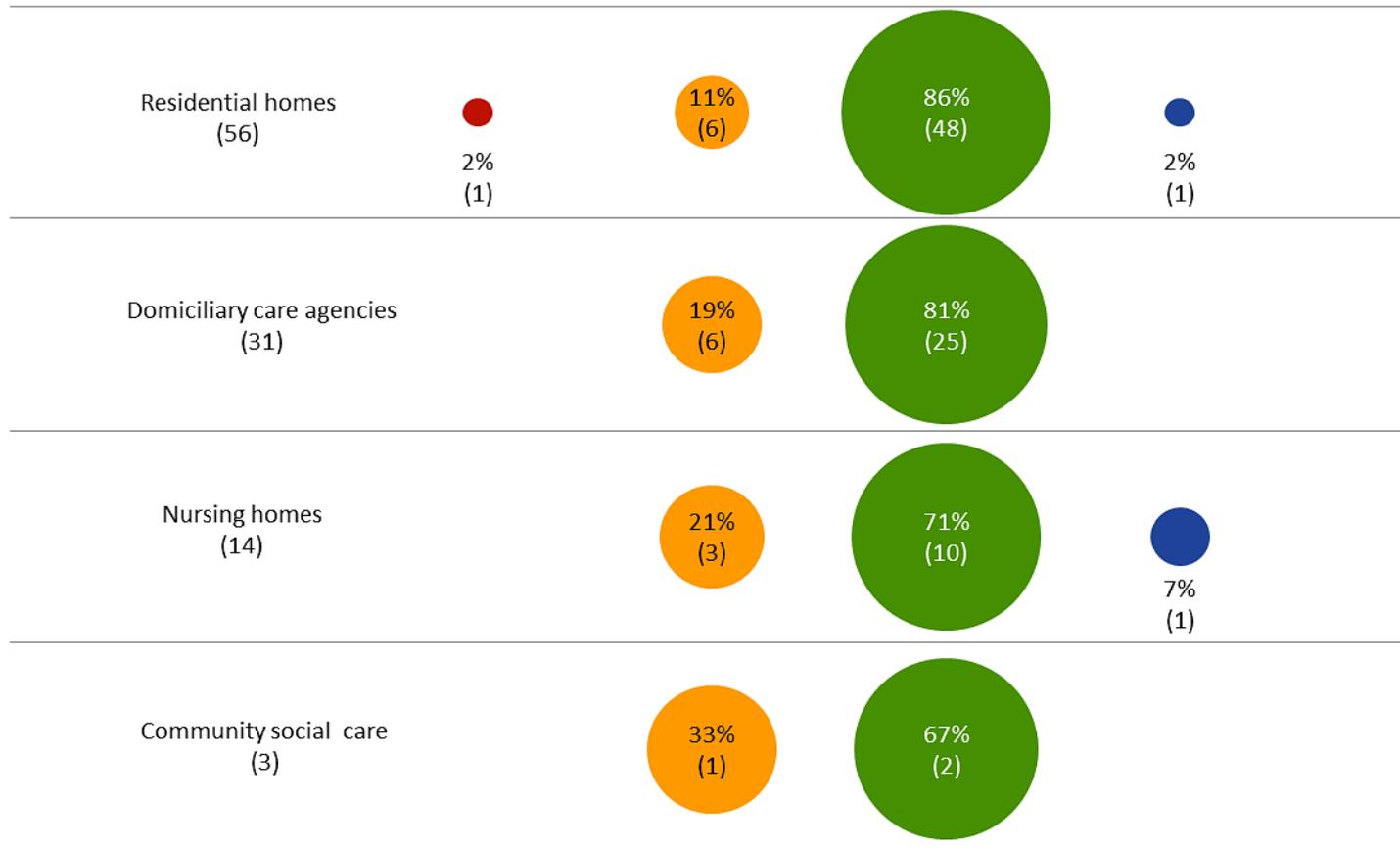


Note: not all percentages add up to 100 due to rounding

Ratings by service type for Medway



Ratings by type of service (Medway)

