Work in progress: the recommendations of the David Noble review and closed cultures work programme

For CQC Board, 18th March 2020

6 thematic aims of the “Closed Cultures” work programme

As previously reported to the Board through the Executive Team report, we have a programme of work underway to continuously improve how we identify and respond to the risk of closed cultures in services. This programme was initiated after the Panorama television programme about Whorlton Hall. Our programme of work has 6 aims, laid out below.
Glynis Murphy review will be delivered in 2 parts. We can take forward part 1 recommendations through this programme. The programme will evolve further once we have recommendations from the second part of the review. Work to address David Noble review recommendations is also now underway.

1.	**CQC understanding:** We have an improved understanding within CQC of the risks and issues associated with closed cultures including human rights and abuse risks
2.	**System understanding:** There is a shared understanding beyond CQC of risks and issues associated with closed cultures, including human rights and abuse risks
3.	**Risk identification:** We better identify risks of a closed culture in services that we regulate
4.	**Information sharing:** We have better information sharing with external stakeholders, with information about risk of abuse, human rights and closed cultures being shared from all relevant sources in a timely and regular manner
5.	**Risk response:** We have improved mechanisms in place to enable inspection teams to take action to address risk of a closed culture, including human rights breaches and abuse risks
6.	**Programme Effectiveness:** We focus on the right areas for improvement through the programme, with co-production with people who use services, their families, providers and other organisations supporting our decisions

Work delivered/ underway to date in closed cultures work programme

Work delivered/ underway through Closed cultures programme	Status	Link to Thematic aim
1. Internal publication of **Insight tool for independent healthcare**, learning disability and mental health services	Completed	Risk identification
2. **Supporting information on closed cultures** published for inspection teams	Completed (version 2 in development – will pick up points from Glynis Murphy review part 1)	CQC understanding System understanding Risk identification Risk response
3. Continue current work in registration to support **registration in line with Transforming Care principles**	In operation	System understanding/ Risk response
4. Use **Summits for restraint, segregation and seclusion review** to gather stakeholder views on improving our regulation and the wider system, including people with a learning disability or autistic people and their families	Completed	All
5. Develop **enforcement approach** where there is "risk of harm" which includes human rights risks	Started	Risk response
6. Consider use of **covert surveillance** where there are warning signs of a closed culture	being scoped/ dependent on Glynis Murphy Part 2 review	Risk identification Risk response
7. Develop "**reducing regulatory risk"** programme to improve risk stratification and response to information of concern	Started	CQC understanding Risk identification Risk response
8. Refresh of **"Registering the Right Support"** to ensure it applies across regulatory model	Due to complete in Spring	System understanding
9. Consider ways to **gather information about use of restraint, segregation and seclusi**on in service settings without mandated collection	Started	Risk identification
10. Develop **tools for inspectors to engage with people who are non verbal**	Started	Risk identification Risk response
11. Develop **observational tools for inspectors** to understand use of Positive Behaviour Support in practice	Started	Risk response

David Noble review recommendations – action plan

Recommendation	Work underway	Owner	Target date	Link to thematic aim
1. Security and availability of inspection notes	Project Initiation Document being prepared as part of set up stage	Debbie Westhead	June 2020	Risk identification
2. Easy access to all information held about a service	a. CQC insight tool b. Intelligence briefing c. Improved service profiles: being scoped	Helen Louwrens / Lisa Annaly	a. Delivered b. Delivered c. June 2020	Risk identification
3. Quality assurance	a. Re-examination of the number and benefit of "quality assurance" processes b. New Regulatory Assurance Framework agreed at ET	Joyce Frederick	a. June 2020 b. June 2020	Risk response
4. Legal (and policy) advice about non-publication of inspection reports	a. Legal note advice on non-publication of inspection reports b. Inclusion of guidance in the Inspection Handbooks: work underway to roll out through heads of policy	a. Rebecca Lloyd-Jones b. Sarah Bickerstaffe	a. Delivered b. March 2020	Risk response
5. Complaints from providers	A review of NCT's approach to investigating provider complaints	Rebecca Lloyd-Jones	March 2020	Risk response
6. Whistleblowing and speak up in CQC: formal apology	Implementing results of the 2016 investigation of the whistleblowing complaint - formal letter	Ian Trenholm	Delivered	N/A
7. Speak up: feedback to complainants	Build confidence in the process for handling and implementing results of internal investigations – HR Policy review	Gill Nicholson	June 2020	CQC understanding