

Adult social care trade associations meeting

Date	Wednesday 29 May 2024 10am – 12pm	
Attendees	<p>Trade associations:</p> <p>Liz Jones (LJ) – National Care Forum Amrit Sumal (AS) – National Care Association Cathy McSweeney (CMcS) – Shared Lives Plus Jan Burns (JBU) – The National Dignity Council Masline Chitura (MCh) – Social Care Nurses Advisory Council Michael Kazich (MK) – Shared Lives Plus Terry Donohoe – Homecare Association Charlotte Lezard (CL) – Care England Duncan Tree (DT) – Association of Mental Health Providers Sarina Kiayani (SK) – Associated Retirement Community Operators Peter Webb (PW) – Care Association Alliance (London) Ruth French (RF) – The Outstanding Society Clive Parry (CP) – Association for Real Change</p> <p>Apologies received: Caron Sanders-Crook (CSC) – Canford health care</p>	<p>CQC:</p> <p>Chair: Mary Cridge (MC) – Director of Adult Social Care Sheila Grant (SG) – Deputy Director, North Network April Cole, Senior Policy Officer Chris Dzikiti, Interim Chief Inspector of Healthcare James Bullion (JB) – Chief Inspector of Adult Social Care and Integrated Care Amanda Partington-Todd (APT) – Deputy Director of Adult Ayse Sema (ASe) – Senior Engagement and Communications Officer Lizzie Hardy (LH) – Communications and Engagement Manager, CQC</p> <p>Apologies received: Rob Assall – Director of Operations Network - London & East of England Tracey Forester – Director of Operations Hub David James – Head of Adult Social Care Policy Ann Ford – Director of Operations Network – North Deanna Westwood – Director of Operations Network - South</p>

Agenda item

Lead

<p>Welcome, introductions and updates</p> <p><i>Finance transformation.</i> We're working on improvements to the ways in which providers interact with our finance teams and pay their fees. Once we've completed our testing, in June the team managing enquiries will change from NHS business services to an in-house CQC team. This means we'll be able to better support providers' enquiries about their fees. We will also be improving our paperwork, presenting more detail on invoices and other communications so that providers understand more clearly what they owe to whom and by when. We'll share more information about these changes directly with you and providers over coming weeks.</p> <p><i>Infection prevention and control</i> All the remaining infection prevention and control (IPC) judgements are now being removed from profile pages on the CQC website. These are the ticks and crosses that show against eight domains related to IPC that we started publishing in the pandemic. There are around 8,400 profiles with these judgements on them on the site at the moment. These will come down as we're no longer using the same inspection model. In new assessments this area will be looked at under its own quality statement. Hence the judgements displayed are no longer updated and are potentially misleading. Previous reports remain available to review.</p> <p><i>Care Home Open Week</i> Care Home Open Week takes place from 24-30 June 2024. This annual event is dedicated to showcasing the warmth, care, and vibrant communities that care homes provide to residents across the country. Providers are encouraged to register their care home using the link above.</p>	<p>Mary Cridge, Director of Adult Social Care</p>
<p>Environmental sustainability quality statement</p> <p>Please refer to slides 5- 14</p> <p>There was conversation about the ways in which providers are already considering their environmental sustainability with LJ reporting that NCF's environmental sustainability network was going well.</p> <p>PW: We are already seeing LAs requiring actions and commitments from providers, but no extra funding. It seems that as with areas such as data collection, ASC are supposed to just add it to the list of jobs to do, but with no funding and little support.</p> <p>LJ: Providers feel a lot of anxiety about being judged in a space where they don't necessarily have the levers to change. It's important to recognise the levers that we've got and the attempts that we are making to reduce our overall environmental impacts across quite a lot of areas. We've had done quite a lot of work with members around food waste and food sustainability also around water waste and responsible use as well as energy, we had a lot of drivers for looking at energy uses and energy efficiency with the price spikes, but actually that's generated both a reduction in energy use and a financial benefit.</p>	<p>April Cole, Senior Policy Officer</p>

