

Care Quality Commission Agenda Item: 4 Paper No: CM/11/16/04

Meeting	PUBLIC BOARD MEETING 16 November 2016
Agenda item Paper Number	4 CM/11/16/04
Item title	Chief Executive's report to the Board
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PURPOSE OF PAPER:

This is a paper for the Board to **note**.

Introduction

The report this month provides an update on the following matters:

Standing items:

- 1. Performance Report
- 2. Update from the Adult Social Care Directorate
- 3. Update from the Primary Medical Services and Integration Directorate
- 4. Update from the Hospitals Directorate

Further items:

- 5. Registering the right support
- 6. State of Care report
- 7. National Audit Office review
- 8. Experts by experience

1. Performance Report

This is covered in a separate item on the agenda.

2. Update from the Adult Social Care directorate

Performance information is included in the Quarterly performance report.

Autumn Grange Residential Home

We expect to publish our internal review into our regulation of Autumn Grange Residential Home alongside the summary of the Council's Safeguarding Adults Review. I will advise the Board of the publication date when this is known.

Autumn Grange Residential Home was a residential care home for 52 older people. CQC inspected the home in November 2012 following whistle blowing concerns and

as a result immediate action was taken by the local authority to move people and the provider closed the home. Autumn Grange was the provider's only location and CQC cancelled the provider's registration. The provider was subsequently prosecuted for corporate manslaughter (the first prosecution for corporate manslaughter in a care home) and the inquest into the death of a person living at the home concluded last month. The coroner delivered a verdict of unlawful killing, concluding that no agency had a causative or contributory role in the death of the person.

A Safeguarding Adults Review was conducted under the auspices of the Nottingham City Council Adult Safeguarding Board. CQC contributed to this and since the conclusion of the prosecution case earlier in the year we have conducted our own internal review. Many of the issues raised by the review have been addressed by the new methodology for monitoring and inspecting services introduced in October 2014 but we wanted to identify whether further improvements are required to be included in the next phase of inspections.

The coroner issued CQC with a Regulation 28 report asking us to look at how we deal with DBS checks for nominated individuals. We are addressing this in accordance with our procedures for Regulation 28 notices.

3. Update from the Primary Medical Services and Integration Directorate

Performance information is included in the Quarterly performance report.

4. Update from the Hospitals Directorate

Performance information is included in the Quarterly performance report.

Since the last report three Trusts have been placed in Special Measures following CQC inspections (St. George's NHS Foundation Trust; South East Coast Ambulance Trust and Princess Alexandra, Harlow) and two Trusts have exited Special Measures (Wye Valley and Norfolk and Suffolk NHS Foundation Trust). The Walton Centre NHS Foundation Trust has been rated Outstanding.

5. Registering the right support

In the Winterbourne View Concordat (2012), CQC committed to a number of actions to support better quality care for people with learning disabilities. This included using registration to ensure good models of care were being provided. In Transforming Care for people with learning disabilities: next steps (2015) CQC committed to use our powers to seek to ensure that inappropriate models of care are not registered.

We published policy on registering the right support in February 2016 which set out how we could consider registration applications in relation to learning disability services. Now we have operated the policy for more than 6 months, we are taking the opportunity to improve the guidance based on our experience of using the policy. We will consult on the policy in December and aim to publish revised guidance reflecting the input of the consultation in March. Our existing policy

remains in place while this activity is underway and will guide the decisions we will take on any applications received.

6. State of Care report

Board members are aware that on 13th October 2016 CQC published *The state of health care and adult social care in England 2015/16*. The report, infographic and interactive map is available on CQC's website.

The report sets out that despite challenging circumstances, as at 31st July 2016:

- 71% of the adult social care (ASC) services that CQC had inspected were rated 'good' and 1% were 'outstanding';
- 83% of the GP practices inspected were 'good' and 4% were 'outstanding'; and
- 51% of the core services provided by NHS acute hospital trusts were 'good' and 5% were 'outstanding'.

However, some people still received very poor care; 2% of adult social care services, 3% of GP practices and 5% of hospital core services were rated 'inadequate'.

76% of NHS services, care homes, general practices and other services that had been rated as 'inadequate' by CQC were able to improve their ratings following reinspection. 23% went from 'inadequate' to 'good' and 53% went from 'inadequate' to 'requires improvement'.

47% of providers that were re-inspected following a rating of 'requires improvement' were not able to improve their rating. Most worryingly, in 8% of cases, the quality of care had deteriorated so much that the rating was downgraded to 'inadequate'.

We also raised concerns that the sustainability of the adult social care market is approaching a tipping point. This view is based on the evidence of inspections, information received through CQC's market oversight function, and a variety of external data.

