



Preparing 42 satellite dialysis units for their Care Quality Commission regulatory inspection

Cathy Poole,

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Presentation outline

1 Introduction

2 Objectives

3 Methods

4 Results

5 Conclusions and application to practice

Introduction

- **Legal framework in the UK**

- Health & Social Care Act 2008 (Regulated Activities) Regulations 2014 (Part 3)
- Care Quality Commission (Registration) Regulations (Part 4)

- **Inspection of legal compliance**

- Undertaken by the Care Quality Commission (CQC)

The Care Quality Commission is the independent regulator of health and adult social care in England

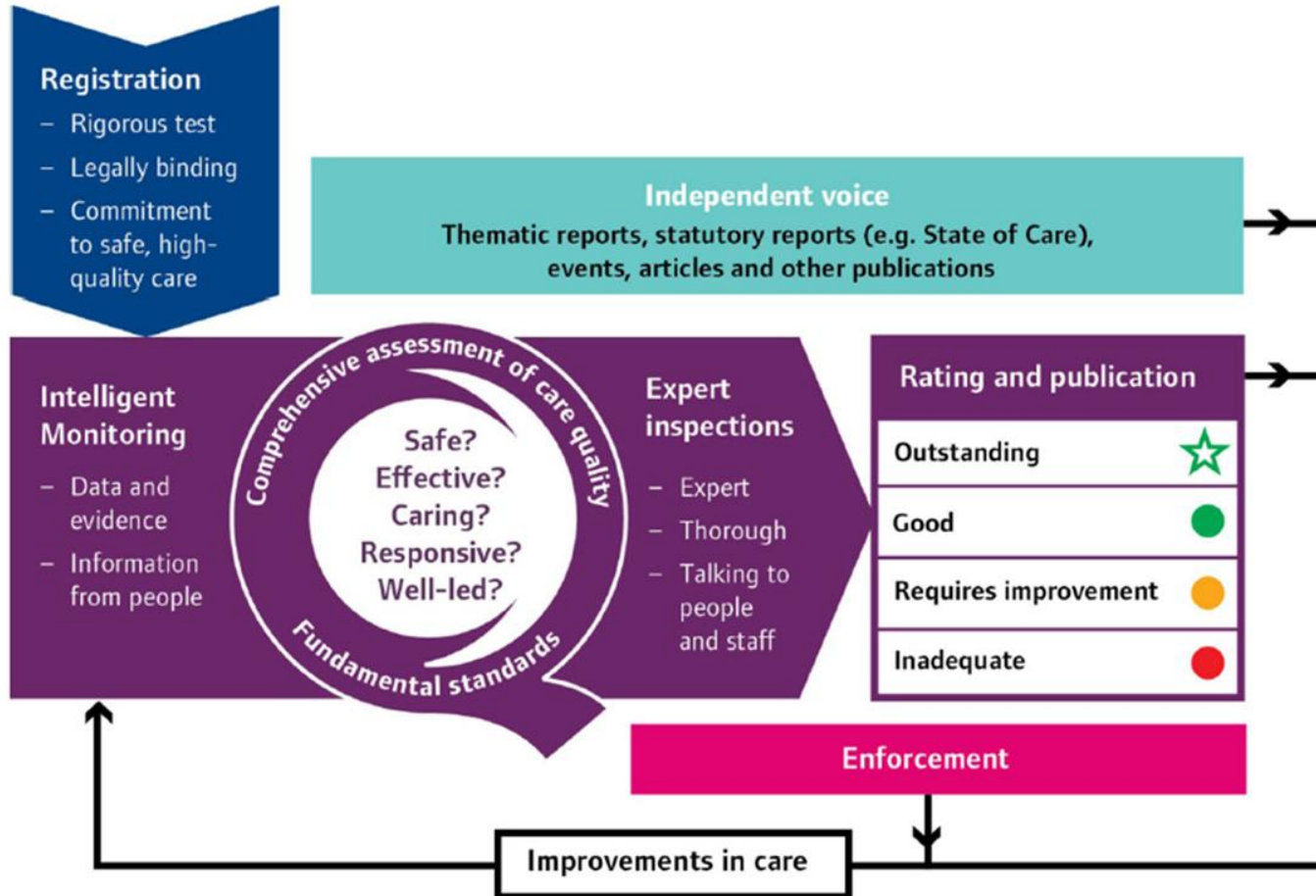
Our purpose

We make sure health and social care services provide people with safe, effective, compassionate, high-quality care and we encourage care services to improve.

