

THIS ITEM IS FOR INFORMATION ONLY

(Please note that "Information Only" reports do not require Integrated Impact Assessments, Legal or Finance Comments as no decision is being taken)

Title of meeting: Health, Wellbeing & Social Care Portfolio Meeting

Subject: Informal Inspection of Regulated Services

Date of meeting: 2nd December 2021

Report by: Marie Edwards - Head of Regulated & Provider Services

Wards affected: All

1. Requested by

Cllr Jason Fazackarley, Cabinet Member for Health, Wellbeing & Social Care

2. Purpose

To update the Portfolio holder as to how Adult Social Care, (ASC) assures the quality of internally provided services regulated by the Care Quality Commission, (CQC).

3. Information Requested

The approach taken by ASC to assuring the service and the Council of the quality of in-house services through informal inspection.

4. Overview of the Care Quality Commission regulation process

Portsmouth City Council is registered with the Care Quality Commission (CQC) for the delivery of 7 regulated services

- 3 services are registered for the delivery of Accommodation for persons who require nursing or personal care
 - Harry Sotnick House
 - Russets
 - Shearwater
- 4 services are registered for the delivery of Personal care
 - Ian Gibson Court
 - Portsmouth Rehabilitation and Reablement Team (ILS)
 - Community Independence Service (CIS)
 - Portsmouth Shared Lives Service
- Each scheme / service has a Registered Manager (RM) who is registered with the CQC, as well as a variety of staff relevant to the service provided.

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- All services are subject to inspections from the CQC in line with their registered activity
- With the exception of Ian Gibson Court, which is part of Local Authority Housing Neighbourhoods & Buildings, (HNB) all services sit within Adult Social Care
- All staff within services receive mandatory training as required
- Portsmouth City Council is required to have a Nominated Individual (NI) for all its regulated services. The nuances of this role are such that the organisation can only have 1 NI.
- The NI has "overall responsibility for supervising the management of the regulated service and for ensuring the quality of the services provided"
- The PCC NI is the Director of Adult Social Care

Traditionally several CQC inspectors would turn up unannounced and spend a minimum of one day on site to complete an inspection looking at the Key Lines of Enquire (KLOE). The five key questions the inspections are based on:

Is the service Safe.

Is the service Effective.

Is the service Responsive.

Is the service Caring.

Is the service Well-led?

With the on-going risks relating to COVID-19 still present, CQC won't be returning to business as usual. They will be drawing on intelligence gathered about a service and focus on services where they have concerns about care, taking appropriate regulatory action to protect people if necessary. CQC will be more targeted and focused around areas of risk. As a result, the inspections may not always lead to a change in rating for a service. CQC new approach will deliver a hybrid inspection regime. In order to minimize the time on site CQC will try to conduct inspections remotely as much as possible. Services will be asked to send a lot more electronic copies of documents or perhaps a log in to home's care system (electronic care planning). This will enable on-site time to be focused and kept to a minimum.

The key components going forward will be:

- A strengthened approach to monitoring, with clear areas of focus based on existing KLOE, to enable CQC to continually monitor risk in a service.
- They will use technology and their local relationships to have better direct contact with people who use the care homes, their families and staff in the care homes.
- Inspection activity will be more targeted and focused on where they have concerns, without returning to a routine programme of planned inspections.
- They will continue to adapt the transitional regulatory approach and remain responsive as the situation changes.
- There is a commitment from CQC to consider longer-term changes to how they regulate, which will be explored through engagement on the future CQC strategy

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- Previous ratings will be feed into the assessment of risk, but they will no longer determine the frequency of inspections as CQC inspections will be more targeted and focused around areas of risk.

5. Informal Inspection Process

The 'Quality Assurance and Learning Framework' is supported by the Head of Regulated and Provider Services, working with the team of registered managers. The purpose is to audit standards across the care homes (including through peer review), consider independent reports (i.e., CQC/ Healthwatch/Corporate Health & Safety /internal audit etc), audit, and support and drive-up standards through consultation, challenge and feedback.

The quality assurance framework articulates how all of the various strands of quality work come together as a coherent package to drive improved outcomes for residents. There are a number of processes that support the informal inspection process, these provide good governance and quality assurance across the services.

