Care Quality Commission

Inspection Evaluation Survey

11th May 2012

Study objective and research approach

Quantitative Study: 34 on-line interviews

-**20** Staff from a Care Facility (**15** Senior Managers)
  -Survey e-mailed to a sample of 115, providing a response rate of 17%
-**14** CQC Inspectors
  -Survey e-mailed to a sample of 18, providing a response rate of 78%

Qualitative Study: 6 ox 40 minute tele-depths

- **3** providers (mix of NHS Trust and care home)
- **3** inspectors

-Fieldwork April 2012*

•Fieldwork took place over the Easter holiday period - annual leave may go some way to explain low participation from providers

To understand the delivery and effectiveness of the Post Winterbourne CQC Inspection programme for those offering care to people with Learning Disabilities

Unfortunately relatively low numbers of providers used the opportunity to respond/comment on their regulator.

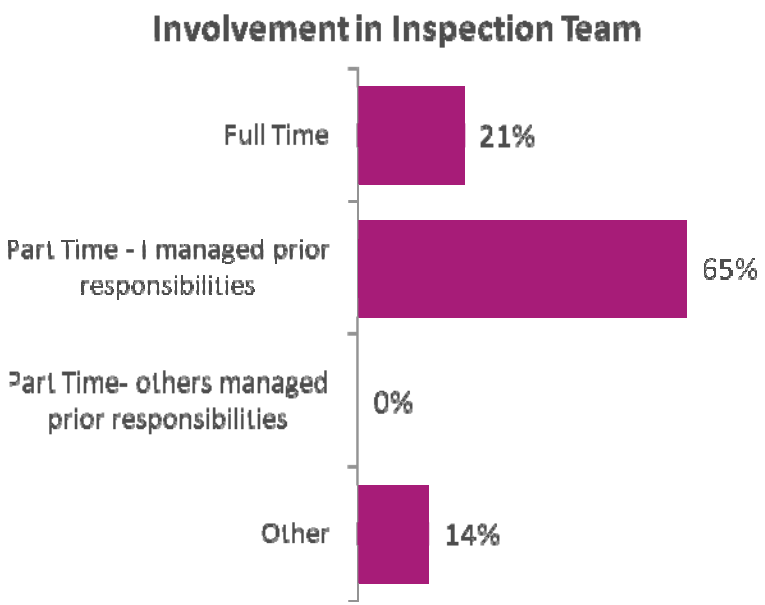
This low response can be interpreted as a lack of engagement in the feedback process.

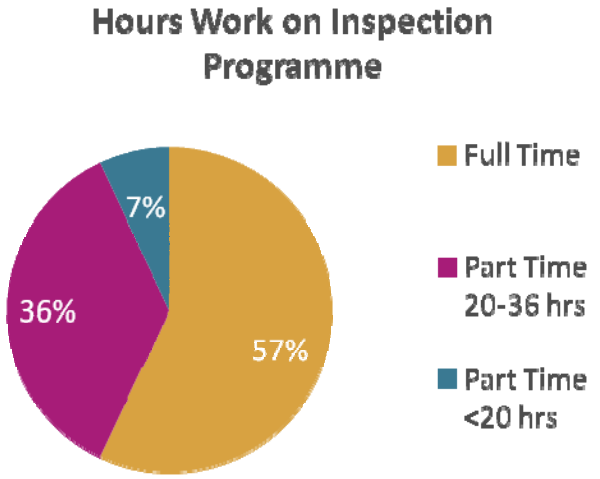
All of qualitative provider respondents had experienced 'notice to improve'

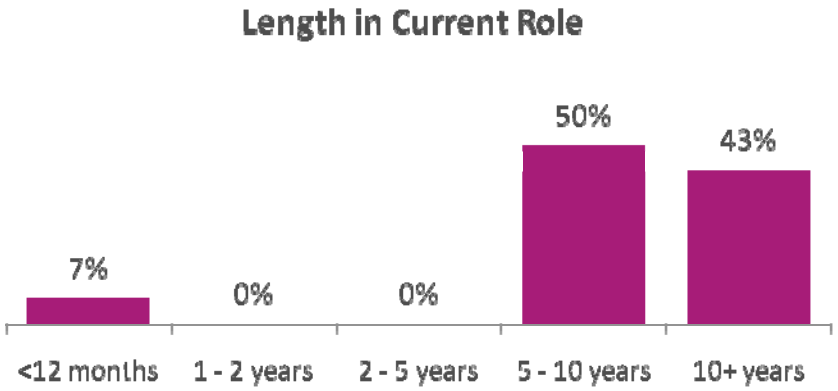
Feedback was gathered from experienced inspectors, who work predominantly full time and visited a range of facilities

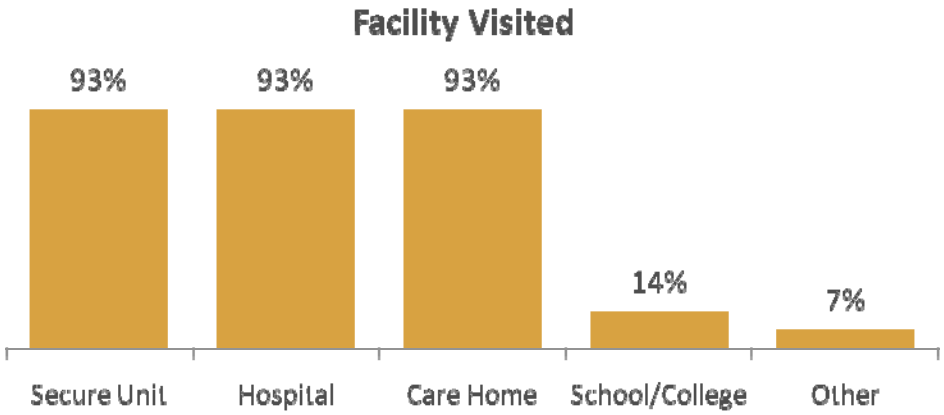
Profile of CQC Inspectors

The inspectors within the **qualitative sample** were full time (x2) and part time with management of prior responsibilities (x1) . All had visited a mix of secure units, care homes and NHS trusts







