Care Quality Commission

Evaluation of CQC's local authority pilot assessments

December 2023

Summary

In Summer 2023, CQC started pilot assessments of 5 local authorities to test the new approach.

CQC's Research and Evaluation team joined the wider project team to evaluate the pilots. The aim of the evaluation was to:

- understand how well CQC is carrying out the assessments and provide assurance that the methods are effective to provide the evidence needed to make a judgement on how well local authorities are discharging their adult social care duties against the Care Act.

- identify early indications of outcomes from the pilots.

Given the pace of this project, the evaluation used a developmental approach. This means evaluation was embedded into the pilots as they happened, focusing on gathering feedback from both the assessment team applying the approach and the local authorities being assessed. To understand people's experiences of the approach, gathering evidence for the evaluation used largely qualitative methods of:

- in-depth interviewing

- focus groups

- observations

There was a good level of participation and interest in the evaluation from both the assessment team and the local authorities themselves.

The pilots involved using CQC's new single assessment framework, applying the relevant quality statements to local authorities and scoring the applicable evidence categories. This approach has not yet been fully rolled out to providers, and the piloting and previous 'test and learn' exercises have provided rich opportunities for testing the new approach. Overall, the evaluation found that:

- **The quality statements at the centre of assessments were broadly right and what local authorities expected.** The team found some pockets of duplication when allocating evidence to the quality statements. We expect this will reduce with the benefit of more time, experience, and guidance.

- **The team was not always confident in scoring evidence.** This was in part about gaining experience in the appropriate level and range of evidence needed to make a judgement among the breadth of evidence gathering undertaken. They also expressed not yet being confident in using the scoring model, which was new to most of the team and required some adjusting to. This was exacerbated by the limited guidance available on the scoring model to support decision making and no guidance available on ratings. The team felt more guidance would create better consistency and reduce challenge from local authorities.

- **Pilot timescales were compressed, which had a significant impact on the process.** It was challenging to organise the on-site fieldwork timetables in a timely way. This was exacerbated by the local authorities being unclear about some of our requests. It also meant the team did not have time to fully assimilate information such as the information return, self-assessment, provider survey and case tracking to inform the fieldwork in the intended way. This is being factored into timeline planning for future assessments.

- **Local authorities found the information return time-consuming to complete and some of the requests ambiguous**. For CQC, this resulted in very large volumes of information to manage in the returns. Despite the issues, local authorities were clear that it was a helpful exercise, which sparked improvements. The information return is being reviewed giving opportunity to provide more refined accompanying guidance using the constructive feedback received. This will also ensure that time spent managing the returns is proportionate to other parts of the process for the team.

- **Self-assessments were helpful for both local authorities and CQC.** These were optional in the pilots, but all local authorities chose to complete one ahead of the fieldwork. Local authorities spoke of this being a helpful exercise and the assessment team found value in the content.

- **Improvements were made in gathering evidence from people's experience, but there is still opportunity to develop the approaches.** Case tracking provided rich and wide-ranging evidence about services for a small number of cases, but proved to be a very time-consuming process for both CQC and local authorities.

- **The composition of the assessment team with internal roles complemented by the expertise of external specialist advisors and executive reviewers was viewed positively by the local authorities.** There are some thoughts on how responsibilities of roles could be better distributed among the team and consideration for how some additional roles may contribute. For example, where Experts by Experience could add most value to strengthen the team approach.

- **The structure of assessment reports has been streamlined, but reports are time-consuming to produce.** This was the first time the team produced full assessment reports and managed the level of evidence that needed to be collated in advance. The team felt it important to ensure the template, and any accompanying guidance, supports a consistent approach to writing reports and appropriate time spent on them.

- **Local authorities found assessment reports valuable in re-affirming the areas of improvement required.** They would have benefitted from more understanding of the process of how we make judgements and the scoring model itself, having raised some concerns about the strength of corroborating evidence and scores that did not always align to the narrative and tone of the report. Local authorities welcomed improvement suggestions in the report and some would have valued more definitive recommendations to further improve their scores and ratings. Additionally, local authorities would like reports to better acknowledge their own self-awareness of areas for improvements and actions they were already taking, as opposed to being presented as issues identified by CQC.

- **The pilot process prompted improvements within local authorities.** Local authorities described strengthening certain policies, improving co-production approaches, reviewing their staff engagement plans and improving how they store and manage files. We will endeavour to understand more about the outcomes and impact of our approach in systems and longer-term improvements as part of research we are currently commissioning.

Background

In June 2022, CQC's Research, Development and Evaluation Committee signed off a plan proposed by the Research & Evaluation team to evaluate the new regulatory model. This included evaluating how the model is applied to assessments of providers, integrated care systems and local authorities .

In Summer 2022 CQC undertook 'test and learn' exercises with 2 local authorities to test the approach to assessing how they meet their adult social care responsibilities under the Care Act. Using the learning from this testing and refining the methodology accordingly, it was agreed to [pilot the approach](#) in 5 local authorities during Summer 2023. The 5 pilot sites were selected from those that put themselves forward using a criteria to ensure the pilots covered a range of local authorities.

As with the test and learn exercises, members of CQC's Research & Evaluation team joined the wider pilot project team to devise a full evaluation of the pilot process. The team included one Research & Evaluation Manager and one Research & Evaluation Advisor.

Evaluation methods

We used a range of largely qualitative data collection methods in the evaluation to determine whether the assessment approach is effective, considering the experiences of the assessment team and the local authorities, and to capture this learning throughout. These included:

- in-depth interviews with key local authority staff

- in-depth interviews with internal pilot leads (assessment managers)

- focus groups with inspectors

- surveys of local authority staff

- information return survey

- observations of fieldwork.

Evaluation findings

CQC's Research and Evaluation team joined the wider project team to evaluate the the 5 pilot assessments. This was to capture the point of view of both the assessment team and the local authorities themselves.

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.

Planning and timescales

We heard from both the local authorities and the internal team members how the timescales associated with the pilots made the preparation and planning for the assessments particularly challenging and resource intensive. This was exacerbated as it was during peak holiday season and summer recess.

