

# CQC Regulatory Approach changes explained



Area	Existing	Proposed from Spring 2023
Frequency of inspection	Frequency of inspections are closely linked to the rating of a service. The poorer the rating the less time between site visits	Frequency is more based on current risk and all the information received by CQC
Ratings	Are only decided or changed after a full inspection that looks at all the Key Questions	They may be changed without a site visit, and without looking at all the areas normally inspected against
Evidence sources	Varied, not prescribed and not used to directly judge a service	6 types of evidence that will be used to judge each Quality Statement. A more defined process with scores attributed to evidence
Report format	Long, detailed and covering a wide area. Primary audience is the provider	Shorter, focused and more geared to letting the public know about a service and what has changed
5 key questions	Asks are services safe, effective, caring, responsive and well led. They are from the perspective of CQC, and what they would expect to see	Still the same 5 questions, but scope increased and they are phrased as 'I' questions, so more clearly what the person using services expects, not what CQC expect

<p>Key Lines of Enquiry (KLOEs)</p>	<p>KLOEs are currently the main criteria that services are inspected against</p>	<p>KLOEs will be replaced by Quality Statements. These are phrased from the perspective of the provider as 'we' statements and detail what is expected to be rated 'good'. They cover similar areas to the KLOEs but with an increased focus on people using services</p> <p>Quality Statements may replace the 'Characteristics of Ratings' and will support rating judgements</p>
<p>Scope of inspection</p>	<p>Focus on the individual service, and what CQC want to know about the quality of care</p>	<p>More holistic, with a focus on health and social care issues in the local area, and how the service recognises and responds to local challenges. This is to respond to the new Integrated Care Systems (ICS) model</p>
<p>Inspection model</p>	<p>An 'exam' based model, where a site visit sets your rating</p>	<p>More of a 'continuous assessment' when evidence provided over time will set your rating</p> <p>CQC has described it as an 'always on' process</p>
<p>Number of assessment frameworks</p>	<p>There are currently two frameworks. One for health and one for social care</p>	<p>One assessment framework with the same Quality Statements for all health and social care services</p> <p>However, there will be another level of criteria to support Quality Statements, called 'Quality Indicators' that will be more service specific and provide detail for individual types of service</p>
<p>Areas of CQC focus</p>	<p>Currently all based on KLOEs, and with a focus on other areas identified as important during the last 7 years of inspections. For example: oral care, infection control, equality</p>	<p>Focus on what is known about a local area or the individual service. More spotlight on equality, diversity, views of the people using services and of other stakeholders, staff support, leadership, culture and improvement</p>