<p>We are trying to have a more sustainable approach, Peter has mentioned commissioning, but it isn't good enough for commissioners to add in environmental targets and not think about the cost implications and the partnership approach to doing that. Certainly, talking to members, the involvement of the people that work for them, who are passionate about this and the involvement of the people they support, it's hugely valuable.</p> <p>AS: Members are very aware of their environmental impact and footprint. There's a need to work in partnership with commissioners with collective responsibility. Clarity from CQC would be great for our members to know how to demonstrate that they are good or outstanding in terms of the environmental sustainability element of this.</p> <p>AC: We're doing a content review of the PIR and I'm talking with colleagues about the possibility of maybe including a question in there around this, so we can start to help build that baseline to help our inspectors to know what to look for as well.</p> <p>DT: Anything on sustainable food sourcing and nutritional value? There are some wider opportunities in relation to quality and improvement expectations and personalised care and support. We know that nutritional value and sustainable food sourcing are intimately linked and there are challenges for that in relation to cost, but it enables both Commissioners, providers, NHS and adult social care to think deeply about the nature of diets and food and menus and offer for people in a range of settings where they're coming from and the costs. We know there's a relationship between cost, nutritional value and variety and offer for people.</p> <p>AC will ask her contacts. Please see this useful source, though it is healthcare focussed: Centre for Sustainable Healthcare</p> <p>PW asked whether work has been done on the environmental cost of destruction of medicines returned to pharmacies. There has been an RPF-funded CQC project on medicines sustainability running this year. More details https://cqc.citizenlab.co/en-GB/projects/a-greener-path-to-innovation-in-medicines-sustainability</p> <p>RF: this has been a valuable discussion and it's been helpful to think about the diversity of what this covers. Articulating that diversity will be helpful in expanding on gathering case studies and will be inspirational.</p> <p>AC is keen to be developing FAQs potentially to have on the website. Aim to return to this meeting before the end of the year to talk a bit more about what we've been finding. We're very happy to keep on talking about this.</p> <p>Please do share any good practice examples via providerengagement@cqc.org.uk and we can pass them on to April and her team.</p>	
<p>Assessments update</p> <p>Please refer to slide 18</p>	<p>Sheila Grant, Deputy Director, North Network</p>

<p>In addition to the update on activity, SG requested feedback from members about experiences of the new assessment process.</p> <p>LJ: I would say overall experience quite mixed depending on where you're starting from and how you feel about your legacy evidence. Experience of trying to challenge not good. Experience of inspectors on site has been generally very positive. Providers are pleased that CQC colleagues can spend a lot more time talking to people and that has universally been welcomed. The number of quality statements being looked at really matters.</p> <p>SG: very helpful feedback as one of the key focuses for the on-site inspection is about us better understanding people's experience of care. So to actually hear that providers are feeling that's happening more is really useful. In terms of requires improvement, we have decided that if we are looking at requires improvement services, we will look at sufficient quality statements to be able to change the rating.</p> <p>In terms of challenging back, SG will take that back to the deputy directors nationally and share that with them, because it think it's really important that you know that the factual accuracy process and the challenge back is respected and that we can clearly justify why we've made a statement and if you've provided us with other evidence that contradicts what's in somebody's notes, we should be able to reflect that and review that.</p> <p>Ian Trenholm's blog included the commitment to look at all quality statements under a key question currently rated as requires improvement or inadequate.</p> <p>We will be sharing an update in July about the frequency of assessments etc.</p> <p>Please share any specific examples for Sheila via providerengagement@cqc.org.uk to take to deputy directors or operations managers to follow through.</p>	
<p>Right Care Right Person (RCRP)</p> <p>CD started with his own reflections and opened the conversation to hear from colleagues in terms of their own feedback or their own experience with RCRP.</p> <p>Key themes from trades members were safeguarding and quality issues, lack of response from the police.</p> <p>DT: What we're calling for is ongoing review of the implementation and the extent to which implementation is meeting the requirements.</p> <p>LJ: Thanks for the space to discuss this. We we've had a couple of conversations directly with members where the lack of response from the police has been really quite dangerous. People experiencing a very significant mental health episode and presenting a significant risk in the service to staff and to the other people in that service.</p>	<p>Chris Dzikiti, Interim Chief Inspector of Healthcare</p>

