



Business plan

2020-2023



Contents

Who we are and what we do

Introduction by Peter Wyman, Chair,
and Ian Trenholm, Chief Executive

Priorities and objectives

Underpinning programmes and projects

What will we deliver and what will we measure

Business planning beyond 2021

Risks

Budget

The CQC board, executive team and directorates

Annex - Objectives and key performance indicators

Who we are and what we do

Who we are: The Care Quality Commission (CQC) is the independent regulator of health and adult social care in England.

OUR PURPOSE

We make sure health and social care services provide people with safe, effective, compassionate, high-quality care and we encourage care services to improve.



OUR ROLE

Register	Monitor, inspect, rate	Enforce	Independent voice
We register health and adult social care providers.	We monitor and inspect services to see whether they are safe, effective, caring, responsive and well-led, and we publish what we find, including quality ratings.	We use our legal powers to take action where we identify poor care.	We speak independently, publishing regional and national views of the major quality issues in health and social care, and encouraging improvement by highlighting good practice.



Introduction

Our business plan sets out four overarching priorities for CQC over the next three years. However, at the time of writing we are in the middle of the first stages of the Covid-19 emergency. It is hard to predict with any certainty exactly how long this will last, or the long-term impacts it will have.

We do know, though, that our core purpose remains to offer the public assurance around the safety of health and social care, and to promote improvement. That purpose remains as true today as it has ever been, and we expect that constancy of purpose to endure.

However, the way we go about our work will be quite different in future years.

Our business plan always foresaw a changed way of working, recognising that we need to deliver our core business while transitioning to a more intelligence-driven and digital future, regulating across providers who work much more collaboratively across systems.

This plan, therefore, represents what we want to achieve over the next three years. Predicting the timing, and exact sequencing, is hard to do in the current climate.

To that end, this business plan should be seen as a baseline planning document – something that sets out a direction of travel, with clear ambitions but with changes in detailed

implementation that will be needed over the coming few months as we assess the full impact and implications of Covid-19.

Priority 1: Deliver our core business

We will continue to improve our performance in **delivering our core business** and how effectively we work as a joined-up organisation. This means delivering better performance as an organisation but also encouraging improvement in a challenging health and social care environment. These challenges include the developing position relating to Coronavirus.

Priority 2: Develop our regulation now

We are **building the foundations**, putting in place the systems, technology and culture we need to make transformation a reality.

- Introducing technology that connects us easily across CQC and frees up time to focus on our core purpose.
- Designing user-centred digital services to support simpler inspection reporting and provider notifications, and the automating of some aspects of enforcement.
- Creating the powerful tools and platform that will transform how we use insight to have an up-to-date view of quality and predict risk.
- Developing a culture of inclusion and mutual support.
- Using our insight, our relationships and our tailored interventions to drive improvement.

We are **adapting and evolving** our regulation, updating how we work to keep people safe and to adapt to changes in health and care that are happening now.

- Developing the underpinning skills and processes to make sure transformation is implemented well.
- Creating a nurturing leadership development and management programme, to support us all to be our best.
- Transforming how registration looks and feels, to make it a simpler, faster and more consistent service.
- Responding to changes in health and social care that are happening now, and adapting our methods, guidance and approach to make sure we protect people.

Priority 3: Develop CQC of the future

We will develop, consult on and publish a **new strategy** for CQC from 2021. This will include:

- Developing an innovative new way of regulating care that meets the needs of people who use services and is tailored to the provider.
- Designing effective and collaborative new products and services with people, providers and the health and care system – always focused on user needs.

- Getting to the heart of changes in health and care, developing approaches that protect people’s welfare and human rights.

Priority 4: Equip our people and organisation to deliver our purpose now and in the future

- We will make CQC a **great place to work** – starting to deliver against of our new people plan for all our employees.
- We will meet our commitments as a sustainable organisation.
- We will demonstrate that we are a listening, transparent organisation that will address both where we need to improve our regulation to be effective wherever care is provided, but also where our people have identified that we need to improve how we manage and organise ourselves.