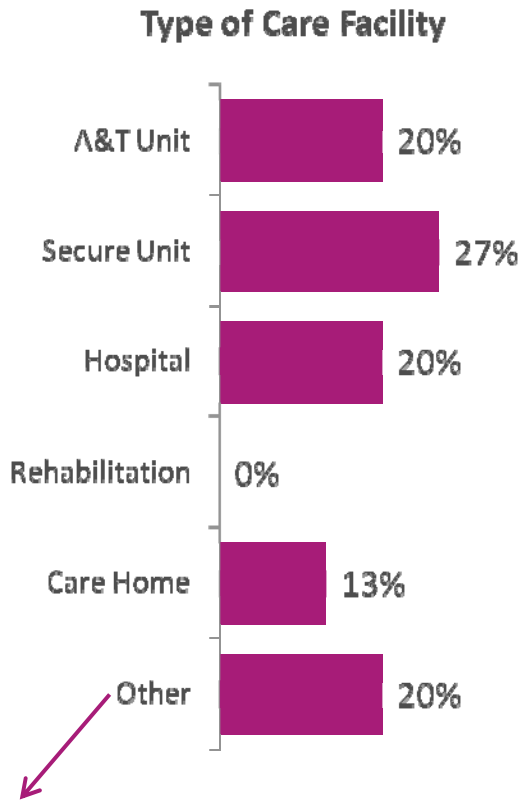


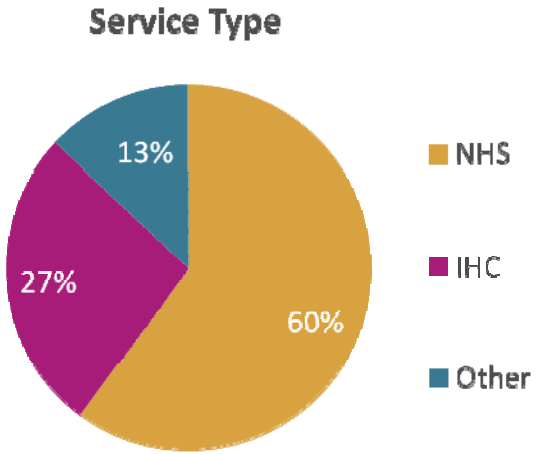
Base: Inspectors = 14

Responses were from a range of Care Providers

Profile of Care Providers

The providers within the **qualitative sample** reflected a mix of hospital and of care homes. Those interviewed held senior roles, reflecting a mix of CEO, lead manager and chief clinician positions





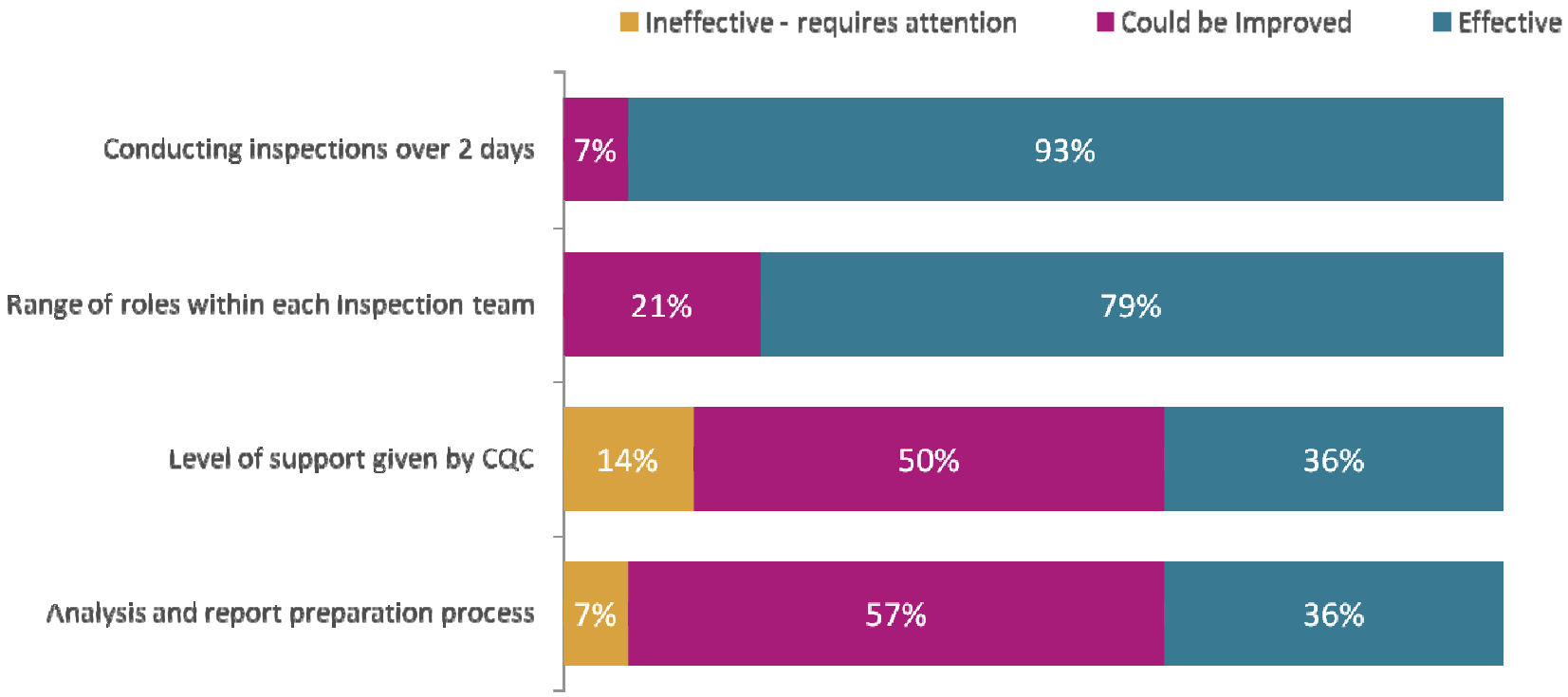
Others consist of: NHS FT, all of the above as multiple locations, LD specialist inpatient and community services and a combination of secure/rehab

