### **Care Quality Commission**

The Care Quality Commission (CQC) is the independent regulator that makes sure hospitals, care homes, dental and GP surgeries, and all other care services in England provide people with safe, effective, compassionate and high-quality care, and we encourage them to make improvements.

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 continue to protect the interests of vulnerable people, including those whose rights are restricted under the Mental Health Act.

### CQC & OSC's information sharing

Our judgements will be independent of the health and social care system. We will always be on the side of people who use services. This is why our relationships with overview and scrutiny committees are an important part of how we work.

Our new inspections of NHS trusts this year will cover the following:

Are services safe?

Are they effective?

Are they caring?

Are they well-led?

Are they responsive to what people tell them?

### How OSC's can share information with CQC

We want to use any information available from OSCs to support these inspections — especially feedback from local people. Build a dialogue with CQC — with regular informal contact and chairs able to 'pick up the phone' .Let CQC know your committee's plans and progress of work. Meet with CQC — as a partner not as a 'witness'. Use our information — the registered services in your area, our inspection activity and our findings

Share information with CQC about people's experiences of the local health and care system and of individual services

Information from scrutiny reviews, public meetings, issues from councillors can all be useful to CQC. Share your findings and recommendations from review. Expect feedback from CQC on how we use your information

We will in return:

Meet with OSCs – but as a partner, not an interviewee

- Explain how CQC fits into the local health and care system
- Provide feedback on how we use information from scrutiny
- Explain how services do/don't meet the fundamental standards and what CQC expects of providers
- Have confidential conversations with the chair/lead officer where agreed
- Hold joint meetings where needed with you and the local Healthwatch
- Help councillors understand the inspection process

### **CQC - Harrow Team**

Inspection teams in CQC are currently divided into regions — London, South, North and Central. These are then sub-divided into more local teams. The inspection team that covers services in Harrow also covers Brent and some services in Enfield and Barnet. We also have staff either nationally or regionally covering our other public functions such as registration, communications and the customer service centre. This structure will change from April 2014 under our new methodology.

The local team is comprised of a Compliance Manager and ten inspectors. Both the manager and inspectors communicate regularly with other stakeholders in the local area such as local authority commissioners and safeguarding, Healthwatch and NHS Trusts.

All adult social care services and acute sites for NHS Trust's require an inspection at least once a year. Independent Health services are inspected at least a year or once every two years depending on the type of service. We are due to have completed at least one inspection for all dental services since they were registered in 2011, by April 2014. We are due to inspect at least 20% of GP practices by April 2014.

# **Inspection Methodology**

We use data collected from intelligence we gather, information from stakeholders and direct communication from people who use services, their staff and other people who have contact with services to decide when we inspect a service and what areas of the service we will inspect. If we receive information of concern that we feel is of enough risk that an immediate inspection is required, that inspection takes place within 5 working days.

An inspection comprises of a site visit to the registered location which can include any of the following:

- talking with people who use the service and their next of kin/representatives,
- · talking with staff
- talking and receiving information from stakeholders
- observations

- SOFI (Short Observational Framework for Inspection)
- Checking records

During an inspection, if we find or see anything concerning that we were not planning to inspect, we can include that area as part of our inspection.

We give headline feedback to a senior member of staff, ideally the registered manager, at the end of an inspection but do not make a judgement at that stage.

We have 10 working days to review the evidence we have gathered, request any additional evidence we feel we require that we did not receive at the inspection (including phoning additional people if we have been unable to speak to enough people during an inspection), draft the report, and have the report checked before it goes to the service.

The service then has 10 working days to review our draft report and feedback if they feel there is anything factually inaccurate. Based on this feedback, we then change anything we agree is factually inaccurate and publish the final report.

### **Compliance Actions and Enforcement Action**

If we have issued a compliance action, the service has up to 28 days after the final report to send an action plan which must include a date by which they feel they will be compliant by. We review the action plan to ensure it is reasonable in time and addresses the area(s) of non-compliance. We will then follow up the compliance action within three months of when the service said they will be compliant by.

If we have issued a warning notice, we tell the service when they are required to be compliant by.

We have additional enforcement powers which include both criminal and civil proceedings. These include fines, changes to a service's registered conditions, cautions, deregistering a manager, the service or the provider.

