

Prepare to Pass

How QCS Quality Centre can help you
prepare for your next CQC Inspection.



Speakers



Steven Crouch
Product Marketing Manager



Lindsay Rees
Head of Product Content



Alana Grant
Product Manager

About us

At its core, the award winning QCS System is your digital hub for quality compliance and knowledge. We make compliance management easy so you can focus on what matters most – **delivering quality care.**

Policies, procedures, and compliance toolkits shaped to **your business.**

Our team of **care specialists** provide you the latest expert insights, guidance, and knowledge.

Instant updates are delivered digitally, **24/7**, via QCS Policy Centre and QCS Mobile App.



163,500
registered users



7,200+
organisations
relying on QCS



100,000+
policies read
and shared
every week



2,300+
policies



1,000+
policy updates
every month



7,000+
best practice
and guidance
resources

Poll

How prepared are you for your next inspection?

CQC: What has stayed the same?

The 5 Key Questions

Overall Outstanding Read overall summary	Safe	Good ●
	Effective	Outstanding ☆
	Caring	Good ●
	Responsive	Good ●
	Well-led	Outstanding ☆

Overall Inadequate Read overall summary	Safe	Inadequate ●
	Effective	Inadequate ●
	Caring	Requires improvement ●
	Responsive	Inadequate ●
	Well-led	Inadequate ●

Ratings

Overall Good Read overall summary	Safe	Good ●
	Effective	Good ●
	Caring	Good ●
	Responsive	Good ●
	Well-led	Good ●

Overall Requires improvement Read overall summary	Safe	Requires improvement ●
	Effective	Requires improvement ●
	Caring	Good ●
	Responsive	Good ●
	Well-led	Requires improvement ●

CQC: What has changed?

A single framework - the same criteria for all services

Old system

Sectors and service types



Adult social care

Care homes, home care, specialist colleges, extra care, supported living and Shared Lives schemes



GPs

NHS GP practices



NHS trusts

NHS acute, ambulance, community health, mental health and substance misuse services



Dentists

Includes dental surgeries, services that visit people in their homes and out-of-hours emergency services



Online primary care

Services that offer consultation, diagnosis or treatment online only



Urgent care

Includes NHS 111 and GP out-of-hours services

New system


**One Single Assessment
Framework for all providers,
local authorities, and integrated
care systems**

CQC: What else has changed?

Date of inspections no longer linked to rating

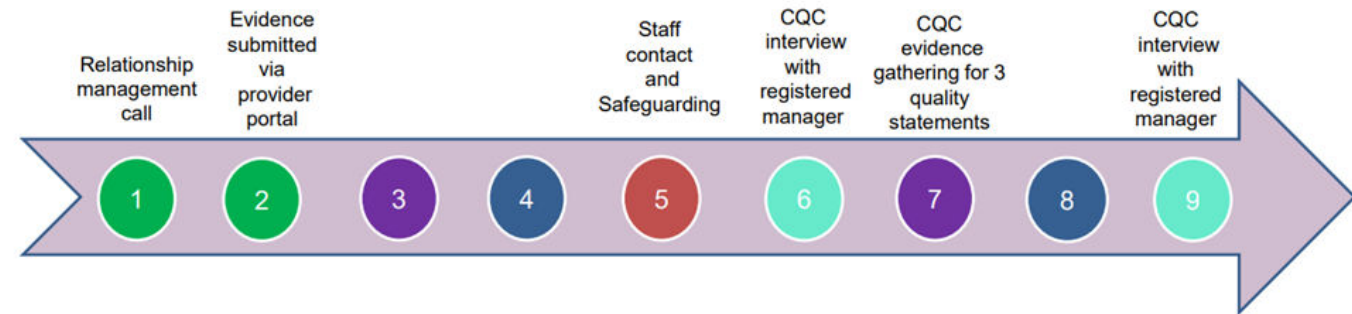
Ratings may be changed without site visits or looking at all Quality Statements



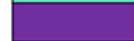


Desktop assessment using digital evidence collected remotely

 **Provider portal**

Always 'On' framework – flexible and 'risk based'

Annual cycle - illustrative



	Planned/routine information collection/contact
	Responsive (CQC led) information collection/contact
	Assessment
	Publication
	Information CQC receives

All 335 KLOEs have gone

Safe

By safe, we mean people are protected from abuse* and avoidable harm.

