



-SINGLE ASSESSMENT FRAMEWORK FOR HEALTH AND SOCIAL CARE-		
Organisation(s):	Care Quality Commission (CQC)	
Country:	England (United Kingdom)	
Contact:	policy@esn-eu.org	
Theme:	 □ Ageing & Care □ Asylum & Migration □ Young People □ Children & Families □ Community Care □ Co-Production □ Disability □ Housing & Homelessness 	 □ Active Inclusion & Employment ☑ Integrated Services □ Mental Health ☑ Service Quality & Management □ Technology □ Workforce Support □ Minimum Income □ Other, please specify:
Principles of European Pillar of Social Rights: Check the 20 principles here.	Chapter III: Principle 16. Health care Principle 11. Childcare and support to children, Principle 18. Long-term care, Principle 19. Housing and assistance for the homeless	
Current status of the practice:	 □ Concept and design phase ⋈ Execution & monitoring phase □ Consolidation phase □ Scaling Up and Transformation Phase □ Other (please specify) 	
Social issues addressed Please explain the problem you attempt to solve	Before the single assessment framework, CQC used three assessment frameworks for different care services: one for healthcare and, one for adult social care. Acknowledging the interrelatedness of social and healthcare support, England has overhauled its quality assessment frameworks, now streamlining both health and social services quality standards in developing a single assessment framework. At this moment, there is unnecessary duplication in CQC's currently separated assessment frameworks. Eliminating duplication allows inspectors to focus on specific topic areas under each key question, as well as to ease inspections for providers and, crucially, to empower citizens to be champions in their own care. The new single assessment model will consist of one overall set of expectations, making it easier to establish one clear understanding of what defines 'quality' care and 'good' service.	

Objectives:

Please provide **a maximum of three** objectives in bullet points.

- Creating an assessment framework that applies to social and health services and being able to assess quality of health and social care outcomes in an integrated manner.
- Improving quality of life of beneficiaries of health and social care.
- Accelerating improvement: Enabling health and care services and local systems to access support to help improve the quality of care where it's needed most.

Activities:

Please summarise the activities put in place to achieve the objectives (maximum 200 words).

As of 2022, the framework will be used to assess health and social care providers, local authorities and integrated care systems.

It comes with 5 key themes, from registration to ongoing assessment. Those are safety, effectiveness, care, responsiveness and leadership. And they will be assessed against the questions: Is it safe? Effective? Caring? Responsive? Well-led?

Evidence to answer those questions will come from:

- People's experience expressed in co-produced "I" statements, based on what people expect and need, to bring these questions to life and as a basis for gathering structured feedback:
- Providers and authorities statements: Expressed as "We" statements;

All areas will be analysed based on statements from people with care experience, care providers, relatives, staff, and management, feedback from partners, and processes, as well as based on the outcomes achieved for the person. To bring these questions to life for care beneficiaries and ease a structured collection of feedback, each question will be translated into 'I' statements based on what people expect and need. Single-assessment forms with 'we' statements written from a provider's perspective help providers understand what is expected of them in terms of standards. In addition, evidence is gathered from staff and leaders, partners feedback, observation, processes, and outcomes.

Next steps:

- CQC will continue to implement the new approach in phases.
 From spring 2023, CQC will focus on making sure the technology they need is in place and that they are able to test it with providers and being confident that the new regulatory approach is ready to launch.
- CQC's new Regulatory Leadership team will set out their priorities across their sectors, including thematic reviews. CQC will be regulating as normal.
- CQC will also start to understand more about what is happening locally when they start looking at how care is

provided at a system level. CQC will share further updates on their approach to local authority and integrated care systems in early 2023.

Evaluation of practice:

Please explain how you evaluate the practice, and what the results were/are so far

CQC developed its new assessment framework in 2021-2022 following almost nine months of engagement and thousands of interactions with providers, people who use services and other stakeholders.

Feedback portrayed that stakeholders support the simplicity of the new framework. Having just 34 topic areas across the five key questions means that providers will be much clearer about what CQC is looking for in their assessments.

Although people valued the simplicity of the approach, many felt the language was too complex. In response, CQC carried out some user research and reviewed the wording of the quality statements to make them easier to read.

As a result of CQC's engagement with providers, they also created some guidance that shows examples of the evidence they collect for each category.

In the summer of 2023, CQC will launch their new online provider portal. They will do this in stages and provide support and guidance. In the first stage:

- providers will be able to submit statutory notifications,
- CQC improve how their enforcement process works.

This is the start of gathering evidence in a new and structured way that will help inform their assessments, making it much easier for providers to interact with us. It also allows CQC to test and refine how the provider portal and its internal technology work to support its new approach.

<u>List three key elements for</u> <u>successful implementation</u>

- 1. **Gathering evidence:** We make use of information, including people's experiences of care services. We gather evidence to support our judgements in a variety of ways and at different times not just through on-site inspections. This means on-site inspections will support this activity rather than being our primary way to collect evidence.
- 2. **Frequency of assessments:** We do not use a service's rating as the main driver when deciding when we next need to

	 assess. The evidence we collect or information we receive at any time can trigger an assessment. 3. Assessing quality: We make judgements about quality more regularly instead of only after an inspection. We use evidence from a variety of sources and look at any number of quality statements to do this. Our assessments are structured and transparent, using evidence categories as part of the assessment framework and giving a score for what we find. The way we make our decisions about ratings are clearer and easier to understand.
Links to supporting documents:	Website CQC New Inspection Framework 2022
e.g. website or report of the practice	A new strategy for the changing world of health and social care - CQC's strategy from 2021 2021 Strategy Ready for the CQC's new single assessment framework