## Care Quality Commission

# The Single Assessment Framework and CQCFIT



#### **Tracy Green**

Business Consultant and CQC specialist

MCIPD FloL CMgrFCMI FREC MEMCC
Accredited Insights Discovery Practitioner



## Objectives

- Recap of the revised CQC Assessment Framework
- Learn about recent assessment reports and outcomes including trends
- Identity top tips and key pitfalls
- See CQCFIT online tool that supports self assessment and compliance

#### **Agenda**

**CQC SAF Recap** 

Assessment reports from the new framework

What is prompting inspections

Learning from recent reports

CQCFIT – a self assessment platform overview and development roadmap

Q&A



## CQC SAF Recap

Single Assessment Framework now rolled out across England

Risk based approach and comparison with others

5 Key Questions

34 Quality Statements (We/I)

6 Evidence Categories: 1. People's experience of health and care services 2. Feedback from staff and leaders 3. Feedback from partners 4. Observation 5.

Processes 6. Outcomes

4 Rating scores and aggregate calculations for an overall score

Not all areas will be assessed

Percentage scores calculating the Scores can be changed without an on-site inspection

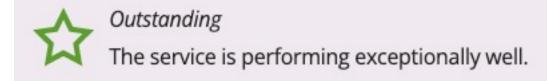


## Reports since April full roll out

- 119 assessment reports with ratings have been published for General Practice
- Highest month was May with 43, the last 3 months 18 reports have been published per month (2 providers were not rated in July)
- 74% rated Good
- 14% rated RI
- 5% rated Inadequate
- 4% rated Outstanding

	Total	<b>Outstanding</b>	Good	RI	Inadequate	Not rated	% Good or above
April	24		17	5	2		71
May	43	2	39	2			95
June	18	1	16	1			94
July	16		9	3	1	2	56
August	18	2	7	6	1		50





01

1 Outstanding practice was assessed on just 1 Quality Statement (QS) under the Responsive key question; Equity of Access 02

That Quality Statement was awarded a rating of Good and due to previous scores being carried over, the overall score was outstanding (as the previous inspection) 03

2 practices rated outstanding last month were assessed on the **SAFE** key question and were rated **Good**.

Due to previous ratings of Outstanding in other areas, their overall rating remained **Outstanding**.

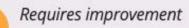


Many practices assessed and rated as Good, were assessed on just 1 Quality statement (Equity of Access)

The remaining practices ranged from being assessed on between 5 to 23 quality statements

These were across between 1-4 key questions so were more robust





The service is not performing as well as it should and we have told the service how it must improve.

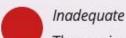
One was an unannounced on-site assessment over 2 days reviewing 6 Quality Statements selected based on concerns received by the CQC relating to safety and governance (Learning culture; Safe environments; Safe and effective staffing; Infection prevention and control; Freedom to speak up; Governance, management and sustainability)

Equity in Access reviewed for 1 practice and all other ratings carried over, so weighting did not allow the overall rating to change

1 had a thorough review of all quality statements – previously inadequate in May 2023

The assessment was carried out in response to feedback we received about the practice and placed in special measures for breaches of Regulations 12 and 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Safe care and treatment and Good governance. Note there had been previous concerns dating back to 2016.





The service is performing badly and we've taken action against the person or organisation that runs it.

1 practice report published last month



Note that they were previously Inadequate and suspended from delivering services for 9/12 with a caretaker contract in place



Whistleblowing concerns prompted this inspection in May 24and they assessed 4 of the 5 key questions



"The practice remains in special measures as a result of concerns we found and we did not have assurances that improvements by the caretaking team were being sustained to ensure continuity of care".

•No RAs • Lack of evidence in safe medicines • Ineffective alerts monitoring • H&S and premises RAs not completed • SEAs and learnings not embedded •SEAs not embedded • Backlog in referrals • Older tasks that could impact patient care • Conflicting information from leaders about how they manage and monitor workflow



## What can we learn from recent reports?

#### **Responsive – Equity of access**

We carried out the assessment as part of our work to understand how practices are working to try to meet peoples demands for access and to better understand the experiences of people who use services and providers.

We recognise the pressure that practices are currently working under, and the efforts staff are making to maintain levels of access for their patients. We recognise the work that GP practices have been engaged in to continue to provide safe, quality care to the people they serve. We know staff are carrying this out whilst the demand for general practice remains exceptionally high, with more appointments being provided than ever.

