

The new CQC Single Assessment Framework: What do I need to know?

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Why is the CQC changing what they do?

Building on the 4 themes in
their published strategy

Embedding their learning
from COVID-19

Integrated Care System
(ICS) remit

Increased focus on outcomes
for people that use services

More responsive and proactive

'Evolution' not 'Revolution'

It's been 7 years...



What's staying?



The 'Fundamental Standards'

The 5 Key Questions

Ratings

The Provider Information
Return (PIR)

The principles of registration
and the need for ongoing
monitoring of services

Notifications

Enforcement activity

An inspection is an
inspection...

What's changing?

A single framework - the same criteria for all services

Key questions now phrased as 'I' statements

Introduction of 34 'Quality Statements' as a replacement for the KLOEs

Quality Statements are:

Phrased as 'we' statements

Detail what 'good' looks like

'Prompts' and 'Characteristics of ratings' are going

Date of inspections no longer linked to rating

An 'always on' framework – flexible and 'risk based'

What's changing?

A wider range of evidence
from multiple sources

'Scoring' evidence on a 1-4
scale to come to a judgement

Developing and sharing the
range of evidence that the
CQC will need to see

Focusing on issues relevant in
your geographical area

Looking at themes – such as
access to services, valuing
staff etc.

More 'desktop assessment'
and forming a remote view of
your service

What's changing?

Shorter, more focused reports

More regular updates on
quality of your service

Ratings may be changed
without site visits or looking
at all Quality Statements

The CQC has stated it will be a
more 'simplified' process

Also, more approachable and
open to conversations

Quality Statements more detail...



Quality Statements have an increased focus on:

Independence

Compassion and dignity

Partnership working

Promoting healthier lives

Improving outcomes

Rights and equality of staff

Equality of access to care provision

Environmental sustainability

Governance and leadership

Best practice and innovation

Sources of Evidence...

People's experience of health and care services

Direct to CQC from relatives, people using services or others

Evidence from you about people's experience including surveys, responses to concerns and improvements made

Sources of Evidence...

Feedback from staff and leaders

Compliments and concerns
shared with the CQC

Focus groups

Staff surveys

Your self assessments (PIR)

Sources of Evidence...

Feedback from partners

Commissioners

Multi agency bodies

Other providers

Health services

Sources of Evidence...

Observations of Care

Mainly on a site visit
to the office

Off site interviews with staff
and professionals

Use of 'Experts by Experience'

Sources of Evidence...

Processes

Policies and
procedures

Care
plans/reviews/
Involvement
of others

Infection
control/Risk
assessments

Accidents/
incidents/
notifications

Complaints/
safeguarding

Training/
recruitment/
induction/
supervision

Completed
audits and
action plans

Sources of Evidence...

Outcomes

Improvements in
health, wellbeing

The 'so what?'
question

Personalised
approach to care

Understanding what is
important to the
person

Tangible results where possible e.g.
weight, number of hospital or GP visits,
involvement of community teams

What should I do now?

Reflect on the sources of evidence on the previous slides, but specifically:

Understand CQC thinking

Would you expect to pass an exam without knowing the subject or revising?

Sign up for the CQC 'Citizen Lab'

Sign up for the CQC Newsletters

QCS emails, webinars, blogs, policy updates and management system

Understand your local area, issues, drivers and pressures

Ensure your PIR is up to date and complete

Keep a record of what you are doing that is innovative, creative and meets an identified need

Treat any person involved with your service as if they are the CQC

What should I do now?

Talk to other managers, services and share knowledge and ideas

Survey, survey and survey again...

They are a main tool to provide evidence of how well you are doing

Analyse results

Make changes ('you said, we did')

Use QCS surveys to help you

Look at the technology you currently use, does it allow you to:

Interrogate and analyse data?

Be person-centred and support the care you are providing?

Update information easily?

Share evidence when needed?

Keep information secure?

What should I do now?

Focus on areas that the CQC has stated are increasingly important:

Infection Prevention and Control (IPC)

Choice and independence

Equality

Culture

Oral health

Staff wellbeing

Best practice

Involvement of people that use services

Sustainability

Continuous improvement

Meeting local need

When are these changes coming in?

'Early adopters' from now...

Updates and changes expected
in December

In next few weeks, releasing
evidence criteria for types
of service

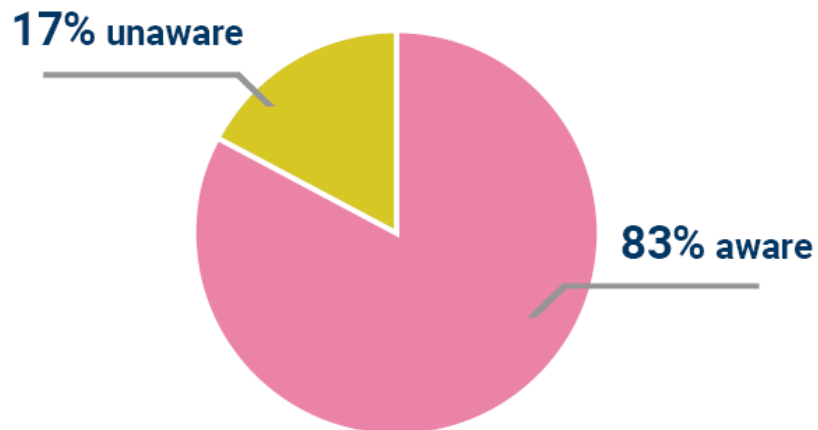
Rollout was planned from January
2023, but latest indication is that it
may be a phased approach from
April 2023

Key headlines from CQC Single Assessment Framework Survey

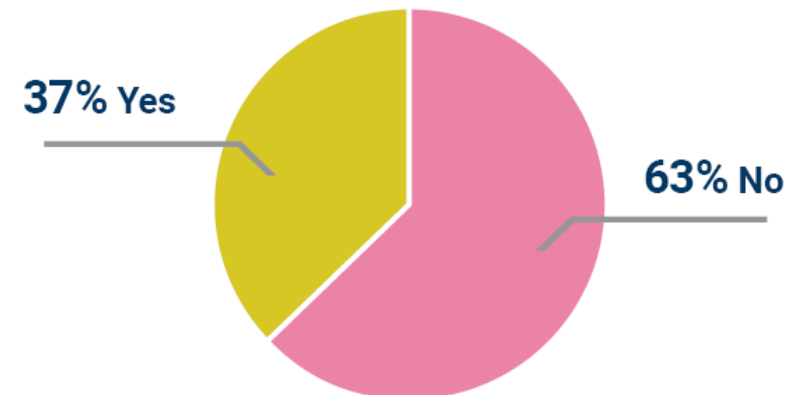
We received **1,268 responses**

Over half (63%) of all respondents state their organisation has not yet started preparing for the new framework. Of those who state awareness of the new framework, 58% say their organisation has not yet started preparing.

Are you aware of the upcoming CQC single assessment framework rolling out in Jan 2023?



Has your organisation started preparing for the new framework?



CQC Single Assessment Framework Survey

The headlines from the survey were:

Need more information

What will an inspection look like under the new process?

To know when it's happening

What are Quality Statements?



Quality
Compliance
Systems

an RLDATIX company

THANK YOU!

You will receive the recording, presentation slides
and your certificate of attendance after this session.