

# Raising standards, putting people first

Healthier Communities  
Select Committee



29 May 2013

# Hayley Marle

**Compliance Manager- Lewisham, Lambeth  
and Southwark**

**[hayley.marle@cqc.org.uk](mailto:hayley.marle@cqc.org.uk)**

**03000 61 61 61 or 07919 891 583**

The purpose of this presentation is to inform the committee of :

Part one - CQC strategy 2013-16

Part two - CQC activity in Lewisham health and social care services



## How we've got here - Views, comments and recommendations



- CQC public consultation Sept - Dec 2012
- Francis Report recommendations and the Government's response
- Winterbourne View Serious Case Review
- Health Select Committee report
- Review of CQC regulatory model by Kieran Walshe
- Review of CQC investigations by Deloitte
- Health and social care ratings review by the Nuffield Trust



### 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

## Underpinning our approach



- Our judgements will be independent of the health and social care system
- We will always be on the side of people who use services



## Five influences on quality



- Commissioners
- Professionals
- Providers
- Regulators
- People who use services



## Five things we will look at



We will tackle the following five questions about services:

1. Are they safe?
2. Are they effective?
3. Are they caring?
4. Are they well led?
5. Are they responsive to people's needs?



## Things we will do differently



- Appoint a Chief Inspector of Hospitals (recruitment process started), and a Chief Inspector of Adult Social Care and Support (advert will be out soon), and consider the appointment of a chief inspector for primary and integrated care
- Develop fundamental standards
- Specialist inspectors leading expert teams, including clinical and other experts, and experts by experience
- NHS hospitals: national teams with expertise to carry out in-depth reviews of hospitals with significant problems



## Things we will do differently



- NHS hospitals: a clear programme for failing trusts that makes sure immediate action is taken to protect people and deal with failure
- Predict, identify and respond more quickly to services that are failing, or likely to fail, by using information and evidence in a more focused and open way – including people's views and experiences
- Improve understanding of how well different care services work together
- Work more closely with our partners in the health and social care system to improve the quality and safety of care



## Things we will do differently



- Publish better information for the public, including ratings of services
- A more thorough test for organisations applying to provide care services, making sure named directors, managers and leaders commit to meeting standards, which is tested at registration
- Strengthen the protection of people whose rights are restricted under the Mental Health Act
- Build a high-performing organisation that is well run and well led, has an open culture that supports its staff, and is focused on delivering its purpose



## What we will continue to do



- A programme of unannounced inspections and reporting across the sectors we regulate
- Inspections at any time in response to concerns
- Inspections and reviews on particular areas of care
- Regulatory and enforcement action



## Next steps



- Changes for 2013/14 set out in our [Business Plan](#)
- We will deliver:
  - New fundamental standards
  - New hospital inspection methods
  - Hospital ratings
  - Begin to develop changes for other sectors
- Continued involvement of staff, providers, stakeholders and public in the development of our work
- Further consultations to be launched soon

## Part two – Lewisham



<b>Service type</b>	<b>Number of locations registered with CQC</b>	<b>Inspected between 1 April 12 and 31 March 2013</b>
NHS (Lewisham hospital)	1	1 (100%)
Social Care	103	103 (100%)
Independent Healthcare	13	8 (62%)
Primary Dental Care	39	10 (26%)
Primary Medical Services	46	Registered as of 1 April 2013
<b>Total</b>	<b>202</b>	<b>120/156 (77%)</b>

## ASC broken down



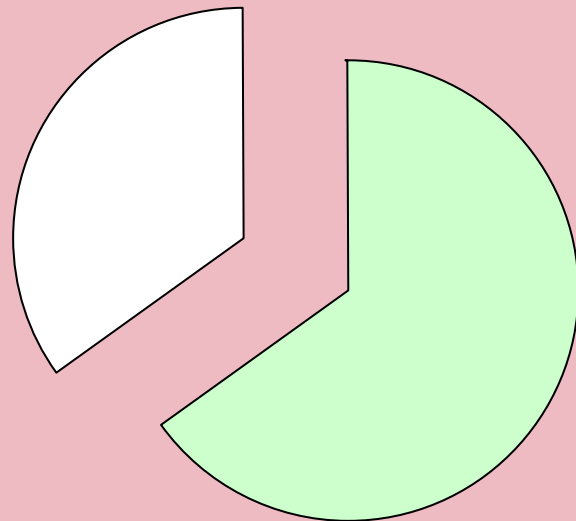
Care home service without nursing	42
Domiciliary care services	34
Care home service with nursing	18
Rehabilitation services	12
Support living service	9
Extra care housing services	7
Shared lives	2
Community based services	3

NB. Locations can provide more than one type of service

## What we found in social care



- 36 (35%) locations we found non compliance with one outcome or more
- 67 (65%) locations we found compliance with all five outcomes inspected



■ Compliance ■ Non compliance





## Outcomes where we more commonly find non compliance



Outcome 14 – Supporting workers

Outcome 16 – Assessing and monitoring the quality of service provision

Outcome 4 – Care and welfare of people who use the service

Outcome 21 - Records

## Examples of services where we found improvements at follow ups



### Housing 21 – Cedar Court Cinnamon Court

- Staffing numbers, supporting staff and cleanliness and infection control

### Housing 21 –Cinnamon Court

- Respecting and involving people, care and welfare, and supporting staff

### Fieldside Care Home

- Records

- Alexander Care Centre (report published 9 May 2013). 78 beds very positive feedback from people, family, staff and other healthcare professionals. A well maintained environment
- Aster House (report published 23 April 2013) eight women with mental health problems – open and responsive manager
- Jigsaw Project (report published 8 November 2012) support in the community to 28 people with mental health problems. Stable management and people were very positive about the service



# Coming soon.... Area Profiles

