

# Hospice Trustees Network Meeting

Tuesday 9th December



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# Welcome and Introductions

Stephen Taylor  
Dorothy House Hospice

# Housekeeping



Please keep your mic muted unless you are asking a question



Please note that the presentations (excluding the Q&A) are being recorded.



The recording and slides will be shared with you after the event, and we'll notify you by email



Please use the Chat function to ask any questions



AI bots are not permitted in these meetings and will be removed

# Agenda

10:00	Welcome and introductions	<b>Stephen Taylor</b> , Chair Dorothy House Hospice
10:05	The role of a Charity Trustee in a CQC inspection	<b>Julie Taylor</b> , Executive Nurse - Director of Clinical Operations Rainbows Hospice
10:35	Q&A	All
10:55 - 11:00	Close	<b>Stephen Taylor</b> , Chair Dorothy House Hospice

# The role of a Charity Trustee in a CQC inspection

**Julie Taylor: Executive Nurse- Director of Clinical Operations.**

**rainbows.co.uk**

**May 2025**

## The CQC Inspection- what to expect

- The inspection is likely to be unannounced
- There can be 3-6 inspectors
- The inspection can be 1-3 days on site and **will look at all areas not just care**
- There will be a requirement to submit evidence and data in the 2 weeks following the inspection
- The team will want to speak to/interview key people:
  - Registered Manager
  - Nominated Individual
  - CEO
  - Governance & Compliance
  - Chairman
  - Trustee
  - HR team
  - Finance Director
  - Health & Safety/Estates and Facilities
  - Staff
  - Families/Young People

## How they inspect

- New inspection Framework- Single Assessment Framework (SAF)
  - This simplified model is built around 34 quality statements, or "we statements," that replace the old KLOEs (Key Lines of Enquiry) and are grouped under the five key questions (Safe, Effective, Caring, Responsive, and Well-led).

*'We have a proactive and positive culture of safety based on openness and honesty, in which concerns about safety are listened to, safety events are investigated and reported thoroughly, and lessons are learned to continually identify and embed good practices.'*

*'We have a shared vision, strategy and culture. This is based on transparency, equity, equality and human rights, diversity and inclusion, engagement, and understanding challenges and the needs of people and our communities in order to meet these.'*
  - The CQC will collect evidence across six categories: people's experiences, feedback from staff and leaders, observations of care, **feedback from partners**, processes, and **outcomes of care**.
- Getting ready for a CQC inspection
  - getting teams involved in the new process
  - learning the updated quality statements
  - improving the ways evidence is gathered
  - actively seeking and acting on feedback for a person-centred care approach.
  - Demonstrate impact.....so what?
  - Board Assurance processes

# Trustee responsibilities before, during, and after a CQC inspection

## 1. Legal & Regulatory Responsibility

- **Accountability under "Regulation 5: Fit & Proper Persons"**

Trustees (as directors with ultimate responsibility for quality and safety) must meet CQC's *Fit and Proper Persons Test*, demonstrating good character, competence, and absence of serious misconduct.

- **Charity law duties (CC3 guidance)**

Trustees are legally required to act *reasonably, honestly, and prudently*, with *due care, skill, and compliance*. They jointly govern and direct the charity.

## 2. Strategic Governance & Oversight

- **Ultimate accountability for service quality**

Trustees must understand quality indicators, regularly review evidence and metrics, and intervene swiftly if standards fall. Oversight should be strategic—not operational.

- **Financial & risk governance**

Ensuring sound financial management supports safe, effective care; trustees may face personal liability if budgets or reserves are mismanaged.

- **Board best practices & continuous learning**

Effective trusteeships include quarterly meetings, committees (e.g., risk, quality, finance), annual board trainings in governance and regulatory compliance.



### 3. Preparation Pre-Inspection

- **Embed compliance across the organisation**

Cultivate a "well-led" culture: regular updates on CQC reforms (e.g., the 2025 Single Assessment Framework), sharing of feedback, outcomes data, culture and values, staff engagement and well being, and quality assurance reviews.

- **Board Assurance**

- Do you have a clear strategy that everyone understands
- How do you receive information?
- Are you **assured not reassured** by the information you receive? Data and evidence- *the so what question*
- Floor to Board flow/reporting
- Clear governance framework that is embedded across the organisation
- Open & honest culture

- **Maintain inspection ready materials**

Trustees should ensure data-driven dashboards/reports (e.g., care metrics, incident logs, infection-control outcomes) and robust documentation including policies are inspection-ready.

- **Delegate and clarify roles/status**

While day-to-day may be led by Registered Managers, trustees must confirm every senior staff member knows their responsibilities, reporting lines, and inspection expectations.

#### 4. Active Roles During Inspection

- **Demonstrate visible leadership and challenge**

Be ready to meet inspectors (likely remotely as the inspection may be unannounced), offer assurance, and respond authoritatively to questions about governance, finance, strategy, risk, and corrective action.

- **Secure stakeholder engagement**

Ensure transparent communications: service users, families, partner organisations, advocates, staff, and volunteers understand inspection rights and are prepared to engage constructively.

- **Support management execution**

Trustees should trust senior leaders to showcase compliance—but remain alert to consistency, understand evidence, and be present if remediation or serious issues arise.

#### 5. Post-Inspection Follow-up

- **Oversight of enforcement or ratings findings**

Trustees must review inspection reports, require action plans with clear accountability, monitor completion, and ensure documentation is maintained.

- **Continuous improvement**

Use inspection feedback to refine policies, board development, quality monitoring frameworks, and stakeholder communication strategies.

- **Maintain compliance with notifications & regulations**

Ensure timely updates to CQC registration and follow-up on notifications of incidents or changes in service delivery.

## In summary:

***CQC: By well-led, we mean that the leadership, management and governance of the organisation assures the delivery of high-quality and person-centred care, supports learning and innovation, and promotes an open and fair culture.***

Trustees are the **final legal authority** for governance, quality, and regulatory compliance in a CQC-registered provider.

They must embed high standards and preparedness as a core strategic priority- supporting, challenging, and guiding senior leadership- but **not micromanage**.

Being an engaged, informed, and legally compliant trustee is central to both inspection success and service excellence.

Trustee CQC Inspection checklist





We care for children, young people and their families  
in the East Midlands – wherever they are.

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# Feedback



Please consider sparing a few minutes to answer this end of year survey, so we can continue to improve future network meetings:

<https://www.surveymonkey.com/r/TrusteeEoY>

# Thank you