Peter Wyman CBE DL
Chair



Ian Trenholm
Chief Executive

COVID-19 – a new phase of regulatory activity

From 16 March 2020 CQC began a new phase of our regulatory activity in response to COVID-19. With the Secretary of State's approval, we will move from conducting routine inspections to focusing on more responsive and targeted ways of supporting providers to keep people safe.

We have a responsibility to make sure that all services across health and social care are safe – but we are also acutely aware of the requirement to balance this duty with the need to allow providers to focus on delivering care and not add to the pressure they are already facing.

Our primary objectives during the period of the COVID-19 pandemic will be to support providers to keep people safe, and to provide government, decision-makers, and local and national partners with an accurate picture of pressures being faced on the ground to inform national response and planning.

Routine inspections to cease

As a result, we stopped routine inspections from Monday 16 March. We are moving towards a new way of providing assurance to the public, government and parliament on the safety of services. It may be necessary to still use some of our inspection powers in a very small number of cases when we have clear reports of harm, such as allegations of abuse. However, inspections (and provider information requests for health services) will not be conducted in their present form during the period of the pandemic.

In adult social care, in the absence of a single national oversight body, CQC will act as a support for registered managers – our inspection team will be there to provide advice and guidance to the providers throughout this period.

We are urgently developing an interim targeted methodology which will enable us to provide assurance on safety and risk during the outbreak, and for a period of time afterwards. This revised methodology will shift the emphasis from inspection to a broader regulatory approach which can be delivered remotely if necessary.

We are developing this at pace and will be talking to providers, stakeholders and the public to ensure that we can continue to use our unique oversight of the health and social care system to help government target support most effectively. The role of regulation will change fundamentally during this period – acting as a source of intelligence and conduit between health and social care will be an important part of what we do for the next few months.

As a result of this, the core business sections of this business plan will be adapted accordingly. We are of course hopeful that we will be able to resume normal regulatory activities during the period covered by this business plan and will update our plan in due course.

Our priorities and objectives for 2020-23

Our purpose is to make sure health and social care services provide people with safe, effective, compassionate, high-quality care and we encourage care services to improve.

Our values are Excellence Caring Integrity Teamwork

Our Strategic priorities are:

2016-21

- Improve our efficiency and effectiveness
- Encourage improvement innovation and sustainability in care
- Deliver an intelligence driven approach to regulation
- Promote a single shared view of quality

2021-26

- Our future strategic priorities

We deliver our purpose, values & strategic priorities through
4 business priorities and 10 objectives:

Priority 1

Deliver our core business

We deliver an effective and efficient Registration service
We use intelligence to regulate registered services
We use enforcement when we need to keep people safe
We provide timely information that is useful for the public and providers
We embed work to improve our consistency of regulation

Priority 2

Develop our regulation now

We develop our regulation and our organisation through a programme of transformation and quality improvement

Priority 3

Develop CQC of the future

We develop, consult on and publish CQC's Strategy for 2021-26

Priority 4

Equip our people and organisation to deliver our purpose now and in the future

We make CQC a great place to work
We are financially sound, and we resource our work effectively
We have effective digital services day to day