Base: Care Providers = 15

Inspectors Feedback

2 day inspections and team mix seen to be a highly effective approach by inspectors but CQC support and the analysis and reporting process could be further enhanced

Effectiveness of the Inspection Process – CQC Inspectors



Base: Inspectors = 14

Q4 To what extent do you believe the following aspects of the Inspection process were effective?...

The team structure and time afforded to inspect was deemed a success; offering a positive, powerful, effective model. However, urgency of response to the Panorama expose created incredibly tight timings and at times punishing schedules

"The involvement of Ex by Ex was excellent and encourage service users to open up" ***Inspector***

Qualitative Feedback

Team Structure

- The range of roles within the team was a success and all roles 'added value' to the process
- Appreciation for Ex by Ex and carers, for the greater insight/openness their presence delivered
- Professional advisors vital, however, should ensure appropriate skill set to care provision and that experience is communicated to the provider
- 2 inspectors correct, however, not always present
- Lead inspectors need more time to manage team

2 day inspections

- Adequate time frame, allowing for detailed inspection/collation of evidence
- Could offer greater flexibility to recognise different size and needs of providers
- Would have liked team to be there for entirety of process e.g. feedback session to include Ex by Ex
- A toolkit of approaches to gather evidence welcomed, however, recognising that one size will not fit all e.g. SOFI more appropriate for those with no communication skills

Level of support given by CQC

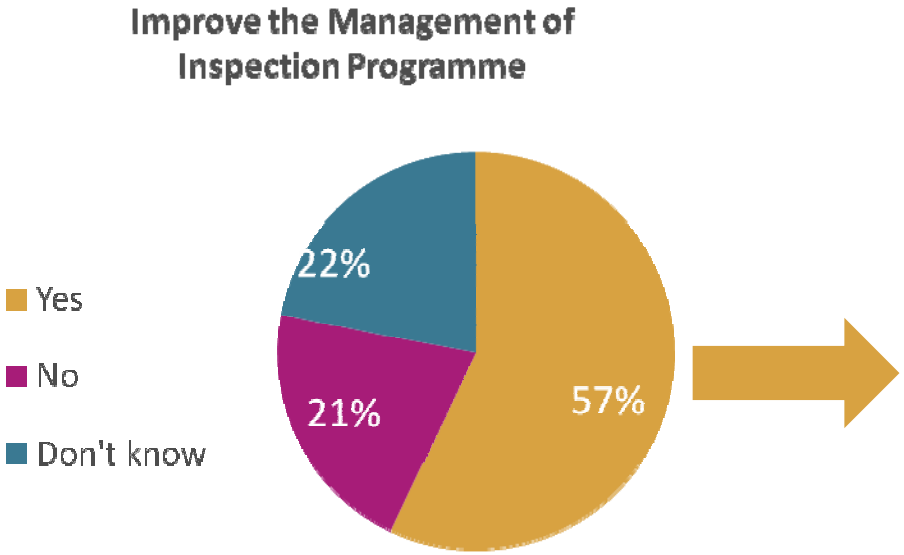
- The training programme could have accommodated smaller group sessions and even more practical hands on experience
- There was insufficient time to embed vital learning from the pilot into the final programme
- Greater level of admin support e.g. booking locations with knowledge of geography, setting up team meeting prior to inspection
- More clarity as to CQC roles and responsibilities
- Tight timescales created tensions, inspectors also recognise CQC team also under extreme pressure. This will be alleviated by more relaxed timeframes in the future

Analysis and report preparation process

- Process was considered correct but timeframe too tight
- Under intense pressure to get reports out, would have liked more time for reflection
- The analysis framework was thorough yet unwieldy – overly complex evidence record
- Appreciate need for 'Easy Read' reports but considered a specialist skill, so should be prepared by experts
- Due to IT compatibility problems the preparation process was unnecessarily time consuming
- The QA process was criticised in parts: could create delays, at times deliver inconsistent judgements, limited explanation of why challenges were being made. Could benefit from inclusion of inspection team member

Inspectors feel that the management of the inspection programme should be improved, particularly the rationale when report judgements are challenged

Inspection Programme Management - CQC Inspectors



Base: Inspectors = 14

Areas for Improvements	
Clearer explanation when report judgements are challenged internally	88%
Improve training	75%
Greater communication with lead inspectors and managers	38%
More support with report writing and judgement making	38%
More time to devote to inspections	25%

'Ensuring that the portfolio holders are involved in the process and take more responsibility by them being in charge of writing the reports, otherwise I found very little interest, involvement or ownership.'
'It would have been helpful if the tools and pro-formas were fit for purpose from day one.'
'More flexibility in length of the inspection. Information provided at beginning of programme -rather than towards the end. Adequate time to complete each inspection process and managers to listen and act.'
'Must be a consistent QA process.'

