

Recommendation				CQC Progress
<b>General</b>				
1	<b>Consistency</b>	1.14	<b>CQC should ensure consistency of approach across all its activities in the application of policies.</b>	<p><b>Clarity re inspection approach:</b></p> <p>Guidance has changed to emphasise that “<i>the site visit is one element of the inspection, and information may be received after the site visit which we may report on.</i>”</p> <p><b>Referring to incidents in reports:</b></p> <p>Guidance has changed to ensure that serious incidents are referred to in reports and the report writing guidance includes standard phrases for inspectors to use.</p> <p><b>Fit and Proper Person:</b></p> <p>New ‘fit and proper person’ (FPPR) guidance was introduced in January 2018 and will be further reviewed following the conclusion of the Kark Review.</p> <p><b>NCSC procedures for sharing information and response times:</b></p> <p>New Safeguarding Adult Reviews, Serious Case Reviews and Learning Events guidance is in place and was updated in February 2018.</p> <p><b>No Registered Manager:</b></p> <p>A review of the ‘action when no registered manager in post’ guidance took place in 2017 and a simpler process was introduced. This remains under active review by the Enforcement Oversight Board.</p>

2	<b>Training</b>	1.15		<b>CQC should ensure there is a strong and consistent focus on excellence in training.</b>	<p>The Academy has a full implementation plan that includes a review of current products, including two key issues highlighted in the report.</p> <p><b>Induction:</b></p> <p>The induction programme for inspectors has been reviewed and it is planned to increase the induction period from 12 to 16 weeks. The new induction programme is scheduled for roll-out during Q2 and will provide a consistent induction experience for all new inspectors/starters across the country.</p> <p><b>Training in regulation:</b></p> <p>The Invitation to Tender (ITT) for the Professional Regulatory Skills Programme (PRSP) (training in regulation) is now live and it is expected that the training will commence in November 2018. This programme will address the key concerns in the report about the confidence of inspectors in using CQC's enforcement powers.</p>
3	<b>Risk</b>	1.16		<b>CQC should ensure that inspectors are properly trained to understand and manage the risks of challenge by providers and are properly supported when dealing with such risks.</b>	<p><b>Support for inspectors in managing risk:</b></p> <p>A Health and Safety Support package is in development, which will be launched in the Summer of 2018. This will include clear guidance as to how to manage conflict and challenge. A risk assessment has already been introduced which encourages the individual staff member to, where possible pro-actively identify risks in advance and mitigate the risk. We are developing a process so that providers or persons identified as being of risk to staff in CQC will be notified and a clear, accessible statement recorded on our CRM IT system. CQC has issued a clear zero tolerance</p>

					statement, which is now on our public internet site.
<b>Information</b>					
4	<b>Data</b>	1.17		<b>CQC should adopt a more proactive approach to the collection, retention and deployment of information about providers and services. Such information should be retained as far as possible in a single, readily accessible form. It should also be wide-ranging but there should be a specific focus on:</b>	<p><b>Proactive data approach:</b></p> <p>Considerable progress has been made to improve the collection, retention and deployment of information and supporting policies in line with CQC's 2016-21 Strategy to deliver an intelligence-driven approach to regulation. This includes:</p> <ul style="list-style-type: none"> <li>• An insight dashboard was introduced in 2016/17 bringing together information about locations into an easily accessible format for inspectors. Further improvements are planned in 2018/19 as the digital programme progresses.</li> <li>• The policy to retain the regulatory history of providers when there are registration changes has been agreed and the implementation plan is being managed by the Registration Transformation Board with 'go live' expected by December 2018.</li> <li>• CQC Inspection Managers are each aligned to a local authority and attend regular meetings to share information and concerns. Inspection Managers also meet with Clinical Commissioning Groups to share information</li> <li>• Cross directorate regional risk forums are now in place and are having a positive impact on better information sharing</li> </ul> <p>The plan to assign a relationship lead for providers with two or more locations is underway and is being led by the Corporate Provider Team in liaison with the inspection teams. This will be completed by the end of September 2018.</p>
			1.17.1	Small and medium size providers: CQC must collect, retain and deploy information on all providers, including those with fewer than twenty services;	
			1.17.2	Data capture from other agencies: CQC should work with other agencies to acquire their relevant data recognising,	

				however, that there may be data sharing constraints;	In addition, CQC is leading with Skills for Care on the Quality Matters action to improve information sharing between national and local agencies.
			1.17.3	Data within CQC: CQC should adopt a more proactive approach to data sharing within the organisation;	
			1.17.4	Information about provider and service risk: CQC should ensure that provider and service risk information is retained in an accessible way even after specific risks have been resolved.	
5	<b>Escalation</b>	1.18		<b>CQC should improve escalation systems to ensure information, including about specific provider and service inspections and enforcement issues, is better transmitted through the CQC hierarchy.</b>	<p><b>Escalation:</b></p> <p>The guidance on criteria for escalating issues to the Board was refreshed and communicated in January 2018.</p> <p>From August 2017, a system and process was established in the Adult Social Care and Registration Directorate to track risks escalated to the Board.</p>
<b>Inspection</b>					
6	<b>Inspection oversight</b>	1.19		<b>CQC should improve inspection oversight to ensure a more</b>	<p><b>Consistency of Ratings:</b></p> <p>A review of post inspection quality control systems has been undertaken</p>

