

CQC update and CQC strategy 2016 to 2021

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Our purpose



The Care Quality Commission is the independent regulator of health and adult social care in England.

We make sure health and social care services provide people with safe, effective, compassionate, high-quality care and we encourage care services to improve.



Our current model of regulation



Register

We **register** those who apply to CQC to provide health and adult social care services

Monitor, inspect and rate

We **monitor** services, carry out expert **inspections**, and judge each service, usually to give an overall **rating**, and conduct **thematic reviews**

Enforce

Where we find poor care, we ask providers to improve and can **enforce** this if necessary

Independent voice

We provide an **independent voice** on the state of health and adult social care in England on issues that matter to the public, providers and stakeholders

Good and outstanding care



- Despite challenging circumstances, most people are still getting high quality care
- Many services improving and collaborating

Hospital core
services

51%

good

5%

outstanding

GP practices

83%

good

4%

outstanding

ASC

71%

good

1%

outstanding

But some very poor care

- Wide quality variation continues with evidence of deterioration
- But some services are struggling to improve despite clear information on what is needed

Re-inspections.....
of all services first rated inadequate

Inadequate
to good
23%

Inadequate
to requires
improvement
53%

Requires
improvement
to inadequate
8%

Remained at
requires
improvement
47%

..... of all
services
first rated
requires
improvement

Why a new CQC strategy?