Q5a. Would you improve the management of the inspection programme at all?
Q5b. How would you improve the management of the inspection programme?

Base: Inspectors = 14

Preparation and training are the areas that Inspectors feel need most improvement. Also ensure process has adequate time flexed in to accommodate team meetings/weekly calls

Suggested Improvements to the Inspection Programme

"We have weekly teleconferences to ensure views of lead inspectors and programme managers are shared but sometimes I was just too busy to dial in!" ***Inspector***

Top Mentions	Inspectors
Better preparation/planning	43%
More training for Inspectors	43%
Longer time scale for preparation for inspection	36%
More information/clear guidance on standards to achieve	29%
More support from managers/inspectors	29%

"We had to respond quickly to Winterbourne and the amount we have achieved is incredible. Now we must plan even more effectively for future inspections" ***Inspector***

"Inspectors needed more training before the pilot, more time to spend with each and share, support" ***Inspector***

"We need more time to prepare, get together with the team face to face ***Inspector***

"A problem with QA is some of the comments were inconsistent and occasionally showed lack of understanding of specific areas of care" ***Inspector***

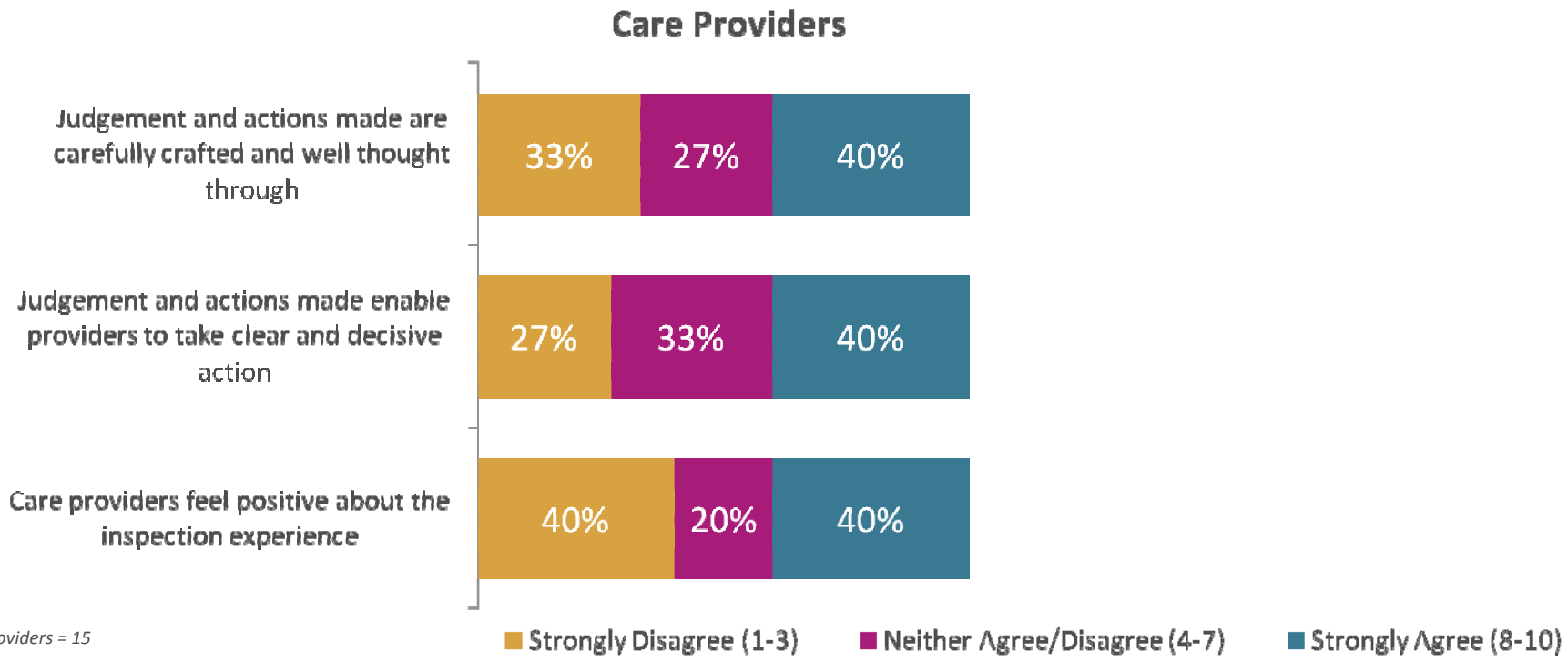
Base: Care Inspectors = 14

Q13. Finally, what improvements would you make to enhance the quality of the inspection programme overall?