# **Performance**

- 1. There are currently 232 registered and active services in Harrow. 116 adult social care services (care homes, DCAs, shared lives services). 58 dentists. 35 GPs. 4 NHS sites, 4 independent ambulances and 15 independent health services such as family planning, slimming clinics, private hospitals and doctors.
- 2. We have conducted at least 96 inspections in Harrow in the last 6 months. There are currently 137 compliance actions and 2 Warning Notices active on services in the area. 462 outcomes for services in in Harrow are currently judged compliant. This is 94.2% of all outcomes we have inspected. This is against a national picture of around 90%.
- 3. 20 adult social care services are currently not compliant with our regulations in at least one area (23.4%). This is against a national and London picture of around 10%. The most common areas they are not compliant in are outcome 16 (Assessing and monitoring the quality of

- service provision) 6 services, outcome 9 (Management of medicines) 4 services and outcome 21 (Records) 4 services.
- 4. 1 independent health service is currently not compliant with our regulations in four areas (6.6%) outcome 1 (Respecting and involving people who use services), outcome 2 (Consent to care and treatment), outcome 13 (supporting workers) and outcome 16 (Assessing and monitoring the quality of service provision). This is against a national and London picture of around 10%.
- 5. 1 NHS site (RNOH) is currently not compliant with our regulations in one area (25%) outcome 10 (Safety and suitability of premises). This is against a national picture of around 10% and London picture of around 6%.
- 6. 2 dental services are currently not compliant with at least one our regulations (1.1%%). This is against a national picture of 5%. These were outcome 7 (Safeguarding people who use services from abuse), outcome 12 (Requirements relating to workers) and outcome 21 (Records.)
- 7. All the independent ambulance services are currently compliant with our regulations.

NB: Percentages for London and National are estimates based on State of care report 2013/14.

# **Outcomes to note:**

Knights Court Nursing Home (Lifestyle Care large nursing home for 80 older people and dementia care— we worked together with Harrow safeguarding team after Harrow informed us of seven ongoing safeguarding investigations. Harrow put an embargo on admissions and we imposed 5 compliance actions and 2 warning notices following a three day inspection in April by two inspectors and an expert by experience. We also raised two further safeguarding concerns from our observations during this inspection. Follow up in July by three inspectors, some improvement but continued non compliance with two outcomes, and a further safeguarding concern raised. Further follow up in December, all now compliant.

Stanmore Residential Home (independent care home for older people in Stanmore, 27 beds) — There were several concerns during 2012, and we issued a warning notice with which they showed compliance. Harrow contract monitoring team also had concerns, and we liaised on our responses and actions. Following scheduled inspection in July 2013 we issued two compliance notices, one of which was for outcome 9 (management of medicines). At follow up inspection in October with a pharmacist inspector we found continuing non compliance with outcome 9 and issued a warning notice. We found them compliant at a further follow up by the pharmacist inspector in December.

<u>Concept Care Solutions – 1<sup>st</sup> Floor Middlesex House</u> (small independent domiciliary care agency in Edgware, contracted by Hertfordshire) – At inspection in December 2012 we imposed 7 compliance actions and 2 warning notices and raised safeguarding concern. We worked with Hertfordshire who started a serious concerns process and imposed an embargo on new referrals. At follow up inspection in May 2013 they were fully compliant.

### **Gentlecare (UK) Limited.**

Warning notice on Outcome 4 and CAs on 7, 13, 14, 16, 17 and 21.

We had a meeting with Gentlecareand had a detailed conversation about the action plan. The service has now recruited a new manager and is very proactive and understands what is required. We will shortly do a follow up inspection to ensure action has been taken.

## **Roseland Care Home**

In our previous inspection of the provider we had judged there were no suitable arrangements in place to ensure staff received appropriate training to enable them to safely deliver care and treatment to an appropriate standard and issued a CA. In a subsequent action plan, the provider set out a course of action to put necessary arrangements in place, including timelines for the proposed actions, which we found had not been actioned neither was there any evidence to demonstrate any effort. Staff had not completed mandatory training such as Safeguarding and MCA 2005. Most were unable to answer questions in the subject areas.

We have issued a CA for outcome 7 and a Warning Notice for outcome 14.A follow up inspection took place on Jan 16<sup>th</sup> and report will follow.

# Carewatch (Harrow, Hillingdon & Ealing)

Provider has had several recent safeguarding concerns. Several of these have been about possible theft of property, excess charging and neglect. Inspection due. We are in contact with local safeguarding teams to establish results of investigations.

### **Pathways Care Group Limited: Greenways**

Police investigation on- going into incident involving a service user and care worker. Recent inspection carried out. Draft report with provider. Safeguarding team and CI liaising re ongoing investigation (at time of writing report)

#### Services inspected where we found full compliance and a good quality of care provision include:

**Caremark** (Harrow), a medium sized domiciliary care agency

David's House, (Methodist homes care home for 30 older people with dementia.)

For both of these we had a 100% positive and complimentary response from people using the services and their relatives, and we found strong evidence during our inspections that equality and diversity were at the heart of their service provision.