

CQC Update

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South

Sussex Care Show 16
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Credit: [Disabled And Here](#)

Our vision, our purpose

Why does CQC exist and what impact will we have?

Our vision

Everyone receives safe, effective and compassionate care.

Our purpose

We regulate health and adult social care, we work together with the public, systems and providers of care to protect people, and to promote and improve quality of care.



Our commitments

Public

To listen, act, inform and protect.

We listen to, learn from, and inform the public. We act to keep them safe and improve care, protecting rights and ensuring safe, effective, and compassionate care for all.

Providers & Systems of Care

To help them improve and innovate.

We work with care providers and systems to improve quality and equity. We set clear, evidence-based expectations, identify risks early, and support innovation through strong relationships and data-driven insight.

Our People

To feel valued and do great work.

We invest in our people, tools, and culture so everyone at CQC is guided by our vision and values. This builds internal trust, external credibility, and enables our people to thrive through strong leadership, support, and a sense of belonging.

Partners who share our Purpose

To work together for better care.

We work with government, Parliament, stakeholders, and communities to share insight and learning—strengthening regulation, accelerating innovation, and building an effective, inclusive, and resilient care system.

The Case for Change

- The Policy context:
 - Dr Penny Dash reports
 - Professor Mike Richards' report
 - Care Provider Alliance report
 - NHS 10 Year Plan
- Independent IT review
- Feedback; both sector and colleague feedback have been invaluable

The last six months... and the next six months

Returned to specialist teams, strengthening subject-matter focus and practice.

Improved oversight and handling of information of concern, alongside clearer risk and prioritisation approaches.

Tackled system pressures by clearing stuck assessments and improving inspection frequency.

Strengthened regulation through improved registration processes for homecare providers and started piloting other sectors.

Redesigned and publication updates to the local authority assessment approach through consultation and collaboration.

Increase inspection activity and reporting.

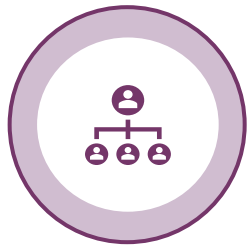
Introduce digital system improvements.

Drive quality improvement outcomes by 'returning to good' for adult social care.

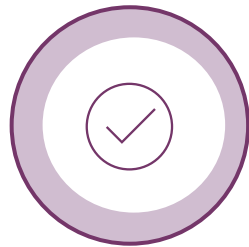
Piloting and testing our draft assessment frameworks.

Introduce phased portfolio management.

We are focused on rebuilding our trusted approach to regulation



Leadership
and expertise



Registration



Assessment
framework



Inspection and
technology



Working in
partnership

Chief Inspector priorities

1

Our expert teams

- Build a strong, cohesive team
- Supporting training, development and recruiting more expertise into our inspectorate
- Strengthening sector leadership

2

Our inspections

- Increasing volume, consistency and quality of inspections
- Developing a balanced inspection scheduling approach including digital providers
- Scheduling to include aged ratings, services registered but not rated

3

Our ability to drive change

- Streamline systems and processes
- Using test and learn pilots to develop new and innovative ways to understand quality of care
- Sharing innovative, and best practice

4

Our methodology

- Using our powers and processes to drive down health inequalities
- An assessment framework designed for primary and community care services
- Engaging and piloting our methodology

Piloting and testing

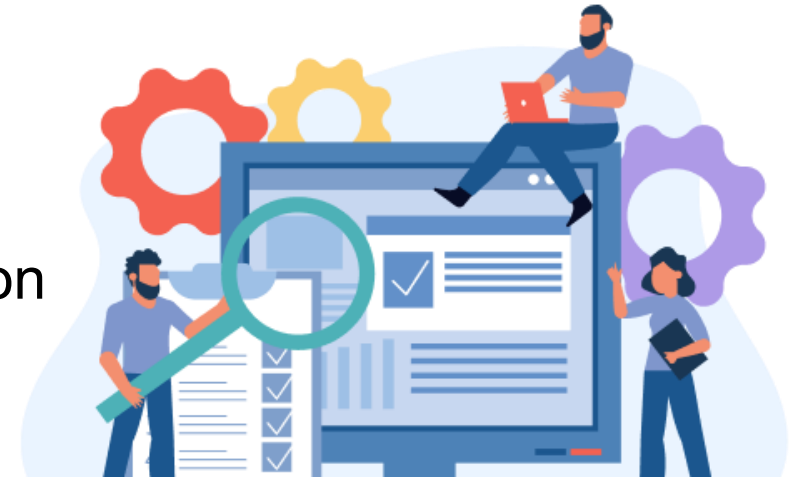
The new approach is key to restoring credible and consistent regulation, supporting providers to improve and giving assurance to the public.

We are running a structured programme of pilots and testing for the new assessment approach between June and October 2026, with a final evaluation in November.

Pilot assessments will run alongside with voluntary participation from providers. Pilot judgements will not affect regulatory status or rating.

The pilot sample reflects the diversity of the sectors we regulate, covering a range of services and settings.

We will use feedback from participating providers and inspection teams, together with survey responses, to understand how the approach works in practice and to refine it further.



>1,700 providers, national stakeholders and public representatives joined our online consultation events during winter 2025

>800 adult social care representatives

Nearly 500 primary and community care service representatives

>200 secondary care representatives

>200 mental health representatives

Across two in-person days, 150 participants, including providers and people with lived experience, contributed 175 feedback survey responses

Focus groups engaging people with lived experience
>30 attendees

Two online sector events with >200 attendees

Inspectorate conferences targeting each sector of regulation

Co-designed team-based tasks designed to draw out feedback from individual teams across regions

Drop-in sessions for inspectorate and registration colleagues - >350 attendees over three events

Snapshot: *Better care, better regulation*

We have done extensive engagement through our *Better care, better regulation* consultation which focused on:

1. How we are proposing to develop our frameworks and guidance for assessing providers
2. How we propose to change our methods for inspecting, assessing and awarding ratings to health and care services

We received over 1,700 survey responses across health and social care providers, stakeholders, CQC colleagues and people.

How we will continue to involve user voice

4 sector-specific focus groups in June, building on what we've heard through the consultation survey and wider engagement. We will involve a diverse range of people who use services, families and carers, including:

- Experts by Experience
- Public Engagement Network members
- Service User Reference Panel members
- People more likely to have a poorer experience of care and experience health inequalities

We will prioritise groups of people who are under-represented from the consultation.

We will focus on the key themes that emerged from people who use service throughout the consultation.



Strengthening our assessment frameworks

- Re-introducing sector-specific assessment frameworks
- Re-introducing clear descriptions of what each rating means in practice
- Fewer quality statements, reframed into key lines of enquiry (KLOEs)
- Reducing duplication
- User voice included throughout
- Rating at key question level
- Continuing to adopt the 'I statements'



Snapshot of what's coming later this year



Feedback

Co-design

Test

Strengthen

Implement

- Online feedback survey – **closed 12 June**
- Sector-specific user voice focus groups in June
- 4 online sector specific events with national stakeholders and providers
- Ongoing dialogue with stakeholders and providers
- Co-designing new digital and technology systems to support our whole regulatory process
- Engagement to test, strengthen and refine draft assessment frameworks from June to October, evaluating in November
- Continuing to test and strengthen our registration processes
- Implementing new assessment frameworks

Any questions?



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