Care Providers Feedback

Of providers who responded to the survey there is an equal balance of those who rate the inspection programme experience as positive and negative

Overall Rating of the Inspection Programme



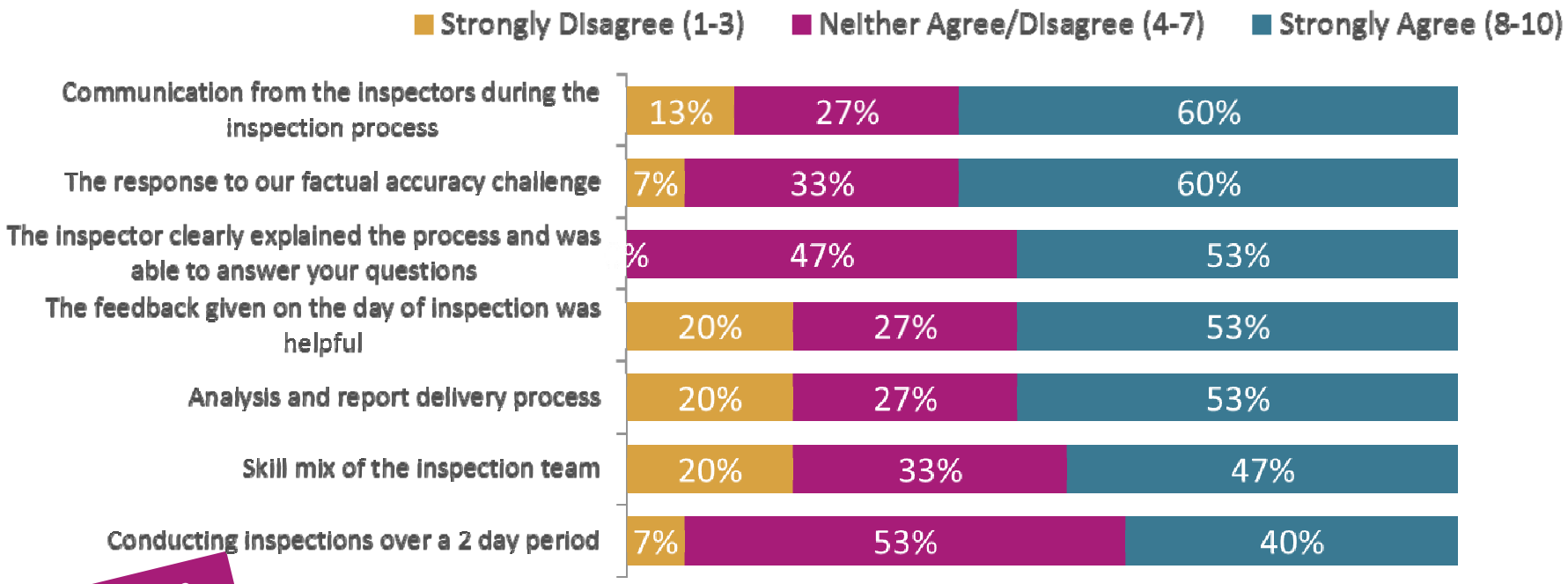
Base: Care Providers = 15

'The inspection process was inconsistent in its findings, outcomes, and required action across what were broadly similar services. The process was disproportionate in relation to the duration of the inspection'
'The draft report for 1 service took 3 months to produce and contained an incomplete and inaccurate observation by inspectors - judgement "non-compliant / moderate concerns'
'The report did not reflect current work being undertaken in areas identified as non-compliant. The report failed to reflect an understanding of care for LD patients detained under the Mental Health Act'

Q12a. To what extent would you agree with the following statements?
Q12b.Why do you say that?

Providers are satisfied with most elements of the inspection process, although there are some low levels of dissatisfaction with feedback on the day and the reporting process

Satisfaction with the Inspection Process - Care Facility Senior Managers



Qualitative Feedback

Widespread satisfaction with the team make up and level of communication during the inspection. However, dissatisfaction with the feedback and reporting process and outcomes (though proviso all Providers had received 'notice to improve'). While feedback on the day was welcome, it was felt to be contradictory to the final report, often painting a far more positive picture than that in the published document. The analysis and report delivery process was felt by some to be not always accurately reflect evidence provided. While they appreciated chance to respond they would have liked the opportunity to provide more evidence – suggests Provider misunderstanding of the process and legal framework – (suggesting an opportunity for CQC to communicate their remit again to Providers?)

Base: Care Providers = 15

Q6a. How satisfied were you with the following aspects of the inspection process?
Q6b. To what do you agree that the skill mix of the inspection team (CQC inspector, professional advisor, experts by experience) improved the quality of the inspection team in terms of the scrutiny of care?

A minority of providers raised a concern with the inspection process and overall there was widespread appreciation for inclusion of diverse team members

Reporting Concerns During Inspection - Care Facility Senior Managers

Concerns Reported During Inspection Process	
On many occasions	0%
On some occasions	27%
Only once	0%
None at all	73%

'Having a small number of service users in the context of a two day inspection meant that the service users were interviewed for hours on more than one occasion'
'Inconsistent advice from different assessors.'
'That there were more inspectors on the unit than patients'
'The process failed to give the provider the opportunity to respond to comments made by SU's and families or observations made by inspectors; to put into context or to factually correct errors during the review'

Qualitative Feedback

Inspection Team
- Widespread appreciation for inclusion of Ex by Ex and carers
- Concerned team members may not fully understand complexity of services and uniqueness of population
- Experience clinician is vitally important – understand the variation of approach to care plans and diversity of services