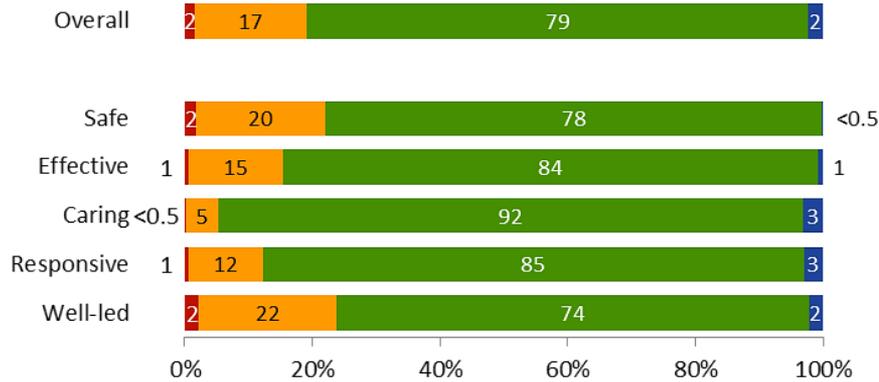


Note: not all percentages add up to 100 due to rounding

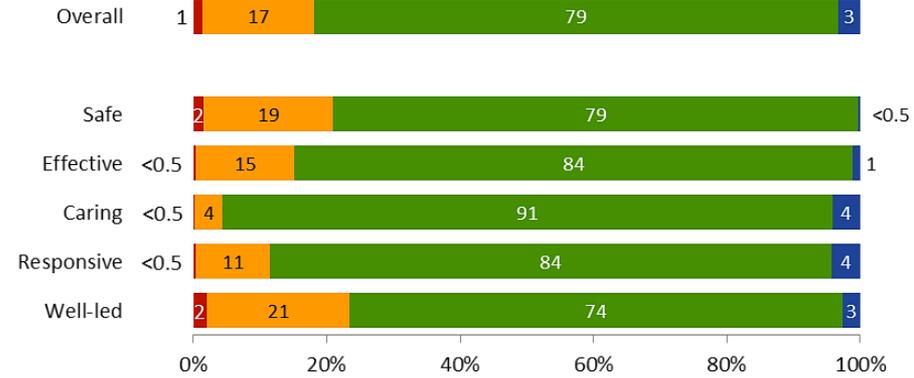
Ratings for ASC locations in Kent ratings are worse for all key questions when compared to the South East and England, whilst Medway ratings are mixed with some key questions worse and some better than the South East and England.



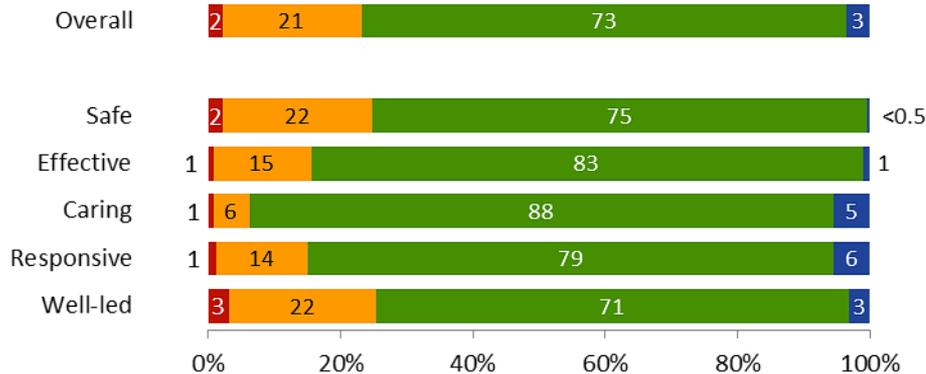
England (21,738)