*Abuse can be physical, sexual, mental or psychological, financial, neglect, institutional or discriminatory abuse.

Code	Key line of enquiry / prompt	Applies to
S1	How do systems, processes and practices safeguard people from abuse?	All services
S1.1	How are safeguarding systems, processes and practices developed, implemented and communicated to staff?	All services
S1.2	How do systems, processes and practices protect people from abuse, neglect, harassment and breaches of their dignity and respect? How are these monitored and improved?	All services
S1.3	How are people protected from discrimination, which might amount to abuse or cause psychological harm? This includes harassment and discrimination in relation to protected characteristics under the Equality Act.	All services



34 New 'Quality Statements' have replaced the KLOEs 'The We Statements'

Effective:

1. Assessing needs
2. Delivering evidence-based care and treatment
3. How staff, teams and services work together
4. Supporting people to live healthier lives
5. Monitoring and improving outcomes
6. Consent to care and treatment

Well-led:

1. Shared direction and culture
2. Capable, compassionate and inclusive leaders
3. Freedom to speak up
4. Workforce equality, diversity and inclusion
5. Governance, management and sustainability
6. Learning, improvement and innovation
7. Partnerships and communities
8. Environmental sustainability

'We understand any negative impact of our activities on the environment, and we strive to make a positive contribution in reducing it and support people to do the same'

34 'Quality Statements have replaced the KLOEs 'The We Statements'

Caring:

1. Kindness, compassion and dignity,
2. Treating people as individuals
3. Independence, choice and control
4. Responding to people's immediate needs
5. Workforce wellbeing and enablement

'We care about and promote the wellbeing of our staff, and we support and enable them to always deliver person-centred care

Responsive:

1. Person-centred care
2. Care provision, integration, and continuity
3. Providing information
4. Listening to and involving people
5. Equity in access
6. Equity in experiences and outcomes
7. Planning for the future

Safe:

1. Learning culture
2. Safe systems, pathways, and transitions
3. Safeguarding
4. Involving people to manage risks
5. Safe environments
6. Safe and effective staffing
7. Infection prevention and control
8. Medicines optimisation

QCS Key Question Quality Statement Posters

Safe

Effective

Well-led

Caring

Responsive






CQC Quality Statements: Safe

Quality statements are the commitments that providers, commissioners and system leaders should live up to. Expressed as 'we statements', they show what is needed to deliver high-quality, person-centred care.

Safe: Quality statements CQC will use to assess quality

Safety is a priority for everyone. It is important that people are always safe and protected from bullying, harassment, avoidable harm, neglect, abuse and discrimination. When people raise concerns about safety and ideas to improve, the primary response is to learn and improve continuously.

Solutions to risks are developed collaboratively. Services are planned and organised with people and communities in a way that improves their safety across their care journeys. Leaders ensure there are enough skilled people to deliver safe care that promotes choice, control and individual wellbeing.

Learning culture We have a proactive and positive culture of safety based on openness and honesty, in which concerns about safety are listened to, safety events are investigated and reported thoroughly, and lessons are learned to continually identify and embed good practices.	Safe and effective staffing We make sure there are enough qualified, skilled and experienced people, who receive effective support, supervision and development. They work together to provide safe care that meets people's individual needs.
Safe systems, pathways and transitions We work with people and our partners to establish and maintain safe systems of care, in which safety is managed, monitored and assured. We ensure continuity of care, including when people move between different services.	Infection prevention and control We assess and manage the risk of infection. We detect and control the risk of it spreading and share any concerns with appropriate agencies promptly.
Safeguarding We work with people to understand what being safe means to them as well as with our partners on the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect. We make sure any concerns are shared quickly and appropriately.	Medicines optimisation We make sure that medicines and treatments are safe and meet people's needs, capacities and preferences by enabling them to be involved in planning, including when changes happen.
Involving people to manage risks We work with people to understand and manage risks by thinking holistically so that care meets their needs in a way that is safe and supportive and enables them to do the things that matter to them.	Safe environments We detect and control potential risks in the care environment. We make sure that the equipment, facilities and technology support the delivery of safe care.

The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

The intention of the regulations is to prevent people from receiving unsafe care and treatment and prevent avoidable harm or risk of harm. Care providers must assess the risks to people's health and safety during any care or treatment and make sure that staff have the qualifications, competence, skills and experience to keep people safe.