Evidence gathering and feedback
- Appreciate immediate timely feedback
- Feedback on the day was helpful but not consistently reflected in the report
- Concerned that evidence provided on the day was not taken into account in report and ultimately judgement
- Some concern don't automatically include CEO/Directors during inspection

"They were friendly and discreet" ***Provider***

"They must be honest in their feedback as didn't reflect the draft report. Why weren't issues raised on the day?" ***Provider***

"Would like to be confident that they had deep understanding of our specialist service" ***Provider***

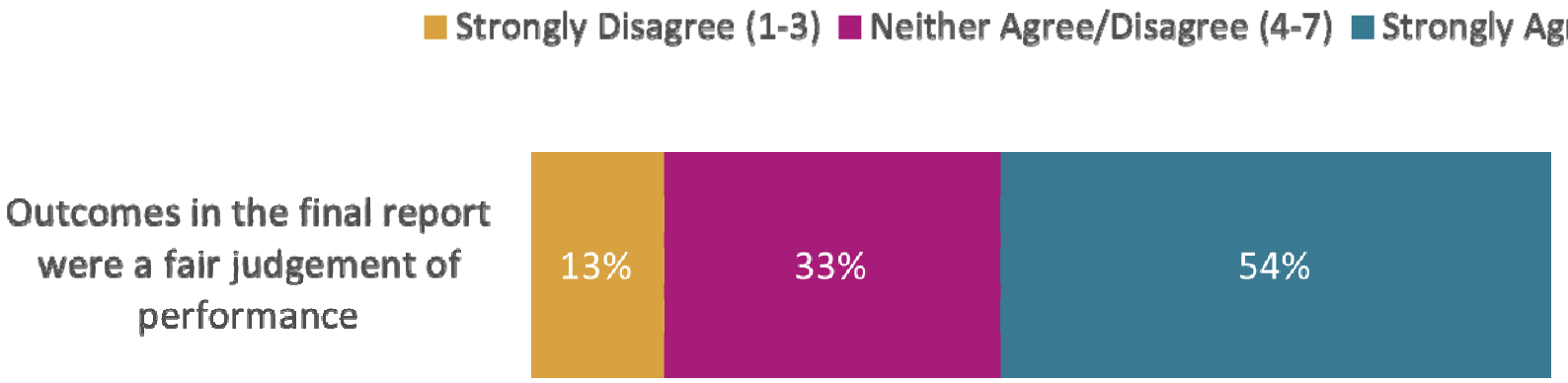
"I appreciate efforts to include experts by experience – great to have mix of backgrounds and experiences ***Provider***

Base: Care Providers = 15

Q7a. Did your management team or staff report any concerns about the inspection process while it was under way?
Q7b.What were the concerns raised about the inspection process?

Final reports are felt to be fair with a balance of providers acting on and not acting on the findings

Impact of the Inspection Programme - Care Facility Senior Managers



"`They do have an impact and identify areas to be addressed and we will change practice"
Provider

"`The report is useful to us as an organisation. I see is as a useful action and planning tool that keeps you focussed"
Provider

"We have made minor changes but some of suggestions would be making a square peg fit a round hole just in order to be compliant rather than for the benefit of the end user"
Provider

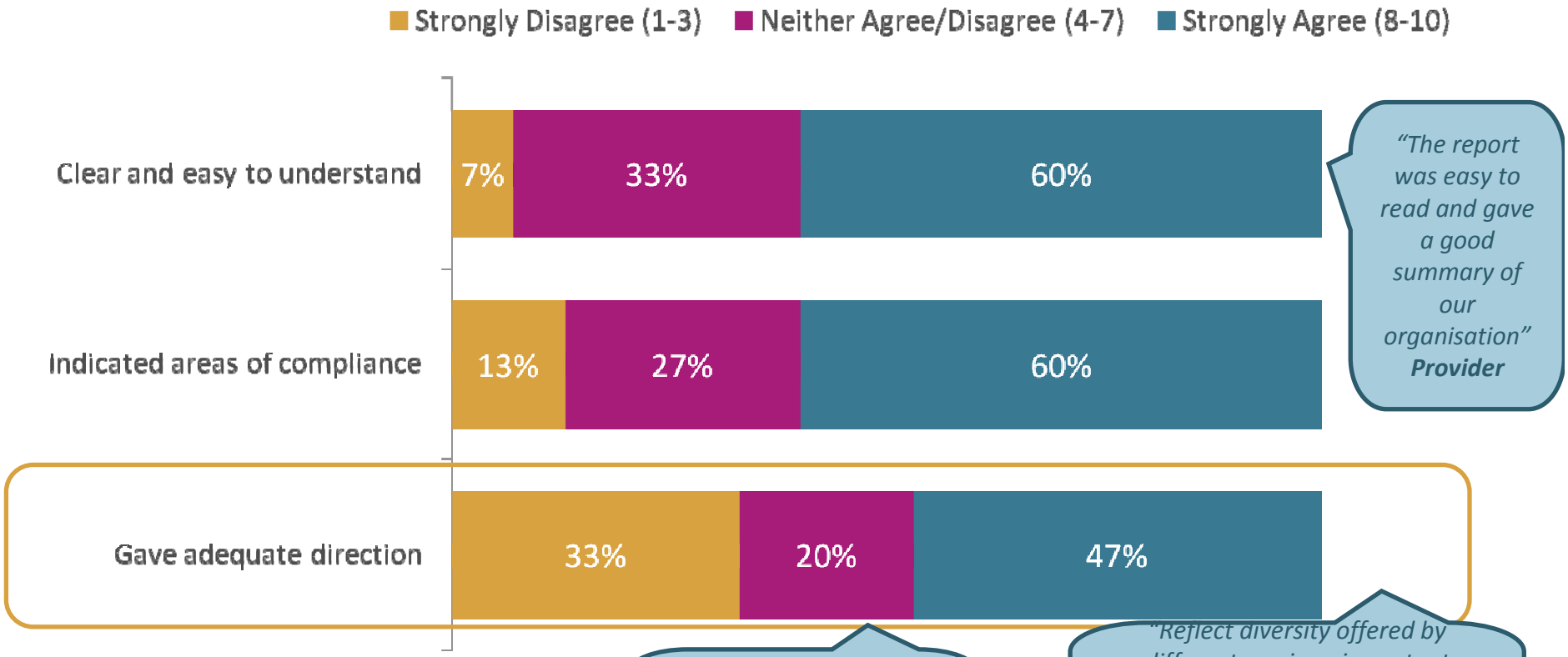
"`We did make some changes immediately after feedback"
Provider

