



Londonwide LMCs

The professional voice of London general practice

CQC plans changes to inspection regime

The Care Quality Commission (CQC) has launched a consultation on proposals to change the general practice inspection regime to include practices providing annual written evidence on how they intend to improve the quality of care provided.

The CQC states: "We will replace the existing provider information return with an annual online information collection. We will ask providers for information every year rather than as part of the preparation for an inspection, and will encourage them to keep it up to date.

"This is one way that providers can demonstrate an open culture and that they are taking responsibility for assuring the quality of care they provide."

It says that examples of the information they will be collecting include:

What has changed about the quality of care provided over the last year and what plans they have to improve.

Examples of good practice

How they provide effective and responsive care to each of the population groups.

The CQC intends to introduce CQC Insight to replace the current "intelligent monitoring"; it says this will present practice data against national comparators to identify potential changes in the quality of care. They have not specified beyond this what these new data sources will be.

Other proposals include:

Practices that have been rated "requires improvement"; will have to provide a written report on how they plan to improve. If they fail to improve on three inspections in a row this will trigger a management review meeting which could lead to enforcement action.

A cut in the number of inspection criteria with practices required to demonstrate how they apply the CQC's key questions to all six patient groups for the "responsive"; and "effective"; domains.

Bringing non-NHS GP providers, and providers of online GP services, in line with the CQC's inspection regime.

A new process for inspecting practices that are part of new, multi-provider models of care with the regulatory burden largely falling on a single nominated provider in the system.

Making reports shorter, less repetitive and more easily accessible for the public and ensuring at least 90% of reports are published within 50 days.