

The retirement of QOF Management Standard 9

The government has now published the Quality and Outcome Framework for 2013/2014* and confirmed that the indicator relating to carers, Management Standard 9 (MS9) is to be removed, along with the rest of the organisational domain**.

Although it was acknowledged that MS9 was less than perfect and needed to be made more robust, it nevertheless planted a flag where carers were concerned and offered those working in GP liaison something of a lever when approaching GP practices. Needless to say, we are very disappointed, not least because, like many of you across the network, we expressed our concern about how this would affect carers when we responded to the NICE QOF consultation in February. Unfortunately, none of these concerns has been addressed and we consider it likely that from April 1st 2013, GP practices will be less inclined to identify carers than previously – with the notable exception of those incentivised by the indicator relating to carers of patients with dementia.

What about the Care Quality Commission?

We can now confirm that the CQC will not be systematically performance managing GP practices on the identification and referral of carers. This was clarified last week when, having looked at the government's response to the consultation on the GP contract changes*** we contacted the CQC after noting that page 11 item 55 states:

“We mapped the organisational indicators against CQC essential standards in consultation with CQC. All of the organisational indicators that are proposed for removal are covered by CQC essential standards even where the detail of the evidence required is not exactly the same. CQC will look for evidence of implementation in practice and not simply the existence of manuals or protocols. As regards the indicators that GPC considered not to relate directly to CQC standards:

- Management 9 (protocol for identification of carers) – CQC will want the provider to demonstrate that they identify and refer carers, not just that they have a protocol;”

The Care Quality Commission subsequently told us that the DH is simply saying that there is some correlation between some of the QOF indicators which are being removed and the essential standards against which the CQC monitor compliance. They also told us that on compliance inspections it is unlikely that they will always check the effectiveness of practices' identification and referral of carers because none of the essential standards directly refers to this.

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The CQC made reference to the extent to which the Health and Social Care Act Regulations and essential standards take account of carers' needs in their own right and added that "with changes in methodology and potential thematic work" they may look at carers' issues in future but there is nothing of which they are specifically aware that would enable them to do this systematically.

*For full details of the QOF for 2013/2014 visit

<http://www.nhsemployers.org/Aboutus/Publications/Documents/qof-2013-14.pdf>

**This only applies to England.

***The government's response to the QOF consultation can be accessed here

<https://www.wp.dh.gov.uk/publications/files/2013/03/consultation-response-GP-contracts.pdf>

Carers Trust is now in the process of exploring other levers and incentives which could potentially be called upon to ensure that carers stay on the map in general practice. For further information or to submit examples and suggestions, please email Julia Ellis, Project Manager (Primary Care) at jellis@carers.org