

# Up-to-date, transparent assessments of quality

When we have completed initial assessments of integrated care systems, we will move to our ongoing assessment approach.

Under that approach, we will gather and assess evidence at different points in time. The associated quality statement scores, theme level scores, overall score and rating may also change.

We will also have flexibility to look at elements of the assessment framework on an ongoing basis and update scores and ratings when needed.

We will report on the history of our assessments, showing how integrated care systems have performed over time in terms of scores and ratings.

## Frequency of assessments

Our ongoing assessment model will be informed by risk. We use this risk-informed approach to decide where we focus our activity, how often we carry out assessment activity and what type of activity we use to gather evidence. This allows for both planned and responsive activity.

National priorities may also affect the evidence collection timeline and approach. The need to collect evidence may also be modified by the risk profile of an integrated care system.

If immediate risks are flagged (for example, information of concern) this will trigger the necessary action to collect evidence. We will prioritise which integrated care system to assess according to the significance of the change in quality.

Where our teams are prompted to review and potentially update what we know about an integrated care system, we will decide what evidence to gather to enable this. This will be guided by the minimum evidence requirements set out for integrated care systems.

Sometimes there will be a trigger to review multiple quality statements and evidence requirements. When this happens, we will take a planned and co-ordinated approach to this activity, including more intensive activity on site if needed.