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| **Good practice example**  |
| **Name of advocate and organisation** |   |
| **Contact details (or include email signature in your response)** |   |
| **Local Authority area** |   |
| **Name of CQC inspection team contact (if known)** |   |
| **General details of working well example**. *Please include why the relationship works well for you (regular meetings, good communication, feedback from the inspection team on how your intelligence has been used in regulation, information sharing with you).* If possible, please include the type of service (we **do not** need to know the name of the services) *Inpatient, outpatient, community care, Learning Disability, Mental Health services for example* |         |
| Is there anything else you think would work to improve the local relationship – an approach that hasn’t been tried? |   |
| Would you be happy for us to share this example in future training for local inspectors (anonymously) ?Can we contact you in the future to hear more about this example if we need to?  |   |
| Any other comments/feedback  |   |
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