In the later pilots, there was very limited time between fieldwork for each assessment, resulting in little sense of a break between them, which would make the workload more manageable for the assessment team. This also meant there was not enough time to make full use of all the information that was intended to help inform the fieldwork, including:

- elements of the information return and self-assessment
- the provider survey responses
- case tracking information
- other information provided by CQC's Data and Insight team.

Local authorities also reported not always being clear how these types of information were informing the assessment.

Fieldwork timetables

Organising the timetable for the fieldwork was generally led by the planner role in CQC along with the assessment lead, and by communicating with relevant contacts at each local authority. Although individual mailboxes were set up for each pilot to manage communications with local authorities, at times they became difficult to manage due to the volume of queries and mailbox access being limited to certain team members. A more central way to handle communications is likely to be needed going forwards. There were also some technical issues reported with keeping the timetable up-to-date between CQC and the local authority, partly due to its format but also the fact it was changing so frequently. As such, there was suggestion of finding a way to share the timetable as a live document in future.

The team and local authorities reported that the on-site fieldwork timetables could not be finalised soon enough as the team managed competing demands from different local authorities. In some cases, fieldwork meetings were being confirmed up to the end of the week before the team were due on site. This posed challenges for the local authorities in organising people to attend meetings, especially external partners. There were also some reflections on how this prevented certain groups of people from being included, who would typically require significantly more notice and/or preparation to put them at ease with participating, for example carers. Similarly, organising the staff drop-ins used on some of the pilots were requested too close to the fieldwork. In some local authorities this meant limited time to communicate these to staff and encourage enough attendance. Larger local authorities needed to implement ways of managing the potentially large numbers of staff that might attend so that the assessment team were not overwhelmed and to ensure everyone's voice could be heard. Some local authorities were keen that in future CQC considers the accessibility of the methods used in terms of people's time, other commitments, and apprehension in participating.

In the early pilots, the team tested out varying levels of flexibility in how the timetable was prepared. This quickly led to the understanding that CQC needed to take control of this as far as possible. This learning was reflected in the pilots as they went on and appeared to result in fewer exchanges between local authorities and CQC. local authorities reported that CQC was responsive and often accommodating to requests in the timetable. It was also said that some of CQC's stipulations were not set out early enough, which had a further impact on the planning. For example, that it was preferable that managers did not attend certain meetings with staff groups.

Future ways of working

The team and local authorities both reflected that the fact the assessment was a pilot may have inevitably made certain parts of the process more time-consuming as people gained confidence and momentum in the approach. Equally, as it was still a pilot, although certain ways of working were accepted, neither local authorities nor the team expect them to be sustainable in the future approach, for example local authorities being able to frequently email their lead contact with queries. This is on the basis that such things would be more centrally managed once the approach is scaled-up and alleviated by the fact that processes will naturally become more efficient, together with local authorities becoming more aware of what is expected of them. While this should improve, all local authorities were extremely clear that, overall, the process had been very resource intensive, and while they now have the benefit of having experienced this process and know what to expect, most local authorities will not have.

Local authority information return and self-assessments

The local authorities were asked to complete a local authority information return within a set timeframe ahead of the fieldwork. They were also given the option of completing a self-assessment that they could share with CQC.

Challenges in completing the local authority information return

There were a number of points of feedback about the information return from local authorities. These were mainly in relation to the time it took to complete the return and a lack of clarity about what was required. We heard that most local authorities requested more time in which to complete the return as it became a very time-consuming process. It was often described as intense and more work than they expected. One local authority described the nature of the process they undertook in completing the return:

> "It did take us quite a bit of resource and time to pull together and also putting in those governance steps at our end to make sure you know that senior managers were happy with what we suggested. So we'd have regular meetings really, to review what information we've got, whether that met the brief and then have that sign-off procedure in there."

Even the local authorities that said they had existing good systems for collating documentation found the information return process a lot of work. However, most were quick to add that they will now be much better prepared for the next time.

Although certain asks in the return were very clear, such as policies that all local authorities hold, the time it took local authorities to complete the return was compounded by other asks that were open to interpretation. One example included 'feedback people have sent the local authority', which some felt was a very broad description. In these instances, some local authorities described providing a wide range of documents in the hope that something would be right, others spoke of asking CQC for more clarity.

Other issues included unclear or outdated language used to describe certain topics or documents, acknowledging that this is made more challenging by local authorities not always using consistent terminology themselves.

Some local authorities spoke of how certain documents would not 'stand up' alone, and it was therefore necessary to include contextual information to support them, adding to the volume of documents and time taken to complete it. One local authority described how some policies tended to be underpinned by lower-level practice guidance, using their governance framework as an example, and not knowing whether to include these additional layers.

Local authorities also found it difficult because they had not been given a clear sense of how much evidence was enough, with one local authority adding that they:

> "wanted to shout loud and proud and had no real sense of what the optimum volume would look like."

One local authority described how it tackled this by submitting what it called 'document bank A' and holding back 'document bank B' that contained further information if CQC requested it.

Some local authorities also reported some technical issues with uploading the information to the portal. Not all reported these issues, but where it was a problem, this added a lot of additional time to the process. Some of this was thought to be glitches with a new system, but some of it may have been alleviated if there had been more guidance on using the system.

A positive exercise for local authorities

Despite these issues, we heard that the local authorities found the process of completing the information return helpful for their local authority. One explained that as a result it meant *"we definitely know ourselves better."* We also know that it was a learning exercise for some local authorities as it spotlighted areas for improvements. Some also described how they will be maintaining documents in this way from now on to make compiling this in the future much easier.

Some local authorities also described how other similar work helped prepare them for the information return and the self-assessment process, including sector-led improvement work that was already in progress and having already undertaken other types of self-assessments recently.

