



Assessments of quality in 2010/11

Let us know how we should assess health
and adult social care



Consultation summary

About the Care Quality Commission

The Care Quality Commission (CQC) is the independent regulator of health and adult social care services in England. This means that as well as checking individual services, we look at how well the two sectors work together. There are many people who need to use both health and social care services, and it's important that their care is as 'joined up' as possible. We also protect the interests of people whose rights are restricted under the Mental Health Act.

Whether care services are provided by the NHS, local authorities of private and voluntary organisations, we make sure that people get better care. We do this by:

- Driving improvement across health and social care¹.
- Putting people first and championing their rights.
- Acting swiftly to remedy bad practice.
- Gathering and using knowledge and expertise, and working with others.

Our work

We have a number of powers that enable us to assess organisations that provide and buy services (providers and commissioners).

Under new laws coming into effect in 2010, anyone who provides regulated healthcare or social care services must apply to be registered with us. Before we will register them, they must show that they are meeting essential standards of quality and safety. We can also use our range of enforcement powers to make sure providers are complying with the law. As well as registering providers, we have the powers to:

- Carry out **periodic reviews** (regular checks) of the performance of all health and adult social care providers and commissioners.

¹ When we use the term 'social care' in this booklet we mean adult social care.

² Care Quality Commission: **Assessments of quality in 2010/11** Summary

- Carry out **special reviews and studies** on economy, efficiency and effectiveness and on information issues in particular areas of care.
- **Publish information** that is useful, timely, and can compare performance between organisations, and can encourage them to improve. It should also support people to make choices and decisions.

By bringing all three of these powers together we carry out what we are calling 'assessments of quality'.

Let us know what you think

Whatever your interest in our work, we'd welcome your views on our high level ideas on how we will assess quality in 2010/11, which are summarised here. You can get in touch with us using the contact details at the back of this booklet. The full version of this consultation is available on our website (www.cqc.org.uk).

Assessments of quality

We want our assessments of quality to:

- Provide useful and up-to-date information and judgements about the quality of care, which is based on what matters to people who use services and their carers, and uses their views and experiences.
- Look at individual services, such as maternity services, and how well health and social care services are working together.
- Focus on the outcomes that people experience.
- Make sure that those who buy or provide services are held to account for the quality and value for money of those services.
- Make sure that our work joins up with other improvement agencies and systems.

- Celebrate and share good practice.
- Make sure that the benefits of our approach outweigh the costs.

Question 1

Do you agree with our aims for assessments of quality?

Quality and risk profiles

We plan to have a quality and risk profile for each care provider and commissioner. This will bring together all the information we hold about the quality of care they provide or buy for people. For example, it will include information we have received from other agencies, providers, people who use services and our own activities. These profiles are a very important part of our approach to regulation. We will be as open as possible in letting the public, providers and commissioners know what information we hold and in developing these profiles in consultation with all our stakeholders.

Better regulation

One of our strategic priorities is to regulate effectively in partnership. This means making sure that we are always focused on delivering the better regulation principles – to be proportionate, targeted, consistent, evidence-based, transparent and accountable. We need to work with other organisations to share information and avoid our regulatory activities being duplicated. We need to ensure that we are minimising the costs that we impose on providers and commissioners of care – for example by making better use of their own performance and management information and, where appropriate, carrying out joint inspections. The rest of this booklet sets out our thinking for each sector.

Question 2

What more could we do to promote efficiency and be more streamlined in our approach to assessments, in order to reduce the costs of assessments while maintaining the benefits?

Our approach for each sector

This part of the booklet sets out our framework proposals for each sector. During the consultation period we will work with organisations and people, including those who use services and their carers, local involvement networks and overview and scrutiny committees to develop our ideas further. We will publish our final proposals in more detail in spring 2010, taking account of what people have told us.

Assessing councils and primary care trusts as commissioners

Commissioners spend lots of public money on services for their local communities – our assessments of quality help to assess whether they are spending their money wisely. At the moment, we have different ways of assessing councils and primary care trusts (PCTs) as commissioners. We want to get better at looking at how health and social care commissioners work together, but we also know that we will have to make some assessments separately. In 2010/11, we want to test some ideas for how we could look at health and social care commissioning together. These ideas include:

- Work with the Department of Health and others to develop the same measures on outcomes, to hold councils and PCTs to account for commissioning better joined-up care.

- Joint service inspections² of councils and PCTs on safeguarding and joined up care.
- Work with other organisations to develop a joint outcomes framework for assessments of councils' and PCTs' performance.

We also want to develop our work on assessing value for money which, in the current financial climate, is particularly important for organisations that provide and buy services.



Assessing councils as commissioners

Our assessments of councils as commissioners in 2010/11 will continue to look at the outcomes that have been commissioned for people, and we will still hold councils to account for the quality of regulated services (such as care homes and home care agencies) that they purchase. We also want to look more at the progress councils have made in meeting the objectives set out by the Government in *Putting People First*. To arrive at our judgements we will continue to use evidence from:

- Performance against the relevant indicators set by the Government.
- Findings from special reviews carried out by us or others.
- Findings from service inspections.
- Councils' evidence from their self-assessments.