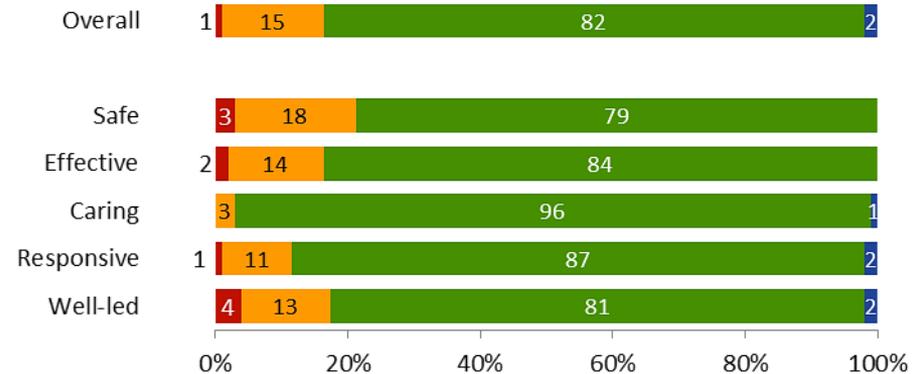
South East (4,027)



Kent (716)



Medway (104)



Note: not all percentages add up to 100 due to rounding

Our next phase of regulation:
a more targeted,
responsive and
collaborative
approach



The reason for change



How we have updated our approach and our assessment framework to reflect the changing provider landscape

more integrated approach that enables us to be **flexible** and **responsive** to changes in care provision

more targeted approach that focuses on **areas of greatest concern**, and where there have been improvements in quality

greater emphasis on **leadership**, including at the level of overall accountability for quality of care

closer working and **alignment** with NHS Improvement and other partners so that providers experience **less duplication**

- New shared inspection handbook
 - Changes to Key Lines of Enquiry and Ratings Characteristics
 - The future of provider information requests
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- In November 2017 we published a shared handbook for providers, inspectors and the public
- This replaces the current provider and inspector handbooks and ensures that inspection guidance is transparent and clear for all who use it



Some key changes for ASC

Safe – support for people when behaviour challenges: *Moved from Effective*

Effective – processes to ensure no discrimination

Moved from Safe

Effective – organisations working together

Moved from Responsive

Effective – staff working together across organisations *Moved from Responsive*

Responsive – supporting people at the end of their life *Moved from Caring*

Key Changes for ASC

- **S1** How do systems, processes and practices safeguard people from abuse?
- **S6** Are lessons learned and improvements made when things go wrong?
- **E1** Are people's needs and choices assessed and care, treatment and support delivered in line with current legislation, standards and evidence-based guidance to achieve effective outcomes?
- **W2** Does the governance framework ensure that responsibilities are clear and that quality performance, risks and regulatory requirements are understood and managed?
- **W3** How are the people who use the service, the public and staff engaged and involved?

Eleven Changed KLOEs



Key Changes for ASC

- **S2** How are risks to people assessed and their safety monitored and managed so they are supported to stay safe and their freedom is respected?
- **S4** How does the provider ensure the proper and safe use of medicines?
- **E2** How does the service make sure that staff have the skills, knowledge and experience to deliver effective care and support?
- **E5** How are people supported to have healthier lives, have access to healthcare services and receive ongoing healthcare support?
- **E6** How are people's individual needs met by the adaptation, design and decoration of premises?
- **C1** How does the service ensure that people are treated with kindness, respect, and compassion, and that they are given emotional support when needed?

Key Changes for ASC

- **C2** How does the service support people to express their views and be actively involved in making decisions about their care, support and treatment as far as possible?
- **C3** How is people's privacy, dignity and independence respected and promoted?
- **R2** How are people's concerns and complaints listened and responded to and used to improve the quality of care?
- **W1** Is there a clear vision and credible strategy to deliver high-quality care and support, and promote a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people?
- **W4** How does the service continuously learn, improve, innovate, and ensure sustainability?



- The way we ask you to provide information about your services will change
- ‘Provider Information Collection’ which is an electronic system developed and being tested with providers
- One PIC replaces the multiple PIR forms formerly sent to providers requesting information

Preparing for Information Requests



Providers will be asked for key information about their service, how it is meeting the five questions, and what improvements they plan to make

Providers will be required to update their account at least once a year but encouraged to provide certain information more frequently and will also be able to update at anytime

Remember that inspectors will use your response in the planning of their inspection so consider what it is that you want to inspection team to know about your service, what your team has achieved and what you are most proud of

Remember why we do this.....



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Thank you



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