Underpinning programmes and projects

Priority 1

- ✓ Embedding quality improvement skills across the organisation

Priority 2

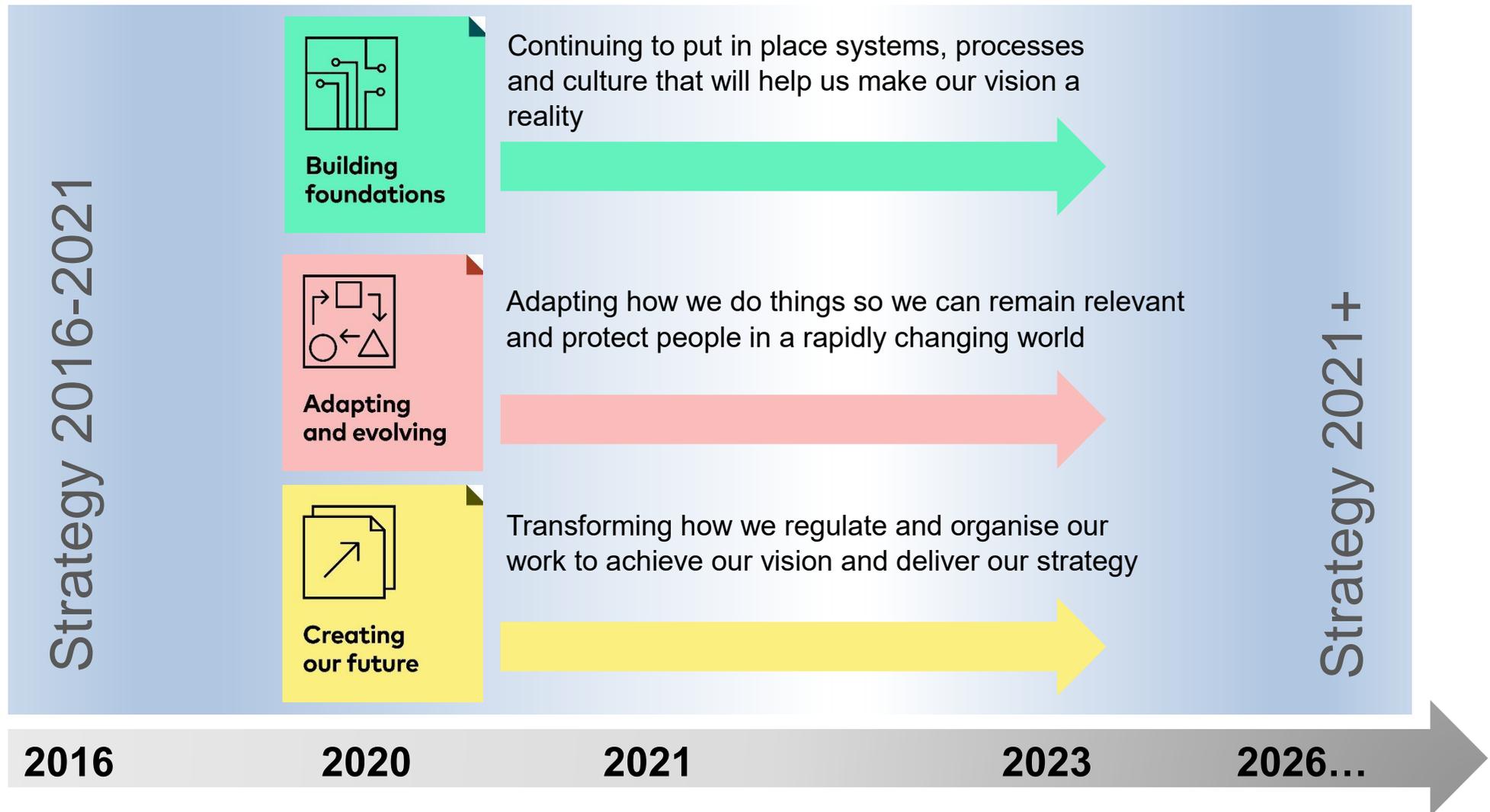
- ✓ Intelligence Driven Enablers Programme

