

Care Quality Commission & Health & Adult Services

Our purpose



The Care Quality Commission is the independent regulator of health and adult social care in England.

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 5 key questions



Are services...



Safe?



Effective?



Caring?



Responsive
to people's needs?



Well-led?

#CareExpectations



What we do:

- Set clear expectations
- Monitor and inspect
- Publish and rate
- Celebrate success
- Tackle failure
- Signpost help
- Influence debate
- Work in partnership



What do the overall ratings mean?



Outstanding

The service is performing exceptionally well.



Good

The service is performing well and meeting our expectations.



Requires improvement

The service isn't performing as well as it should and we have told the service how it must improve.



Inadequate

The service is performing badly and we've taken action against the person or organisation that runs it.

Key points



- The majority of **people are receiving good quality care**. This is something to celebrate.
- Over 80% of inadequate services improve on re-inspection but for services that require improvement nearly 40% don't improve and 5% get worse
- We are focusing on encouraging improvement in services rated RI
- We will do this **flexibly and proportionately**, using inspector judgement and existing risk and enforcement frameworks
- We will monitor these services more closely to identify changes in quality (up or down) and respond more quickly, as required



An overview of CQC's civil and criminal enforcement powers



Severity



Role of Quality & Monitoring

- Monitor services against contract standards. In house services are held to the same standards.
- Support providers to make improvements, working with the CQC.
- Share good practice.
- Chair of Engagement Meetings.
- Promote training, initiatives like Make Care Matter
- Provider Risk Profiles and market trends

What we are doing

- Engagement Meetings
- Increasing numbers of QA & Contracting Officers
- Introducing the Quality Improvement Team
- Introducing Lay Visitors
- Monitoring the market
- Mac Care Matter and workforce development

Main challenges facing the market

- Limited workforce
- Living Wage, slip in rates of pay
- Competition between sectors
- Negative press coverage, little positive press

Role of Members

- Understanding of local market
- Understanding of wider market issues
- Information supplied on suspensions of services

Quality of Provision - July 2017

Percentage of Services Rated in North Yorkshire %				
	Inadequate	Requires Improvement	Good	Outstanding
Care Homes	1	12	84	3
Nursing Homes	2	32	67	0
Domiciliary Care	0	11	87	2

Number of Services Rated in North Yorkshire					
	Inadequate	Requires Improvement	Good	Outstanding	Not Yet Rated
Care Homes	2	18	127	4	5
Nursing Homes	1	18	38	0	4
Domiciliary Care	0	10	80	2	21

Quality of Provision - Regional Comparison

Percentage of Providers Rated Good and Outstanding				
	North Yorkshire	Highest %	Lowest %	Regional Ranking
Care Homes	87	87 (NY/Doncaster)	53 (Bradford)	1
Nursing Home	67	90 (Doncaster)	29 (Wakefield)	7
Domiciliary Care	89	100 (North Lincs)	64 (Bradford)	4

Market Shaping and Commissioning

4.2 The Care Act places new duties on local authorities to promote the efficient and effective operation of the market for adult care and support as a whole. This can be considered a duty to facilitate the market, in the sense of using a wide range of approaches to encourage and shape it, so that it meets the needs of all people in their area who need care and support, whether arranged or funded by the state, by the individual themselves, or in other ways. The ambition is for local authorities to influence and drive the pace of change for their whole market, leading to a sustainable and diverse range of care and support providers, continuously improving quality and choice, and delivering better, innovative and cost-effective outcomes that promote the wellbeing of people who need care and support.

Managing provider failure and other service interruptions

- service interruptions because of business failure, this chapter explains what local authorities must do if a provider is unable to carry on because of business failure
- business failure involving a provider in the Care Quality Commission's (CQC) market oversight regime. This section explains CQC's role if business failure occurs and the link with the local authority's temporary duty
- business failure involving a provider not in the CQC market oversight regime. This section explains what local authorities must do if the business failure involves a provider not in the CQC regime
- administration and other insolvency procedures. This section explains the relationship between local authorities and persons such as an Administrator appointed in insolvency proceedings
- service interruptions other than business failure. This section explains local authorities' powers where a service is interrupted for other reasons
- the link with local authorities' duties in respect of market shaping. This section explains how local authorities' market shaping activities can play a part in effectively addressing service interruptions
- the need for contingency planning. This section explains how local authorities should consider having contingency plans in advance to address the service interruptions that pose the greatest risk locally