Care providers should ensure that they only employ 'fit and proper' staff who are able to provide care and treatment appropriate to their role. To meet this regulation, providers must operate robust recruitment procedures and must have a procedure for ongoing monitoring of staff. Staff must receive the support, training, professional development, supervision and appraisals that are necessary for them to carry out their roles and responsibilities.

Napthens Health & Safety Audit

The Napthens Health & Safety team will be available to provide a remote consultation of QCS customers' processes. We offer a 30 minute video consultation to provide a 'Health & Safety check' to explore key H&S risk areas, in order that you can take away an understanding of your key H&S obligations and make a high-level assessment as to how you are currently performing against them. If you would like further information, please call the team on 01772 898 444 or email healthandsafety@napthens.co.uk

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The I Statements

QCS Quality Compliance Systems
an IRLData company

Key Question Safe

The CQC 'We' statements (Quality Statements)

- Learning culture
- Safe systems, pathways and transitions
- Safeguarding
- Involving people to manage risks
- Safe environments
- Safe and effective staffing
- Infection prevention and control
- Medicines optimisation

For more information about Quality Statements refer to the CQC Quality Statement Poster: Safe in QCS Compliance Centre, or follow this link
<https://www.qcs.co.uk/cqc-hub/key-question-and-quality-statement-poster-safe/>

Want a simple digital solution to meet the new evidencing requirements?
Scan me!



The CQC I statements:

People have said that for them to be **Safe** it is important that the following things happen:

- “ When I move between services, settings or areas, there is a plan for what happens next and who will do what, and all of the practical arrangements are in place. ”
- “ If my treatment, including medication, has to change, I know why and I am involved in the decision. ”
- “ I feel safe and am supported to understand and manage any risks. ”
- “ I know what to do and who I can contact when I realise that things might be at risk of going wrong or my health condition may be worsening. ”
- “ I can get information and advice about my health, care and support and how I can be as well as possible – physically, mentally and emotionally. ”
- “ I have considerate support delivered by competent people. ”

Example for 'EFFECTIVE'

'I am empowered to get the care, support and treatment that I need and want'

Example for 'CARING'

'I am treated with respect and dignity'

Example for for RESPONSIVE

'I am in control of planning my care and support. If I need help with this, people who know and care about me are involved'

Six new evidence categories



New scoring system

Moved away from
assessing at a single
point in time

Different areas of the
framework are assessed
on an ongoing basis

Scores for different
evidence categories are
updated at different
times

Scores are translated in to
% and assigned ratings
at key question level



Scoring example

Quality statement:

Infection prevention and control

"We assess and manage the risk of infection. We detect and control the risk of it spreading and share any concerns with appropriate agencies promptly."

Evidence category	Evidence used	
People's experiences	patient surveys	complaints and compliments
Feedback from staff and leaders	Inspection to look at the care environment	Call to speak with staff at the service.
Observation		
Processes	Existing evidence	

Evidence category	Score (Max 16)	Existing or updated score
People's experiences	3	updated
Feedback from staff and leaders	2	updated
Observation	3	updated
Processes	3	existing
Total score for the combined evidence categories	11	68.75
Total possible	16	

4 = Evidence shows an exceptional standard
3 = Evidence shows a good standard
2 = Evidence shows some shortfalls
1 = Evidence shows significant shortfalls

Scoring example cont.

25 to 38% = inadequate

39 to 62% = requires improvement

63 to 87% = good

88% and above = outstanding

Safe: Quality statements	Score (Max 32)	Existing or updated score	Key Question Rating
Learning culture	2	existing	
Safe systems, pathways and transitions	3	existing	
Safeguarding	3	existing	
Involving people to manage risks	2	existing	
Safe environments	3	existing	
Infection prevention and control	3	updated	Good
Safe and effective staffing	2	existing	
Medicines optimisation	3	existing	
Total score for the safe key question	21	65.625	Good
Total possible	32		

Score thresholds are important

'low' **Good** for Safe Key Question

3% lower would result in **Requires Improvement** for Safe

Summary: there is a spotlight on capturing

Ongoing continuous assessment and improvement

The Lived Experience of People

- We can help you to do this with the power of QCS Quality Centre using digital audits, digital mock inspections and digital action plans to demonstrate the good and outstanding care you are providing, and where you have identified the need to improve capture clearly how you are going to do this.
- Now going take look at digital audits, how to do this well, and why it is important, first before showing our new digital mock inspection software.