Our role

We monitor, inspect and regulate services to make sure they meet fundamental standards of quality and safety and we publish what we find, including performance ratings to help people choose care.

CQC Operating Model



Key: CQC's core functions



• Key Lines Of Enquiry

- Is the service **safe?**
- Is the service **effective?**
- Is the service **caring?**
- Is the service **responsive to peoples needs?**
- Is the service **well-led?**



Objectives

- 1. To provide a coordinated approach to the preparation of staff and patients**
- 2. To ensure timely submission of pre-inspection information to the CQC**
- 3. Assist in the collation of evidence to demonstrate compliance**
- 4. Provide key CQC reference documents to the dialysis units**
- 5. Emphasise the CQC approach - “Key Lines of Enquiry”**

• Delivery of an interactive study day

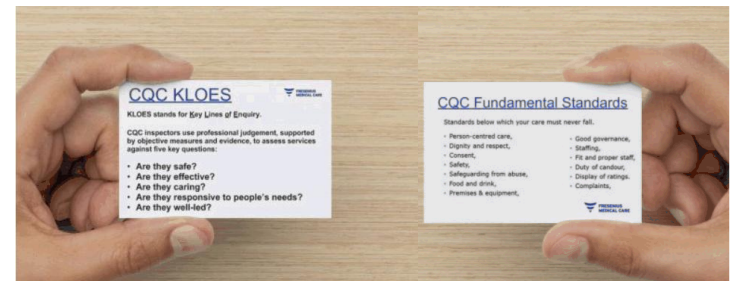
- Overview of the CQC
 - What has changed
 - What the focus is now on
- CQC Resource/Evidence Folders
- KLoE Group Work
 - Identifying evidence for the inspection
- KLoE Group Work Feedback
 - Sharing ideas and evidence
- Q&A Safeguarding
 - DoLS & MCA
- CQC Notifications Revisited
- Completion of a Provider Information Request
 - Gathering & collating evidence
- Action Planning
- Quiz



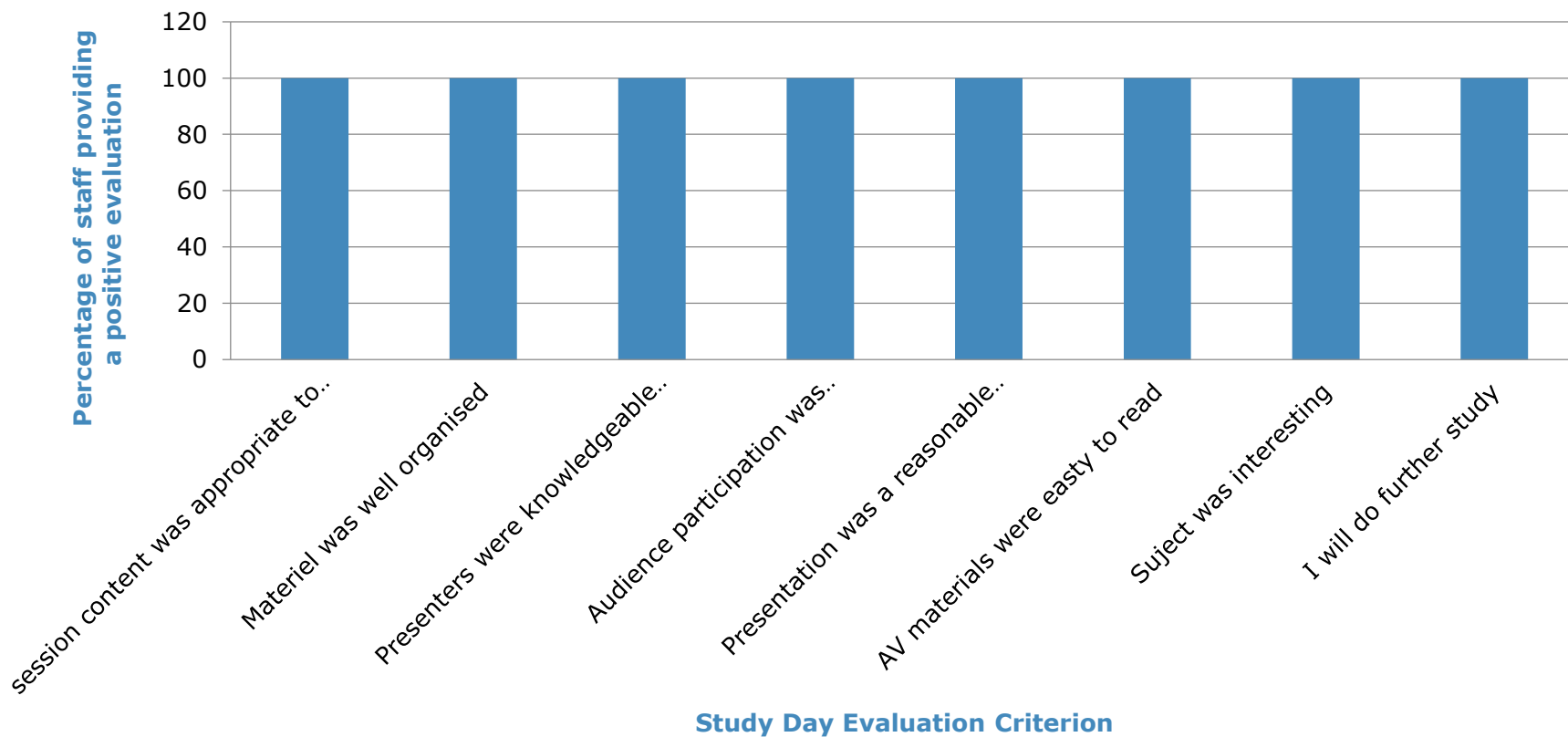
Development of a **P**rovider **I**nformation **R**equest template

