



Private and Confidential

# Position Specification

Care Quality Commission

Chief Inspector of Hospitals

Reference number 1703-045L

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## Letter from the Chief Executive of the Care Quality Commission

I am looking for a fantastic person to join my Executive Team to replace Professor Sir Mike Richards.

The Care Quality Commission (CQC) is the independent regulator of health and adult social care in England. CQC's role is to ensure that health and social care services provide people with safe, effective, compassionate and high-quality care, whilst encouraging improvement to these services. The CQC's new five year strategy, ***Shaping the Future***, sets out an ambitious plan for a more targeted, responsive and collaborative approach to regulation so more people receive more high quality care. The next five years will be an exciting period and the Chief Inspector of Hospitals will play a pivotal role in turning this strategy into a reality.

The Chief Inspector will take over from Professor Sir Mike Richards, who retires later in 2017, and will be responsible for the delivery of a new flexible intelligence driven inspection model that can accommodate new models of care, in line with CQC's strategy. Accountable to the Chief Executive and a member of CQC's Unitary Board and executive team, the Chief Inspector will be a highly influential figure who possesses the requisite political acumen and professional standing to be credible with the Secretary of State, clinical professionals, the public and the 500 professionals in the Hospitals Directorate.

The successful candidate for this pivotal role will need to be a gifted communicator and leader, capable of engaging a dispersed team. They will need to demonstrate the ability to engage clinicians, ministers and members of the public and contribute as a senior leader to CQC's strategy and direction. The Chief Inspector will be a clinician or board executive with significant experience in the NHS, have impeccable professional values, and the ability to act as the authoritative public face of the CQC in communication with the media and the public about the national state of healthcare.

We look forward to hearing from you.

A handwritten signature in black ink, appearing to read 'David Behan', with a large, stylized initial 'D'.

Sir David Behan  
Chief Executive

## Introduction

The Care Quality Commission (CQC) is the independent regulator of health and adult social care in England and ensures the country's health and social care services provide people with safe, effective, compassionate, high-quality care, and also encourages improvement to these services.

### *Summary of CQC's role*

- Register health and adult social care providers.
- Monitor and inspect services to see whether they are safe, effective, caring, responsive and well-led, and publish findings, including quality ratings.
- Use its legal powers to take action where it identifies poor care.
- Speak independently, publishing regional and national views of the major quality issues in health and social care, and encouraging improvement by highlighting good practice.

### *Summary of CQC values*

- Excellence – being a high-performing organisation.
- Caring – treating everyone with dignity and respect.
- Integrity – doing the right thing.
- Teamwork – learning from each other to be 'the best we can be'.

### *CQC Strategy for 2016 – 2021*

CQC's new five year strategy, "Shaping the Future", published in May 2016, has been developed using feedback received from thousands of people -- including providers, staff and partners -- and learnings from more than 22,000 inspections. It sets out an ambitious future for a more targeted, responsive and collaborative approach to regulation, so more people get high quality care.

A full strategy can be downloaded at [www.cqc.org.uk/content/our-strategy-2016-2021](http://www.cqc.org.uk/content/our-strategy-2016-2021)

The next five years will be an exciting period to make its strategy a reality, and the CQC will work closely with individuals who use health and social care services, the providers it regulates, plus its national and local partners, to develop a regulatory approach relevant and appropriate for fast-changing health and adult social care services in England.

The first Chief Inspector of Hospitals, Professor Sir Mike Richards, has done an outstanding job of establishing the inspection regime, building capacity and capability, and delivering a highly credible inspection service. Professor Sir Mike retires later in 2017 and an outstanding successor is sought.

## **The Role of Chief Inspector of Hospitals**

Directly accountable to the Chief Executive and a member of the CQC Unitary Board and Executive Team, the Chief Inspector is an influential figure and will need the requisite political acumen and professional standing to be credible with the Secretary of State, clinical professions and the public.

With overall responsibility for assessing how well hospitals put the quality of care at the heart of everything that they do, the Chief Inspector will lead regional teams of inspection colleagues including, where appropriate, specialist advisors, Experts by Experience and Mental Health Act Reviewers, to assess whether services are safe, effective, caring, responsive and well led. Where Trusts are in breach of these standards, the Chief Inspector will determine whether enforcement action should be taken.

The Chief Inspector is responsible for the delivery of a new, flexible risk based inspection model through which we can accommodate new models of care. They will also be committed to building a single shared view of quality across providers, commissioners and regulators. As part of this work, the Chief Inspector will work with the National Quality Board, in particular with NHS Improvement, NHS England and the National Institute for Health and Care Excellence, to define what good quality care looks like.