- Although three quarters of ASC services that were initially rated 'inadequate' improved following re-inspection, nearly a quarter of re-inspected services were not able to improve their ratings. Half of services rated as 'requires improvement' that were re-inspected (904 out of 1,850) had no change to their rating. In 153 cases we found that the care had become inadequate.
- CQC data shows that a five-year period of steady increase in the number of nursing home beds going from 205,000 beds in 2009 to 224,000 beds in March 2015 has now stalled, with numbers remaining static since that time.
- Already CQC has seen examples of providers starting to hand back contracts as being undeliverable; local authorities warn of more to come. This is due to pressures on fees that funders of care are able or willing to pay, and cost pressures that include the impact of the national living wage (introduced in April 2016).

• In 2015, Age UK estimated that more than a million older people in England were living with unmet social care needs (such as not receiving assistance with bathing and dressing); a rise from 800,000 in 2010.

 The number of older people receiving local authority-funded social care fell 26% from more than 1.1 million in 2009 to around 850,000 in 2013/14. Also, 81% of local authorities have reduced their real-term spending on social care for older people over the last five years.

We made a call for more resource for adult social care, for people who need access to services and to alleviate the pressures on the NHS.

The report was the most widely covered story for CQC so far this year, with around 200 articles being generated across national, regional and trade outlets on the day of publication alone. It was the second leading story on broadcast media that day and was covered by all of the national newspapers. I took part in several national broadcast interviews including with BBC Radio 4's Today programme, ITV Good Morning Britain, BBC Breakfast, ITV Lunchtime News, Channel 5 News, and the BBC News Channel. Andrea Sutcliffe, Chief Inspector of Adult Social Care, and Chris Day, Director of Engagement, extended the coverage to consumer and regional broadcast media outlets. Andrea Sutcliffe gave an interview to BBC Radio 4's You & Yours and with the BBC General News Service. The report findings were also highlighted in Parliament, both on the day of the launch and in subsequent Prime Minister's Questions.

7. National Audit Office review

Discussions are proceeding with the National Audit Office (NAO) around the timing of their follow up Value for Money study of the CQC. It is anticipated that the scope and likely start date of this work will be agreed by colleagues across the two organisations by the end of November, with a start date possibly in December. Against this timeframe it is likely that the output of the study would be published in the early summer next year. The Executive Team and other colleagues across CQC have been reviewing the recommendations of the NAO's most recent study of CQC, together with further inputs from the Public Accounts Committee. Progress against these has been reported to both the Executive Team and the Audit and Corporate Governance Committee. The Board will be kept informed as to scope and progress of the upcoming study.

8. Experts by experience

The Executive Team and Board members have received correspondence from current and former experts by experience, expressing concerns. We take these concerns very seriously and on 5th October I responded to their letter of 20th September 2016. Remploy have also responded, outlining the actions they are taking. On 7th November further correspondence was received and a response is being prepared. The response will be shared with Board members.

CQC has used the contract mechanisms to drive service improvement and Remploy has been working on improving all of the key areas outlined in the letter of 20th September. The contract management process measures, and provides evidence of, improvement against clearly defined improvement targets and outcomes of

improvement plans are monitored by CQC against key performance indicators (KPIs). Additionally, CQC requires Remploy to report monthly on performance against the contractual KPIs.

CQC have recently held the six monthly contract(s) review meeting where Remploy were formally asked to address any remaining actions to support improvement. This can be made available to Board members. Whilst substantial progress has been made (including fulfilment of requests for expert by experience, employer support to experts, and communication with inspectors and experts by experience), some residual targets for improvement have not yet been fully met (such as complaints regarding training for experts by experience and suitability of experts by experience for particular inspections).

CQC will continue to carry out the contract obligation to review the performance of all expert by experience contracts and to monitor progress. Where, despite the improvement in some areas, performance requires improvement, CQC will use the full range of contract remedies available, for example Requires Action Notices, Corrective Action Notices and financial penalties. We are enforcing all obligations under the contract.

To help CQC assess the value for money of the contracts, CQC included contract obligations for suppliers to provide an "open book" report, which provides financial information for assessing the actual cost of the service delivered against the pricing structure for the services detailed in the contract. This ensures that CQC can challenge and demand changes in the financial structure of the service to support improvement as determined within the contract mechanism.

It is important that experts by experience raise concerns with the suppliers, Choice Support (Central region) or Remploy (North, London and South regions), in the first instance. If there is evidence that they have not had a satisfactory response from Choice Support or Remploy then this should then be raised this with CQC.

We will continue to monitor the performance of the suppliers under the contracts.

The Board is asked to **note** these items.

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Date: 8th November 2016