

**Healthwatch Worcestershire Response to CQC consultation on 'Next Phase of Regulation 2'.**

**Survey Response: Next phase consultation 2**

**Are you completing this form as a...**

*Voluntary or community sector representative (including Healthwatch)*

**Are you answering on behalf of an organisation, a provider or a service?**

Yes

**If you are answering on behalf of an organisation, please give its name:**

*Healthwatch Worcestershire*

This part covers our proposals for regulating in a complex changing landscape.

**Select 'yes' below if you would like to see the questions about regulating in a complex changing landscape and respond.**

*Yes, I would like to see the questions about regulating in a complex changing landscape and respond*

**Q1a. What are your views on our proposal that the register should include all those with accountability for care as well as those that directly deliver services? (see page 7)**

*Personalisation and specifically personal budgets as a key model of care have not been addressed in this paper and clarification is needed on CQC role in supporting the NHS commitment to significantly increase the take up of Personal Budgets - subject to that comment agree with the proposals.*

**Q1b. What are your views on our proposed criteria for identifying organisations that have accountability for care? (see page 12)**

*Agree with the criteria outlined.*

**Q2. We have suggested that our register show more detailed descriptions of services and the information we collect.**

**What specific information about providers should be displayed on our register? (see page 14)**

*Support the concept of using a box type visual presentation for us to go into and draw down on - need to ensure use of plain English.*

**Q3a. Do you agree with our proposals to monitor and inspect complex providers that deliver services across traditional hospital, primary care and adult social care sectors? (see page 18)**

*Strongly agree*

**Q3b. Please explain the reasons for your response.**

*Within our Health and social care provision we find the inter connection of varying complex organisations difficult to follow and hold to account. We find it difficult to obtain performance and quality data on behalf of patients ,service users and carers.*

**Q4a. Do you agree that a provider-level assessment in all sectors will encourage improvement and accountability in the quality and safety of care? (see page 23)**

*Strongly agree*

**Q4b. What factors should we consider when developing and testing an assessment at this level?**

*We support the proposals to assess providers in a way that better reflects the audience for the ratings. There is an opportunity to develop an assessment framework that has more emphasis on outcome achievements as well as the input assessments that can be an obstacle to innovation. The proposal to assess only leadership at provider level makes sense, although this must reflect the importance of leadership throughout an organisation's teams. It should be possible to draw upon commercial quality models, such as EFQM, in particular on the ability of providers to assess and improve quality within their own organic management systems.*

**Q5a. Do you think our proposals will help to encourage improvement in the quality of care across a local area? (see page 29)**

*Strongly agree*

**Q5b. How could we regulate the quality of care services in a place more effectively?**

*We consider this to be extremely important. Most of the drivers of quality in any health economy depend upon effective integration across patient pathways and in managing long-term illnesses. The CQC has an important role in assessing how an overall system operates, and the ability to identify inadequacies in a specific provider that have their roots in the wider system. We support the proposal to help local partners identify opportunities for improvement. There should be an assessment of the ability of a local health system to analyse issues arising from lack of integrated care and its ability to innovate to address them*

This part covers our proposals for primary medical services.

Select 'yes' below if you would like to see the questions about primary medical services and respond.

*Yes, I would like to see the questions about primary medical services and respond*

**Q6a. Do you agree with our proposed approach to monitoring quality in GP practices? (see page 33)**

*Strongly agree*

**Q6b. Please give reasons for your response.**

*For patients ( and for those of us who are members of local patient groups ) it is vital that we are given a meaningful role in how our local GP practices are run and the opportunity to influence decisions and changes made by the practices.*

**Q7a. Do you agree with our proposed approach to inspection and reporting in GP practices? (see page 37)**

*Strongly agree*

**Q7b. Please give reasons for your response**

*The new approach to rating GP services gives an opportunity to better reflect the pivotal role GPs play, in the wider health system. For example, GP's effectiveness has a significant impact on the number of patients with long term illnesses that require emergency admission through A&E. The assessment should look at the impact a GP's performance has in enhancing the quality of care across the pathways.*

**Q8a. Do you agree with our proposal to rate population groups using only the effective and responsive key questions? (Safe, caring, and well-led would only be rated at practice level - see page 37.)**

