



FACT SHEET

CQC Ratings: From Good to Outstanding

From Good to Outstanding: A Manager's Playbook



1. What distinguishes Outstanding (at a glance)

- 💡 **Innovation with impact:** push beyond “meets expectations”. Pilot, test, evidence results.
- 🤝 **Community integration:** active partnerships with local health teams, groups, and services. Don’t operate in a silo.
- 🧠 **Culture you can see:** every staff member can describe the vision, values, and “how we do things here”.
- 📈 **Relentless improvement:** never “done”. Close loops and raise the bar.
- 📢 **Open & sharing:** spread what works (peer networks, local forums). Confidence, not arrogance.

Practical add-on: Run a 30-minute team huddle this week to ask: 1) one innovation to test, 2) one community contact to make, 3) one “close the loop” action due by Friday—capture on a single-page tracker.

👉 **Simple version:** Have a short 30-min team chat. Ask: 1) one new idea, 2) one local contact to call, 3) one job to finish by Friday. Write it on one page.



2. Small changes that make a big difference

- 🎯 **Action plans that actually deliver:** SMART objectives, owners, deadlines, review dates, and proof of completion.
- 🔄 **Close the loop examples:** grow veg → cook → eat → record feedback; incident → RCA → change → re-audit.
- 🧐 **Pattern analysis:** look across falls, safeguarding, complaints for themes and responses.

Bold practical add-on: Pick one area with repeat issues (e.g., late calls). Write one SMART action, assign an owner, set a 14-day review, and book the review now in your diary.

👉 **Simple version:** Choose one problem that happens a lot (like late calls). Give it to one person, agree a fix, and set a two-week check-in.

3. Leadership that moves ratings



🚶 **Be visible daily:** “lose the door”, walk the floor, join visits periodically, speak to families and professionals.

🕒 **Lead and manage:** managers keep systems; leaders set direction. You need both.

📌 **Flip the triangle:** leadership supports frontline staff to succeed.

Quick practice: daily walkabout log; weekly 15–min huddle; monthly community touchpoint.

Bold practical add-on: Block 20 minutes at the same time every day for a visibility walk (or dom–care check–in call), and capture three observations on a laminated card you keep in your pocket.

👉 **Simple version:** Spend 20 minutes each day walking around (or calling a care visit). Write down 3 things you notice.

4. Creating ownership across the team



🏆 Appoint champions (e.g., Tissue Viability, Dementia, Nutrition, EDI) with a micro–charter.

👉 Delegate audits to trained staff; managers review themes.

🙏 Recognition: thank–you culture and shout–outs.

Open management meetings: invite a carer monthly.

Bold practical add-on: Name two champions today, give them a 15–minute brief and a one–page audit tool, and book each to deliver a 5–minute “what we learned” slot at next week’s huddle.

👉 **Simple version:** Choose 2 staff to lead on small areas (like food or dementia). Give them a short task and ask them to share what they learned in next week’s meeting.



5. Training & development that moves the needle



- 🎯 **Align training to needs:** mandatory + needs-led (condition-specific); evidence competence.
- 🌐 **EDI matters:** everyone completes and can describe daily application.
- 🚀 **Go beyond minimums:** prepare for future needs.

Training matrix essentials

Staff	Role	Module	Date	Provider
Competency	Refresh by	Evidence		

Bold practical add-on: Print your training matrix for one team, highlight any “expired/unknown” cells in yellow, and schedule two competency observations this week (10 minutes each) to close gaps.

👉 **Simple version:** Print your training list. Mark training that is out of date. Watch 2 staff this week for 10 minutes each to check skills.

6. Evidencing the impact of training

Use before/after and triangulate:

- 📊 **Hard data:** falls, PRN use, admissions, GP call-outs, late calls, MAR errors.
- 💬 **Feedback:** people, families, professionals.
- 👁️ **Observation & supervision:** sign-offs and reflective notes.
- 📋 **Action-plan closures:** show change and re-audit.

Bold practical add-on: Choose one training delivered in the last 8 weeks (e.g., dementia). Pull 3 data points pre/post, 3 quotes (person/family/pro), and one observation—drop all on a single A4 “Impact Card”.

👉 **Simple version:** Pick one training done recently. Collect 3 numbers (before/after), 3 short quotes, and 1 observation. Put all on one sheet of paper.





8. Turning it around

-  Reset culture: leaders own problems; no-blame audits.
-  Build foundations first: audits, RCA, care plans, rota reliability, MAR accuracy —then innovate.
-  Virtuous circle: happier staff → better care → better surveys → easier recruitment.

Bold practical add-on: Run a 20-minute “Stop/Start/Continue” with your shift team; pick one “Stop” and one “Start”; add both to the action plan with a 14-day check-back.

 **Simple version:** Ask staff: what to stop, what to start, what to keep. Pick one “stop” and one “start” and check again in 2 weeks.



9. One piece of advice

Believe in yourself—and always choose what’s best for the person using your service.

Bold practical add-on: For any decision this week, write the person’s initials at the top of the note and add one line: “Best outcome for X is...” —use it to guide your choice.

 **Simple version:** When making a choice, write the service user’s name and add: “Best for them is...” Use this to decide.

Very short templates (steal these)

A

SMART Action
Plan line

B

Root-Cause
Snapshot

C

Champion
Micro-Charter

D

Mini
Survey

Bold practical add-on: Copy one template, fill it for a live issue today, and pin it to the team board with the review date circled in red.

 **Simple version:** Take one template, fill it in today, and pin it on the wall with the review date in red.



10. Community integration ideas (fast wins)



- 🤝 6-weekly PCN/GP/DN check-ins; rota a manager + champion.
- 🎉 Invite local groups for joint activities; log outcomes.
- ➡️ Share one best practice per quarter with a neighbouring service.

Bold practical add-on: Send one 3-line email today to your GP/DN contact: “**One thing we’re doing, one thing we need, one thing we can offer,**” and diarise a 15-minute call.

👉 **Simple version:** Email your GP or nurse; **Say 1 thing you’re doing, 1 thing you need, 1 thing you can share.** Book a 15-min call.

11. Inspector-friendly evidence pack




Vision &
improvement plan


Training matrix +
2 competencies


12-week
KPIs


Three closed
action plans


Survey summaries +
quotes


Champion list + one
audit


Community log

Bold practical add-on: Create a desktop folder called “**Inspection Pack – Live**” and drop in just one current item from each of the seven sections by close of play.

👉 **Simple version:** Make a folder on your computer called “Inspection Pack”. Put one example for each of the 7 areas inside it today.



12. Watch-outs

- ? Ownerless action plans; no dates.
- 🧑 Staff can't explain vision/values or EDI in practice.
- 🗣️ "We've always done it like this."
- 🛡️ Defensive with CQC; hoarding best practice.
- 📉 Innovation with no outcome evidence.

Bold practical add-on: Ask three staff at random to explain the service vision in one sentence and give one EDI-in-practice example; note gaps and cover them in tomorrow's 5-minute huddle.

👉 **Simple version:** Ask 3 staff to say your vision in one line and give an equality example. If they struggle, explain it at tomorrow's meeting.

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