² A service inspection is an evaluation of a council's performance in delivering social care, and the council's ability to improve that delivery in the future.

We want to set clear and stretching targets for high performing councils, and make our analysis and targeting of assessments stronger. This will make sure that our approach in 2010/11 is more challenging as well as more streamlined and efficient.

We will produce a report of our findings that will highlight where things are going well, as well as serious issues that need to be addressed. This will be our evidence and information for the Comprehensive Area Assessment, which is a joint assessment of how well people are being served by their local public services, and how well those services are working together to improve outcomes for local communities.

Question 3

Do you support the general direction of our approach for assessing councils as commissioners? What changes would you like to see to make sure that our assessments are as effective as possible in promoting improvement in the performance of councils?

Assessing primary care trusts as commissioners

We need to make sure that our approach to assessing PCTs as commissioners of services joins up with other assessments, such as World Class Commissioning.

The Government has just published *The operating framework for the NHS in England 2010/11*, which sets out national priorities for the NHS. We will continue to use sets of indicators to measure the quality of care against these priorities.

Our assessments of PCTs will include:

- Scores for each PCT against national priorities and existing commitments.
- A scored assessment of financial management (from work by the Audit Commission).

- Scores against World Class Commissioning as background information (from work by strategic health authorities).
- Findings from special reviews.
- Findings from joint inspections, such as children's services with Ofsted.
- Findings from joint service inspections with councils (we will be testing this in 2010/11).

We hold councils to account for the quality of regulated services they purchase, and we want to test this approach with PCTs, which buy social care services such as care homes and home care agencies.

We will produce a report of our findings that will highlight where things are going well, as well as serious issues that need to be addressed. This will be our evidence and information for Comprehensive Area Assessment.

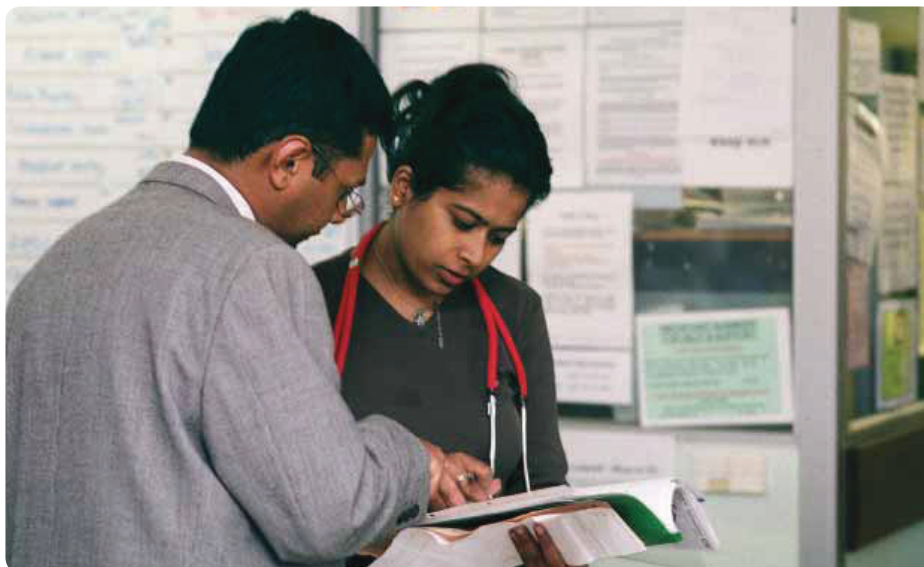
Question 4

Do you support the general direction of our approach for assessing PCTs as commissioners? What changes would you like to see so that our assessments are as effective as possible in promoting improvement in the performance of PCTs?

Assessing NHS trusts and primary care trust providers

On 1 April 2010, NHS trusts (including foundation trusts) and PCT providers will fully come into our new system of registration. We therefore want the main focus for us and them to be making sure that all their services meet the essential standards of safety and quality set by registration.

In the past, we have made overall assessments of NHS trusts by looking back at their performance, and publishing information six months after the end of the year that was being assessed. We want our new system to provide more up-to-date information and, where possible, give more information to people at service level, such as maternity or stroke services.



We will continue to use sets of indicators to measure the quality of care against the national priorities in *The operating framework for the NHS in England 2010/11* that are tailored to each type of trust, such as those that look after people with learning disabilities or mental health needs.

Scoring

We do not propose to provide an overall score or rating of the quality of care provided by a trust, but we would like to know what you think about this. While an overall rating can be useful in encouraging improvement, it can also be misleading because it could hide variation in the quality of different services (such as stroke or maternity services) provided by an organisation.

Our assessments of quality of NHS trusts and PCTs as providers will include:

- A statement of a trust's or PCT provider's status of their registration.
- Scored assessments of performance against the national priorities and existing commitments set by the Government.

- A scored assessment of the quality of financial management (from work by the Audit Commission).
- Judgements about the quality of particular services we have reviewed.