- PIR received from the CQC 14 weeks ahead of the inspection.
 - Units have up to 15 working days to complete and return the PIR to the CQC.
 - The CQC use the PIR and other data held on file to compile a pre-inspection data pack.
 - It is important that the information in the PIR is correct and that an audit trail exists.
-
- **Development of a unit presentation template**
 - Key corporate information
 - Space for local unit specific adaptation

 - **Development of CQC business cards**



CQC Preparedness Study Day Evaluation



- CQC preparedness study day comments/suggestions:

Should be a routine topic

Would have liked to see a completed PIR

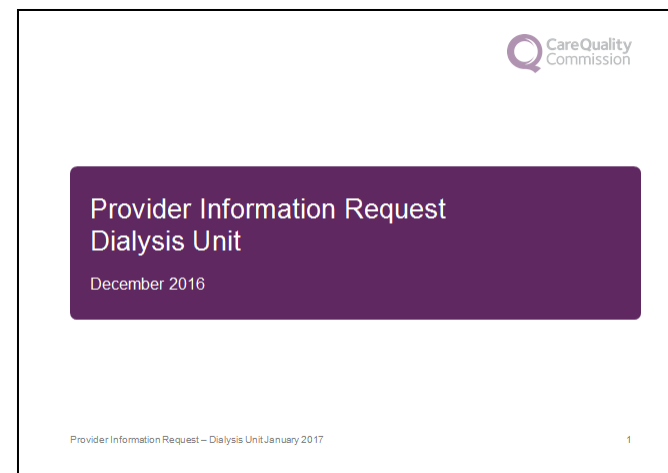
Deputy Clinic Manager would benefit from this study day

Very good but lots to take in

Excellent, very informative day of training

- **Submission of completed PIR**

- Following contractual changes only 35 instead of 42 units were to be inspected by the CQC (18% reduction)
- 100% (N=35) units submitted their PIR on time
- 42 pieces of unit specific evidence submitted with each PIR
- Units now “CQC Ready”
 - First CQC inspection took place 04.04.17
 - Last CQC inspection took place 06.07.17



Conclusions

- **Coordinated approach was appreciated**
- **Preparation is paramount**
- **Meeting deadlines contributes to being prepared**
- **Having robust policies and procedures in place made it easy to collect evidence to meet KLoE's**
- **Getting "CQC Ready" takes team work and commitment**



Conclusions

- In the words of Benjamin Franklin.....



Thank You Very Much for Your Attention

Acknowledgments

Shaun Tudge

**Clinic Services Director
Fresenius Medical Care Renal Services Ltd.
Birmingham – United Kingdom**

Natalie Bedows

**Chief Nurse
Fresenius Medical Care Renal Services Ltd.
Birmingham – United Kingdom**

David Crisp

**Quality Assurance & Risk Manager
Fresenius Medical Care Renal Services Ltd.
Birmingham – United Kingdom**

Maria Teresa Parisotto

**Chief Nurse Advisor
Fresenius Medical Care
Bad Homburg - Germany**