

CQC

Fundamental Standards | KLOE's Quality Assurance | Governance Framework

Learning Objectives

By the end of this workshop, you shall have a better understanding of CQC, what they do, why and how.

CQC Introduction and its position in the UK Health Spectrum

Fundamental Standards

Key Lines of Enquires

Role of Registered Providers

Role of Registered Managers

Inspection Types

Pre-Inspection Documents

Required Evidence (what & how is data analysed?)

Audits

Inspection Questions & Answers

Observational Techniques

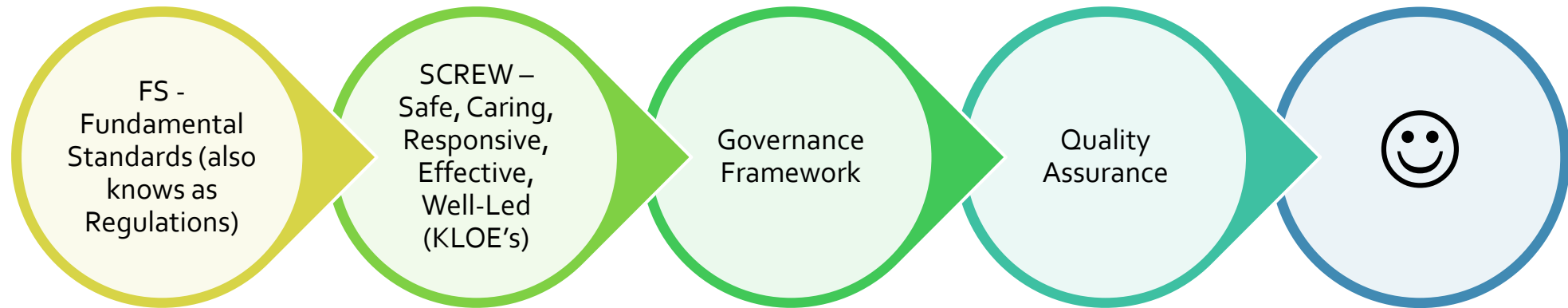
Workflow Processes

Governance Framework

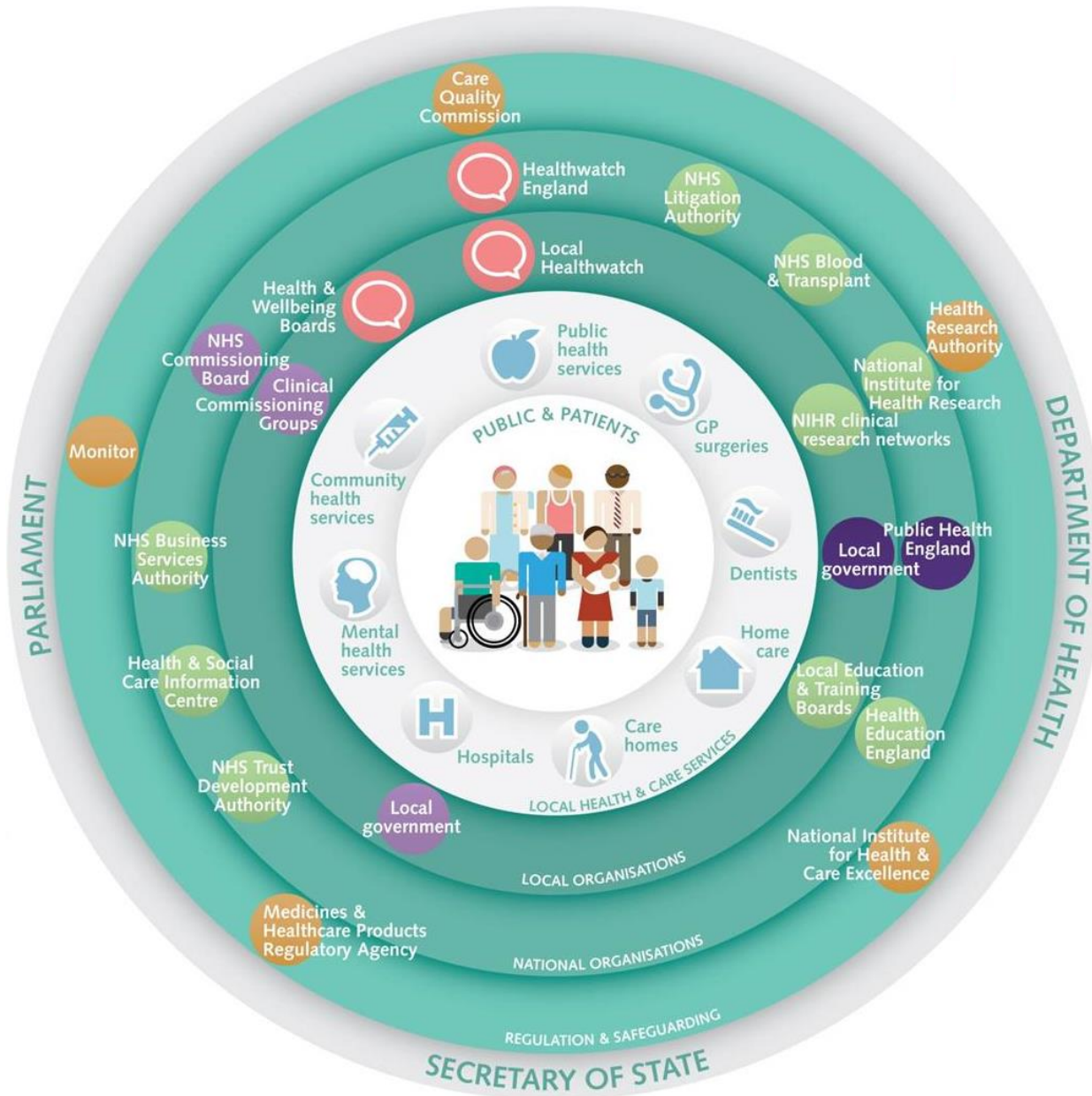
Quality Assurance

The So-Called Boring Stuff (Notifications).

Main Objectives



UK Health Spectrum



Fundamental Standards – Reg 09 & 14

Care and treatment must be appropriate and meet people's needs and preferences

People must be treated with dignity and respect

Care and treatment must only be provided with consent

Care and treatment must be provided in a safe way

People must be protected from abuse and improper treatment

People's nutritional and hydration needs must be met

Fundamental Standards – Reg 09 & 14

All premises and equipment used must be clean, secure, suitable and properly used, maintained and located

Complaints must be appropriately investigated and appropriate action taken in response

Systems and processes must be established and used to ensure compliance with regulatory requirements

Sufficient numbers of suitably qualified, competent, skilled and experienced staff must be deployed

Staff must be of good character, qualified and able to do their job

FS – Person-Centred Care

The patients' care or treatment is tailored to them and meets their needs and preferences.

FS – Dignity & Respect

All patients must be treated with dignity and respect at all times whilst they are receiving care and treatment.

Everyone have privacy when they need and want it.

Everyone is treated as equals.

Everyone is given the support they need to help them independent and involved in care.

