What the CQC Quality and Safety Outcomes mean for you

TRUSTED. Your guide
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The booklet explains the standards (or Outcomes) which we must meet in order to maintain registration of our services with the Care Quality Commission (CQC). It is based on the CQC guidance document Essential Standards of Quality and Safety (March 2010) and has been designed to help staff relate the Outcomes to their day-to-day roles.

We have used plain English and included appropriate questions to make your task of understanding and meeting the outcomes easier. These questions are there to act as memory joggers for things that you may encounter/action during your normal day-to-day work, and as a result, evidence for the CQC will naturally be generated from doing them.

For further information on Healthroster or Performance Accelerator, please contact Liz Jones at Allocate on 01782 667001 or email ljones@allocatesoftware.com

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**Introduction**

The Facts
- There are 16 Quality and Safety Outcomes - as listed below.
- They are more about patient experience than policies and processes.
- All staff need to have an understanding of the Outcomes.
- The CQC can make an assessment visit, unannounced, to any registered provider.
- We must ensure that our patient care meets (and exceeds) the Outcome requirement.

All staff members are responsible for ensuring they meet the Outcomes.

If you have any concerns please discuss them with your line manager.

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**The 16 Care Quality Commission Quality and Safety Outcomes**

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More information can be found on the Care Quality Commission website [www.cqc.org.uk](http://www.cqc.org.uk) / Guidance for professionals / Introduction to registration
Section 1
Involvement and information

Outcome 1:
Respecting and involving service users

Definition
People understand the care and treatment choices available to them. They can express their views and are involved in making decisions about their care. They have their privacy, dignity and independence respected, and have their views and experiences taken into account in the way in which the service is delivered.

Points for you to consider in your day-to-day role
• Do I involve patients in their care plans by explaining their treatment, options and care?
• Do I give relevant information leaflets/contact details to patients?
• Do my patients participate in decision-making about their care and treatment?
• Do I give patients information about the risks and benefits of alternative treatments?
• Do I document on the patient’s file when I have discussed their treatment options or when I have given them information?
• Do patients sign their care plan/assessment to confirm that they have been involved and understand their treatment?
• Do I know how to access interpreter services?
• Have I completed Equality and Diversity training?

Outcome 2:
Consent to care and treatment

Definition
People give consent to their care and treatment, and understand and know how to change decisions about things that have been agreed previously.

Points for you to consider in your day-to-day role
• Do I understand when I need to obtain written consent?
• Do I understand when I can take verbal and/or implied consent?
• Do I know how to document and keep records of consent?
• Can I identify people who cannot give valid consent?
• Do I respect people’s decisions and respond appropriately to those decisions?
• Do I provide sufficient information (of benefits and risks) to enable valid consent to be obtained?
• Do I understand when it is appropriate to respect the confidentiality of children?
• Do I document assessment of capacity if the person is unable to consent?
• Do I consult with relatives if the person lacks capacity to consent?
• Have I completed Mental Capacity Act training?
• Have I read the Consent policy?
• Can I apply the procedures within my practice to effectively ensure valid consent is obtained?
Section 2
Personalised Care, Treatment and Support

Outcome 4:
Care and welfare of people who use services

Definition
People experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

Points for you to consider in your day-to-day role
• Do I involve patients in their plan of care or treatment?
• Do I explain the risks, benefits and alternatives of treatment?
• Are care plans regularly reviewed, taking into account all aspects of welfare and wellbeing?
• Do I give my patients my name, job title and contact details?
• Do I know how to report an error or incident regarding the care or treatment I give a patient?
• Do I give patients (or people acting on their behalf) information to enable them to make choices?
• Do I act upon safety alerts?
• Do I know what to do in the event of an emergency?

Outcome 5:
Meeting nutritional needs

Definition
People are encouraged and supported to have sufficient food and drink that is nutritional and balanced, and a choice of food and drink to meet their different needs.