The impact of the local authority information return on the assessment team

All returns and self-assessments were received in advance of fieldwork, although some local authorities had requested additional time to complete them. For the assessment team, the information return process became unwieldly due to the volume of the returns. This needed more time to be reviewed, which reduced time for the information to inform the direction of fieldwork as much as was intended. Some of the team described the onerous nature of the process in having to review excessively long documents to summarise them into a paragraph for the evidence grid. This was compounded by the vast volumes of documentation from most of the local authorities, some of which included blank templates and duplicative documentation. One of the assessment leads described using the return much more when report writing than in the planning, partly because they'd not had time to fully use it earlier, but also because it proved just as helpful at this stage too.

Improving the local authority information return

CQC team members were clear that the current return process would not be sustainable, and that the guidance needs to go much further in providing detail of what is needed, as well as why and how that is best supplied.

For the local authorities involved in the pilots, a good starting point for some would be to receive feedback from CQC about whether they had supplied the information needed, at the right level and volume. Some were also keen to understand more about how the information was used in the assessment, although they anticipate some of this may become apparent in the assessment report.

Suggestions from CQC and the local authorities to develop the guidance and improve the overall process in future included:

- Guidance on 'what a good local authority information return looks like'. This should give a sense of volume of the return, whether policies should be adult social care or organisation-wide, and technical matters such as whether links or embedded documents are acceptable.

- More clarity on the purpose of documentation requests to enable local authorities to be clearer about the level of information to provide, and whether to add context.

- Requesting a very core set of information initially, and only requesting wider information if necessary.

Self-assessments

Self-assessments were an optional part of the return, but we understand all the local authorities had undertaken some form of self-assessment in preparation. They all reported this as a broadly helpful exercise. One local authority described being surprised that it was an option to complete a self-assessment. They felt it should be a requirement of the process as it was both helpful for them to complete and for CQC in setting the scene about their local authority. One local authority commented on the range of self-assessment tools available to them and how this had been confusing at the time. They felt there could be some guidance for local authorities on the different tools available to support them and which to use.

Pre-fieldwork data and insight

CQC's Data and Insight team produced a dashboard for the assessment team to use to inform their assessments. It allows users to compare indicators associated with individual local authorities to get an overall understanding of how they meet their care duties. The report also provides contextual data to help users understand the broader context in which local authorities operate. Data for the dashboard was drawn from a variety of sources such as from the Adult Social Care Outcomes Framework (ASCOF) where it met a set of criteria for inclusion, such as alignment to the assessment framework.

The assessment team described reviewing the dashboard ahead of the fieldwork and reported finding the demographics and safeguarding data useful in providing context about the local authorities. Assessment leads also spoke of reviewing it as part of the report writing. External assessment team roles were not able to access the dashboard in full, but felt there could be value in having a summary ahead of the fieldwork.

The team felt the data was useful and reported that Data & Insight colleagues were very responsive to queries about it. However, the team could not be clear on the extent to which this information added value to the process. There were views that the dashboard would become more useful in time when there would be more comparative year-on-year data and between different local authorities.

Some wider points were raised about how the team might interpret and use some of the data. For example, one person pointed out that national data on safeguarding can contain wide variation. Team members themselves suggested that there may be a need to improve skills in how to use and interpret data and to better understand if positive or negative indicators are indeed as they appear. It was thought this would partly come in time as the team became more familiar with the data.

There are ongoing conversations about where some types of evidence are best placed in the new framework. As a result, the team found evidence in the dashboard was not always aligned to the published single assessment framework. This affected a small number of areas but did pose some challenges for the team when considering evidence in report writing.

Some local authorities reported being surprised they were not asked for more data about their performance as part of the information return. They understood this was because CQC was using nationally available data, but were interested in how this was feeding into the assessments. They also raised concerns that this data might not be as current as data they could supply directly.

Provider survey

To gather views from providers that the local authorities worked with, the assessment team and colleagues in CQC's Data & Insight team devised a provider survey. This was developed during the pilots, which meant it was only ready to be used on the latter 3 assessments. Local authorities provided CQC with a list of their regulated providers and CQC sent the survey out through the Provider Engagement function. The intention of the survey was to provide the views of providers that worked with the local authorities, which may either inform the fieldwork and/or generally contribute to the evidence that the team was collecting.

Of the pilots that used this survey, there were mixed views about its value. We heard that it was distributed too late to inform the fieldwork and that the responses received were either so mixed in nature it was difficult to draw out any themes, or that the number of responses was too low to provide any additional insight. Despite this, the team felt the overall intention of the survey was good and that it could prove helpful. They felt it should be continued in the future approach providing it is distributed earlier to both increase response rates and allow time to analyse the information ahead of the fieldwork.

One local authority also commented that it led them to consider running a similar survey themselves. They also felt there was opportunity for CQC to share the responses collected with the local authorities for their own learning purposes, acknowledging these would need to be anonymised.

Case tracking

CQC introduced case tracking on the pilots as a method to obtain evidence from people's experiences. This was based on a method that CQC has used on other types of inspection, such as with Children's services. The team asked the Children's Services team for guidance to support how they applied the approach on the local authority assessments.

The local authorities in the pilots were asked to obtain 50 cases from their records that fitted a set of criteria supplied by CQC. This was then reduced to 10 cases, with the aim of engaging with 6 of those cases. A mix of CQC inspectors working with Experts by Experience contacted people to carry out the case tracking. Sometimes this was done by phone or online, and other times they met people face-to-face. During the pilots, this work was spread among the team, but some comments indicated that that it may be worth considering if this should be managed by a dedicated few in future.

We heard mixed feedback as to how well the case tracking process worked. The overriding feedback from both local authorities and the assessment team was how time-consuming it was, leading to some concerns about whether the resource required was balanced by the quality of the evidence it produced.

Some local authorities explained that it took excessive time to compile the initial list as their systems did not align easily to the criteria, and some reported an almost manual approach of seeking cases from multiple different teams. Some local authorities also felt that the criteria did not account for the individual local authority's population demographics. For example, if they had a particularly young population, it was not always possible to demonstrate this in the way the criteria was applied. It therefore didn't always feel like the final cases used were necessarily representative of the area.