FS – Consent

Patients or anybody acting on their behalf **MUST** give consent before any care or treatment is given.

FS – Safety

Patients must not be given unsafe care/treatment or be put at risk of harm that could be avoided.

Providers must assess the risks relating to H&S.

Ensure the care/treatment facilities environment is safe.

Ensure that staff have the right qualifications, competence, skills and experience.

FS – Safeguarding from Abuse

Patients must not ever suffer any form of abuse or improper treatment while receiving care.

Neglect

Degrading
Treatment


Unnecessary or
disproportionate
restraint

Improper limits
on their
freedom.


FS – Food & Drink (where applicable)

Patients must have enough to eat and drink to keep them in good health while they are receiving care & treatment.

FS – Premises & Equipment




The places where patient is receiving care and treatment must have the clean & suitable equipment.



The equipment used in the care and treatment must also be secure and used properly.

FS – Complaints



Patients must be able to complain about the care & treatment.

Providers must have a complaints system in place to handle & respond to the complaint.

Every complaint must be thoroughly investigated.

The learning outcome must be shared and actions taken to prevent in future.

FS – Good Governance

The provider
must have a
good
governance
framework in
the organisation.

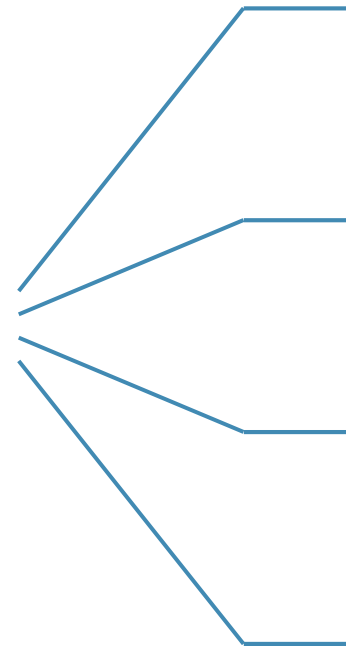
The governance framework must ensure its effectiveness on the quality and safety of care.

The governance framework must help the service improvement whilst reducing the risk to patients health, safety and welfare.

The governance framework features: effective structures, systems of accountability, strategy platform to deliver good quality and sustainable services.

FS – Staffing

The provider
must have
suitable
staff.



Qualified

Competent

Experienced

Trained

FS – Fit & Proper Staff

The provider must employ staff who can provide care and treatment appropriate to their role.