However, this challenging context, access to general practice remains a concern for people. Our strategy makes a commitment to deliver regulation driven by people's needs and experiences of care.

The assessment of the quality statement equity of access includes looking at what practices are doing innovatively to improve patient access to primary care and sharing this information to drive improvement.

Business

Solutions

TIP:

Review GP mythbusters 77: Access to GP services and GP mythbuster 90: Population groups

#### What can we learn from recent reports?

The assessments are ongoing, so they are unlikely to inspect across all key questions at an individual assessment. They will carry over previous ratings for some areas and build on these over time.

#### **Themes:**

- Good Governance
- SEAs
- Complaints
- Safety alerts
- Safe recruitment checks
- Mandatory training
- Identifying and managing risks
- Effective Prescribing
- Access
- Patient feedback
- Monitoring referrals
- Cervical screen and childhood imms uptake
- Responding to access and demand through data and innovation



## How do I prepare?



- ✓ Understand standards and what GOOD looks like
- ✓ Teamwork and collaborations Well Led
- ✓ Good governance, processes, audits and risk assessments
- ✓ Population needs assessment
- ✓ Utilise AI and digital innovation
- ✓ Know your baseline and create a plan
- ✓ Include the team and do not try to do it all yourself

   work at scale
- ✓ Review all publicly available data –Fingertips, GP Patient survey, QOF
- ✓ Engaged teams
- ✓ Engaged patients
- ✓ Be knowledgeable see GP MythBusters (108)
- ✓ Be prepared
- ✓ Seek external support if required



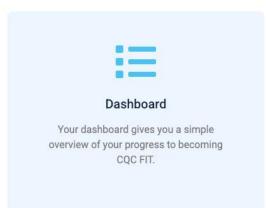


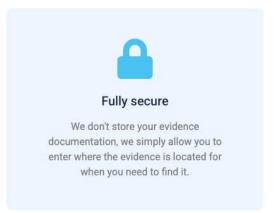
CQCFIT has been created after hearing so many overwhelmed and overworked practices say they want clarity around what evidence is needed to be compliant and obtain at least a 'good' rating.

CQCFIT is an online self-assessment platform that details the evidence needed for the 34 quality statements

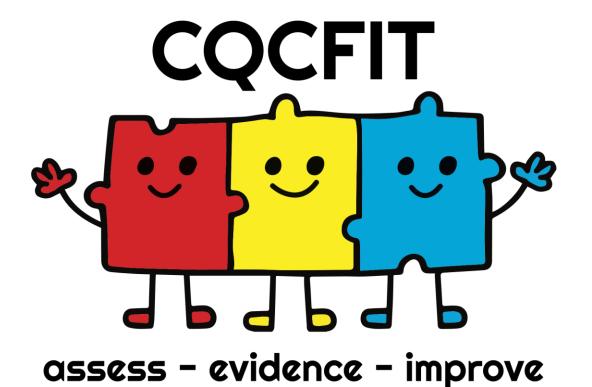
Detailed within the 5 key questions, you and your team can work through each section creating your own action planning tool to becoming CQCFIT.











https://cqcfit.co.uk/



## CQCFIT development roadmap

CQCFIT ROADMAP									
TASK	Detail	Date start		Testing timeline					
Visual management on dashboard	<ul> <li>Visual management shows pie charts detailing complete/in progress/not started</li> <li>Ability to click on each area to display all tasks</li> </ul>	1st Sept 24	30-Oct-24	13/11/2024					
Multiple log ons with additional cells for who and	<ul> <li>Additional 4 user logons within license subscription.</li> </ul>	·							
by when plus extra tab for my outstanding actions		1st Sept 24	30-Oct-24	13/11/2024					
Allocation of tasks to assigned users	<ul> <li>Allocated actions show as an assigned list under each QS heading</li> </ul>	·		13/11/2024					
Ability to allocate task deadlines	Ability to enter deadline action date	1st Sept 24	30-Oct-24	13/11/2024					
Alert dates - audits/training etc	<ul> <li>Ability to enter due dates and alerts are created to user</li> </ul>	1st Nov 24	30-Jan-25	13-Feb-25					
Report functionality for reports and completion	<ul> <li>Need to specify what reports in each sprint based on user feedback and requirements</li> </ul>	1st Nov 24	30-Jan-25	13-Feb-25					



## Questions and feedback





### Tracy Green

consult@tracygreen.co.uk

07488 231747

Linkedin: Tracy Green MCIPD (She/Her)



https://cqcfit.co.uk/