Using 6 cases was based on the sample size that case tracking uses in other types of CQC inspections, including those undertaken with Ofsted to audit children's experiences. But there was also concern both from local authorities, the assessment team and the Experts by Experience that 6 cases simply wasn't enough to be meaningful among all the other evidence and considering the scale of people that local authorities serve. As such, we heard it referred to as a *"drop in the ocean".* Feedback did not suggest a more ideal number of cases, acknowledging that it would be impractical to consider a more representative number using this method, as people highlighted the amount of work that was required for the 6 cases. Some local authorities referenced looking at around 10-12 cases as part of peer reviews as a comparison approach. An Expert by Experience made a suggestion for having a percentage criterion based on the size of the local authority.

The timeliness of the case tracking was also an issue both for local authorities and CQC. Some local authorities explained that cases were ongoing after the fieldwork and that some people had been left unsure whether CQC would still be contacting them. They asked that CQC communicate better with the local authority about which cases had been approached and completed. Where some cases were not completed before fieldwork, they could not be used to inform it.

We heard from both local authorities and the team that there were some challenges with people's mental capacity to participate. Sometimes, this fluctuated, so people who had previously agreed to participate were later not able to do so. This raised questions about how to ensure this approach is fully inclusive and allows for those whose capacity can change. We also heard some general feedback about how inclusive the approach is, such as whether it can include the people who are hardest to reach and whether it considers people's different communication needs, including whether CQC has the tools and skills to engage everyone.

There were some views that the approach should be more independent of the local authorities. One of the local authorities described being *"surprised"* that they selected cases initially and had expected CQC to ask to access their systems and collate cases. They suggested in future it might be worth exploring if CQC could get access to local authority systems, with supervision. A team member suggested another way to increase independence of the process. This could involve asking the local authorities for a much longer list of cases, to which CQC could apply the criteria, so there was less influence by the local authority.

Despite some challenges in the case tracking process, local authorities and the assessment team both felt that the case tracking was an important method for obtaining people's experience, given the rich and wide-ranging information about different services that it can provide. Team members frequently referenced the information they obtained through this method as confirming other findings or flagging areas of concern and some stated that they enjoyed carrying out the work. It was clear though that the efficiency of the process needs addressing to ensure there is a balance between the time taken with the benefit, and that cases should be completed early enough to inform fieldwork planning. Further information on the purpose of this method and how the information is used may also help to alleviate concerns about what it is intended to demonstrate.

Involvement of Experts by Experience in case tracking

It was thought that Experts by Experience could provide a valuable role in talking to people as part of the case tracking process, although we received mixed feedback on whether this proved to be the case. The assessment team did not always think that this was the right part of the local authority assessments to involve them in, and they explained that there had been a lot of work in making arrangements for involving them. They also felt that the limitations of what an Expert by Experience can do was a particular challenge for case tracking, for example in not being able to undertake home visits or view records. Despite this, feedback suggested that the Experts by Experience provided helpful reports following the conversations they had. It is thought that the pilots are helping to define the role of an Expert by Experience in these assessments and other potentially better-suited opportunities have been suggested.

The Experts by Experience involved expressed having enjoyed the nature of this work. They felt their role could add value as they perceived their shared or similar lived experiences allowed participants to feel more comfortable and at ease, enabling them to share their experiences more openly and honestly. One Expert by Experience explained:

> "I do think that it does make it easier when somebody who has had a similar type of experience will understand a lot more or will delve further into certain questions or have sub questions that you would know to ask if you've had that experience."

The Experts by Experience reported a mostly friendly and supportive working relationship with the assessment team members. However, some also had the impression that the inspectors did not perceive their role in the case tracking work to hold value, beyond what the inspector could have gathered themselves. Despite this, the Experts by Experience understood that it was part of the pilot process to better understand where roles can best contribute.

The Experts by Experience shared some additional feedback, including that there were accessibility issues with the report template, which had to be resolved. They also explained that they did not always receive feedback on the report they produced, which they felt was a missed opportunity for learning. This added to their sense that their role not been appreciated in this process.

Improving case tracking

To help overcome the challenges encountered with case tracking, CQC intends to explore this with the Children's Services inspection team who are well-versed in using this method.

In addition, local authorities felt the improvements could be made by providing more guidance and clarity on the case tracking process and its purpose, for both them and the people involved. Although CQC did provide some briefing material, it is not clear if the local authorities always cascaded it to everyone involved. More information may also help to put people at ease about participating, as some local authorities referred to spending a lot of time explaining and reassuring people, as one added:

> "Some people got really quite anxious about it, so we have to go back and explain it in a different way."

Some local authorities also flagged that the guidance should include an easy read version as standard, as this had not been supplied at the outset and had to be requested. They also said that guidance should clarify points such as:

- whether advocates can be involved

- how the information collected informs assessments

- practicalities like when and how CQC will contact people

- how people's preferences, for example to meet in person, would be accommodated.

Fieldwork evidence gathering

Methods used to gather evidence

The assessment team used a variety of methods to gather the wide breadth of evidence that they needed to obtain in the intense fieldwork period. Members of the team gathered evidence both on site and off site through:

- carrying out individual interviews with staff and stakeholders

- meeting with different groups

- offering drop-in sessions

- visiting services and different groups.

Often, a lot of these engagements centred around the local authority's main offices, but the team also travelled to other locations to meet different people. Overall, the fieldwork approach seemed to work well for the assessment team.

Assessment team timesheet data showed that time spent on evidence gathering increased as the pilots went on. This is likely to be explained by the team finding they needed extra time for some methods, such as group interviews and having additional methods on the later pilots, including having to manage staff drop-ins and the provider survey. There was also more engagement with local voluntary groups on some of the pilots, and increasingly case tracking interviews were undertaken in person.

Leads for the pilots trialled slightly different meeting lengths, but they arrived at a consensus of around 45 minutes to an hour for individual meetings and up to 1.5 hours for groups. For most interviews and groups, one member of the team would lead while another took notes. It became clear on the pilots that it was important to have a note taker who could digest what was being said to help agree the key points and who could discuss the meeting afterwards with the lead.

