Putting people first

How the Care Quality Commission work with people who use health and care services

September 2013

Raising standards, putting people first
The Care Quality Commission is the independent regulator of health and adult social care in England.

Our purpose:
We make sure health and social care services provide people with safe, effective, compassionate, high-quality care and we encourage services to improve.

Our role:
We monitor, inspect and regulate services to make sure they meet fundamental standards of quality and safety and we publish what we find, including performance ratings to help people choose care. We will ask the following questions when we inspect services.

- Are they safe?
- Are they effective?
- Are they caring?
- Are they well-led?
- Are they responsive to people’s needs?

Our principles
- We put people who use services at the centre of our work.
- We are independent, rigorous, fair and consistent.
- We have an open and accessible culture.
- We work in partnership across the health and social care system.
- We are committed to being a high-performing organisation and apply the same standards of continuous improvement to ourselves that we expect of others.
- We promote equality, diversity and human rights.
Introduction

This statement describes how we will involve the public, people using services, their families, and carers in our work.

It supports our new strategy for 2013 to 2016, ‘Raising standards, putting people first’, and builds on the work we currently carry out to involve people and local communities. It is based on what people who use services and other bodies have told us. Under the Health and Social Care Act 2008, we have to publish a statement setting out how we will:

- raise awareness of our role and responsibilities among people who use services and their carers;
- promote the provision of health and social care services, and get involved with discussions with people who use services and carers about the way in which we carry out our functions;
- make sure that we listen to the views and experiences of people and carers, and that we take proper account of those views; and
- arrange for any of our functions to be carried out by or with the assurance of people who use services and carers.
Our commitment to involving people in our work

People who use services, their carers and families will feel confident that we have listened to their views and experiences of care. We will have evidence that we have listened to people, and involved them in helping us deliver all aspects of our work.

This statement, and how we will deliver the action plan, takes into account the lessons we have learned from:

- the Mid-Staffordshire NHS Foundation Trust Inquiry;
- the failures in patient care at Winterbourne View, University Hospital Morecombe Bay Trust; and other failures in health and social care.

These are stark reminders of the failures of professionals and the wider system to listen to and act on the concerns of people who use services, their families and carers. By learning from these tragic events we can look at the ways in which we will involve people in our work. Together with providers of health and social care services we must show that
we listen to people who use services. And, more importantly, their views and experiences are understood, treated with compassion, taken seriously and acted on.

**How we will involve people who use services and their carers**

There are a number of different ways to involve people who use services. How we involve them will depend on the circumstances, but we will always put people who use services at the centre of our work. As well as involving individuals, we will actively involve local community groups and voluntary organisations, as well as local government and health organisations in sharing information and concerns about local health and social care services.

We will make it a fundamental part of our approach to listen to and hear from people who use services. We will tailor the way in which we do so using methods which best suit particular individuals. We will involve people who use services, and their carers, in our work and draw on them as partners. As part of this partnership approach, we will take account of equality, diversity and human rights. We will act straight away on what we hear from people who use services, and their carers.

**“There must be real involvement of patients and the public in all that is done.”**

Robert Francis, The Mid Staffordshire NHS Foundation Trust Public Inquiry

**What we have already done to involve people who use services and carers**

We will build on the work we have already done to involve people in all areas of our work, such as:

- helping us to prioritise and plan our work;
- advising us on gathering and using information and on the methods we use; and
- taking part directly in inspections and advisory groups.
We have focused our inspections on putting people first and monitored the quality of care by understanding what it is like for people who are experiencing care.

We have gathered views direct from the public by using ‘Tell us about your care’ forms. We have also tested out a number of ‘Tell us about your care projects’ with voluntary organisations and people who use services.

We have checked that providers involve people in discussions about their care and how it is provided.

We have developed relationships with local involvement networks across the country, and used their information to inform our inspections.

We have involved people who use services in our inspections, as Experts by Experience.

People who use services advise us on our plans through standing advisory panels. These include eQuality Voices (who monitor our commitments to equalities diversity and human rights) and the Service User Reference Panel (SURP), made up of people who are, or have been, detained under the Mental Health Act.

Since 2009 we have run a network of community groups called ‘SpeakOut’ who work with communities across the country who are often not heard. SpeakOut groups have been able to tell us about how we should plan our work to take account of diverse and vulnerable communities.

“Being a SURP member gives me a tremendous sense of equality that I have not felt for many years – being able to input into changes and turn my very negative experience of being detained into something positive.”

Brenda Jones, SURP member

“The SpeakOut network gives a platform to black and minority ethnic residents and patients to share their experiences of using health and social care services.”

Deska Howe, SpeakOut member, West Bromwich African Caribbean Resource Centre
Our priorities on involvement

To deliver the promises made in our new strategy, we must work in partnership with people who use services. We want you to know how we will do this. This statement explains what we will do over the next three years, and is accompanied by an action plan setting out what we plan to achieve each year. We will set up a panel, made up of people who use services, to work alongside us and challenge and scrutinise us on how we deliver on our promises.

