



Memorandum of Understanding between the Care Quality Commission and Vitality



Memorandum of Understanding between the Care Quality Commission and Vitality **Health Insurance**

Introduction

1. This Memorandum of Understanding (MoU) sets out the framework to support the working relationship between the Care Quality Commission (CQC) and Vitality, in order to safeguard the wellbeing of the public receiving health and social care in England.
2. The working relationship between CQC and Vitality is part of the maintenance of a regulatory system for health and adult social care in England that promotes patient safety and high quality care.
3. CQC is the independent regulator of health and social care in England. Vitality is an insurance company providing a variety of private medical insurance products under which members receive funding for private medical treatment. The responsibilities and functions of CQC and Vitality are set out in Annex 1. Both organisations share a concern for the quality and safety of health and care services, and recognise that the development of models of health and care service delivery requires closer cooperation between the two organisations.
4. This MoU does not override the statutory responsibilities and functions of CQC and Vitality and is not enforceable in law. However, CQC and Vitality are committed to working in ways that are consistent with the principles of this MoU.

Principles of Co-operation

This MoU is a statement of principle which supports our focus on promoting patient and public safety and wellbeing. More detailed operational protocols and guidance can be developed as required.

5. CQC and Vitality intend that their working relationship be characterised by the following principles:
 - a. The need to make decisions which promote people's safety and high quality health and social care.
 - b. Respect for each organisation's independent status.
 - c. The need to maintain public and professional confidence in the two organisations and the regulatory process.
 - d. Openness and transparency between the two organisations as to when co-operation is and is not considered necessary and/or appropriate.
 - e. Addressing gaps in the regulatory framework.

Areas of Co-operation

6. The working relationship between CQC and Vitality involves co-operation in the following areas:
 - a. To act in the public interest by sharing data and information of concern relating to patient safety and all relevant aspects of quality of services to inform the regulatory functions of CQC through its inspection, registration and monitoring of providers of

independent healthcare. This may also include information relevant to NHS practice where clinicians interface between sectors.

Consideration of information should include but is not exclusive to:

- A patient safety risk
 - Evidence of a theme emerging which may be indicative of a wider issue across a hospital or provider group
 - Outcomes of Insurer visits to services
 - Poor clinical treatment or poor clinical outcomes for patients
 - A decision to suspend practising privileges or place a condition on a consultant's private practice at a hospital or other registered service.
 - Event or incident that has led to a particular procedure being suspended on a temporary or permanent basis. This may be related to clinician practice, equipment failure, staffing, high number of incident or one serious incident or other reason
- b. To be open and transparent when in receipt of information regarding the safety and quality of services received by their clients from services that are registered with CQC. The information is shared with CQC in a timely way through the recognised CQC routes. By safe, we mean people are protected from abuse* and avoidable harm. Concerns may also relate to financial and corporate issues such as fitness of staff including board members. *Abuse can be physical, sexual, mental or psychological, financial, neglect, institutional or discriminatory abuse
 - c. To share data that has been agreed on a regular and ongoing basis
7. Both organisations recognise that all processing of personal data (including the sharing of personal data) must be carried out in accordance with the Data Protection Act 1998 (or from 25 May 2018, in accordance with the General Data Protection Regulation). Both organisations agree that the sharing of personal data will be carried out in a manner consistent with the Data Sharing Code of Practice published by the Information Commissioner's Office.
 8. Both organisations recognise their responsibilities under the Freedom of Information Act 2000. Where either organisation receives a request under the Act for information received from the other, both organisations agree to take reasonable steps to consult on the proposed disclosure and the application of exemptions, but recognise that the responsibility for disclosure lies with the organisation that received the request.

Resolution of Disagreement

9. Where there is disagreement between CQC and Vitality, this should be resolved in the first instance at working level. If this is not possible, it may be referred through those responsible for the management of this MoU, up to and including Chief Executive of the CQC and Chief Executive of Vitality who will then be jointly responsible for ensuring a mutually satisfactory resolution.

