

## Assessment team

The CQC assessment team comprised 10 internal staff who had been seconded into assessment manager and inspector roles, and a small number of external staff who currently hold senior positions in local authorities and were acting as specialist advisors (SpAs) or executive reviewers to the local authority assessments. The team was supported by one assessment planner also recruited internally. For the pilots, a deputy director was also part of the team and for 3 of the pilots, a CQC director also joined. A small number of CQC Experts by Experience were involved in the case tracking work. These are people who have lived experience of health and care services and are contracted to assist in gathering information for our on-site activity and other work.

#### Induction and experience

Across the team there was significant operational experience in CQC, including 5 members who were involved in the local authority test and learn exercises and some who had been a part of other previous system-based work, such as the Provider Collaboration Reviews. Most also had some past experience working in or with local authorities. Collectively, this meant they were well positioned to join the pilot assessment team. To further support them in their roles, all members of the internal team participated in induction training sessions. Managers not previously involved in the test and learn activity also shadowed one of the pilots before leading their own. They reported that this gave them confidence in their role.

The team was resoundingly positive about the induction sessions, with one describing it as the best induction they'd had to a role. Several have reflected since undertaking the pilots that they could have benefitted from more training on the Care Act duties of local authorities, and hope there will be some additional training on this ahead of formal assessments. Others have reflected that they'd like some training on local authority structures and governance.

The team will be expanding significantly as formal assessments begin. This is likely to include staff new to CQC, so it will be important to consider what level of induction those roles will need. The existing team hopes that external recruits would help to bring more of the Care Act expertise to complement their regulatory experience.

#### External roles

The executive reviewers and SpAs were a positive addition to the assessment team. One of the local authorities commented:

"I think there was a blend of CQC core employed people alongside people who came from other local authorities, that seemed to work really well from the feedback that I've received."

It was observed that these roles created a sense of mutual respect with those in the local authorities, given their professional background. The internal members of the team were also extremely positive about the contribution of these external roles, saying how they helped by sharing examples of what 'good' would look like in a local authority.

Considering the future team, and the potential to expand the pool of SpAs and executive reviewers, as with the new internal team members, it will also be important to consider how to best include and support these roles. SpAs and executive reviewers were predominantly involved in the fieldwork and quality assurance of assessment reports for the pilots they took part in. However, some feedback suggested they could be better involved at different stages or simply included more. For example, they could be involved in receiving some more information about the pre-fieldwork data and insight, such as summaries of information returns and case tracking, or more involved in discussions about reports and judgements. As assessments start to roll out, the intention is to involve these roles more at different stages.

# Team expertise to carry out assessments of local authorities

Overall, the team was positive about working together and it was clear that members had created a good working culture. Local authorities were also largely positive about the team, particularly how they'd put people at ease during the fieldwork and created a friendly atmosphere. Local authorities were generally confident that the team also had the right skills and composition, with one local authority commenting on specific expertise:

"We welcomed the fact that you had a number of social workers as part of that assessment team."

They added,

"I felt reassured that they had a clear understanding of local authority work in adult social care."

However, other local authorities were less sure of the team's skills and understanding and said they would reserve judgement on this until they had seen how the assessment had been captured in their report. One described an experience that left them unsure if the team had up-to-date knowledge when they were asked questions about commissioning, which they felt were many years out of date, adding that:

"Things had moved forward quite significantly around relationships with partners and commissioning models."

Some local authorities felt there could have been value in having more detail about the assessment team members, such as pen pictures. This was not to make judgements about whether the team had the right skills and experience, but rather to put faces to names, to understand the roles within the team and, importantly, to help make the team feel more human. There was a lot of feedback about the apprehensiveness of staff in local authorities and of other groups involved in the assessment fieldwork about speaking to CQC. Local authorities felt one way of reducing this would be if they were able to share some information about who teams would be meeting with. Some particularly felt this might help increase participation with certain groups of people with lived experience.

In addition to the need for a range of skills and expertise, one local authority commented on the lack of ethnic diversity of the assessment team, when reflecting on the diversity of people within their local area.

### Future team composition

The pilots have raised some questions about the composition of the team going forward, and opportunities to use certain roles in a better way. This included the Experts by Experience, who helped to make telephone calls as part of the case tracking work. It was felt they might be more suited to making calls with certain groups of people with lived experience, such as carers, which would benefit the team in capturing voices from a wider range of people.

There have also been some comments and observations about the sheer volume and range of work that the pilot leads (assessment managers) have had to manage and whether there is opportunity to reconsider the distribution of some of this workload. Not least because this leads to concern about the potential impact of this level of workload on an individual's wellbeing. Suggestions that may ease this included creating a 'lead inspector' role, who would work closely with the overall assessment lead to:

- manage the evidence grid
- interpret complex evidence for inspectors
- lead corroboration
- be involved in report writing.

Additionally, some felt that there was potential for wider members of the team to handle logistical and practical matters, such as responding to queries from local authorities or dealing with fieldwork practicalities.

We received little feedback about the suitability of the size of the team for the assessment, but timesheet data highlighted that more time was spent on the largest local authority involved in the pilot, Birmingham City Council. The additional time was mostly on the planning and data and evidence analysis parts of the assessment. It is worth noting that Birmingham City Council is quite significantly larger than the other local authorities that participated in the pilots, and there wasn't a notable difference between the team's time spent on the other pilots However, it is worth considering the impact of the size of a local authority on the size of the team, to ensure a balance of workload among the wider team and proportionate scale of the assessment.

CQC has recently introduced the new role of a regulatory co-ordinator to operational teams. Although these roles are new, it could be worth exploring if a similar role could benefit the local authority assessment team. Furthermore, following restructuring of CQC operational teams, there has been general interest in how the new locally based Integrated Assessment and Inspection teams will interact effectively with the Local Authority Assessment team to ensure benefit to both.

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