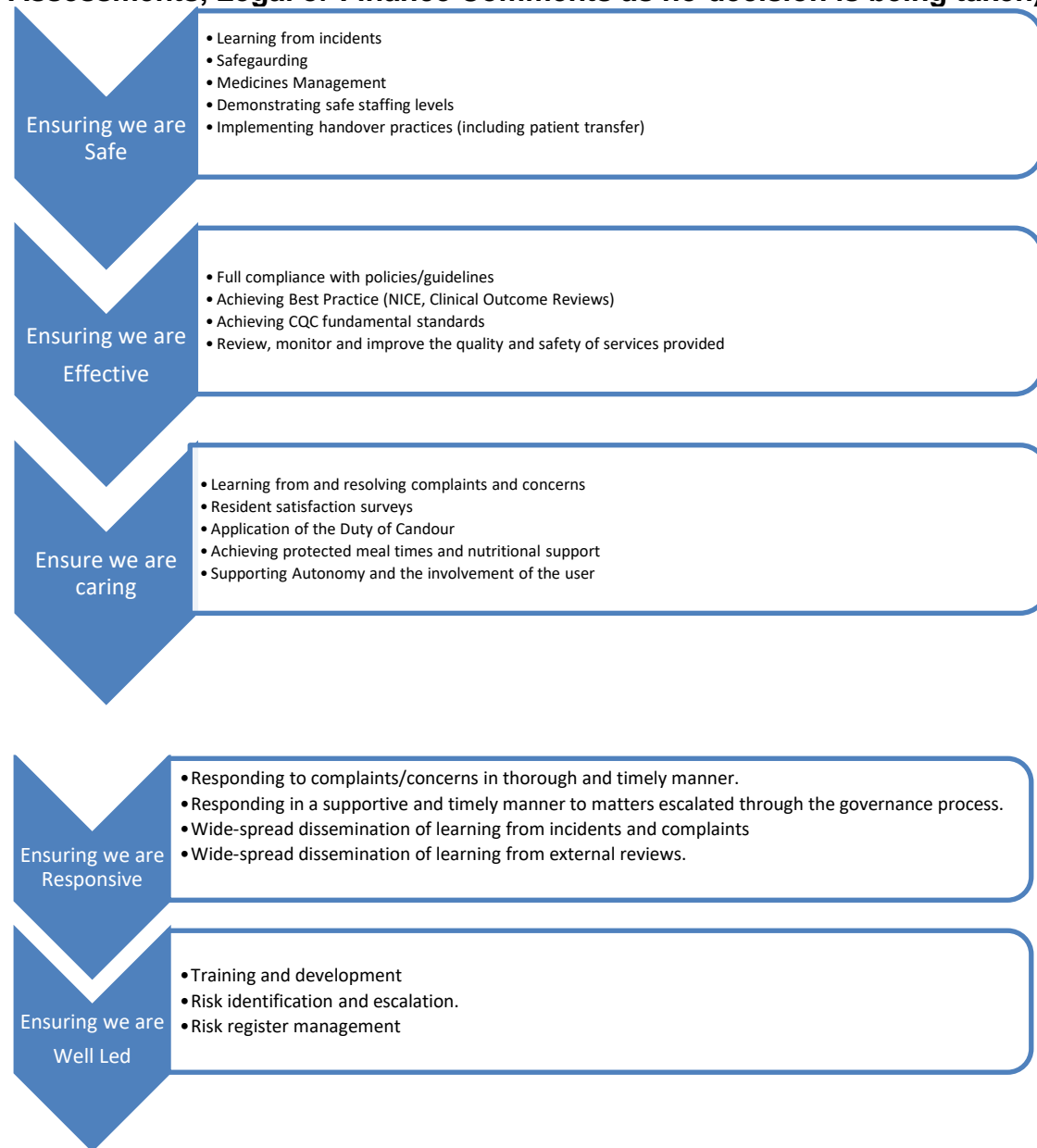
Comprehensive informal inspections are completed by the Head of Regulated & Provider Services annually with support from key individuals such as Social Workers, safeguarding team and NHS colleagues. This provides a robust scrutiny of care practice within the service against the five KLOE. Any resulting actions are monitored and reviewed by the head of service to ensure compliance of action plans through to completion. The informal inspection reports are shared with the chief executive, cabinet member, ASC Director/Deputy, staff and loved ones at the care home.

6. Key Learning

To ensure that we not only deliver the highest quality care to our service users under the *Health and Social Care Act 2008 (Regulated Activities) regulations 2014* but that we learn from incidents and mistakes. The key learning is linked to the CQC Key Lines of Enquiry as follows:

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7. Governance

The NI and Head of Regulated & Provider Services, review and monitor governance compliance against the following performance indicators:

- Compliance with the CQC Key Lines of Enquiry
- Implementation of service relevant National Institute for Clinical Excellence, (NICE) guidelines
- Progress with addressing the priorities of the adult social care strategy and risk register
- Compliance and progress against any actions identified through inspections.

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- Reviewing trends in incidents and accidents and their action plans
- Action plans from audits

The Head of Regulated & Provider Services proactively invites external assessments to validate the success and quality of the services it provides. These assessments are undertaken by, but not exclusively:

- Healthwatch
- Health and Care Portsmouth Quality Team
- Solent NHS Trust Quality Team
- Service user and relatives' feedback

The Governance process also ensures all relevant service areas complete an on-going self-assessment against the CQC Key Lines of Enquiry and internal audits. In addition, all informal inspection findings and any other recommendations are reported to the ASC senior management team governance and workforce meeting.

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Signed by (Director)

Appendices:

Background list of documents: Section 100D of the Local Government Act 1972

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

Title of document	Location