



meeting	CABINET COMMITTEE
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	agenda item number

Planned New Processes for Inspection and Evaluation of Local Services by CSCI

Introduction

CSCI have set out a new process for inspection and evaluate in a document entitled Inspecting for Better Lives: A Quality Future. This document is currently the subject of a consultation process, with the deadline for comments set at 14th November 2006.

The main focus of Inspecting for Better Lives (IBL) is the premise that good quality social care has the potential to improve people's lives. Every month over 100,000 CSCI reports are downloaded from their website by people looking for information about local services. CSCI Inspection Reports explain what a service does well and where it needs to improve. To meet an increasing demand for information about the quality of services, CSCI will be introducing quality ratings, which will be an easy-to-understand way of comparing services. As well as the public and people seeking to use services, people who buy and manage social care services will be able to use these quality ratings to clearly understand the strengths and weaknesses of a service.

Inspecting for Better Lives – Wider Plans

As a result of regulatory changes from 1st April 2006 CSCI are now able to:

- introduce new ways of describing a care service, including a judgement on quality
- change the frequency of inspections of adult services. A judgement can now be made whether a service presents a risk to the people that use it. If it does then it will be inspected more frequently, if it is a better service then it will be inspected less often
- carry out an annual review to establish whether the inspection plans for that service need to be changed
- require providers of all care services will have to complete a self-assessment form outlining how their service is run
- require services rated 'poor' to implement an improvement plan

In addition CSCI have increased the number of unannounced inspections to the point that the majority of inspections are now unannounced.

CSCI are currently seeking to involve people who use care services in the inspection process. A number of inspections each year will have a person with experience of using social care services

accompanying the inspector, these people will be known as 'experts by experience'. This idea is currently under further development.

CSCI are also using new types of surveys to gather the views and experience of people who directly use care services. All inspections will take into account the direct experience of people who use the service. CSCI are developing new ways of engaging with people who have difficulties communicating and they are also introducing surveys in different languages and formats.

CSCI will also be taking a tougher line on providers of the poorest services. Local plans will monitor how well they improve and legal action will be taken if improvement is not likely to take place quickly enough.

What will change with Improving Better Lives (IBL) ?

- The frequency of adult inspections
- The style of all inspections
- Introduction of a quality rating
- How services manage and report on quality
- How providers tell CSCI of plans to improve
- How people who use the services are involved
- How services register with CSCI
- How complaints are handled.

IBL Principles :-

- Greater focus on the experience of service users
- Places responsibility for quality with the provider
- Robust risk assessment based on key inspection
- New range of inspections based on proportionate approach
- Concentrating CSCI resources on poorly performing services

Quality Rating System

CSCI want to achieve a rating system that:

- is easily understood by everyone
- providers of social care can relate to and encourages them to improve
- councils and health agencies can use in deciding how to give incentives to providers to improve services
- shows an open and transparent way of reaching the rating.

CSCI will be introducing a published quality rating for all care services by **mid 2007**. The quality rating will be in two parts: part one will be a simple graph showing how well the service performs, part two will comprise an overall rating which will use a 'star rating' system of 1 (poor) to 4 (excellent). During 2006 the quality ratings will not be published but CSCI will inform providers on the level of their performance and what this might mean once quality ratings are introduced.

New Plans for CSCI Inspections

In April 2006 CSCI introduced a new type of inspection – the 'key' inspection. A key inspection is a comprehensive assessment of risk which takes into account the previous history of the provider.

It will be unannounced and will cover all key National Minimum Standards. Key inspections will consider service user views and will use case tracking as a central methodology. All services will receive a key inspection by July 2007. Services will then be given a rating based on this inspection. Thereafter 'excellent' (4 star) providers will only receive a key inspection once every 3 years, while those services rated as 'poor' will receive more frequent inspections (at least two per year), which will include 'random inspections'. Random inspections will be short, targeted and will be fieldwork appropriate e.g. a follow-up to a previous inspection issue. There is likely to be a greater use of enforcement action against those providers who fail to rectify outstanding requirements and allow requirements to drift from inspection to inspection.

Modernising Registration

There will be one central registration team, based at the CSCI office in Leicester. This central team (Central Registration and Compliance Team – CRCT) will receive and process all applications, for changes in registration etc. There will be dedicated 'registration inspectors' in each area office, i.e. there will be 2 allocated for Nottingham.

It will be the responsibility of the provider to demonstrate fitness to provide the service. To assess fitness CSCI will send out a pre-interview questionnaire and the 'fit person' interview will be conducted by a single inspector (previously 2). There will be no routine site visit and the inspector will use their judgement about what evidence to sample.

CSCI will no longer act as an 'advice service' for care providers that are considering whether or not to establish a new service in an area. In future, it will be the responsibility of the provider or prospective provider to do their own market mapping and research prior to registration. Providers building new units or extensions are being advised not to contact CSCI until the building is ready – i.e. it is up to the provider to demonstrate that the building is fit for purpose.

Dealing with complaints

CSCI have declared that since the Care Standards Act 2000 places no explicit duty on them to deal with complaints, in future, the statutory responsibility for dealing with complaints should lie with the local authority. CSCI expects to have no case specific investigatory role and will signpost all complaints to local authorities.

Challenges for Social Services

1. *Lack of clarity about SSD involvement in Inspections*

It is unclear exactly what role Social Services Department Commissioners will play in key inspections or how monitoring information held by Social Services Department will be fed into the inspection process. ***Should the Department wish to use CSCI's quality rating outcomes to establish a quality premium for care home fees, it would be imperative that SSD contributes to the inspection process.***

2. *Problems of contracting with providers who receive a low quality rating*

CSCI has indicated that local authorities have a responsibility to “gate keep” providers and that they should only contract with those providers who are fit enough to provide an appropriate service. The onus is therefore on SSD not to contract with services that fail to meet minimum standards. The dilemma for commissioners is that they may be contracting with services rated as ‘poor’ by CSCI. SSD will need to consider what action it will need to take if a provider receives a poor rating and what incentives it might need to introduce for failing providers, to raise the quality of their service?

3. *Dealing with Complaints*

There will be a significant cost implications for SSD if all complaints relating to care homes and home care providers are routed through SSD rather than through CSCI. The implications of the proposed changes are not well understood and a review of the complaints procedure will be necessary to meet the increased workload, which will flow from this change.

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