We found that there was generally a good balance of on-site and remote fieldwork from the local authority's perspectives, and they appreciated the flexibility that this offered to fieldwork participants. Most commented that their staff preferred meeting CQC face-to-face and that some local groups or providers requested online meetings. This largely reflects what happened in practice and where specific requests were made, CQC was generally accommodating. There were some reflections from local authorities that although some of the local groups requested online meetings, the local authority felt face-to-face may have worked better in encouraging participation.

We heard from the local authorities that staff were often apprehensive before speaking to CQC, but they later reported on the experience with positivity. They said they were able to speak about their work and their achievements and that the team created an open and comfortable atmosphere. One described staff coming out of the meeting with CQC as being *"on a bit of a high".*

We also heard that CQC considered features of individual local authorities in deciding evidence gathering methods, for example taking into consideration the geographical spread of a local authority and what visits could be accommodated practically in the time available for the fieldwork. These adjustments tended to be more practical considerations, which the approach was flexible enough to accommodate.

One local authority did make a wider comment on the importance of considering the local area context in how the approach is applied:

> "I think sort of tailoring the inspection model to particular characteristics of an area is something if there's scope to do it in an inspection and that adds valuable insight."

They went on to explain how deprivation in parts of the area they cover has a *"huge impact on how we discharge our social care duties."*

Question techniques

There was some mixed feedback from the local authorities on whether the questions CQC asked were at the right level. One explained:

> "I think the nature of some of the questions were really open ended, very open ended in that you could look to respond to that from multiple angles."

This left some staff concerned that they were not always giving CQC the information needed. However, others seemed to appreciate the opportunity to talk openly about their work. The team seemed to adapt questioning styles where it made sense, using prompts to gather more detail, and we observed more pointed questioning where, for example, the team were following up points raised in the corroboration meetings.

There was potentially some benefit in team members following certain themes in the meetings they led, such as safeguarding, as this helped them to corroborate what they had previously heard. However, there is also value in attending a mix, and often the timetable and other logistical pressures dictated this more so. Similarly, there were suggestions of an ideal order in which to hold certain meetings, for example speaking to the local authority's CEO late on in the fieldwork to reflect on and test out what had been heard, but again this was not always possible owing to people's availability.

A couple of points arose about good practice for interviewing, including ensuring a consistent message at the start of conversations on the confidentiality of what participants say (if this has not been shared through briefings before) and ensuring this is upheld, for example in not sharing an individual's viewpoints with other fieldwork participants.

Engaging the right people

In our survey of local authority staff who had been involved in the pilots in some way, 88% (n=136) agreed that CQC was speaking to the right people to understand and assess the local authority. Furthermore, most felt CQC asked them the right questions, with 82% answering 'no' when asked if there were any other questions CQC should have asked them. Separately, we heard reflections from some of the local authority lead members about CQC's areas of interest when speaking to them, as they mentioned:

- performance management

- governance

- scrutiny processes and oversight

- the involvement and perspectives of people who use services.

In our interviews with local authorities, some told us that there were other groups and individuals who they felt should have been involved in the fieldwork but were not initially. Some of this was explained by early confusion in establishing the responsibilities of different teams and roles, which was usually rectified quickly. Some local authorities suggested in future CQC should outline the types of role responsibilities they are interested in, rather than specific role or team titles. One explained:

> "I think it's a case of more clarity around the roles you wanted to cover and then letting us identify who within our organisation could actually do that work to do that interview for you."

Another local authority commented that information they had already supplied could have been put to better use and avoided the need for meetings to discuss who CQC should engage with:

> "If someone had really read our self-assessment and looked at a structure chart of our department first before sending us the list of teams they wanted to meet, we could have avoided needing to have that meeting."

The assessment team also reported a lack of information from the local authorities on why certain teams or individuals had been scheduled to meet them. This was exacerbated by the rush to finalise timetables before fieldwork, allowing little time for queries.

It seems that the pressured time in the run-up to fieldwork may have prevented an opportunity to alleviate some of this confusion. Going forward, local authorities would appreciate more up-front refined guidance to support this. If this is effective it would also help to ensure that CQC is targeting the fieldwork to the most pertinent groups and individuals. Speaking to staff without managers present has been a long-established method used by CQC on other types of inspection and influenced the approach CQC took with local authorities. However, some local authorities expressed frustration about the request to not include managers in some meetings with frontline staff. local authorities also said CQC was reluctant to engage some of the managers separately or as a group and they felt this was potentially a missed opportunity to gain more of a strategic perspective.

Two local authorities felt there could have been more engagement with a wider range of health colleagues. One explained they'd expect this:

> "where there is that really strong dependency between social care and how to deliver and social care duties under the Care Act."

Another added that although CQC had asked to speak with health partners they had been unclear on precisely which ones:

> "We were asked to have interviews with Health Partners, but there wasn't any clarity as to which ones, strategic health colleagues, operational colleagues, or place based."

One of the local authorities also acknowledged that, as yet, they didn't know how far this might be covered by integrated care system assessments, as they were aware that CQC is also undertaking these pilot assessments. It will be possible to then consider the integrated care system and local authority pilots alongside each other and the extent to which each examines parts of the Care Act requirements.

Linked to a number of these points, was the importance of striking the right balance between the local authority and CQC regarding how far the local authorities should influence who CQC is engaging in the fieldwork. Being pilots, it seems it was possible for this to be more of a two-way process between CQC and the local authorities. Going into formal assessments, it's not expected this would be sustainable as an approach from a practical perspective but pertains to an important point about what level of independence is needed in the fieldwork arrangements.

People's experience evidence

Gathering people's experience as evidence is integral to validating other evidence found in the assessments and is one of the evidence categories in the single assessment framework. There has been progress in this area since the test and learn exercises, such as including case tracking in the approach. We asked local authorities and the team if CQC had good quality methods to collect enough information on experiences in the pilots, and while they could describe a range of ways this was happening, they often had suggestions about how CQC could do more.

