Social Partnership Forum meeting with CQC – Action Note

Wednesday 8 November 2017

Chair – Danny Mortimer & Jon Restell

Attendance:

Ted Baker, Chief Inspector of Hospitals (CQC)
Andrea Sutcliffe, Chief Inspector of Adult Care (CQC)
Tina Robert, Regulatory Policy Officer (CQC)
Danny Mortimer, Chief Executive (NHS Employers)
Rebecca Smith, Director of Engagement (NHS Employers)
Jon Restell, Chief Executive (MiP)
Jon Fahie, Senior Negotiating Officer (CSP)
Victoria Small, SPF Project Manager (SPF)

• Danny welcomed Ted to the group and thanked him for his continued commitment to these meetings.
• Ted spoke about the next phase of inspections. Where they hope to go back to each trust each year, these will be a more focused inspection, based on evidence of risk, they will always include the well-led domain (although it may take two years to get to this place). The NHS Staff Survey is a strong indicator for clinical quality with culture and leadership being key. He gave the example of the number of staff that get flu vaccination each year as a sign of the leadership and focus on safety. Organisations that do well on staff engagement, where there isn’t the disconnect between board and ward and staff truly feel they have a voice do well. Where an organisation has poor performance of WRES you often find lower indicators of quality.
• The new focus of these unannounced inspections will be staff engagement as key, and outstanding trusts have high levels of staff engagement. First reports of this phase will be out in the next few weeks.

Tackling Bullying – A Call to Action

• Bullying figures show that in the lower performing trusts it’s a 3rd of staff, but even in good trusts it is 1 in 5, so still high and unacceptable.
• CQC inspections can: ask whether trusts are signed up to the Call to Action; look at what measurable action trusts are taking; look at how they are monitoring progress
• The well-led framework for trusts which has been agreed with NHS Improvement includes key lines of enquiry: does the leadership have capacity and capability to deliver high quality, sustainable care? Is there a culture of high quality, sustainable care? Is there a clear vision and creditable strategy to deliver high quality sustainable care to people, and robust plans to deliver? Are there clear and effective processes for managing risks, issues and performance? Are there robust systems, processes for learning, continuous improvement and innovation? Are the people who use services, the public, staff and external partners engaged and involved to ensure high quality sustainable services? Is robust and appropriate information being analysed and challenged? Are there clear responsibilities, roles and systems of accountability to support good governance and management?
• Equally outstanding document published by CQC is a useful resource for trusts.
• Ted’s ambition while he is chief inspector is to see a turn-around in the levels of bullying in the NHS.
• As a regulator, CQC are holding people to account for quality of care and this accountability hopefully will not be seen as bullying, they would prefer to be seen as a partner in supporting a focus on quality.
• There needs to be a wider debate on what accountability means with Boards/Chief Executives. CQC views accountability as part of the solution to drive change. The Board needs to consider why didn’t they see issues coming and the Board assurance process will not address the issues if there is a poor culture.
• There is a relationship between financial levers from NHS Improvement on trusts and the impact on quality. It is an important issue but a CQC needs to stay focussed on quality. Presentation of the state of care which CQC gives a clear message that quality of care will not be compromised.
• Two frameworks, one for well-led and one for adult social care with similar things being asked and measured.
• To be rated “Outstanding” - Staff are proud of the organisation as a place to work and speak highly of the culture. "You are likely to be rated as inadequate if “There are high levels of bullying, harassment, discrimination or violence, and the organisation is not taking adequate action to reduce this", and this impacts on quality. In overall terms, the guidance now refers to the organisation having an inclusive and compassionate culture and a culture staff feel positive about.
• Driving improvement published in the summer – 8 trusts that have gone through from inadequate to good. New report to be published that covers the case studies.
• Hull has a good story on improving its culture and tackling bullying. Colchester has come out of special measures.

ACTION – for SPF partners to consider how they can use the case studies.

CQC/NHSI joint plans to assess how NHS trusts use their resources from autumn 17.
• Pilots have already been tested.
• Consultation published 8 November and closes in January. It will run in parallel with CQC process but is led by NHSI, the proposal is the outcome will have a quality of care rating and will be the sixth dimension, they will be given an aggregated score, but will continue to report them separately so don’t lose historical quality data.
• The level of contact with NHSI and interpretation of levels could raise some issues for providers on the NHSI inspections.
• Key lines will be informed by metrics but also interviews with separate visits, but aligned with well-led visits. Can’t use evidence in two places so things will be kept separate.

ACTION – SPF partners to respond to the consultation.

Trade Unions and engagement with CQC
• CQC outlined where in their work they would continue and encourage to engage with staff side locally.
• Adult social care – not as unionised, but will also talk to staff. Next phase is to extend into domiciliary services but anticipate getting access to staff maybe a challenge given the nature of the service and may be more reliant on data.
• As routine, they will continue to write to trade unions in trusts.
• NHS Staff Survey is a key measure for CQC.CQC suggested that TU reps could encourage members to complete the survey.
• Discussed the development of the WDES – and how might feature in future inspections.

Next meeting:
Thursday 3 May 2018 - 2.00pm – 3.00pm, London.