<p>RF: My company's experience in elderly care with occasional mental health crises has been very difficult. Has even ended up in paramedics putting in a safeguarding against us in one case! A very long road to get people the help they need and deserve.</p> <p>DT: CQC colleagues and indeed with wider colleagues in the sector, if there's a way for Inspectors and when working with providers looking at when a provider has made a report of police involvement filtering out where the force involved was using RCRP approach so we can get some sort of sense of how it is panning out.</p> <p>CD: it's too early for us to have seen themes emerging, but we will reflect on how we get more feedback from providers, especially where there are high risk instances where the police were involved - monitoring to see if we are seeing any changes.</p> <p>Please see more information on RCRP here.</p>	
<p>Any other business</p> <p>LA assessment provider survey. There's an opportunity to meet with colleagues in our data and Insight team and our local authority assessment teams to review those questions and sense check that they're in the right space. Please indicate your interest by emailing providerengagement@cqc.org.uk.</p> <p>PW: Is there a guide to whether daycare services need to be registered or not?</p> <p>MC: Services provided via day care provision is not currently in scope as it's not part of our regulations or regulatory framework, so CQC has not got powers to regulate that sector. However, registration may be required if personal care is delivered – each instance should be checked to see if it comes under scope of registration. There's a registration section on the website which includes "Scope of registration: Who has to register?" https://www.cqc.org.uk/guidance-regulation/providers/scope-registration-who-has-register/ For any subsequent queries or clarification needed, please contact the National Customer Contact Centre on 03000 616161 in the first instance.</p> <p>LJ: what impact does the general election have on the workforce development fund?</p> <p>JB: I think this is one of the issues where officials won't be able to say anything until the new government is formed.</p> <p>TD: When CQC assesses a Local Authority's contract performance monitoring and quality, how does the Commission ensure that minimum visit times are appropriately set and that providers meet the timescales set out in the contract e.g., is 'call clipping' identified and acted on.</p>	<p>Mary Cridge, Director of Adult Social Care</p>

MC: We look widely across the 9 quality statements, and this would come under our Care Provision, Integration and Continuity one, under ensuring quality of local services. Like any assessment/inspection we look at themes and trends to make a judgement. We would not look in detail at minimum visit times and 'call clipping' as a standard however would consider the broader information sent to us in the information return around care quality monitoring, look at the provider survey feedback and any feedback from people, carers, staff or partners about this and the LA monitoring of calls. If this was something which had come up in any of the feedback we would follow this up in the normal way as part of our evidence gathering and look into this in more detail.	
Close Next ASC Trade Association meeting is on Wednesday 26 June 2024 from 10am to noon via Teams	

ACTIONS

Action	Action Owner	Status	Due Date
Conversation at a future meeting about how we can support providers to alert us to their improvement.	CQC	Pending	Update at May meeting
Update meeting on how ICS project is involving the voice of care providers	Grace Evans, CQC	Not started	Update at July meeting
Assessment run-rate – when will most assessments use new rather than legacy evidence?	CQC – Sheila Grant and Lizzie Hardy	In progress	Update at June meeting
LJ to pose hypotheses of what data would be useful for CQC colleagues to explore making this available via data dashboards.	Liz Jones	Pending	28/06/2024
Add discussion of Liberty Protection Safeguards (LPS) to future agenda	Lizzie Hardy	In discussion with CQC colleagues	02/08/2024
Environmental Sustainability will be returning in the autumn	April Cole	Pending	30/10/2024