NQB(12)(03)(02)

NATIONAL QUALITY BOARD
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CQC'S STRATEGIC REVIEW
A note from the Chair of the Care Quality Commission

Summary

1. CQC is undertaking a strategic review, the output of which will be a new five year strategy for CQC. The review has a number of aims, which include setting priorities for CQC and establishing clear expectations around CQC's role. As part of the process of developing the strategy, CQC is posing a number of questions and debating them with stakeholders. The Board is invited to consider and respond to these questions as part of CQC's engagement process.

Recommendation

2. The Board is asked to consider and discuss:

    *   The issues posed by the questions set out in paragraph 9. Input from the Board would be particularly welcome on the issues raised by questions a, b, f and g.

    *   How the Board would like to engage further with CQC's strategic review.

Background

3. CQC is now entering its fourth year and a new phase of development. Whilst CQC has achieved much since it was established, recent external scrutiny has provided comment and recommendations on CQC's delivery to date of

its statutory functions. Whilst many of these recommendations have been taken on board and acted on already, it is important to reflect on the collective findings and also the impact of external factors such as the changing care landscape resulting from the Health and Social Care Act 2012, the forthcoming Social Care White Paper and potential impact of the economic climate on the care sector.

4. CQC's Board has therefore commissioned a strategic review which will result in a new five year strategy for CQC. The aims of the review are to decide and make clear:

- What the public and providers can expect from CQC in the future

- What CQC will do and how they will do it

- What the most important things are that CQC wants to focus on in the next five years

- Where CQC wants to be by then and how they will get there

- CQC's updated mission, vision and values

5. And also to:

- Make clear what is CQC's role and responsibility and what is that of others - commissioners and providers, other regulators

- Respond positively and publicly to recent external challenge

- Engage stakeholders and staff in CQC's future direction

Engagement and consultation

6. Engagement with external stakeholders and CQC staff and public consultation are clearly fundamental elements in undertaking the review. CQC is currently carrying out extensive engagement with a wide range of stakeholders as part of developing the content of a draft strategic review document for formal consultation.

7. The key phases of the engagement and consultation process are as follows:

   - Pre-consultation – spring/early summer 2012

   - Formal consultation – summer 2012

   - Sign off new strategy by CQC board – autumn 2012

   - Publication – by end 2012

8. As identified at the last meeting of the NQB, it will be important for the findings of the strategic review to be reflected where required in proposals for changes to the CQC regulations, as part of the regulations review process currently being undertaken by the Department.

Strategic questions for debate

9. To support discussions taking place in the current round of pre-consultation engagement, CQC has identified a number of questions for debate with stakeholders as follows. They are deliberately broad and potentially contentious, so that they generate constructive debate and assist CQC in developing a strategy that reflects the views and expectations of stakeholders and the public. The Board are invited to contribute to debate by discussing the issues raised by the following questions and in particular questions a, b, f and g.

a. **Given the scope and breadth of the sectors CQC regulates – how does CQC best manage the risks?**

This question is designed to promote discussion about expectations of what CQC can achieve given the size of the sector it regulates. Should CQC concentrate on high risk care sectors and/or poor performers and if so, how might it do this?

b. **What role should CQC play in improving quality of care?**

The Health and Social Care Act 2008 sets out quality and safety requirements in regulations. CQC registers providers against these requirements and monitors whether they remain compliant. Could CQC usefully have a role in improving standards of care above the essential standards described in the regulations within its current statutory remit and in light of other organisations' responsibilities? For example, if CQC identified examples of good practice, should it pass them to other organisations to promote across the system?

c. **What should CQC be doing in publishing information?**

Currently CQC publishes the findings of inspections in the form of reports and also in summary form on its public website, together with basic information about provider locations. Should it provide additional information about services and comparative information, or should its strategy be to promote third party use of the information it holds?

d. **How should CQC inform the development of policy?**

CQC gathers unique information about services in the course of its regulatory work. This includes trends in types of service provision and in patterns of non-compliance at local and national level. Should it be making more use of this information to inform debate and policy development through public commentary and reporting?

e. Who should CQC serve?

The rights and interests of people who use services should always come first, but what relationship should CQC have with providers of services? What are the best ways for CQC to involve people in its work?

f. To what extent does CQC need to be seen to act independently?

As an independent regulator, CQC needs to be independent of the providers it regulates and also to act autonomously within the wider health and social care system, taking a risk based approach to prioritising its work and making evidence based judgements. How should it respond to requests from stakeholders which may cut across these principles?

g. What would successful regulation by CQC look like?

Is it possible to completely eliminate poor standards of care in the system and raise the quality bar? What would need to happen to make this a reality?

The Board is asked to discuss the issues posed by the questions set out in paragraph 9. Input from the Board would be particularly welcome on the issues raised by questions a, b, f and g.

The Board is also invited to consider how they would like to be engaged further with CCQ's strategic review.

Care Quality Commission
June 2012