

CQC: Safeguarding

Provider Handbook: How CQC regulates: NHS GP practices and GP out-of-hours services:

The five key questions we ask – five “key lines of enquiry”

To get to the heart of people’s experiences of care, the focus of our inspections is on the quality and safety of services, based on the things that matter to people.

We always ask the following five questions of services.

- Are they safe?
- Are they effective?
- Are they caring?
- Are they responsive to people’s needs?
- Are they well-led?

Are they Safe

By safe, we mean that people are protected from abuse* and avoidable harm.

*Abuse can be physical, sexual, mental or psychological, financial, neglect, institutional or discriminatory abuse

Good:

People are protected from avoidable harm and abuse.

Safeguarding vulnerable adults, children and young people is given sufficient priority. Staff take a proactive approach to safeguarding and focus on early identification. They take steps to prevent abuse from occurring, respond appropriately to any signs or allegations of abuse and work effectively with others to implement protection plans. There is active and appropriate engagement in local safeguarding procedures and effective work with other relevant organisations.

There are clearly defined and embedded systems, processes and practices to keep people safe and safeguarded from abuse. These:

- ☑ Are reliable and minimise the potential for error.
- ☑ Reflect national, professional guidance and legislation.
- ☑ Are appropriate for the care setting.
- ☑ Are understood by all staff and implemented consistently.
- ☑ Are reviewed regularly and improved when needed.

Staff have received up-to-date training in systems, processes and practices

Outstanding:

People are protected by a strong comprehensive safety system, and a focus on openness, transparency and learning when things go wrong.

There are comprehensive systems to keep people safe, which take account of current best practice. The whole team is engaged in reviewing and improving safety and safeguarding systems. Innovation is encouraged to achieve sustained improvements in safety and continual reductions in harm.

A proactive approach to anticipating and managing risks to people who use services is embedded and is recognised as the responsibility of all staff.

Requires improvement:

There is an increased risk that people are harmed or there is limited assurance about safety.

Systems, processes and practices are not always reliable or appropriate to keep people safe. Monitoring whether safety systems are implemented is not robust. There are some concerns about the consistency of understanding and the number of staff who are aware of them.

Safeguarding is not given sufficient priority at all times. Systems are not fully embedded, staff do not always respond quickly enough or there are gaps in the system of engaging with local safeguarding processes.

Inadequate:

People are unsafe or at high risk of avoidable harm or abuse.

There is insufficient attention to safeguarding children and adults. Staff do not recognise or respond appropriately to abuse.

Staff do not assess, monitor or manage risks to people who use the services. Opportunities to prevent or minimise harm are missed.

Systems, processes and practices do not keep people safe. There is wilful or routine disregard of standard operating or safety procedures.