BLOG

Return to Good or Draft Framework? The Priorities Haven't Really Changed...

When the Care Quality Commission (CQC) announced its Return to Good inspections for social care, many providers wondered how much shorter the inspections would be. The quick answer to that question is: shorter than today's full comprehensive inspections, but about the same length as those we will see under the new draft assessment framework.

The original Single Assessment Framework contains a considerable 34 Quality Statements, whereas the Return to Good assessments focus on just 18. Meanwhile, the draft Adult Social Care Assessment Framework meets in the middle somewhere, introducing a new structure based around 24 Key Lines of Enquiry (KLOEs).

However, when directly compared side by side, what is looked at under Return to Good is very similar to that under the new proposed framework. Of course, language has been changed and some Quality Statements have been merged or renamed, but the themes CQC has chosen to inspect remain largely the same. That's not a huge surprise when we consider that all of this is based around the Fundamental Standards – because whatever the framework, the Regulations haven't changed.

Comparison of Return to Good Quality Statements and the Draft Framework

Return to Good	Draft KLOE	Comparison
SAFE		
Learning culture	Improvement, learning and innovation Safety culture	Direct comparison
Safeguarding	Safeguarding	Direct comparison
Involving people to manage risks	Managing risks during care and treatment	Direct comparison
Safe environments	Safe environments and infection prevention and control Safety culture	Similar criteria
Safe and effective staffing	Safe staffing	Direct comparison
Medicines optimisation	Safe medicines and treatments	Direct comparison

Return to Good	Draft KLOE	Comparison
EFFECTIVE		
Assessing needs	Assessing needs	Direct comparison
Delivering evidence-based care and treatment	Evidence-based care and equitable outcomes	Direct comparison
Monitoring and improving outcomes	Supporting people to live healthier lives	Similar Criteria
Consent to care and treatment	Consent to care and treatment	Direct comparison
CARING		
Kindness, compassion and dignity	Kindness, compassion and dignity	Direct comparison
Independence, choice and control	Independence, choice and control	Direct comparison
RESPONSIVE		
Person-centred care	Person-centred care	Direct comparison
Listening to and involving people	Listening to and responding to feedback	Similar criteria
Equity in experiences and outcomes	Equity in experiences Timely and equitable access	Similar criteria
WELL-LED		
Shared direction and culture	Strategic direction Workforce equity and culture	Similar criteria
Governance, management and sustainability	Governance and management	Similar criteria
Learning, Improvement and Innovation	Improvement innovation and learning	Similar criteria

This comparison demonstrates that CQC has not fundamentally changed what it believes constitutes good care. Instead, language has been changed and the structure of the assessment framework has been streamlined, while retaining a consistent focus on the areas most closely associated with safety, quality and regulatory compliance.

Conclusion

Inspection methodology continues to evolve, but the foundations of good care remain the same. The Return to Good programme and the draft assessment framework both prioritise safety, leadership, governance, staffing, person-centred care, consent and continuous improvement. For providers, this offers reassurance that continued investment and attention in these core areas will continue to support regulatory compliance, regardless of how the framework develops. And as the Return to Good inspections of today and the new assessment framework of tomorrow are so similar, it allows both providers and the CQC to test how effective the future KLOEs are going to be.