What will we deliver and what will we measure

1. Deliver our core business	2. Develop our regulation now	3. Develop CQC of the future	4. Equip our people and organisation
<p>We will:</p> <ul style="list-style-type: none"> Improve timeliness and quality of our registration Deliver a risk-based inspection programme, and respond to evidence of increased regulatory risk Use enforcement to keep people safe Provide timely useful information for public and providers Embed work with our people to improve our consistency and give us improved regulatory assurance 	<p>We will:</p> <ul style="list-style-type: none"> Deliver a change programme that results in clear benefits and modern, efficient regulation that our people will operate that is relevant to the health and social care of now and the future. Improve our efficiency through a Quality Improvement programme, that engages and involves our people in determining and implementing changes 	<p>We will:</p> <ul style="list-style-type: none"> Agree a draft new Strategy which will set out our future vision, why it is the right one, and clear plans to implement it Engage with stakeholders, the public and our own people about it Publish Strategy for consultation Publish final Strategy and Business plan 	<p>We will:</p> <ul style="list-style-type: none"> Begin to deliver a People plan: Leadership capability and expectations Reward and recognition Employee talent management, career Launch diversity and inclusion strategy and implementation plan Use employee insight well Line management capability Deliver effective digital services day to day
<p>Why is this important?</p> <p>If we fail to accurately identify risk in health and social care regulated settings or if our operating model is not effectively implemented then our credibility as a regulator will be undermined, and we will not ensure the quality of care for people who use services.</p>	<p>Why is this important?</p> <p>If we fail to adapt our regulatory model to the pace of change in health and social care provision then we will be unable to ensure the quality of care for people who use services.</p>	<p>Why is this important?</p> <p>If our new Strategy is not considered to be credible and appropriate in the changing context of health and social care, then we will not be able to realise our vision of a relevant, effective, regulator.</p>	<p>Why is this important?</p> <p>If our people's engagement does not improve or further deteriorates, then we will lose their trust and therefore willingness to move the organisation forward in line with Purpose, Strategy and programme of changes to improve regulation for the public.</p>
<p>How will we measure success?</p> <ul style="list-style-type: none"> Services inadequate or requires improvement 90% inspected within published frequency Concerns dealt with within an improving median time (to be developed) Improving report publication times 	<p>How will we measure success?</p> <ul style="list-style-type: none"> Measure delivery of our programme to time, cost and quality. Measure % of benefits that are realised. Number of QI improvements made and benefits they deliver 	<p>How will we measure success?</p> <p>We will measure the reach of our new Strategy content across all channels, and how many opportunities people have to contribute to it</p>	<p>How will we measure success?</p> <ul style="list-style-type: none"> We will measure through our pulse survey whether our people feel more engaged in shaping our future and more committed to our future direction Improved system availability and response times to issues

Business planning beyond 2021

Our plan sets out the key objectives and measures for delivering our core business, developing our regulation now, developing CQC for the future and equipping our people and organisation. Many of the investments we are making now will continue into 2022 and 2023. Our business plan will be reviewed in Q3 of 2020/21, and a new detailed plan published for 2021-23 in April 2021, which will reflect the new Strategy we will have published at that point.



Risks

CQC manages and reports on the strategic and high-level risks to the delivery of its Strategy. These reports and the risk register are published on our website. The table below sets out these risks and a summary of the mitigations, alongside the business plan priorities to which they relate. It shows new risks we have added relating to developing a Strategy that has wide stakeholder recognition and a support; a risk relating to not being a sustainable organisation; as well as development of new mitigations relating to existing risks including those relating to the effectiveness of our operating model in all settings; change and improvement related ones, including digital change and our people risks.

	External	<i>Risk</i>	<i>Mitigation</i>
1	Effective regulator RGC/ACGC	If we fail to accurately identify risk in health and social care regulated settings then our credibility as a regulator will be undermined, and we will be unable to ensure the quality of care for people who use services.	Develop a new assessment framework; Implement changes under our Improving Regulation Today project; Implement changes following Whorlton Hall
2	Pace of change RGC	If we fail to adapt our regulatory model to the pace of change in health and social care provision then we will be unable to ensure the quality of care for people who use services.	Develop our approach to Whole system regulation, innovative and technology-based care
3	Funding Health and Adult Social Care RGC	If provision of health and adult social care services is not adequately funded, then market could become pressured to the point where failure is significant – and this will increase our operating costs.	Monitor and where appropriate escalate to DHSC
4	UK transition from the EU	If during or post the transition period, the trade deal affects access of EU nationals to UK employment and the availability of medical and non-medical consumables, then our methodology and approach to regulatory safety could be impacted.	Monitor and where appropriate escalate to DHSC
5	Coronavirus COVID-19	<p>If services we regulate need to care for significant numbers of people with the virus, and with staff sickness, then people could be at risk of receiving poor care</p> <p>If our own people are unwell with the virus, then we will not be able to carry out our regulatory function.</p> <p>If CQC changes its regulatory approach in the pandemic (for instance to support more and enforce less), then re-establishing its traditional role with providers, and our own people, may be a challenge.</p>	<p>Share what we know through our work about the impact on providers with DHSC</p> <p>Implement mitigations including adapting our regulatory activity to responsive and targeted ways of supporting providers to keep people safe. Implement Government advice on minimising risk of infection both within CQC and between CQC and services.</p>

