How to Navigate the CQC's New Sector-Specific Overhaul: A 5-Minute Guide for Care Managers

In Brief: The CQC is scrapping the one-size-fits-all Single Assessment Framework (SAF). By the end of 2026, adult social care providers will move back to sector-specific Key Lines of Enquiry (KLOEs) and a "professional judgement" model that ditches numerical scoring. To stay "Good" or "Outstanding," you need to stop chasing percentages and start evidencing specific care outcomes.

The compliance landscape in UK adult social care is shifting: again.

If you feel like the goalposts just moved while you were halfway through a penalty kick, you aren't alone. The Single Assessment Framework (SAF), once promised as the ultimate "simple" solution, is being overhauled. The CQC has admitted that a "one size fits all" approach doesn't work when you're comparing a high-stakes surgical ward to a 10-bed dementia care home.

By the end of 2026, the SAF as we know it will be gone. In its place? Four sector-specific frameworks designed to bring back nuance, professional judgement, and: most importantly: relevance to your specific daily operations.

The Problem: The Failure of "Generic" Compliance

For the last few years, care managers have been forced to map their complex, human-centric services to 34 generic "Quality Statements." These statements were often vague, leading to "Innovation Theatre": activities that look busy on paper but provide zero actual value to residents.

You've likely spent hours filling out spreadsheets to hit a "compliance score" that doesn't actually reflect the quality of care on your floor. That's the problem. Software can't fix a broken human process, and a generic checklist can't capture the reality of a "Well-led" care home.

The 2026 overhaul is a direct response to this. The CQC is moving away from the 132-point algorithmic scoring model. They are returning to sector-specific KLOEs (Key Lines of Enquiry) and putting the power back into the hands of inspectors to use their professional judgement.

The Strategy: Sector-Specific KLOEs for Adult Social Care

In the draft adult social care framework, the 34 Quality Statements are being condensed into **24 sector-specific KLOEs**.

While the "Five Key Questions" (Safe, Effective, Caring, Responsive, Well-led) remain the pillars, the way you evidence them is changing. The CQC is looking for "Rating Characteristics": clear, written descriptions of what *Outstanding* actually looks like in a care setting, rather than just a tick in a box.

The "Strategy First, Tools Second" Philosophy

Before you go looking for new software to "solve" the 2026 overhaul, you need a strategy. At ReflowAI, we always tell our AI Strategy Consulting clients the same thing: **Automation without a process is just faster chaos.**

You don't need a tool that generates a generic report. You need a process that captures evidence of *outcomes*. The CQC doesn't just want to see that you have a "Learning from Incidents" policy; they want to see the specific chain of events where an incident occurred, what was learned, and how it tangibly improved a resident's life six months later.

Your 5-Step Roadmap to the 2026 Overhaul

You don't need a year to prepare. You need a structured approach to transition your evidence from "Generic SAF" to "Sector-Specific Care."

1. Audit Your Current Evidence Stack

Stop adding new files. Look at what you have. If your evidence is structured around the 34 Quality Statements, start mapping them to the 5 Key Questions. The 6 evidence categories (People's experience, Staff feedback, Observations, Partner feedback, Processes, Outcomes) aren't going anywhere: ensure your "Outcomes" folder isn't empty.

2. Ditch the "Scoring" Mindset

The 132-point model is dead. Stop obsessing over reaching "90% compliance" in a spreadsheet. Start asking: "If an inspector walked in today and asked about our learning culture, could I show them three specific improvements we made this month?"

