

Summary of board papers – statutory bodies

Care Quality Commission board meeting – 15 December 2021

For more detail on any of the items outlined in this summary, please find the full agenda and papers [available online](#).

Chief inspector's update

Regulatory approach

- Given the exceptional pressure services are experiencing as we head into winter, CQC re-stated how it intends to regulate over the coming months:
 - CQC continues to deliver a risk-based approach to inspection, while taking action to increase system capacity
 - CQC will continue to focus inspections where there is evidence that people are at risk of harm, where it can support increasing capacity across the system and identifying good practice that it can share to drive improvement
 - CQC does not currently plan to return to routine frequency-based inspections
 - CQC will use its ongoing monitoring to identify services that may have improved and, where appropriate, inspect to identify improvements and re-rate
 - Developing its future regulatory approach
 - In May CQC launched its new strategy which set out its ambitions for the future of regulation
 - Recent development work includes: a new assessment framework, approaches to using people's experiences of care, developing assessments of quality in systems and assurance of how local authorities deliver their duties under the Care Act and how CQC's teams interact with providers and other stakeholders.

Chief inspector of adult social care's report

People at the heart of care: adult social care reform white paper

- CQC welcomed the long-awaited white paper which lays out the Department of Health and Social Care's (DHSC) ambitions for reform of the social care system

- In its 'state of care' report CQC showed increasing vacancy rates in care homes rising from 6% in April to 10.2% in September 2021. Therefore, CQC welcomes the initial commitment on funding to recruit and retain more staff.

Out of sight – one year on progress

- On 2 December 2021, CQC published a progress update to the 2020 out of sight review into restraint, segregation and seclusion. General findings include:
 - Rates of restraint, segregation and seclusion are not reducing yet and more work needs to be done in this area
 - However, there is work under way which shows some positive change and a step in the right direction, both at CQC and with partner organisations.

Adult social care workforce

- CQC is monitoring the staffing pressures within the adult social care (ASC) sector. At present, the data on voluntary cancellation of registration, or a regulated activity in ASC services does not show a marked month on month increase
- During the week commencing 13 December 2021 CQC will launch a workforce survey tool. This provides inspectors with tools to understand the workforce challenges at a location level as well as capture the actions the provider is taking to mitigate risks to the quality of care people receive.

Closed cultures

- An evaluation of the impact of the project is underway. Emerging findings show that CQC is improving how it tackles closed cultures. There will be a fuller update to board in January
- The pilot of the quality of life tool has widened. The tool aims to get to the heart of an individual's experience of the care they are receiving and the life they are leading.

Chief inspector of hospitals' report

- In November CQC undertook 67 inspections and published 58 reports. There are a further 67 inspections planned for December and 124 for January
- The latest survey of patients' experiences of community mental health services was published earlier this month. The report shows that people are consistently reporting poor experiences of NHS community mental health services. Many people reported that their mental health had deteriorated as a result of changes made to their care and treatment due to the pandemic.

Chief operating officer's report

- CQC's business plan for 2021-24 was published in August 2021 which is a 3-year rolling plan for 2021-24, with a firm set of objectives for the first period to March 2022:
 - 'Delivering our regulatory business'
 - Manage risk to people – CQC will analyse data it captures and interpret it to identify risk
 - Ensure it offers a timely registration service which meets the needs of public and providers
 - Responds to risks in way to keep people safe
 - Transform regulation of learning disability and autism
 - Deliver its independent voice and key publications
 - 'Transformation to deliver our strategy'
 - 'Managing our people and resources'
 - Deliver its people plan
 - Demonstrate a visible commitment to good mental health and equip managers to regularly engage, monitor and respond well
 - Develop a diverse CQC workforce with equal opportunities for everyone and a culture of inclusion
 - 'Manage our finances and resources effectively'

Executive director of operations' report

- CQC has made good progress on the revised ways of working, including changes to the way CQC undertakes the direct monitoring approach for band two providers
- The executive director of operations has also been working with the operational leadership teams to re-define CQC's operational priorities, given the need to adapt to the pressures being placed on the sectors it regulates.

Engagement, policy and strategy directorate's report

Update of parliamentary activity

- CQC wrote to the joint committee on human rights on 'care home visitations' to respond to a letter from the committee requesting updates following CQC's appearance at the committee
- CQC is providing written evidence to the health and social care select committee as part of the committee's inquiry into 'the future of general practice'
- CQC provided a written briefing ahead of the second reading of the health and care bill and are offering further conversations with peers.

Engagement updates

- Public behaviour change campaign launch. January will see the return of CQC's 'because we all care' campaign which seeks to drive people to share experiences of care with CQC to increase the support for its effective and smarter regulation of services.

Urgent and emergency care: update

- Overall high demand alongside fallen productivity across the health system due to COVID-19 safety measures
- This is a system problem that manifests itself in urgent and emergency care (UEC), for example staff leaving adult social care workforce impacts UEC demand
- There is an issue of flow through the system. Large numbers of hospitals have patients ready to go home who can't be discharged
- Workforce shortages which will be exacerbated by Omicron and the need for staff to self-isolate which is a concern