		If the organisation and delivery of health or social care changes permanently as a result of the experiences of the pandemic, CQC will need to adapt accordingly	
--	--	--	--

Priority 1 Deliver our core business

6	Effectively regulating RGC/ACGC	If our operating model is not effectively implemented then people who use services could be at risk because poor quality care is not identified, or we have not had an impact in encouraging improvement.	Quality improvement programme Evolving model
---	------------------------------------	---	---

Priority 2 Develop our regulation now

7	Change delivery	If the change programme – strategic and tactical - is not fully funded and effectively implemented to deliver anticipated benefits and outcomes, then we will not be able to realise the full vision of our strategy now and in the future.	Change programme management Quality Improvement programme Engagement with our people
8	Capacity for change	If the organisation is unable to manage the transition between our current model of regulation and the future, then we will be unable to maintain the confidence of our staff and stakeholders	Effective change and business planning, engagement through ET and SLT30 leadership

Priority 3 Develop CQC of the future

9	Our strategy	If our 2021-26 Strategy is not considered by stakeholders to be credible and appropriate in the changing context of health and social care, then we will not be able to realise our vision of a relevant, effective, regulator.	Effective engagement, consultation planning, and delivery. Create an intelligence architecture to deliver an intelligence led approach
---	--------------	---	--

Priority 4 Equip our people and organisation to deliver our purpose now and in the future

Our people

10	People engagement and well-being	If our people’s engagement does not improve or further deteriorates, then we will lose their trust and therefore willingness to move the organisation forward in line with Purpose, Strategy and programme of changes to improve regulation for the public. This includes the potential challenges for well-being from the impact of COVID 19, including home working, potential for isolation etc.	People plan COVID 19 planning and implementation of initiatives to communicate and keep in touch; ensure safe appropriate equipment.
11	Capacity and capability	If we are unable to transition our people to our future way of working, or attract and retain the right people with the right skills then we will not be able to deliver our core business and programme of change and improvement.	People plan COVID 19 planning and implementation of initiatives to communicate and keep in touch

Our costs

12	Our funding	If we do not have a robust funding strategy for provider fees and grant in aid, we risk not being able to cover our operating costs	Financial strategy
----	-------------	---	--------------------

Our IT and information

13	Digital foundations	If we do not successfully deliver our future IT services programme, which is to secure our future digital services provider then we will not be able to operate.	Digital foundations programme
14	Business continuity	<p>If we are unable to deliver our IT technologies and systems due to Cyber security attacks, then critical work will not be delivered or data security breached.</p> <p>If we are not protecting or securely managing our information, then loss of personal/ confidential data will cause harm/distress to individuals; and people are unwilling to share information with CQC.</p> <p>If we fail to plan to prevent or mitigate a major health and safety incident involving our staff then they will be at risk of severe harm or worse.</p>	<p>Business continuity planning and testing</p> <p>Information governance.</p> <p>Expanded Business continuity planning and testing due to COVID 19;</p>

Budget

	Budget 2020/21 £m	Budget 2019/20 £m	Budget 2018/19 £m
Pay	176	176	173
Non-pay	54	50	50
Expenditure	230	226	223
Depreciation	8	10	8
Total net expenditure	238	236	231
Fee income	-206	-208	-201
Funded Activity	-2	-2	0
Grant in Aid	-24	-25	-27
Non-cash	-1	-1	-3
Reserves	-5	0	0
Total funding	-238	-236	-231

Budgets are subject to final confirmation with the Department of Health and Social Care.

