

Open letter to Matt Hancock, Secretary of State for Health and Social Care and Helen Whately, Minister for Care

26 August 2020

Dear Ministers

RE: CQC inspectors must have regular routine testing when they conduct on-site inspections

The National Care Forum is writing to you to highlight the huge level of concern raised over the recent announcement that CQC inspectors do not need to access regular testing when they conduct on-site inspections of care services. This is an extraordinary decision and must be reversed as a matter of urgency. The rationale provided by the Department of Health and Social Care (DHSC) that CQC inspectors do not meet the criteria for needing routine weekly testing is simply not credible.

This decision to exclude CQC inspectors from weekly testing prior to visiting care settings to inspect them creates several very unhelpful and very counter-productive impacts:

- **It contradicts the current DHSC policy to limit the spread of COVID:** DHSC has a specific policy intent to minimise the movement of all staff within homes, backed up by clear guidance on how to do so and a £600m Infection Control Fund to support care homes to make this happen. It has also instigated a whole-home testing regime designed to test all staff within homes, regardless of role. It seems extraordinary to decide not to test CQC inspectors, who will spend a number of hours on-site in care homes, moving between different groups of residents and staff, and who will be visiting potentially multiple homes and therefore have the potential to transmit the virus as part of their visits, both within care homes and between care homes.
- **It undermines care homes' ability to manage visitors in a COVID-19 safe way:** care homes are extremely anxious about letting any external visitors in as part of their infection prevention and control (IPC) measures to avoid COVID-19. To date, family visitors have either been in the garden, or accompanied on their visits into homes directly to be with the relative they are visiting, to minimise contact with other residents and staff, while visits themselves have been time limited. Care home visitors have to undergo a screening process, have their temperature tested, declare their COVID-19 status as far as they know it and share their contact details for Test and Trace. Other external visitors are being kept to a minimum for essential purposes.
- **It is fundamentally inconsistent with care homes' existing infection prevention and control measures and policies:** Care homes have worked extraordinarily hard to ensure they have stringent and effective infection prevention and control measures in place, based on the emerging evidence and knowledge of COVID-19. Care homes have robust risk assessments in place to manage and limit the flow of people in and out of their settings and regular COVID-19 testing of those routinely working in care homes is a key part of these IPC measures to prevent inadvertent asymptomatic transmission of the virus. CQC inspectors routinely work in care homes too – so why exclude them from regular routine testing?

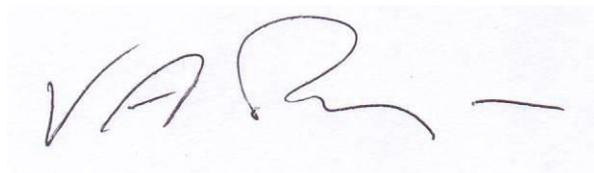
- **It presents very significant credibility challenges for the regulator:** the CQC is the body responsible for ensuring that the significant infection prevention and control measures and regular testing set out within government policy for care homes are in place and being used effectively, and yet that same body is potentially presenting an IPC threat to those settings by virtue of the lack of regular testing for their staff working in care homes. The irony of this is not lost on care providers or families of those receiving care. Families and friends will quite rightly wonder why CQC inspectors are not being tested prior to entering any care homes.

We welcome scrutiny and oversight by the regulator and we all want the CQC to be able to regulate effectively. However, this must include routine regular testing for those inspectors tasked with conducting physical on-site inspection visits to care settings.

We recognise that testing capacity is always part of these decisions, but it seems likely that it will be a relatively small number of CQC staff who will be front facing and going into homes, so including them in routine regular testing will not have a significant impact on capacity.

We look forward to an immediate reversal of this decision.

Yours sincerely



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Please note that this letter is public, and will be shared more widely.