

CQC Consultation – Better Regulation, Better Care

Healthwatch Birmingham and Solihull responded to this online survey consultation published by the CQC regarding how they assess and rate providers. Our response centred on ensuring clarity for providers and the public regarding both the proposed changes and ratings going forward. We also highlighted the need for ongoing public engagement to ensure that assessment frameworks are tailored to the needs of services and the people who use them. Our responses to the individual questions are as follows:

Question 1: To what extent do you agree that we should publish clear rating characteristics of what care looks like for each rating as part of our new assessment frameworks

Strongly agree

Agree

Neither agree nor disagree

Disagree

Strongly disagree

Question 2: To what extent do you agree with our proposed approach to developing assessment frameworks that are specific to each sector?

Strongly agree

Agree

Neither agree nor disagree

Disagree

Strongly disagree



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2a Do you have any comments or suggestions on how we should develop the sector-specific assessment frameworks?

Sector specific assessment frameworks will help to reflect the different areas which are most important to address within each sector. This will help to increase transparency for people as they are able to identify areas specific to that service which may be falling short. This also enables services to more easily identify where they are going wrong and make improvements.

As part of the development of this framework it may be important to consider public feedback regarding what is important to them when accessing these different service types. This will help to tailor the assessment framework to the needs of the people who access specific services and make improvements in these areas simpler to identify. It is important that ongoing engagement is held with the public to continuously improve these frameworks based on feedback from professionals, stakeholders and the public.

Question 3: To what extent do you agree with our proposed approach to making our assessment frameworks clearer and removing areas of potential duplication?

Strongly agree

Agree

Neither agree nor disagree

Disagree

Strongly disagree



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Question 3a: Do you have any comments on the content of our current single assessment framework, or suggestions for how we should make our assessment frameworks simpler and clearer?

We support the approach of making assessment frameworks clearer and easier to understand. This will enable members of the public to better understand how a service has been assessed as well as making it clearer for services where they need to make improvements. We are keen though that the public are still able to easily access further detail about the assessment frameworks if required, and that information is not withheld in the process of simplification. It will be important to have meaningful continuous engagement with professionals, stakeholders and the public to develop these to suit all needs.

Question 4: To what extent do you agree that we should award ratings directly at key question level with reference to rating characteristics

Strongly agree

Agree

Neither agree nor disagree

Disagree

Strongly disagree

Question 4a: Do you have any comments or suggestions on our proposed approach to awarding ratings?

We feel that a clearer outline of the planned changes to the CQC rating system is required to properly understand the potential impact of these changes. Whilst these proposed changes may make the rating clearer for some by enabling a clearer description of the evidence gathered, the lack of scores for each category may make this less understandable for others. We hope to see a balance kept between these two approaches to ensure that ratings are clear to a wide range of audiences.



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We feel that to enable the public to properly understand the proposed changes, a draft ratings document should have been included in the consultation documentation. This would have enabled members of the public to comment on the format from their own experience rather than the abstract approach presented.

Question 5: Do you have any comments or suggestions for how we should support our inspection teams to deliver expert inspections, impactful reports and strong relationships with providers?

We welcome the commitment to the development of workforce skills, particularly when considering the importance of the regulatory relationship between CQC and service providers. Ensuring that NHS Trusts have a direct point of contact means patient outcomes can be discussed openly with confidence and help to ensure that any changes, if necessary, are made.

We would like to see a clear example of how the CQC aim to consider strengthening the approach to collaboration with providers, and if a locality specific approach will be taken in the further development of the regulatory relationship.

We are also pleased to see a commitment to clear detail in the reports produced as a result of these inspections. This enables specific actions from providers to make improvements to the service they offer to patients, and for patients themselves to hold services to account for these improvements.

We also feel it would be useful for inspectors to be made aware of the importance of collecting and including patient experiences to demonstrate that reports are feedback driven.



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Question 6: To what extent do you agree with the approach to following up assessments and the principles for updating rating judgements?

Strongly agree

Agree

Neither agree nor disagree

Disagree

Strongly disagree

Question 6a: Do you have any comments on our proposed approach?

We are pleased to see that the government's 10 Year Health Plan for England has shaped the development of a proposed frequency schedule of inspection across Health and Social Care. We are particularly interested to hear more about the rapid response inspections that are to be AI-powered. This proposal is likely to identify serious risks before they escalate, however we would expect to see more documentation spanning data-protection and feasibility of AI-model maintenance. We also understand that the CQC are committing to not mixing new evidence with previously gathered evidence. This is a welcome change as it demonstrates how the CQC values continuous feedback about the public when assessing services. We would welcome the CQC working more closely with patient voice organisations such as local Healthwatch to address any gaps in feedback heard.



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Question 7a: To what extent would you support CQC in re-introducing an overall quality rating for NHS trusts and trust-level ratings of all 5 key questions?

Fully support

Mostly support

Partly support

Not support at all

I don't know

Question 7b: To what extent would you support CQC in no longer aggregating key question ratings to produce an overall rating for an individual hospital location?

Fully support

Mostly support

Partly support

Not support at all

I don't know

Question 7c: Do you have any comments to support your views, or suggestions for how we should award ratings for NHS trusts and independent hospitals?

The proposed rating changes could make judgments clearer and more transparent. Removing aggregated scores may help provide better context for each rating, but this will only work if reports explain the reasoning clearly. Since aggregated scores made quick judgments easier, the public will need detailed evidence to understand ratings under the new system. We strongly feel that maintaining separate location-level ratings allows a better judgment between the variations of services provided within the same trust and would wish for this to remain the same. Within inspection reports it will still be important to provide clarity about specific services



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performance, to allow the public to understand nuances between services within the same location. There is a risk that by presenting aggregate ratings without giving further details may unduly worry some members of the public if aggregate scores are lower than previous service specific scores.

Question 8: We'd like to hear what you think about the opportunities and risks to improving equality and human rights in our proposals. Do you think our proposals will affect some groups of people more than others (for example, those with a protected equality characteristic such as disabled people, older people, or people from different ethnic backgrounds). Please tell us if the impact on people would be positive or negative, and how we could reduce any negative effects?

n/a

Question 9: Do you have any other comments on our work, things we should consider, or suggestions for how we could improve?

Regarding the consultation document we feel there would have been better clarity if examples of the proposed changes had been presented. It would be useful to observe the 'older' document style compared to the new style to better illustrate how the changes would read in practice.

We also feel that videos or other multimedia tools may have been a useful tool explaining the changes that are taking place. Both methods would have enhanced the clarity of information regarding the planned changes and invited more thoughtful consideration from members of the public as to how the changes may impact their use of the CQC rating system.



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