				<b>consistent approach, especially in relation to ratings.</b>	by the Quality and Risk Team. The resulting programme of work is being managed by the Inspect and Rate Board and completion is expected by the end of September 2018.
7	<b>Inspection reports</b>	1.20		<b>CQC guidance on inspection reports should ensure clarification and improvement in relation to the following:</b>	<p><b><i>Inspection reports:</i></b></p> <p>In November 2017 the assessment framework for Adult Social Care inspections was fully revised and updated, including the inspection handbook. This has addressed many of the issues raised:</p> <ul style="list-style-type: none"> <li>• The guidance emphasises the importance of considering all information in reaching a judgment about services being inspected</li> <li>• There are more detailed characteristics against each of the Key Lines of Enquiry for Outstanding, Good, Requires Improvement and Inadequate to improve consistency</li> <li>• Clear guidance of how to report on serious incidents is in place</li> <li>• The implementation of the new framework was underpinned by training for inspectors and their managers</li> </ul> <p><b><i>Provider's claims re special expertise:</i></b></p> <p>Specific training programmes and support are being established to support areas of special interest for inspectors to enhance their confidence and understanding of particular service types, what good looks like and how to assess the specialist expertise of providers. This is a priority in the ASC 2018/19 learning plan.</p> <p><b><i>Referring to ongoing enforcement activity:</i></b></p> <p>As the report notes, CQC is currently restricted from referring to ongoing</p>
			1.20.1	References to incidents;	
			1.20.2	References to ongoing enforcement activity;	
			1.20.3	References to state of services at the time of publication;	
			1.20.4	References to a provider's claims to special expertise and how those are to be monitored.	

					enforcement activity by our regulations. We will continue to pursue with the Department of Health and Social Care a change to these regulations so that we can refer to enforcement activity before its completion and therefore provide more transparency for people using services.
<b>Enforcement</b>					
8	<b>Enforcement oversight</b>	1.21		<b>CQC should improve enforcement oversight to ensure a more consistent approach to both decisions making and monitoring of progress.</b>	<p><b><i>Enforcement oversight:</i></b></p> <p>As the report indicates, there have been considerable changes in the management of criminal investigations and prosecution work since Hillgreen. For example, in ASC Case Management Review Panels were introduced in 2017 to review decisions, monitor progress and ensure timely decision making.</p> <p>The Enforcement Oversight Board has implemented a substantial programme of work to ensure more consistent decision making and there is active scrutiny of this work by the Executive Team.</p>
9	<b>Victims and next of kin</b>	1.22		<b>CQC should proactively keep victims and next of kin informed of enforcement activities.</b>	<p><b><i>Victims, families and next of kin:</i></b></p> <p>The guidance on engagement with victims, families and next of kin had been developed in 2016. The guidance was reviewed in 2017 and was confirmed as appropriate.</p> <p>A leaflet for families to assist inspectors when discussing cases with victims and/or their families is in development (based on a similar resource used by the Health and Safety Executive) and will be available by the end of July 2018.</p> <p>Professional Regulatory Skills Programme (PRSP) (training in regulation) will also ensure that inspectors <i>'are properly trained and have the</i></p>

					<i>confidence to have difficult conversations'</i> as recommended in the report.
10	<b>Representations</b>	1.23		<b>CQC should establish a dedicated resource to consider representations from providers.</b>	<p><b>Representations:</b></p> <p>A dedicated Representations team was established December 2017 and it has now been agreed that the team will be made permanent.</p>
11	<b>Criminal enforcement</b>	1.24		<b>CQC needs to keep closely under review their evolving approach to criminal enforcement.</b>	<p><b>Criminal enforcement.</b></p> <p>The report acknowledges that “CQC have addressed the defects in their approach at the time of the incident” and considerable progress has been made, for example, to strengthen the availability of legal advice through the restructure of that team; to make more detailed guidance available for inspectors; to share lessons from the successful prosecutions now completed; to strengthen the coverage of enforcement in the induction programme; and to provide better support to inspectors through the imminent appointment of Evidence Review Officers.</p> <p>The introduction of the Professional Regulatory Skills Programme in November will also cover the balance between improving care and prosecuting which is identified in the report as an issue.</p>
12	<b>Criminal enforcement – legacy issues.</b>	1.25		<b>CQC should consider whether the legacy from their lack of preparedness to use their powers of prosecution when newly acquired in 2015 has been properly examined to identify incidents which should</b>	<p><b>Criminal enforcement legacy issues:</b></p> <p>The independent report makes reference to CQC’s lack of preparedness for the new enforcement powers as transferred in 2015 however acknowledges that ‘sensible’ systems are now in place. An enforcement decision tree tool is used to determine the most appropriate action an inspector should take. The enforcement decision tree supports consistency of decision making.</p>

				<b>be considered against current prosecution criteria.</b>	
13	<b>Primacy in investigations</b>	1.26		<b>CQC should establish a protocol with NPCC and any other relevant prosecuting authorities to ensure clarity about who is the lead prosecutor for offences which CQC can prosecute.</b>	<p><b><i>Memorandum of Understanding:</i></b></p> <p>This is in hand and guidance on how to handle primacy of investigations has been developed. Both should be completed by July 2018.</p>
14	<b>Legal resources</b>	1.27		<b>In the light of apparent capacity, capability and recruitment concerns, CQC should consider reviewing the strength and grading of their legal resources available to assist and guide enforcement activities.</b>	<p><b><i>Legal resources:</i></b></p> <p>The Legal Services team has been fully reviewed and restructured since Hillgreen to improve capacity and capability. This will continue to be kept under review as enforcement activity continues to rise.</p> <p><b><i>Attraction and retention:</i></b></p> <p>Work is being undertaken so that CQC is better able to understand what attracts and retains people and assess if the organisation is getting best value from the total reward offer. We will provide a further update to the Board in <b>September</b></p>