Base: Care Providers = 15

Q10.Overall, to what extent did you feel the inspection outcomes in the final report were a fair judgement of performance?
Q11. Overall, to what extent did you feel you made changes to the way you approached caring for those with learning disabilities as a result of the inspection programme?

They understand the report, yet a number of providers feel the report does not provide enough direction (suggesting limited understanding of the CQC role and framework it operates within)

Rating of Inspection Report - Care Facility Senior Managers

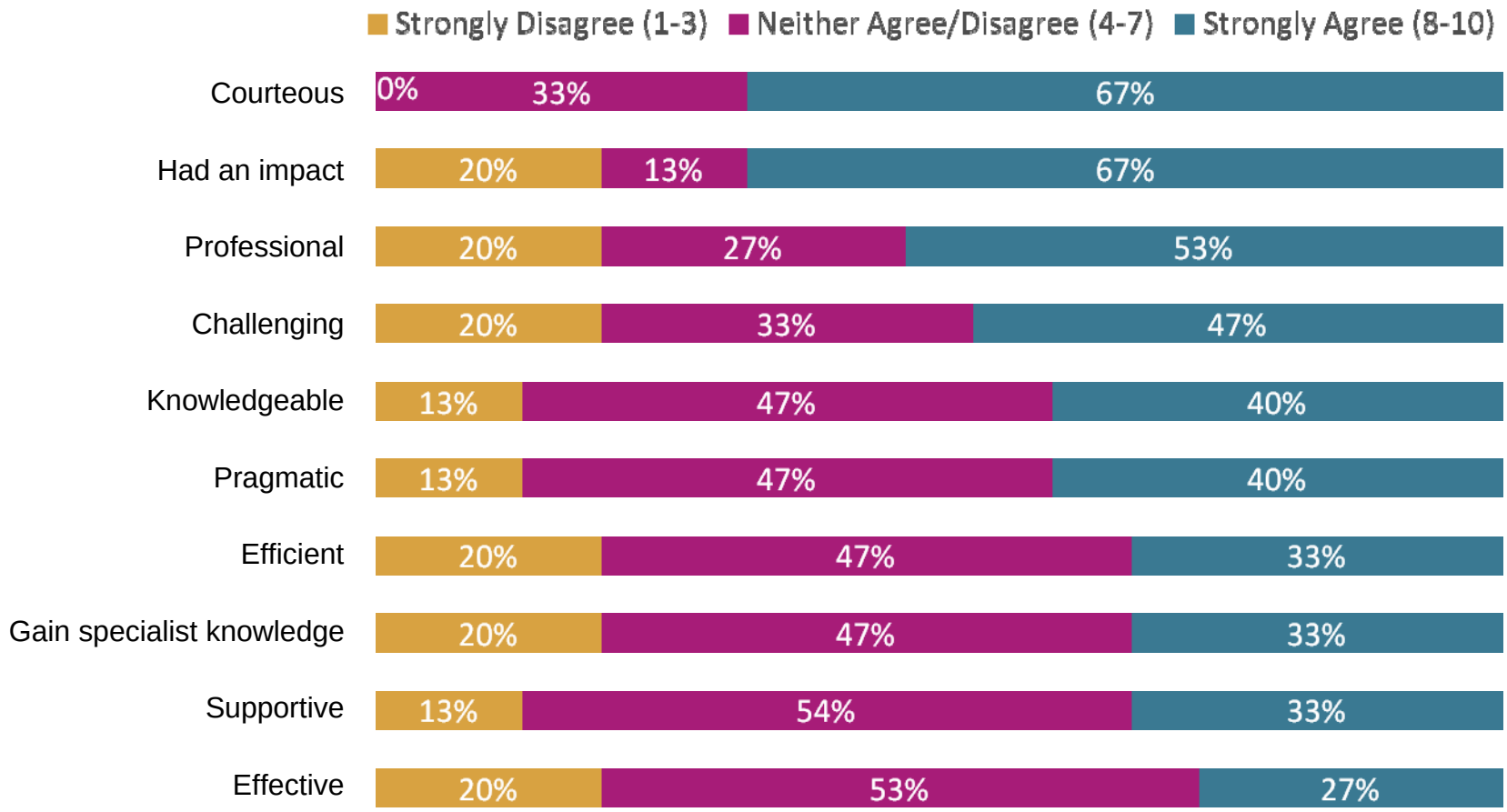


Base: Care Providers = 15

Q8. How would you rate the inspection report received on the following aspects?