Clear staffing roles.

Sufficient access to information.

Understand policies & procedures.

Able to identify, record and manage risk to mitigate it.

FS – Duty of Candour

The provider must be open and transparent about the care & treatment.



If anything goes wrong they must do following:

Inform/Accept what has happened.

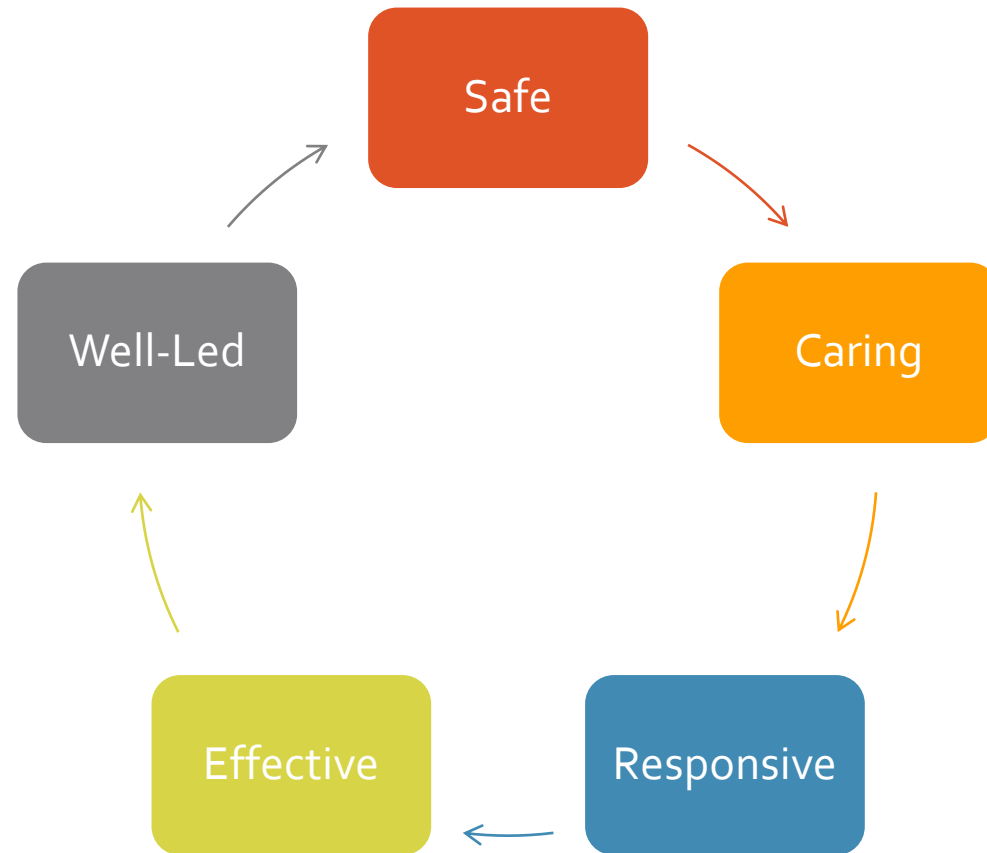
Provide Support.

Apologise (where applicable).

FS – Display of Ratings

The provider must display their CQC rating in a place where a patient can see it.

Key Lines of Enquiries



Is it Safe?



Is it Effective?

Assessing needs and delivering evidence-based treatment



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graph TD; A[Assessing needs and delivering evidence-based treatment] --> B[Monitoring outcomes and comparing with similar services]; B --> C[Staff skills and knowledge]; C --> D[How staff, teams and services work together]; D --> E[Supporting people to live healthier lives];
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Monitoring outcomes and comparing with similar services

Staff skills and knowledge

How staff, teams and services work together

Supporting people to live healthier lives

Is it Caring?