The team frequently spoke of actively trying different ways to engage a wide range of community and other types of local groups. One described asking the local authority for a list of local voluntary groups who were then telephoned, but this was at rather short notice and few responded. local authorities described thinking during the planning stage that there was not sufficient engagement with certain groups of people and in some cases they suggested wider groups to involve, which CQC was often able to accommodate. Others found that CQC made requests when on site to speak to or visit different groups, such as asking to visit a community hub at short notice. One local authority added that CQC would have,

> "got a different picture of [the local authority area] if they had gone out and met people in different locations."

It is clear that these engagements were valuable and should be continued along with considering other opportunities to engage people in the assessments. Suggestions to do this included engaging more community groups to get a more diverse set of views, including through:

- drop-in sessions

- involving Healthwatch to obtain people's views

- involving advocates to ask people questions on CQC's behalf.

Increasing the range of methods should also consider how to ensure these are independent of the local authorities, who, as one team member flagged, tended to determine the groups that CQC engaged with. Additionally, to engage people more it is vital to ensure that opportunities are accessible and inclusive, considering people's different needs.

The quality statements

The assessment approach was underpinned by CQC's new regulatory model and the [single assessment framework](#) that includes quality statements under key questions. Local authority assessments use 9 quality statements mapped across 4 overall themes to assess local authorities for their duties under the Care Act.

When we asked local authorities for their views on the quality statements, they were broadly positive about them being applicable and appropriate. In most cases they were what the local authorities expected and considered them to be pitched at the right level. As one local authority stated:

> "They are consistent with what we would want to see in terms of a local authority being tested against."

One local authority commented on how it was pleased to see a focus in the statements on inequalities, as well as prevention and wellbeing. Others commented on how they intend to integrate the quality statements as a framework going forward. The only area that one local authority suggested it might expect to see more emphasis on in the quality statements was around partnership working with health colleagues. This pertains to earlier comments about involving health colleagues more in the fieldwork.

For the assessment team, the piloting was their first experience in using the quality statements. They too were broadly in agreement about the content of the quality statements being right and that they were enabling CQC to assess local authorities for the adult social care functions for which they are accountable. We also heard that the 'I' and 'We' statements provided a helpful background to talk to people about. However, when it came to allocating certain types of evidence, they found there was some overlap in the statements, which added to time spent deciding where to place evidence. We heard some specific examples:

- On evidence about transitions, *"you could put evidence under care pathways, which talks about people's journey and joined-up care, it could go under partnerships as you expect adult and children services to work well with families and all involved, or you could put it under safe pathways because the transition needs to be safe and not put anyone at risk"*.

- Another member of the team described how evidence about hospital discharge could go in either the Safe systems, pathways and transitions or the Care provision, integration, and continuity quality statements.

This potential ambiguity leads to concern about consistency and whether it is necessary to provide more 'fixed' guidance on evidence that bridges quality statements. Although the team had these challenges they understood it is a new framework and they expected that in time the allocation of evidence would become much clearer.

Corroborating evidence

The team described using an evidence grid to populate with evidence before and during the fieldwork, which worked well as a method to collate evidence in a succinct and central way. It was designed to help the team as they went through the assessment process, corroborating the evidence and eventually helping to form the basis of the assessment report.

If there had been more time ahead of the fieldwork it could have been an even more useful tool in informing the fieldwork, instead with so little time at this point, not all existing evidence had been added. There was also feedback of the need to improve how it was used by better summarising evidence and agreeing a method for highlighting key evidence. This would support the assessment leads in managing the overall evidence gathering process and later in report writing. There was general support for continuing use of the grid but with more guidance, as one team member explained:

> "If we're going to use the evidence grids as we are doing now, I don't know whether that will change, there will need to be some guidance for that in terms of how we should fill that in and how that information should then be pulled through from the evidence grid for the managers."

At the end of each fieldwork day, the team usually held a corroboration meeting. Led by the lead for that pilot, this followed a process of working through the timetable of meetings that had happened that day and sharing key points from each.

We observed several corroboration meetings, and feedback from others showed that they provided opportunity for people to test out what they had heard alongside others' understanding, which frequently led the team to areas of interest to address in further conversations. The contribution of external team members was also critical at this point, and they were able to clarify or challenge thinking with their expert knowledge, for example in clarifying typical local authority governance or responsibilities of certain roles.

The team shared some mixed views about the effectiveness of the format of corroboration meetings, with some suggesting there is no other way to do it, but others finding it too long-winded especially at the end of a long day. Overall, it was thought it improved over the course of the pilots as the team became more focused on sharing the key points and less so on other commentary about their meetings. There was suggestion that the evidence grid could be better used as part of corroboration to help identify gaps. We also heard some thoughts on whether other members of the team could take the lead on the corroboration meetings, allowing the pilot lead to better absorb what was being said.

Evidence judgements and scoring

Beneath each of the quality statements is a set of [evidence categories](#) that must be fulfilled and scored ahead of writing the report. In most cases the team felt they had collected a good range of evidence on the assessments to score the categories and come to quality statement scores. However, there was some feedback that it was difficult to make sense of the different evidence categories, with one team member suggesting they needed more training in this. Others suggested their confidence in this was growing but they wanted feedback on whether they were getting it right.

There were several reflections from the team on the evidence scoring process, including not knowing how much evidence was enough to make a judgement, and that they were sometimes unclear on how to apply the scoring model. Support from colleagues in Data & Insight about scoring helped this. However, they also explained that guidance on the scoring model did not provide enough detail on what should be given a specific score, or any definitions around ratings and evidence that would tip into an outstanding rating, for example. Scoring was particularly difficult where there was completely conflicting evidence in a category. One person added that they had concern about being challenged by local authorities on the scoring without more guidance to support their decision making.

Some of the team found wider elements of the [scoring model](#) difficult to understand, explaining that the process of aggregating the quality statement scores to produce an overall score did not always reflect the possible variation in quality statement scores.

Some local authorities reflected that how CQC reaches scores and ratings was an area of the process that was not as transparent to them as it could have been, and they asked to be made more aware of the scoring model at the start of the pilots. One said they may have highlighted certain things more if they knew more about how the scoring worked. They were also interested in better understanding the process of corroborating evidence and in how evidence is gathered against the I and We (quality) statements.