Our priorities for the next three years

Involving a wide range of people who use services

We will make sure that we involve a wide range of people who use services as well as local communities in our work, including groups of people who may have particular experiences of using health and social care services.

We will work more closely with some specific groups of people over the next
Our priorities on involvement

three years. These will be carers, people using learning disability services and mental health services, disabled people, and children and young people.

We will involve more people who use services in helping us to plan, monitor and evaluate our work. We will also involve people in developing new fundamental standards.

We will involve people in developing new ways of inspecting services, such as NHS hospitals and community-based services.

We will develop approaches to understanding the experiences of people who are affected by the Deprivation of Liberty Safeguards. (These safeguards aim to protect people’s human rights in circumstances where they cannot give permission for their care or treatment.)

We will ask people to help us develop our new rating systems for services.

People who use services will help us to choose areas and develop the plans for our themed inspection programme.

Working in partnership with local people

We want to develop effective relationships with local people through their local representatives and community groups. We will work with local Healthwatch, local authority councillors, and foundation trust councils of governors across the country. Where they exist, patient participation groups will have the chance to be involved with every inspection of a GP practice.

We will encourage community groups and advocacy organisations to tell us about people’s views and experiences, and will tell them about what we do.

As part of improving how we deal with and listen to people’s complaints about poor practice, we will work more closely with quality surveillance groups, complaints advocacy groups and others who gather complaints about poor care. We will use this information to help with future inspections.

We will take account of the review of the NHS complaints system, and use the findings to help with our work in the future.

We will test a programme so that members of the public, working with us, can act as ambassadors for the new fundamental standards of care.

“At the meeting I gained inspiration for new ideas, for example comic book strips to make information more interesting and attractive to young readers.”

Jason, 18, Children and Young People Advisory Group
Healthwatch England

Healthwatch England was set up in October 2012 to make sure that the views and experiences of people who use health and social care services are heard and taken seriously at a local and national level. We’ll work with Healthwatch England to co-ordinate the way information is shared between our inspection teams and local Healthwatch, where there will be a close partnership at a local level.

Making every voice count on our inspections and visits under the Mental Health Act

We will involve people who have experience of services (Experts by Experience) in more of our inspections and visits under the Mental Health Act. We will make sure that Experts by Experience receive effective training and support.

We will make sure that our inspectors are appropriately trained to focus on people’s views during inspections. We will develop different ways to gather feedback from people in hospitals, in social care and in primary care.

We will look particularly at the experiences of care across services for people with dementia and their families, and the experience of children who are being transferred to adult services.

“Being an Expert by Experience means giving my time directly to people, helping to make sure they have their say, and the little details that are so important to people’s quality of life are not missed.”

Juliet, Expert by Experience
Challenging Behaviour Foundation

“I’ve seen things on wards that were wrong and had no opportunity to say anything. This is an opportunity to be heard.”

Roz Davies, SURP member

Increasing public understanding of what we do and what we find

We will raise public awareness of what we do and explain the standards of care that people have a right to expect. We will focus on improving awareness and understanding among people who are choosing, looking for, or receiving care. We will make sure that we particularly reach people who are rarely heard from
and who are vulnerable because of their circumstances.

Developing ratings for services will allow people to make comparisons and help them to make choices.

We will search for both positive and negative comments about a service, including using social media (for example, Facebook and Twitter) and other comments made on our website. We will make sure that we use other similar information in our work. We will use information about the views and experiences of people from other organisations websites, such as patient choice and patient opinion, to inform our work.

We will provide accessible and useful information to people who use services, the public and local groups, to help them choose care and promote good care. We will develop the information with the people who need to use it.

Making sure providers listen to people and act on what they tell them

When new care services register with us, we will check that they have a plan to work with people who use services.

We will use the fundamental standards to check on how well providers are involving, listening to and responding to people who use their services.

Supporting our staff to work with people who use services

We will involve people who use services and their carers in helping us to become a high-performing organisation by including them more in our programmes for developing staff. This will include involving people who use services in developing our training programmes, particularly in the new ways of inspecting, and involving them in delivering our training.

“The Gypsy and Traveller community is one of the most deprived and isolated ethnic minority groups in the UK. It is important that CQC hears from communities like ours with little access to health and social care services and where some people have a high level of health problems.”

Janie Codona MBE, One Voice for Travellers
Evaluation, research and good practice

Organisations are developing many approaches to the way they involve people who use services. We are committed to improving the way in which we involve people in our work. To support this we will work with appropriate academic institutions to identify evidence-based approaches and put them into practice.

It is important that our work to involve people who use services is effective, has a positive effect on the way we carry out our functions, and is value for money. As we deliver on our plans to involve people in our work, we will evaluate and report on the effect this has had.

How we will report on progress

We will report on progress in our Annual Report and Accounts.

We will report regularly to the panel of people who use services, which was set up to provide advice on our work, about the views and experiences of people who use health and social care services.
How to contact us

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