Points for you to consider in your day-to-day role
• Do I give support to patients who need help with food and drink?
• Do I assess, plan and monitor patients’ nutritional and hydration needs?
• Do patients have a choice of food and drink?
• Have I completed food hygiene awareness training if required for my role?

““Our recent CQC unannounced inspection was very much focused on observation of care, interaction with patients and their families as well as questioning of staff about outcomes. It has highlighted the importance of ensuring that staff within each directorate and every location know and understand the standards.”

David Libiszewski, Assistant Director Clinical Governance, United Lincolnshire NHS Trust
Section 2
Personalised Care, Treatment and Support

Outcome 6:
Co-operating with other providers

Definition
People receive safe and coordinated care when they move between providers or receive care from more than one provider.

Points for you to consider in your day-to-day role
• Do I know what information I should share with other services/providers?
• Do I document the information I have shared on the patient’s file?
• Do I know how to share information securely?
• Have I completed Information Governance training?
• Have I signed the Confidentiality Code of Conduct?

Section 3
Safeguarding and Safety

Outcome 7:
Safeguarding people who use services from abuse

Definition
People are safeguarded from abuse, or the risk of abuse, and their human rights are respected and upheld.

Points for you to consider in your day-to-day role
• Do I know who to contact if I have a concern regarding an adult or child that I need to discuss?
• Do I know how to report a concern regarding an adult or a child?
• Do I know how to escalate concerns if I believe that other professionals have not responded to my concerns appropriately?
• Do I know what to do if I think someone is unable to consent to treatment?
• Have I completed Mental Capacity Act training?
• Have I completed Safeguarding Adults/Children training as required for my role?

“Performance Accelerator is now being used as our mechanism to roll out the essential standards to eight Directorates. This is essential as it will provide a view of compliance within each Directorate as well as at a corporate level. Directorates are now being asked to use the tool to gather more patient-centred evidence of compliance.”

David Libiszewski, Assistant Director Clinical Governance, United Lincolnshire NHS Trust
Section 3
Safeguarding and Safety

Outcome 8: Cleanliness and infection control

Definition
People experience care in a clean environment, and are protected from acquiring infections.

Points for you to consider in your day-to-day role

• Do I always wash my hands/use gel before touching a patient?
• Is equipment decontaminated appropriately after use?
• Do I know who to contact in the event of an infection control concern?
• Have I read the Infection Control Policy?
• Have I attended Infection Control training?
• Have I read the Decontamination Policy?
• Is my Hand Hygiene training up to date?

Outcome 9: Management of medicines

Definition
People have their medicines when they need them, and in a safe way. People are given information about their medicines.

Points for you to consider in your day-to-day role

• Do I update patients’ records with medicines information?
• Do I know how to obtain advice on medicines?
• Do I know what procedures to follow for controlled drugs?
• Do I know how to report a medicines incident?
• Do I receive drug alerts related to medicines?
• Do I receive and act according to the latest Standard Operating Procedures?
• What Medicines training have I received?
• Am I familiar with the relevant sections of the Medicines Policy?

"We have no concerns about staying updated on the changing compliance agenda as Performance Accelerator is maintained with the latest information."

Grahame D Moore,
Performance Manager,
NHS Blackpool Community Health Services
Section 3
Safeguarding and Safety

Outcome 10:
Safety and suitability of premises

Definition
People receive care in, work in, or visit, safe surroundings that promote their wellbeing.

Points for you to consider in your day-to-day role
• Do I undertake site risk assessments when appropriate?
• Do I know what to do in the event of emergency evacuation from the building?
• Have I attended Health and Safety and Risk Assessment training?
• Have I completed Waste Management training?
• Have I completed Equality and Diversity training?

Outcome 11:
Safety, availability and suitability of equipment

Definition
Where equipment is used, it is safe, available, comfortable and suitable for people’s needs.

Points for you to consider in your day-to-day role
• Do I check that the equipment I am using has been maintained or tested before using it?
• Do I receive and act upon details of Safety Alerts related to equipment that I use?
• Do I understand what a single-use device is?
• Am I trained in all the devices that I use?
• Have I read the Decontamination Policy?
• Have I read the Medical Devices Policy?