Improvement in local authorities

Although it is still early in applying the approach to assessing local authorities, it is important that CQC understands where at any stage this is leading to improvements. Understanding this will help to apply the approach so that it will exploit these opportunities to promote improvement in local authorities further.

As such, we asked local authorities whether being involved in the pilot had already led to any improvements. Several described how it had reconfirmed existing plans but also that it gave them opportunity to recognise some of their achievements, as one local authority described how the pilot process:

> "re-energised those conversations and it also just highlights to staff how far they've come in certain areas as well."

Others described some specific areas where they were now making improvements as a result, demonstrating early signs of the impact of CQC's intervention. These included:

- A participation strategy to improve how to capture people's voices, as identified when completing the information return.

- The recruitment of a stakeholder engagement officer to address improvements in this area.

- Strengthening plans to improve the approach to co-production.

- Plans to refresh their approach to staff engagement and run drop-ins and surveys again (following CQC's use of these methods in the assessment)

- Creating a central point for case file audits

- Revising an assurance, learning and improvement framework

- Identifying gaps and priority actions for strategies and policies within adult social care and centralised information resources, following completion of the information return.

- A gap analysis that complemented the information return following peer review and allowed the local authority to refresh the evidence hub.

Many of these speak to the 'Organisational' impact mechanism, that is where regulatory interaction leads to internal organisational developments. We intend to seek more understanding of the impact of CQC's role in local authorities through commissioned research and evaluation that will focus explicitly on CQC's impact in systems (including integrated care systems). This will also build on the 8 impact mechanisms that underpin CQC's understanding of its regulatory impact in a provider setting.

Assessment reports

Report writing process

The culmination of the assessment process is a report that includes scores and ratings across the different quality statements. The writing of these reports was led by the pilot leads. They explained that the report structure had improved since the test and learn exercises, given they were writing across quality statements rather than evidence categories, which helped the flow. However, it was clear that compiling reports was still an onerous process, and it was the first time the team was writing full local authority assessment reports. Leads also flagged that report writing was a very pressurised time in the pilots, describing how they sometimes had to finish the report for one local authority while also planning the assessment of another. As such, we frequently heard from the team that they could not sustain this pace of work in future.

The leads described how the process involved fully populating the evidence grid before starting the report writing, with everything collected before and during the fieldwork. One described how this alone had taken a full week to complete. There was feedback that this could be improved with more input from other team members. One lead also suggested that although the evidence grid is being populated throughout the process, this needs to be reviewed and keep it up-to-date. They mentioned this in relation to having only identified some small gaps in evidence during the report writing stage.

There was some debate among the team about whether the reports were as expected in terms of length. This led to conversation about the challenge of ensuring reports are succinct and do not become overly lengthy, while also not losing the meaning of the content. They felt that more guidance on what evidence must be included would be helpful, as well as more writing style guidance to ensure general consistency.

The team also flagged a lack of clarity on who reports are predominantly aimed at – whether this is local authorities, the public, or other stakeholders. This too will help with ensuring consistency in writing styles, the level of detail and the nature of what content is highlighted.

Quality assurance

Reports undergo a quality assurance process including peer review by another inspector and a manager, as well as a SpA or executive reviewer if they were involved in the pilot. They then go to more senior colleagues for sign-off before sharing with the local authority for an opportunity to make comments on the factual accuracy of the content. The team described this as so far working well, but felt they needed to have some clear guidance on the process for quality assuring reports to ensure it is consistently applied. The final part of the quality assurance process for pilot reports was a calibration panel where all 5 reports were worked through against the evidence to understand scoring. The panel comprised members of the internal team and external experts. Discussion at the panel further opened some questions about scoring, with some debates on scores being difficult to settle considering the lack of guidance. However, the panel upheld all the scores and ratings given in the reports. It is thought that a similar panel will continue in the early part of the initial formal assessment period.

Local authority report feedback

Assessment reports were initially shared with local authorities in draft form for comments as part of a factual accuracy process. They were also offered a feedback session with their assessment lead. Those that had this reported on it being incredibly helpful, adding that it helped to clarify anything before submitting any comments about factual inaccuracies. Local authorities also stated that it was reassuring to have the feedback session with the same assessment team leads. It provided consistency throughout the pilot process and gave confidence that the leads knew the context of their local authority.

Overall feedback we received on the reports demonstrated that all local authorities agreed that the report was valuable in reaffirming the areas of improvement required, and scoring by quality statements was received positively. One local authority explained:

> "What really does help is the focus on each of the quality statement and the scoring for each of those… It enables us to look at the areas where we are doing well, but areas where we do need to improve and pay particular focus to. We like the fact it's not generic that you can look at each of the nine quality statements in great detail."

Some local authorities added that they found the percentage scores helpful in understanding where they fell on the scale, and depicting how close they were to increasing their score to motivate themselves and frontline workers. It was stated that a *"blanket score of needs improvement would be depressing."*

There were mixed views from different local authorities about whether their scores and ratings were what they expected. Regardless, all welcomed the feedback to help them improve. One described how a score in one area didn't reflect what they saw in practice and that there was some work for them to do in understanding that.

There were some points about a lack of cohesion between the scores and the narrative in the reports. For example, a narrative that read positively was sometimes followed by a low score relative to the positive framing of the score's justification. One local authority added:

> "At times the descriptions or justifications for the scores were contradictory and didn't appear to match the scores that were given."

Sometimes, local authorities felt that there were not always enough pieces of corroborating evidence to substantiate judgements or to give a clear idea of how the inspectors came to their judgements.

> "There doesn't appear to be a great deal of triangulation. I would have expected more triangulation in the statements that they were making."

All local authorities described how they did not understand the scoring methodology, which may explain a number of the points made. Furthermore, this made it difficult to understand how judgements were made and where weighting was given to the evidence that they had provided in the information return and evidence collected during the fieldwork. Most local authorities expressed some concern that not all evidence had been fully reviewed or that it was hard to differentiate what had been used and what had been omitted. However, local authorities did recognise that the volume of evidence provided was immense and may have been too much for the assessment team to have sifted through.