The CQC Board, Executive Team and Directorates

Chair and Board Peter Wyman					
Chief Executive Ian Trenholm					
Engagement , Policy & Strategy Directorate	Adult Social Care Directorate	Hospitals Directorate	Primary Medical Services and Integrated Care Directorate	Regulatory Customer & Corporate Operations Directorate	Intelligence and Digital Directorate
<p><i>Chief Executive, Ian Trenholm</i></p> <ul style="list-style-type: none"> Engagement Policy & Strategy 	<p><i>Chief Inspector of Adult Social Care</i></p> <p>Kate Terroni</p> <ul style="list-style-type: none"> North Region Central Region South Region London Region Market Oversight Corporate Providers 	<p><i>Chief Inspector of Hospitals</i></p> <p>Prof Edward Baker</p> <ul style="list-style-type: none"> Hospitals Inspection Mental Health Inspection Mental Health Act Operations 	<p><i>Chief Inspector of PMS & Integrated Care</i></p> <p>Dr Rosie Benneyworth</p> <ul style="list-style-type: none"> General practice Urgent Care 111 and Out of Hours Services Independent Doctors & clinics including online Medicines optimisation Dental services Children, Health and Justice Defence Medical Services 	<p><i>Chief Operating Officer</i></p> <p>Kirsty Shaw</p> <ul style="list-style-type: none"> Registration operations Registration and Regulatory Assurance Customer Support Services People Improvement, Implementation and Evaluation Transformational change Finance, Commercial Workplace & Performance Governance & Legal Services 	<p><i>Chief Digital Officer</i></p> <p>Mark Sutton</p> <ul style="list-style-type: none"> Intelligence Digital IT
FTE 190 (approx.)	FTE 766 (approx.)	FTE 586 (approx.)	FTE 345 (approx.)	FTE 908 (approx.)	FTE 307 (approx.)
Budget Pay £10m Non-pay £5m Total: £15m	Budget Pay £43m Non-pay £3m Total: £46m	Budget Pay £37m Non-pay £4m Total: £41m	Budget Pay £22m Non-pay £2m Total: £24m	Budget Pay £38m Non-pay £25m Total: £63m	Budget Pay £15m Non-pay £14m Total: £29m

Annex: Objectives and key performance indicators

Priority 1: Deliver Our Core Business

1.1 We deliver an effective and efficient Registration service

We will improve the performance of the Registration service, and the quality and consistency of decisions through our matrix working

<p>Timeliness: Understand and improve the time taken to reach robust decision on a registration application</p>	<p>Simple applications improvement of TBC per month based on baseline.</p> <p>Complex applications improvement of TBC per month based on baseline</p>
<p>Quality: Monitor the quality and consistency of our decisions in granting or refusing registration applications</p>	<p><5% of new provider receive a risk-based inspection within 6 months from registration date</p> <p>>80% of new providers are rating good or outstanding within 12 months</p> <p>>90% of representations upheld</p> <p>>90% of first tier tribunals dismissed</p>
<p>Risk: Appropriate action will be taken against providers that are found to be unregistered in a timely manner</p>	<p>>90% within 8 weeks</p>

1.2 We use intelligence to regulate registered services

We will deliver a risk-based inspection programme whilst responding to evidence of increased regulatory risk

<p>Inspection Frequency: Services rated inadequate and requires improvement will be inspected within their published timing frequency</p>	<p>>90%</p>
<p>Risk: Inspections undertaken in response to intelligence and risk are prioritised</p>	<p>No target – Monitor volume of inspections due to risk compared to scheduling</p>

Safeguarding: Whistleblowing and information of concern will be responded to and used appropriately	Safeguarding Alerts < 1 day Safeguarding Concerns actions taken in < 5 days Whistleblowing – measure will be developed to track improvement against the median time to respond to all concerns
--	--

NOTE: During the 2020/21 business year we will not be carrying out a full inspection of as high a proportion of some services according to their existing rating as we have previously. To ensure that we maintain strong oversight of services where we know improvement is needed, we will continue to prioritise services that are rated Inadequate and Requires Improvement for inspection within the timelines in our current guidance. This means that during 2020/21, services that are rated Good or Outstanding will be less likely to receive a full inspection within the timeframes indicated in our current guidance, unless we have reason to believe that the quality of the service has changed.