*Neither agree nor disagree*

**Q8b. Please give reasons for your response.**

*Unless a service is safe, then there is no point in it being responsive- I appreciate that this is simplistic however, safety should take priority and if a practice is unsafe in one element of care, then overall it is unsafe.*

**Q9a. Do you agree with our proposal that the majority of our inspections will be focused rather than comprehensive? (see page 37)**

*Agree*

**Q9b. Please give reasons for your response.**

*Support the proposal to publish information much sooner*

**Q10a. Do you agree with our proposed approach for regulating the following services? (see page 42)**

- |   |                |
|---|----------------|
| i. Independent sector primary care                    | Strongly agree |
| ii. NHS 111, GP out-of-hours and urgent care services | Strongly agree |
| iii. Primary care delivered online                    | Strongly agree |
| iv. Primary care at scale                             | Strongly agree |

**Q10b. Please give reasons for your response (naming the type of service you are commenting on)**

*As a patient representative group we have been concerned for some time that accountability and open performance data has not been adequate or properly accounted for in the three areas you highlight and have numerous local examples of poor and questionable performance that we have no clear accountability route to follow*

This part covers our proposals for adult social care services. Select 'yes' below if you would like to see the questions about adult social care services and respond.

*Yes, I would like to see the questions about adult social care and respond*

**Q11a. Do you agree with our proposed approach to monitoring quality in adult social care services, including our proposal to develop and share the new provider information collection as a single shared view of quality? (see page 47)**

*Strongly agree*

**Q11b. Please give reasons for your response.**

*For too long we have side stepped the accountability for good care and quality in the field of Social Care, Local Councillors and Officers have not been robust in challenging Central Government and NHS, Organisations like Healthwatch have been warning for some time now that the “system” is not responsive and we are facing a crisis of our own making. CQC have a real opportunity to put some markers down to improve services for thousands of vulnerable patients and service users. Collective and joint ownership of the way forward, meaning full engagement with service user groups and co-producing the changes are key.*

**Q12a. Do you agree with our proposed approach to inspecting and rating adult social care services? (see page 50)**

*Strongly agree*

**Q12b. Please give reasons for your response.**

*As Social Care is in such a mess and service users and carers are often powerless in the situations they find themselves, in your proposals must deliver change and improvement at pace and direction.*

**Q13a. Do you agree with our proposed approach for gathering more information about the quality of care delivered to people in their own homes, including in certain circumstances announcing inspections and carrying out additional fieldwork? (see page 50)**

*Strongly agree*

**Q13b. Please give reasons for your response.**

*This is a big gap in our understanding of care performance, an example of the Government allowing the private care sector to expand without any clear and transparent accountability. Many of the people who contact Healthwatch on this subject do not have the reassurance and confidence that should be a fundamental right.*

**Q14a. Do you agree with our proposed approach for services which have been repeatedly rated as requires improvement? (see page 52)**

*Strongly agree*

**Q14b. Please give reasons for your response.**

*Current system lacks public confidence and has to be a stronger enforcement of standards by CQC*

**This part covers our proposals for the fit and proper person's requirement.**

Select 'yes' below if you would like to see the questions about the fit and proper person's requirement, and respond.

*Yes, I would like to see the questions about the fit and proper person's requirement and respond*

**Q15a. Do you agree with the proposal to share all information with providers?**

*Strongly agree*

**Q15b. Do you think this change is likely to incur further costs for providers?**

*The issue of disclosure and anonymity needs to be more robust and protect the source of disclosure. Family representatives should always be involved in a confidential gathering of soft information. Need to recognise extra burden for service providers*

**Q16. Do you agree with the proposed guidance for providers on interpreting what is meant by “serious mismanagement” and “serious misconduct”?**

*Agree with the definitions*

Your responses to this consultation will be used to inform our work and future development.

If you would like to be updated when we publish our consultation response, please provide your email address.

We will not share your email or use it for any other purpose.

*simonadams@healthwatchworcestershire.co.uk*

Would you like to see a copy of your response?

If you select 'yes', your response will be displayed after you click 'finish'.

*Yes, I would like to see my response*

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