In terms of the wider report content, local authorities described a good balance of the positive comments and constructive criticism throughout the report. However, all local authorities felt that no recognition was given in the report for self-awareness and areas of improvements that the local authority had identified, which they had presented to CQC themselves. The report was worded in a way that implied CQC had identified the improvements, not the local authority. It was felt that weighting should be applied when the local authority had already identified an area for improvement, especially if the action was already being taken, and that should count for something compared to situations where CQC identifies problems.

There were some points about a lack of clarity on how local authorities could improve. For example, there were some areas where a local authority rated as good, yet there were no recommendations for areas of improvement. Therefore, local authorities were curious as to what they could do to become outstanding. In another example, a local authority's area scored as its second lowest percentage for good, had nothing listed under areas for development.

> "There would be comments stating that "more work needs to be done," without recommending what this means or looks like."

Where suggestions for improvement were made, they were welcomed, and local authorities reported that they were working on implementing these points. Some local authorities even asked for more direct recommendations in the report. However, CQC is clear that its role is not to prescribe to local authorities how to improve.

There were some points about how the reports could benefit from an editorial review before being shared with the local authorities, to pick up grammar errors and typos and to review the terminology used to ensure it is up-to-date. Furthermore, some feedback suggested the structure of reports could be improved as they were found to be disjointed at times. One local authority described it seeming to *"jump from one area to another without a cohesive flow going through them"*.

There were mixed views on the extent to which reports demonstrated that the assessment team understood the local area context of each local authority. One added:

> "I do think the team had a good sense of the population, had a good sense of the people who are in receipt of adult social care and the information that was provided was consistent with what we see and was specific to the population."

However, another explained that certain evidence could be framed negatively without consideration for the context which suggested a lack of understanding.

There was some discussion at the calibration panel and among local authorities of the extent to which housing was linked to Care Act duties. It appears this is something that may need clarification due to some conflicting views on this, which appeared in some of the reports.

Some wider points were made about how far the reports and assessments overall reflect the resourcing challenges that many local authorities are faced with. Concern was raised that local authorities were being scored negatively for things outside of their control, especially when they were being recommended improvements that they may not have the resources to make. One local authority explained their position:

> "Who wouldn't have expected, you know, required some improvement with the pressures that we have in adult social care around delays, and when you've got a very poorly funded local authority. It really is those sorts of things that impinge on the sort of projects that you'd want to develop when you need extra resources."

One local authority suggested that a statement providing a clear recognition of the existing and present challenges local authorities are up against, such as financial resources and council restraints. This would reassure them that they were not being *"judged"* or expected to resolve broader issues outside of their control.

Conclusion

The pilots have provided a thorough opportunity to test CQC's approach to assessing local authorities. Despite early trepidation from the local authorities, intensive timescales and the adjustment to a whole new assessment approach, it has been largely well-received. They also reported that it was largely proportionate to their expectations on reflection, acknowledging this would always be a big piece of work.

The assessment team has also taken on the challenge of simultaneously managing 5 different pilots while also adjusting to a new assessment framework. It is clear that this has been task on a huge scale for those involved. It has confirmed that elements at the heart of CQC's approach, such as the quality statements, are fit for purpose and CQC has created a methodology that can be applied in such a way that accommodates a range of contextual factors about different local authorities.

The most prominent and recurring themes in the feedback have been around how more time and more guidance would have alleviated many of the challenges with the processes that supported the assessment. Time has been an issue due to the pressures of the pilots, and it is unclear at this stage to what extent similar timeframes will be replicated in the initial formal assessment period. The consensus is similar to what we heard in the test and learn exercises – that CQC must do more ahead of the fieldwork. Having significantly longer lead-in times to use the information gathered ahead of fieldwork will enable the fieldwork to focus on the most pertinent opportunities to engage the right people, supplementing what CQC already knows.

Guidance and more specificity about what CQC wants to understand about local authorities has been heard throughout, from the initial information return process, the fieldwork planning and in the fieldwork itself. It is now time for CQC to move away from the relatively open approach taken so far to one that is much more defined. Local authority feedback indicates they would welcome this, and it should result in a more efficient approach all round.

The team would have also benefitted from more guidance on some key areas, such as the allocation of evidence and, quite simply, how much evidence is enough. When it came to scoring, the team aired genuine concerns about the lack of guidance on the model and would have valued guidelines around what constituted different ratings. Without this there is concern for inconsistency and challenge in judgements if teams have no formal guidance to fall back on. CQC will need to carefully consider how it supports these requests, also considering the new staff who will be joining the local authority assessment team and the importance of training and inducting them well to all aspects of the new approach.

The full value and role of assessment reports will be seen more once they are published, but we know improvements to their structure have been made. If these improvements were coupled with more guidance for the team on the level of evidence to include, which strikes the balance of succinctness without losing meaning, the team would have more confidence in the reports. As it stands, not everyone is clear on the primary audiences for reports so this needs to be conveyed as CQC starts the initial formal assessments.

From the local authorities' perspectives, the pilot assessment reports helped them to reaffirm areas for improvement. Some local authorities felt they could go further in providing recommendations and clear steps to improve ratings. All felt there should be consideration in judgements for if or how local authorities were already addressing identified areas for improvement. Local authorities raised some concerns about the strength of corroborating evidence in relation to some judgements, and a lack of cohesion between the narrative and judgements at times. They all expressed wanting to understand the scoring model and process more, and earlier in the pilots.

As the pilots come to a close, the team and the local authorities are acutely aware that the formal assessment period is set to begin in earnest. There is apprehension about this period and whether there is sufficient scope for the learning from the pilots to bed in, while ensuring CQC takes a consistent and clear approach into the next phase. While the methodology fared well in the pilots, the ultimate test of this will come next when the true range of local authorities will be subject to this approach. This will include local authorities that may have challenges that test the methodology in a way that CQC did not encounter in the pilots, with what were a relatively willing audience. It will also be vital to the success of the approach that CQC is mindful of communicating frequently and thoroughly with the local authorities who are greatly interested in how they can best prepare themselves.