3. Tighten Governance and Learning

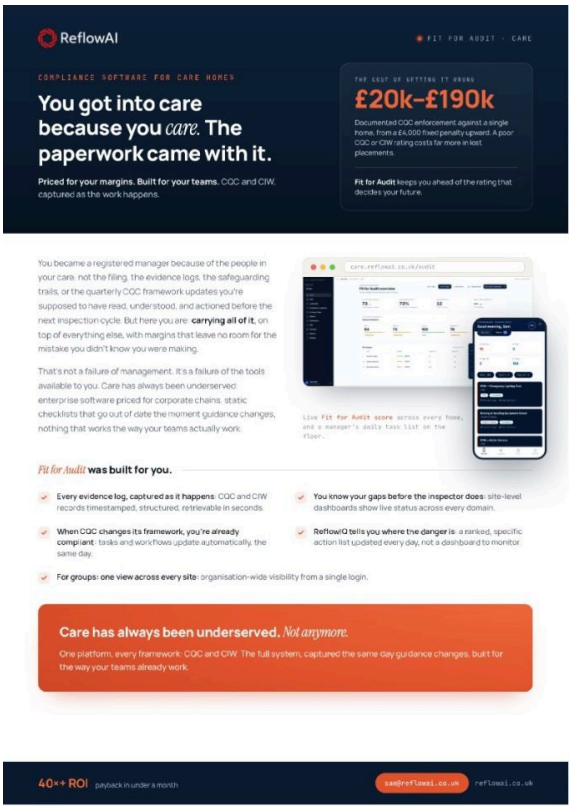
The new draft frameworks place massive weight on governance. This means your clinical and care governance meetings can't just be "minutes taken." They need to be linked to risk registers and action plans. Use tools like FitForAudit Care to surface these risks automatically before they become inspection failures.

4. Focus on Workforce Acuity

Staffing is the #1 risk area. The CQC is moving beyond simple "ratios." They want to see that your staffing levels are driven by the *dependency and acuity* of your residents. If your rota hasn't changed in six months but your residents' needs have, you have a gap.

5. Automate the Mundane

You are likely wasting 5-10 hours a week on manual logbooks. This is "waste" in its purest form. Every hour spent on a spreadsheet is an hour taken away from resident care. This is where a LogBooks Hub approach saves lives: and your sanity.



Common Pitfalls: The "Signs" You're Falling Behind

Are you making these mistakes? Most care managers are:

- **The "Paper Mountain" Trap:** Still relying on physical files or "digital paper" (unstructured PDFs). If it isn't searchable and linkable to a framework, it isn't evidence; it's just paper.
- **The "Inspection Panic" Cycle:** Only gathering evidence when you think a CQC visit is imminent. The new "continuous assessment" model means the CQC can update your rating at any time based on the data you submit.
- **Ignoring the "Why":** Training staff on *how* to fill a form but not *why* the data matters. Human adoption is your biggest risk. If staff don't see the value, the data will be poor.

Where to Start (Without Spending a Penny)

You don't need a massive budget to start preparing for the 2026 sector-specific shift.

1. **Map your Top 5 Risks:** Sit down for 20 minutes. What are the 5 things that keep you awake? Map those directly to the "Safe" and "Well-led" questions.
2. **Review One Incident:** Take your last incident report. Trace it. Did the learning actually change a policy? If not, fix that loop today.
3. **Talk to Your Staff:** Ask your senior carers what the biggest "time-waster" in their day is. If it's a manual logbook, that's your first candidate for automation.

The CQC overhaul isn't a threat; it's an opportunity to strip away the generic "Innovation Theatre" and get back to what matters: proving you provide excellent care.

If you're tired of the spreadsheet treadmill and want to see how automation can give you back 10 hours a week, check out our Care Home Compliance solutions. We don't do generic checklists: we do sector-specific evidence that keeps you inspection-ready, 24/7.

Frequently Asked Questions

When does the CQC Single Assessment Framework (SAF) officially end?

The SAF will be phased out throughout 2026. The new sector-specific frameworks are expected to be finalized in Summer 2026, with a full rollout completing by the end of the year.

Do I need to change my current evidence folders?

Not immediately, but you should start mapping them. The 5 Key Questions remain the same. The change is in the "prompts" (KLOEs) used to judge them. If your evidence is currently organized by the 34 Quality Statements, you will eventually need to transition them to the 24 new Adult Social Care KLOEs.

Is the CQC bringing back numerical scores?

No. The CQC is moving away from the percentage-based scoring model that was part of the SAF. Instead, they are moving toward a "professional judgement" model based on written Rating Characteristics.

How does ReflowAI help with these changes?

Our FitForAudit Care platform is built specifically for the adult social care sector. When the CQC changes the framework, we update our system automatically. Your staff don't need to learn a new

framework; they just keep capturing evidence via email or WhatsApp, and we map it to the latest KLOEs for you.