Message from Ian Trenholm on corornavirus (COVID-19) response

COVID-19 new phase of regulatory activity

Colleagues

I wanted to let you know that from today we have decided to begin a new phase of our regulatory activity in response to COVID-19. Subject to 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 to 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 will be stopping routine inspections from today Monday 16 March. Instead we will be 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, and will be implementing the following:

- Continuing the use of provider information returns (PIRs). However, we will
 not penalise providers for the late return of PIRs
 - Sharing the information we collect with local authorities and clinical commissioning groups in order to reduce reporting burden

• Using PIRs as a key way to learn about the impact of COVID-19 on providers' operational business and using this information to raise concerns and prompt action from government.

Developing our interim regulatory methodology

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.