Question 5

Do you support the general direction of our approach for assessing NHS trusts and PCTs as providers? What changes would you like to see to make sure that our assessments are as effective as possible in promoting improvement in the performance of NHS trusts and PCT providers?

Assessing adult social care providers

All adult social care providers will be fully registered with us under the new system by 1 October 2010. We therefore want the main focus for us and them to be making sure that all their services meet the essential standards of safety and quality set by registration.

We already award quality ratings to adult social care providers, and we intend to continue to award these under the new system. We believe that this is useful and meaningful, since we can report on the quality of care at a service level – for example an individual care home or a domiciliary care agency.

From April to September 2010, we will reassess ratings where an inspection is due (the current law requires us to inspect every care service at least once every three years).

Services will keep their existing ratings on 1 October 2010. But if we have to register a service with compliance conditions (conditions that require improvement or an action plan), we will make this information available to the public. This will mean that the public and people choosing services know that the service needs to improve to fully meet the new essential standards of safety and quality.

Between October 2010 and the end of March 2011, we will focus our assessments and inspections on services that are not compliant with registration. We will also reassess the ratings of services that are rated 'good' or 'excellent', and would have been due an inspection under the current three-year rule. We will limit these assessments to only consider quality over and above essential standards set by registration in key areas.

The future of quality ratings

We will need to make changes to our approach to quality ratings to reflect the new system of regulation, and we will work with all of our stakeholders to develop this. The changes we need to make include:

- How we award a rating – we think we will always need to carry out a visit to the site of a service, and will always seek the views and feedback from people using the service and other stakeholders (including relatives and visiting professionals).
- Frequency and methods – we think we will need to reassess ratings in a given period, with a reassessment taking place at least once every three years. There will also be checks on registration compliance.
- What we will assess – we think that we should look at some of the key registration outcomes of care to assess their quality over and above registration levels. We will also see if there are other things we could measure that demonstrate quality.
- Rating scale – there will need to be grades that show how good a service is; the challenge is deciding how many grades we need within that.

Question 6

Do you support the general direction of our approach for assessing adult social care providers? How do you think we should approach quality ratings in the future?

Assessing independent healthcare

We do not have the powers to carry out periodic reviews of independent healthcare. We will work with the Department of Health and the sector to think about how and when these services could have broader assessments of quality.

We will publish information we have about independent healthcare as part of our quality and risk profile – including findings from registration. And some NHS-funded independent healthcare services will be assessed as part of our special reviews programme, such as mental health or learning disability services.

Reporting our findings

We want to work with all of our stakeholders during this consultation period, so they can help shape the way we report the results of our assessments of quality. We particularly want to work with the public and people who use services to make sure we can give them a clear, concise summary of what is good about a service or care in a particular area, and what needs to get better.

Equally importantly, we want to consult with those who buy or provide services. We want to make sure that our reporting gives them a clear understanding of how they are performing and any improvements they need to make.

Question 7

Do you have any views on our approach to reporting our findings? What sort of information would you like us to publish – what would you find useful?

Special reviews and studies

Our special review and study powers allow us to look at the provision of NHS and social care and the commissioning of that care.

Our studies are research projects where we publish our national findings.

Our special reviews are assessments of providers and/or commissioners across England, and we make judgements or give scores against their performance. To make these judgements or scores we will use and collect data, or carry out visits, or both. The outcomes of these assessments will inform our registration and ongoing compliance work, and form part of our assessments of quality.

Table 1 overleaf sets out the topics we are considering for our special reviews or studies in 2010/11 and beyond. We have suggested these topics for a number of reasons, such as people may have told us they have concerns, or we have information that there is poor quality care in these areas. We have included some reviews that will help us to look at pathways, to see whether health and social care services are joined up to achieve the best outcomes for people and meet their needs. We will not be able to carry out all of these reviews in 2010/11, so your views are important in helping us to prioritise.

Table 1: Proposed topics for our special reviews or studies in 2010/11 and beyond

Topic
The pathway for people with dementia
The pathway for people with long-term neurological conditions
Nutrition and hydration
The impact on carers of discharge from hospital
A review of the care programme approach in mental health
The quality of nursing care
The use of restraint
The health and social care needs of offenders
Safe and effective surgery
Reducing preventable mortality in hospital
Unmet need in social care
Maternity services
Domiciliary (home) care

Question 8

Which of our proposed topics for special reviews and studies do you think are the highest priority? What specific issues would you like us to address and how could we best do this?

Giving us your views

Please send us your responses to the questions in this booklet by **Tuesday 27 April 2010**. The full version of this consultation is available on our website, and includes details about confidentiality of information (see web address below).

There are three ways you can give us your feedback:

Email

Email your response to assessmentconsult@cqc.org.uk

Post

Write to us at:
Assessment Consultation
Care Quality Commission
103-105 Bunhill Row
FREEPOST Lon 15399
London
EC1B 1QW

Online

Using our online form at
www.cqc.org.uk/getinvolved/consultations.cfm

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Care Quality Commission: **Assessments of quality in 2010/11** Summary **15**



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459