CQC is seen to be impactful, courteous, and professional, but less associated with effectiveness and being supportive

Perceptions of the Care Quality Commission



Overall, there is greater positivity associated with values relating to the experience on the day of inspection and slightly less agreement with broader top level values like 'effective' and 'supportive'

Base: Care Providers = 15

Q9. Please indicate your level of agreement with each of the following statements in relation to the Learning and Disability Inspection Process? The Care Quality Commission is….

High praise for the courteousness and professionalism of the team. Inspectors to be given a working narrative to deliver balanced, neutral feedback on the day, as 'concerns' within final report can come as a shock

Qualitative Feedback

General attitude during the inspection

- On the whole respectful of the provider and unique services offered
- Polite and courteous to those interviewed
- Communication with frontline and service users welcome
- Discreet while on site, respectful to service users
- While efficient during visit, could spend more time preparing: identify correct people to interview, understand specific challenges faced by provider

Impact

- On the whole appreciate inspection – recognise the importance and value to the organisation
- The report and feedback can encourage positive change – considered useful action planning tool
- Proviso that report can be damning and harmful for morale and wider perception by the public (particularly if receive 'major' for perceived minor issues)

Level of support

- While felt correctly communicated with during the visit, this did not manifest itself afterwards
- No contact made despite 'major concerns' being identified post visit – would appreciate phone call
- Would have appreciated being asked for more evidence during the visit to allow for accurate picture to be created (demonstrating perhaps lack of awareness of CQC remit/role and the inspection process)
- Limited opportunity to allow specialist input from the provider into the programme

Specialist knowledge

- Some assume lack detailed knowledge of specific care providers and need to those who experience the service
- Would appreciate knowing who is within the team so that if necessary they can receive help as to how best to communicate with service users
- Want to to be confident that 'professional advisor' is skilled in his/her role
- Accept role of inspection team to challenge and appreciate the positive changes that these challenges can create. Minor concerns sometimes focus on 'wrong area' – demonstrating lack of understanding and experience

The vast majority of providers did not suggest further improvements; those that did want more experienced inspectors, better communication and timely feedback

Suggested Improvements to the Inspection Programme

Top Mentions	Care Providers
More experienced/knowledgeable inspectors	20%
More interaction/communication with staff/inspectors	20%
Better and prompt written/verbal feedback of inspection	20%
More consistency in the judgement framework	13%

"I do think the structure of the inspection is correct and thorough" ***Provider***

"I was happy with communication on the day but then nothing till draft. Would have appreciated call to request evidence" ***Provider***

"There must be consistency: in one unit a care plan wasn't signed so got a moderate, in another unit two care plans weren't signed and received a minor" ***Provider***

"I think the process Is correct, we are given opportunity to challenge and respond" ***Provider***

"Report doesn't reflect feedback during the visit, I respect the process but has to be quality reporting and not too negative or punitive in tone" ***Provider***

"If more time spent with them on the day I could have provided more evidence" ***Provider***

"Some of the reports can be too black and white – a tick box" ***Provider***

Base: Care Providers = 15

Q13. Finally, what improvements would you make to enhance the quality of the inspection programme overall?

Summary

In summary…

CQC Inspectors

- On the whole inspectors did not feel fully prepared for the inspection visit. Of particular concern was inadequate time to meet and fully brief the full team.
- The majority of inspectors feel that the report and preparation process could be improved, in particular the compatibility of report frameworks/formats, and the QA process tightened to ensure a more timely publication process.
- On a more positive note, conducting the inspection over 2 days and having a range of roles in the inspection team, is seen (particularly the involvement of Experts by Experience, carers and professionals) as working effectively and should be embedded into the process going forward. Need to ensure that the correct match of team skills to a particular site visit are delivered more consistently going forwards
- The management of the inspection programme could be enhanced further still, with training and preparation/planning being key areas mentioned.

Care Providers

- Care Providers rate all aspects of the inspection positively, although there is an opportunity to improve communication and feedback given during the course of the inspection as sometimes this was found to be more positive than the final written report received
- Most found the size of inspection team acceptable and were happy with the mix of skill sets, but, given the smaller size of some facilities, a minority of providers felt that the size of inspection team was unnecessarily large.
- The majority of providers agree with the findings in the final report and find it easy to understand, however, a minority of providers do feel that the report does not provide enough direction (perhaps illustrating lack of knowledge of CQC role) and a similar proportion say they have not acted upon the findings.
- Of the few Care Providers who could think of areas for improvement, these revolved around wanting to see more experienced inspection staff, better communication and interaction during the inspection process.

In conclusion…

- The inspection process was recognised as an effective and a necessary response to the Winterbourne Review.
- The punishing schedule appears to have been challenging and, at times, highly stressful for the inspection teams. However, in the context of the ambitions of the inspection programme it is deemed by and large to have been a significant achievement.
- As a result of the inspection programme being delivered within incredibly tight timescales, Inspectors and their teams do not appear to have been fully prepared before each visit. Subsequently, this could have a detrimental impact on the relationship with the provider during the visit and their confidence in the outcome of the inspection process.
- Inspectors are now looking to the CQC for improvements in training, planning, communication and report writing. They also need greater reassurance around the timeliness and robustness of the QA process.
- Those providers that responded would like to see more explanation / direction within the inspection report, even though this is beyond the current remit of the CQC. There are opportunities to encourage providers to fully embrace their responsibility to drive quality of care, by building closer supportive relationships during the inspection and reporting process.