"Exorbitant" Care Quality Commission fee rises are a "raid" on NHS budget that will damage patient care, warn doctors' leaders

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Doctors' leaders have warned that "exorbitant" and "inexplicable" planned rises in Care Quality Commission (CQC) fees in England amount to a "raid" on overstretched NHS budgets that could undermine patient care and threaten the future of small GP practices.

The BMA's concerns are highlighted in its response to the CQC consultation on regulatory fees which looks to reform the way the body funds its inspection regime.

Key concerns from the BMA include:

- \cdot NHS trusts with turnovers of £125m-£225m would see a threefold rise from £78,208 in 2015-16 to £215,835 in 2017-18.
- \cdot Single-location GPs with 5,001-10,000 patients would see a sevenfold rise from £725 to £4,839 in two years.

The BMA's response to the consultation says:

"By forcing NHS providers to pay fees direct to CQC — masquerading as full costs recovery — the Government will no doubt assert a decrease in DH spend, while in reality mercilessly raiding a budget, purportedly ring-fenced for frontline services.

"As the sole provider of system regulation and consequently with a monopoly and captive market, the CQC is an increasingly bloated bureaucracy with little focus on value for money or analysis of the real performance indicators linking cost to quality outcomes."

Dr Mark Porter, BMA chair of council, said:

"This is a cynical set of proposals that will force parts of the NHS to hand over large chunks of their budgets to the CQC without any evidence of a positive benefit to patients. This comes at a time when the NHS is under unprecedented pressure, trying to find the 2-3% efficiency savings demanded by the Government while attempting to cope with increasing patient demand on inadequate funding and staffing levels.

"The CQC does not in any part of this consultation explain why these ridiculous rises are needed, especially when it is supposed to be scaling down an inspection regime that has been beset by setbacks and failures. Only last year the CQC had to abandon part of its programme which judged GP practices before inspectors even walked through the surgery's doors¹.

"These rises cannot be allowed to go ahead as they amount to a raid on funding: in practice these proposals will cut budgets ear marked for patient care.

"Everyone in the medical profession wants an effective regulatory system that maintains patient safety, but this will not be achieved by these flawed proposals. The CQC need to put a halt to this process and put forward a genuine consultation that leads to a cost effective system that is value for money for the taxpayer."