A changing environment

Use and delivery of regulated services is changing

CQC must deliver its purpose with fewer resources

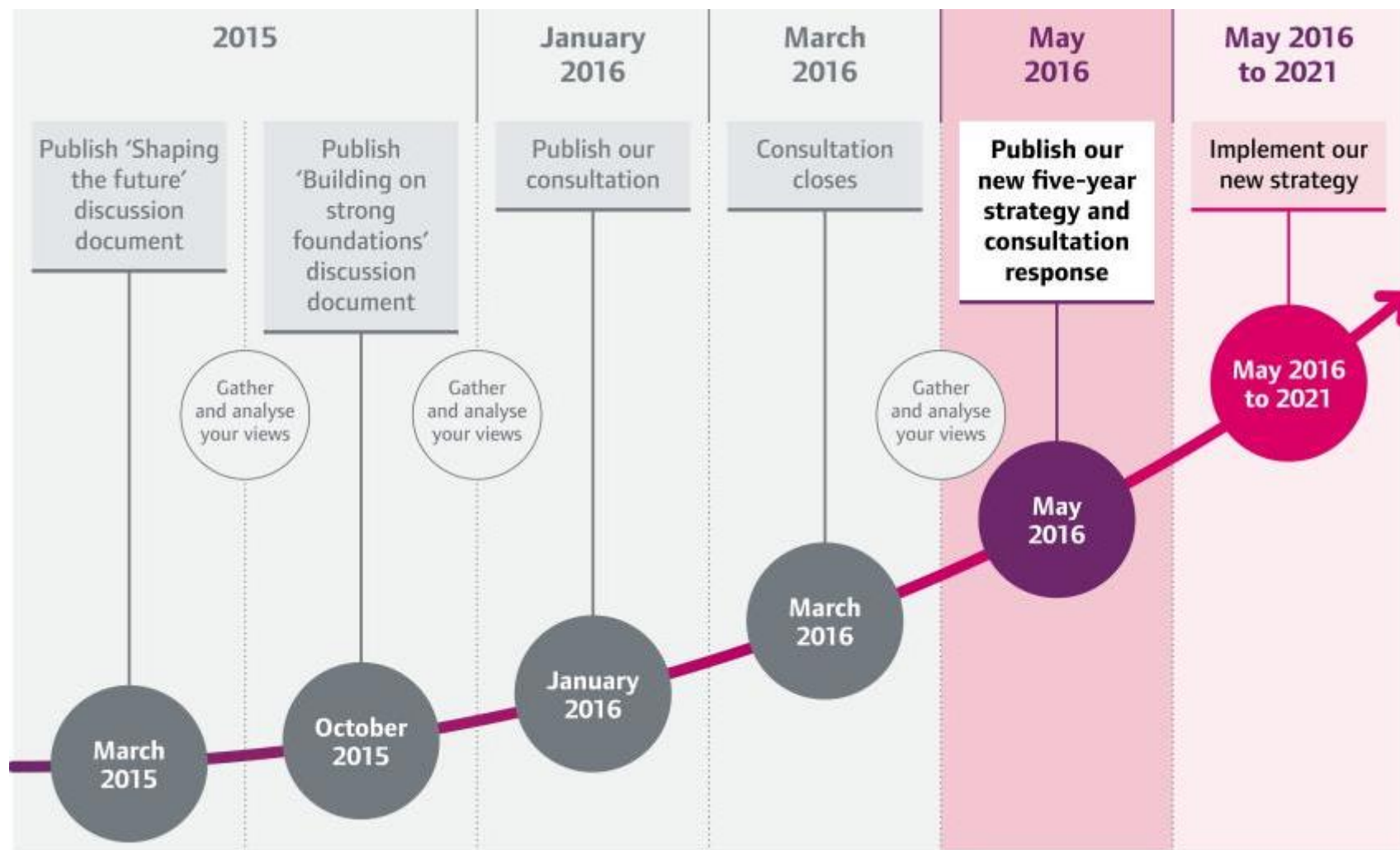
Adapt and improve

We want to become more efficient and effective to stay relevant and sustainable for the future

The public, and organisations that deliver care, have told us we have improved but we know there is more to do



Strategy timeline



Our ambition for the next five years:

A more targeted, responsive and collaborative approach to regulation, so more people get high-quality care



Four priorities to achieve our strategic ambition

1. Encourage improvement, innovation and sustainability in care
2. Deliver an intelligence-driven approach to regulation
3. Promote a single shared view of quality
4. Improve our efficiency and effectiveness



What will stay the same?

- Our **purpose, role and operating model** - inspections will continue to be central to our assessments of quality
- Our **work with the public** to understand and focus on what matters to people
- Our role in **protecting and promoting equality and human rights** - including for people being cared for under the Mental Health Act or the Mental Capacity Act Deprivation of Liberty Safeguards



What we will do differently

- Support innovation by working with providers delivering care in new ways
- Focus more on the quality of care for population groups and how well care is coordinated across organisations
- Rate how well NHS Trusts are using their resources



- Focus resources towards higher-risk applications at registration
- Build and use our insight to target our inspections where risk is greatest or quality improving

What we will do differently



- Expect providers to describe their own quality against our five key questions
- Share data sets with partners, other regulators and commissioners on care quality

- Improve the experience of providers and the public by moving as many interactions as possible online
- Invest in our internal systems and improve our processes to make sure that we can work efficiently and effectively



What will our strategy mean for hospitals?

- Focus on core services that require improvement
- Update ratings based on smaller, more focused inspection; use more unannounced inspections
- Expect providers to describe their own quality against our five key questions
- Work with NHS Improvement to give new ratings on efficient use of resources
- Produce shorter reports, more quickly that make clear how we have come to our conclusion



Hold an annual review of each provider to determine where to focus our inspection activity for the year ahead

What will our strategy mean for primary care?

- Reduce duplication for providers, agree actions jointly where there are risks of poor care
- Extend inspection intervals for good or outstanding practices
- Focus on understanding innovative models of care and areas where potential risks may emerge



Federations and other new care models: focus on well-led question, consider inspection of sample locations alongside, understanding potential risks using local data

For urgent and emergency care, including OoH and NHS 111: inspect related services at the same time

What will our strategy mean for adult social care?

- Improve and use local information to better inform inspections
- Expect providers to describe themselves using the 5 key questions
- Move to greater intervals between inspections for services rated good or outstanding as information improves
- Respond to risk and improvements for those requiring improvement as information improves
- Clarify where services are good with outstanding features and where services that require improvement are not meeting fundamental standards



For corporate providers: Understanding impact on quality through culture, policies and head office leadership, improving local activity

Thank you



www.cqc.org.uk/ourstrategy

 [@CareQualityComm](https://twitter.com/CareQualityComm)

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Your name
Your job title