Similarly, some NHS trusts (especially those rated Good or Outstanding) may take longer to receive a well-led inspection at the trust-wide level where we do not believe an inspection is immediately required.

1.3 We use enforcement when we need to keep people safe

We will improve the consistency of the enforcement decisions we take as an organisation and criminal enforcement we take will be robust, timely and properly recorded.

Criminal: Improve time taken at each stage of the criminal enforcement process (evidence gathering, investigation and listed for trial)	Baseline criminal enforcement times and measure improvement
Urgent Action: Where necessary to undertake urgent action, we will do so within 3 days	70% minimum and improving

1.4 We provide timely information that is useful for the public and providers

We will publish timely information to the public whilst reviewing our content and structure of inspection reports and improve our publication timeliness

Report Writing: Improve time taken at each stage in the report writing process (draft, quality audit and publication)	2019/20 baseline and improving
Independent Voice Reporting: Timely publication of independent voice products	Annual Report and Accounts 2019/20 – July 2020 Controlled Drugs annual report 2019 – July 2020 State of Care 2019/20 – October 2020 IRMER annual report 2019/20 – October 2020 Mental Health Act Annual Report – December 2020

1.5 We embed work to improve our consistency of regulation

We will implement a new model for regulatory assurance in CQC and through our QI projects improve the consistency of regulation across and within our Directorate teams.

Consistency: Improve consistency in our regulation through a supportive competency and assurance package including regulatory skills programme, observed practice and other agreed methods.	TBC% of inspection workforce having completed in 2020/21
Rating Change: Monitor the volume of reports where factual accuracy challenge has resulted in a change of rating due to evidence presented	Monitor variance against 19/20 as a benchmark

Priority 2: Develop our regulation now

2.1 We develop our regulation and our organisation through a programme of change and quality improvement

We will deliver clear benefits through our portfolio of change programme and improve our efficiency through delivery of a Quality Improvement programme

Change Delivery: Our change programme is delivered on time, to cost and with quality outcomes	Monitor % delivered to time, cost and quality
Benefits: Deliver agreed business benefits realisation plans	% benefits realised (project/programme & aggregate level)
QI: Through quality improvement projects we will deliver cash and non-cashable benefits	Number of QI improvements Number complete Benefits realised

Priority 3: Develop CQC of the future

3.1 We develop, consult on and publish CQC's strategy for 2021+

Our strategy will set a clear future direction for the organisation and we will actively engage the public and other stakeholders

Strategy: Deliverables about the strategy are on track	Board agree draft consultation document Jul 20 Publish draft strategy for consultation Sept 20 Publish final strategy and business plan Mar 21 Numbers of people seeing strategy content (all channels) Number of opportunities to contribute all audiences
---	---

Priority 4: Equip our people and organisation to deliver our purpose now and in the future

4.1 We make CQC a great place to work We will start delivering against of our new people plan for all our employees, and transition well to our new office locations in London and Nottingham. We meet our commitments as a sustainable organisation.	
Working for CQC: CQC colleagues would recommend CQC a great place to work	% improvement in scores during the year from pulse survey
Turnover: our level of turnover is tracked and understood	Monitor variance and outliers
Sickness: remains within target and is monitored for variance against directorates	Monitor variance and outliers
Sustainability: monitor statutory requirements and improve our performance	CO2 emissions against government target
4.2 We are a financially sound organisation and resource our work effectively We will better understand and respond to internal resource requirements and will monitor our finances to ensure we have a clear understanding of our position	
Budget: The financial position for capital and/or revenue is within 2% of budget	On budget or variance of <2%
4.3 We have effective digital services day to day Our digital stability and operational performance will continually improve, and we will implement a new and improved supplier contract	
Systems: Availability of systems is improved (Website, CRM, Network Connectivity, Office 365, Outlook, OBIEE, Cygnum)	% of availability improved
IT Response: Incidents raised with our service desk will be resolved in an improved time	Monitor monthly % of improvement