Duration and Review

10. This MoU commences on the date of the signatures below. It is not time limited and will continue to have effect unless the principles described above need to be altered and/or cease to be relevant.
11. This MoU will be reviewed every 2-3 years but may be reviewed at any time at the request of either party. Any alterations to the MoU will, however, require both parties to agree.
12. Both organisations have identified a person responsible for the management of this MoU (known as 'Relationship Leads') and their contact details are set out in Annex 2. Relationship Leads will liaise as required to ensure that:
 - a. This MoU is kept up to date;
 - b. They identify any emerging issues in the working relationship between the organisations;
 - c. They resolve any questions that arise in regards to the interpretation of this MoU.

Signatures



Sir David Behan CBE
Chief Executive
Care Quality Commission
Date:



Dr Keith Klintworth
Deputy CEO
Vitality Health
Date:

Annex 1: Responsibilities and functions of CQC and Vitality

Care Quality Commission

CQC is the independent regulator of health and adult social care in England. Its purpose is to make sure health and care services provide people with safe, effective, compassionate, high-quality care and to encourage them to improve.

CQC does this by registering, monitoring, inspecting and regulating hospitals, adult social care services, dental and general practices and other care services in England, to make sure they meet fundamental standards of quality and safety. We set out what good and outstanding care looks like and we make sure services meet these standards which care must never fall below.

CQC reports publicly on what it finds locally, including performance ratings for care providers, to help people choose care and encourage providers to improve. It also reports annually to Parliament on the overall state of health and adult social care in England.

Vitality-

Vitality facilitate the delivery of health and wellbeing services to its insured population, its core purpose is to make people healthier and enhance and protect their lives.

Vitality monitor the quality of care members receive via their Vitality policies via engagement with their insured population and the partners that deliver services to our members to ensure the highest clinical standards in the care provided.

Vitality engages with all industry regulators (e.g. CQC, GMC and PHIN) to drive improvement in the monitoring and measurement of care quality in the private health sector.

Annex 2 Contacting CQC

There are various ways in which information about a service/hospital/location/provider can be shared with CQC. To ensure information reaches the correct inspector for the location it is important to include the following detail if known:

- Name of location e.g. hospital/clinic/service
- Address
- CQC location ID
- Name of provider
- CQC provider ID

Please **do not** send emails direct to an inspector, all information is logged centrally and it will be assigned to the location and the relevant inspector.

Information can be shared by:

- Calling the National Customer Service Centre (NCSC) on 03000 616161 or by e mail E mail to enquiries@cqc.org.uk

Annex 3: Contact details for all parties

Care Quality Commission 151 Buckingham Palace Road London SW1W 9SZ 03000 616161	Vitality Health 4th Floor 70 Gracechurch Street London EC3V 0XL
--	--

Named contacts between CQC and Vitality UK are as follows:

Relationship Leads: (First points of contact for any specific matters relating to this MoU)		
	Care Quality Commission	Vitality
Name:	<u>Heidi Smoult</u>	<u>Christopher Gilbert</u>
Position:	<u>Deputy Chief Inspector</u>	<u>Head of Hospital Services</u>
Email:	<u>Heidi.smoult@cqc.org.uk</u>	<u>chris.gilbert@vitality.co.uk</u>
Tel:		

Chief Executives (Internal escalating policies should be followed before referral to Chief Executives)	
Sir David Behan CBE Chief Executive David.behan@cqc.org.uk	Neville Koopowitz Chief Executive officeoftheCEO@vitality.co.uk

Other Useful Contacts: (e.g. Media Team, Legal Team etc.)		
	Care Quality Commission	Vitality
Name:		<u>Dr Ali Hasan</u>
Position:		<u>Clinical Risk Director</u>
Email:		<u>ali.hasan@vitality.co.uk</u>
Tel:		