Kindness,
respect and
compassion

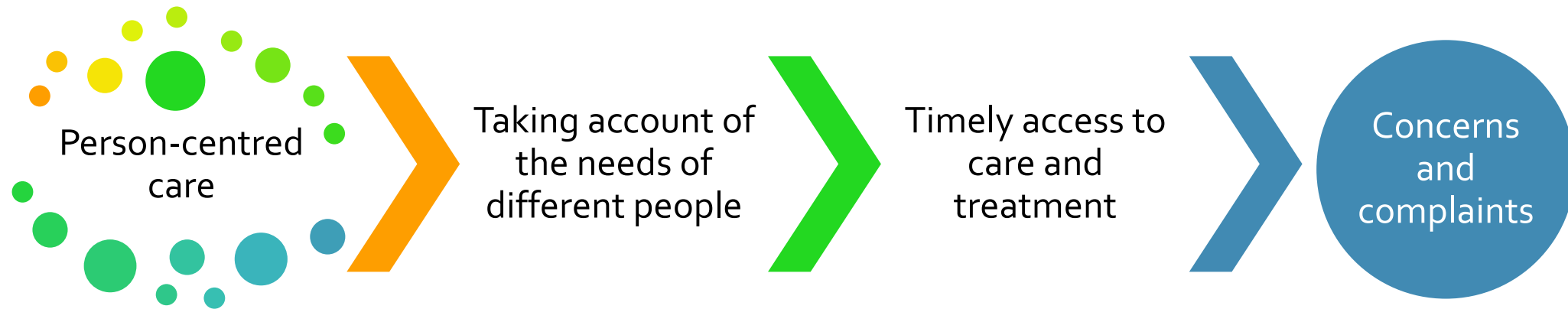


Involving
people in
decisions
about their
care



Privacy and
dignity

Is it Responsive?



Is it Well-led?



Population Groups

- Older People
- People with Long Term Conditions
- Mother, Babies, Children and Young People
- The working-age population and those recently retired
- People in vulnerable circumstances who may have poor access
- People experiencing a mental health problem.

Registered Manager



Registered Provider

Must have financial resources to provide and continue to provide services as per SoP.

To comply with fundamental standards & Regulations.

To provide a safe, caring, effective, responsive and well-led service.

To comply with all other legal obligations of the business.

Only provide services which are covered under their regulated activities and SoP

Ensure they have effective governance framework to ensure quality assurance and service improvements.

Inspection Types

Scheduled Inspections

Planned in advance.

Responsive Inspections

Specific & Immediate Concern

Themed Inspections

To find explore concerns across the whole sector

Follow-up's

The follow-up inspections based on your previous inspections.

Quality Assurance & Governance Framework

Difference



- Governance Framework entails what, why & how should it be done.
- Quality Assurance ensures the process of maintaining a desired level of quality.

Quality Assurance & Governance Framework

Quality assurance is a way of preventing mistakes and avoiding problems when delivering services.

What does it cover?

Clinical Audits
Non-clinical Audits

Service Monitoring
Risk Assessments
Secure Systems

Responsible Workforce
Organizational Resilience

Performance
Management
Service
Improvements

Quality Assurance & Governance Framework

Governance ensures that objectives & responsibilities are clear and that Quality, Performance and Risks are identified, understood and managed.

What does it cover?

Laws
Regulations
Statues

Policies
Procedures
Protocols

Contracts
Agreements

Management
Administration

Workflow Processes

Workflow Processes refers to series of activities or tasks that need to be completed sequentially or in parallel to achieve a business outcome.

Differences

Processes are sequence of tasks.

Workflows are the way to make this sequence more productive and efficient.

Example

Effective Recruitment of a staff.

Management of Patient Records / Registration.

All the If's and but's.

Whenever you are designing a workflow you must ensure that you completed the 360 degree loop on that item. So your stages should be following:

Identify

Design

Review

Deploy

Validate

Miscellaneous

PIR

List of items CQC will request before the scheduled inspection.

Inspection Q&A

Questions during the inspection can vary, mostly they are around the KLOE's, Governance, Workflows, Quality Assurance, Training & Development, Service Improvements, and Audits.

Evidence

Audits
Assessments
Checklists
External Compliance
Any Other Information.

Observational Techniques

Walk-around in the surgery to observe following:

- Cleaning Checklist
- Visitors Log
- Safety Exists
- Fire Alarms
- Fire Extinguishers
- Water Outlets
- Exposure from Reception whilst leaning

Clinical Audits

Clinical Audit is a quality improvement process that seeks to improve patient care and outcomes through systematic review of care against explicit criteria and the implementation of change.

Prescribing Audit

Diabetic / Asthma / COPD Audit

Medical Record Keeping

Patient Outcomes

Respective Services
(being offered by practice)

Non-Clinical Audits & Assessments

Audits

Health & Safety Audits	Infection Control Audit	HR Audit	GDPR Audit	Fire Safety	COSHH Audit	Significant Event Audits	Complaints Audits	Service Improvement Audits	Disability Access Audit	Clinical Waste Audit	Capacity Audit
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Assessments

Legionella Risk Assessment	Fire Risk Assessment	Car Park Risk Assessment	Pregnancy Risk Assessment	First Aid Risk Assessment	Staff Training Assessment	Display Screen Equipment Assessment	Security Risk Assessment
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Checklists, Logs, Plans & Records

Medical Emergency Checklist	HR Checklist	Cleaning Checklist	Financial Process Checklist	Visitors Log	Equipment Log	Fire Drill Log	Business Continuity Plan	Staff Immunisation Records	Staff Sickness Record	Staff Holiday Record	Performance Management Records
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The Boring Stuff – CQC Notifications



Thank you for your patience.



Questions

Answers