“Performance Accelerator is not a static system, it is updated and developed to ensure it provides the latest ideas and information available. Throughout the Registration process Dynamic Change were able to update me far quicker and with more information than central departments. In addition all amendments from the CQC were provided directly into our systems.”

Linda Cottenham, Kettering General Hospital NHS Trust
Section 4
Suitability of Staffing

Outcome 12:
Requirements relating to workers

Definition
People are kept safe, and their health and welfare needs are met, by staff who are fit for the job and have the right qualifications, skills and experience.

Points for you to consider in your day-to-day role
- Do I follow the recruitment process, ensuring all new recruits, including temporary staff, have the appropriate checks and qualifications?
- Do I have a Personal Development Plan (PDP) in place?
- If I recruit staff, have I had Recruitment and Selection training?
- Am I familiar with the Disciplinary process?
- Am I familiar with the process for monitoring sickness absence?

Outcome 13:
Staffing

Definition
People are kept safe, and their health and welfare needs are met, because there are sufficient numbers of the right staff.

Points for you to consider in your day-to-day role
- Do I have a Personal Development Plan in place?
- Do I raise concerns regarding staffing levels with my line manager?
Section 4
Suitability of Staffing

Outcome 14:
Supporting staff

Definition
People are kept safe, and their health and welfare needs are met, by staff who are fit for the job and have the right qualifications, skills and experience.

Points for you to consider in your day-to-day role
• If I am new to my organisation, have I attended corporate and local induction?
• Have I had supervision in the last 3 months?
• Have I had an appraisal in the last year?
• Do I have a Personal Development Plan in place?
• If I recruit staff, do I ensure all new staff attend corporate and local induction, and record this?
• Do I report any incidents of bullying, harassment or violence?
• Do I know how to raise concerns (the Whistleblowing process)?
• Have I attended Appraisal/Appraisee training?

Section 5
Quality of Management

Outcome 16:
Assessing and monitoring the quality of service provision

Definition
People benefit from safe, quality care because effective decisions are made and because of the management of risks to people’s health, welfare and safety.

Points for you to consider in your day-to-day role
• Do I change a patient’s care plan if a risk is identified of inappropriate or unsafe care or treatment?
• Do I know how to raise concerns about risks to people, poor practice and adverse events?
• Do I involve my patients in decision making about their care and treatment?
• Do I participate in clinical audits and share learning from these with my team?
• Do I report incidents when they occur?
• Do I and my team learn from incidents, comments and complaints?
• Do I discuss action plans and lessons learnt at my Team Meetings?
• Have I read the Incident Reporting policy?
Section 5
Quality of Management

Outcome 17: Complaints

Definition
People, and those acting on their behalf, have their comments and complaints listened to and acted on effectively, and know that they will not be discriminated against for making a complaint.

Points for you to consider in your day-to-day role
- Do I change a patient’s care plan if a risk is identified of inappropriate or unsafe care or treatment?
- Do I know where to find information on the complaints process to give patients?
- Does my service/team learn from complaints and comments and make changes as a result of them?
- Do I discuss complaints at my Team Meetings?
- If I am responsible for responding to complaints, have I attended complaints training?

Outcome 21: Records

Definition
People’s personal records are accurate, fit for purpose, held securely and remain confidential. The same applies to other records that are needed to protect their safety and wellbeing.

Points for you to consider in your day-to-day role
- Do I document verbal discussions about care, treatment and support on the patient’s file?
- Do I link new patient records with any previous records that exist for that patient?
- Do I ensure that all my patient records are up to date, accurate, and kept confidential?
- Am I familiar with the archiving process?
- Are records stored and transferred securely according to our policy?
- Have I completed Information Governance training?
- Have I completed Record Keeping training?

“The CQC came onto the ward without notice with one inspector and a recent patient.”