

Care England summary of CQC Board meeting papers 17 June 2020

Paper 1: Minutes from the Previous meeting

ITEM 4 – EMERGENCY SUPPORT FRAMEWORK

CCQ's National Customer Service Centre colleagues have continued to offer full service and that processing of information from the Give Feedback on Care portal also continued.

CQC have been using the lockdown period to make changes that will help the way they regulate in the future.

CQC note that the Emergency Support Framework (ESF) is not a means of inspecting and rating. They anticipate that, over the coming weeks, where necessary, inspectors can visit premises and ask questions face to face.

CQC note that they can aggregate information from the ESF to regional or local authority level, to inform regional conversations about risk and enabling reporting on emerging pictures at that level.

ITEM 5 – COVID-19 Insight

CQC remain concerned about discharge of people from hospitals to ASC settings without appropriate information-sharing that would allow the care setting to make an assessment of risk and to protect their residents and staff. CQC are investigating a small number of cases where care homes have informed CQC this has occurred and will take action as appropriate.

As the infection rate declines, CQC want to test how NHS, Primary Care and ASC services are working together to prioritise the reopening of care for non-Covid patients. CQC want to be clear how services understand the risk in their area and how they safely improve access to care for different groups.

The need for transparency is something CQC will be championing at the next National Quality Board meeting. Transparency across the system enhances trust.

CQC have created a page on their website for providers to bring together the guidance from other organisations that relates to them.

ITEM 6 – FINANCIAL IMPACT OF COVID-19 ON THE CARE SECTOR

For care homes, there was a typical occupancy decline of over 6% in April and a current expectation of a further decline of over 10% owing to a continued mismatch between the number of deaths and admissions.

On a best-case basis, the occupancy recovery period is likely to be around 2 years.

Responses from the Market Oversight providers have suggested that some form of Covid-19 support has been offered by around 60% of local authorities (although this was variable, averaging at around 7% uplift), but that they were much less likely to receive any offer of support from (around 10% having made an offer).

Using an average occupancy decline in April of around 7% and a forecast occupancy decline being broadly a further 10% to calculate occupancy reduction, and assuming operators flex their capacity to be around 80%, this would suggest a vulnerability of around 50,000 beds. However, this is based on assumptions on information that is changing, and only a 10% sample size.

ITEM 7 – EXECUTIVE TEAM REPORT

A Board member asked about how CQC are capturing the learning from their response to Covid-19. CQC responded that they have adapted the workshop to focus on new and adapted behaviours, and that the pulse survey includes a free text question to identify positive change over the last two months.

Paper 2: Executive Team Update

Upcoming activity of interest

CQC will be undertaking Provider Collaboration Reviews to understand how local systems have worked together during the crisis, with a view to sharing stories of best practice in their insight reports.

Members of the Leadership team will participate in organisation-wide calls in the coming month focusing on the disproportionate impact of Covid 19 on Black and minority ethnic colleagues, and to ensure support is in place for all who need it.

Restraint, Segregation and Seclusion/Closed Cultures update

CQC are publishing an update to their supporting information for inspectors on closed cultures in June. CQC have developed this using feedback from people who use services, families, voluntary sector stakeholders, and other health and care bodies. CQC will be rolling out mandatory training from the 22 June to support their regulatory colleagues to use this guidance to inform inspection activity in the coming months with all Inspectors needing to complete this by the end August.

CQC are working in collaboration with Warwick University to develop a tool for inspectors to assess how well Positive Behaviour approaches are used in a range of health and social care services. This will be developed in collaboration with an Expert by Experience. The requirements for the tool will have been gathered by the end of August.

Special Educational Needs and Disability (SEND) – Joint Inspectorate programme Ofsted – CQC

DfE have now commissioned Ofsted and CQC to review the current arrangements and develop a new inspection framework to run from April 2022. As with the current programme, DfE will provide additional funding to resource the programme.

Local Systems work

In greater detail than the insight approach, CQC will commence a Provider Collaboration Review (PCR) programme with a focus on the interface between health and adult social care for the over 65 population group. This will include a focus on their access to and experiences of urgent and emergency care services. CQC are taking this approach because of the risks that have emerged between health and social care, supporting the providers and people living in care homes and/or in

receipt of domiciliary care. Their ambition is to look at provider collaboration in all ICS/STP areas. CQC will be undertaking a phased approach (between June and August 2020) to introduce PCRs (across providers in an ICS/STP area) and following their first series of reviews CQC will produce an interim report for publication externally that draws together the learning.

Forthcoming Publications

COVID-19 Insight – issue 2: After the 17 June Board meeting, CQC will publish the second of what is a regular series of insight documents aimed at highlighting COVID-19 related pressures on the sectors that CQC regulates. It draws on information gathered through feedback from staff and people receiving care, their regular data collection from domiciliary care services, and insight from their regular conversations with providers and partners.

Controlled Drugs Annual Report 2019: The Controlled Drugs Annual Report is CQC's annual update on their regulatory oversight of the Controlled Drugs Regulations for the calendar year 2019.

Give Feedback on Care year-long campaign - Public Launch: CQC are launching a new campaign with Healthwatch England to support and encourage more people in England to feedback on health or social care services they or a loved one have experienced.

Adult Inpatient Survey: The adult inpatient survey is part of the NHS Patient Survey Programme delivered by CQC on behalf of NHS England and the DHSC. The survey is an important independent measure of people's experiences as an inpatient and provides NHS trusts with insight into the experiences of the people to whom they deliver services. It is carried out annually and the results feed into their intelligence about NHS trusts, which directs the focus of their inspections.

For the full list of Board papers, please see: <https://www.cqc.org.uk/about-us/board-meetings/care-quality-commission-board-meeting-17-june-2020>

If you have any questions please do not hesitate to contact George at gappleton@careengland.org.uk