Poll

Do you still run paper-based audits/mock inspections?

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Digital Audits

How and why should we audit?

Responding to concerns

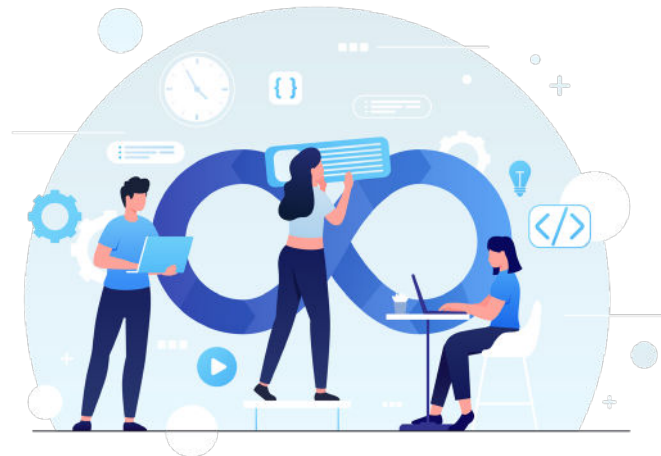
Continuous quality improvement

Must NOT be a tick box exercise

Less is sometimes more

Actions!

Sharing findings and learning



What audits should you do?

Medication management

Mental capacity & DoLS

Accidents & incidents

Infection control

Health and safety

Safeguarding

Observation of care

Care planning

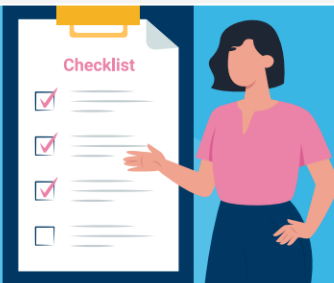
Pressure prevention

Nutrition

Workforce planning

Recruitment

Good Governance Checklist



To achieve good governance in your service, you must demonstrate continuous quality improvement.

Documenting the effectiveness of the processes and systems you have in place and taking time to observe and document how people experience your service, will provide evidence about the great care you provide, and where improvements are needed, allow you to demonstrate openly how you plan to make improvements.

A range of audits is in place and they are completed regularly.					
These may include the following audits with accompanying action plans:	Tick		Actions needed	By Whom	By When
	Yes	No			
Behaviour Related Incidents					
Care/Support Planning and Risk Assessment					
Clinical Infection					
Falls					
Mealtime Observation					
Medication Administration/Management					
Nutrition					
Outcomes					
Tissue Viability/Pressure Prevention					

I did an audit, so what....?

Responding to concerns

Anonymous complaint received by CQC about your service... 'People fall all the time and are left alone for long periods'

Share you evidence

- Monthly accident incident audit
- Workforce planning audit
- Staff rota/time & attendance records
- Staff surveys
- Relatives and resident surveys
- Care observation audit
- Complaints audit
- Safeguarding audit
- Call bell audit/visit logs

Outcome: Case closed

Continuous quality improvement

Your medication audit highlights poor record keeping and low stock issues indicating possible medication errors/risk of errors occurring.

Take action

- Investigate gaps in records
- Report any errors taking further action as needed
- Staff training
- Staff supervision
- Spot checks/observations of practice
- Competency assessments
- Re audit

Outcome: More effective process, better quality record keeping and reduced risk of medication errors.

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Digital Mock Inspections

Why run mock inspections?

New CQC SAF is LIVE now

If you are inspected tomorrow, it will be under the new framework, so you need to be ready and prepared...



Digital mock inspections the results

- Opportunity to assess your service against the new single assessment framework, **gather evidence for compliance** with each quality statement, under the new evidence categories.
- Map and signpost this evidence visually in a digital dashboard for each key question and quality statement, clearly identifying compliance, and putting in place a **plan of action** to fill any gaps found where evidence is needed to demonstrate compliance.
- The best way to see how this can help you, is to show you!



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Product Demo

Poll

**Do you think you would feel
better prepared for your next
inspection with QCS Quality
Centre?**

How do you get QCS Quality Centre?



Scan for a free trial!

June Offer!

SAVE UP TO

£450



Thank you.