# ADULT SOCIAL CARE & HOUSING OVERVIEW AND SCRUTINY COMMITTEE

Subject:		Care Quality Commission: Consultation on Assessing Quality		
Date of Meeting:		04 March 2010		
Report of:		The Director of Strategy and Governance		
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Wards Affected:	All			

## FOR GENERAL RELEASE

## 1. SUMMARY AND POLICY CONTEXT:

- 1.1 The Care Quality Commission (CQC) is the body responsible for regulating, inspecting and assessing health and social care commissioners and providers in England.
- 1.2 The CQC is currently undertaking a national consultation, seeking views on how it might best assess the quality of commissioners and providers of health and social care services.
- 1.3 There is an opportunity here for the Adult Social Care and Housing Overview & Scrutiny Committee (ASCHOSC) to submit its views to the CQC. However, this consultation ends in April (i.e. before the next scheduled ASCHOSC meeting). Therefore, if members do intend to make a submission, they may wish to authorise a working group of members to make comments on behalf of ASCHOSC.
- 1.4 A summary of the CQC consultation document is attached as **Appendix 1** to this report.

# 2. **RECOMMENDATIONS**:

- 2.1 That members:
- (1) note the contents of this report and determine whether to respond to the CQC consultation on assessing quality;

And, if members do wish to respond to the consultation:

- (2) agree that a working party of ASCHOSC members be appointed to make comments on ASCHOSC's behalf;
- (3) determine which members should sit on the working party.

# 3. BACKGROUND INFORMATION

- 3.1 The CQC was established in 2009 to regulate all publicly funded health and social care services in England. The CQC replaced separate regulatory regimes for health and social care services (the Healthcare Commission and the Commission for Social Care Inspection respectively).
- 3.2 **Appendix 1** to this report contains details of the current CQC consultation on how best it should assess the quality of commissioners (Local Authorities and Primary Care Trusts) and providers (public sector providers, but also the independent sector and '3<sup>rd</sup> sector' provision).
- 3.3 The CQC consultation ends in April 2010. In practical terms this means that, should ASCHOSC wish to make a submission, members would either have to agree on the content of their submission at the 04 March committee meeting, or (perhaps more realistically) agree to empower a working party of ASCHOSC members to make comments on behalf of the whole committee.

# 4. CONSULTATION

4.1 No formal consultation has been undertaken in preparing this report.

# 5. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

5.1 There are none for the council.

#### Legal Implications:

5.2 The recommendations at 2.1 above are proper to be agreed by ASCHOSC. If the committee decides to form a working party, this should operate on the same basis as an ad hoc scrutiny panel, provision for which is made in Part 6.1, paragraph 5 of the council's constitution.

Lawyer consulted: Oliver Dixon Date: 19 February 2010

### Equalities Implications:

5.3 None identified. If members do choose to make a submission to CQC, they may wish to consider equalities issues when formulating their comments.

## Sustainability Implications:

5.4 None identified.

## Crime & Disorder Implications:

5.5 None.

## **Risk and Opportunity Management Implications:**

None identified. 5.6

### Corporate / Citywide Implications:

5.7 CQC regulates the commissioning and provision of health and social care services, including Local Authority commissioning/provision. It is therefore in the council's interest that the CQC's assessment regime is robust, fair and effective, so as to ensure that it provides the best possible regulation and advice.

# SUPPORTING DOCUMENTATION

### **Appendices:**

1 Summary of CQC consultation on assessing quality

### **Documents in Members' Rooms:**

None

### **Background Documents:**

None