Internally, the Chief Inspector will work to ensure that CQC is able to assess quality from the perspective of people using care across multiple services and in both hospital and community settings. Acknowledging that the way care is delivered is changing, the Chief Inspector will need to work closely with our Adult Social Care and Primary Medical Services Directorates to integrate inspection teams.

### **Key tasks and responsibilities**

The new Chief Inspector will:

- Deliver CQC's methodology for hospital inspections and for working with the board of the CQC to ensure the effective regulation of care in England.
- Lead a system of hospital inspections that includes in-depth inspections and incorporates a rigorous intelligence-based approach to decisions about the frequency and depth of such inspections.
- Lead inspections of mental health services that provide support and treatment largely in specialist community based settings.
- Work to ensure a culture of collaboration across hospital inspection teams and colleagues and business partners in the enabling directorates, Strategy and Intelligence and Customer and Corporate Services in support of CQC's ambition to embrace ways of working and technology to efficiently deliver person-centred care.
- Control, monitor and review expenditure against a set budget for the directorate, ensuring that spending is managed within budget and that prompt and appropriate action is taken to tackle any variances.
- Build key working relationships with Department of Health, NHS England, NHS Improvement, hospital management, the clinical professions and other key stakeholders, whilst maintaining independence and ensuring that the CQC is on the side of patients.
- Work closely with the medical and nursing professions, the Medical Royal Colleges, the RCN and other national organisations to build a network of clinicians and senior managers who will contribute to the inspection process.
- Encourage a culture of candour within hospitals so that concerns are reported through the correct channels.

- Ensure CQC’s quality judgements about hospitals are sufficiently rigorous to trigger escalation, take regulatory action and place Trusts into a failure regime, working closely with other national regulators.
- Engage the public in the work of the CQC, securing their trust in the activities and judgements of the inspections team and ensuring intelligence and information from the public is fed into inspection decisions.
- Determine the set of data which will be used to contribute to judgements about hospitals, working closely with NHS England, NHS Improvement and NHS Digital (formerly NHS Health and Social Care Information Centre).
- Understand the digital agenda and how this can inform the way CQC regulates in the future
- Conduct in-depth and standard assessments of a hospital’s current care quality performance, Board governance and organisation culture.
- Work with other hospital regulators on regulatory issues from authorisation of Foundation Trusts through to escalation and regulatory action.
- Advise on the capacity and capability of trusts entering the failure regime or undergoing reconfiguration to deliver fundamental standards of care.
- Encourage a culture that values rigour and challenge.
- Contribute effectively to the CQC board.
- Be accountable, authoritative public face of CQC in communication with the general public about the national state of hospital care and the quality of hospital care more broadly.
- Publish the annual state of health and care report.

## **Candidate Profile**

The successful candidate will be able to demonstrate evidence of the following **core skills and experience**:

### *Leadership and change management:*

- A gifted communicator and leader capable of engaging a large, dispersed workforce c.500 colleagues.
- Contribute fully as a senior leader to CQC’s overall strategy and direction, and the effective operation of the organisation.
- Assume joint responsibility, with other senior leaders, for corporate performance, the achievement of the organisation’s strategic objectives and the effective management of risk.
- Outstanding strategic skills with a proven track record in effective change management.
- Impeccable and unquestioned professional values, capable of creating, leading and inspiring cultural change within an organisation and the ability to do so across a sector.
- Experience in large scale, complex organisations.

### *Capability and integrity as a leader in the health system to:*

- Engage clinicians, ministers and members of the public on complex and sensitive issues and gain the confidence of clinicians and hospital leaders.
- Support and enable the board to deliver across all the activities of CQC.

- Understand the effectiveness of quality indicators and potential approaches to measuring care quality through metrics.
- The post holder should be a Clinician or Board Executive with significant experience in the NHS.
- Although regulation experience would be desirable, it is not essential.

*Personal Effectiveness:*

- Well-developed interpersonal skills, authority and judgement including the ability to communicate well with a wide range of audiences.
- Experience in building strong relationships and delivering with and through others.

In addition to the above, the new Chief Inspector will demonstrate the following **key competencies**:

- Lead teams across CQC to commit to our overall success and to deliver our defined regulatory and organisational outcomes and to explore new ideas.
- Inspire others through their own individual performance in support of the delivery of CQC's regulatory model, is open to constructive challenge and feedback.
- Set a compelling vision and direction for stakeholders and CQC teams, leads internal and external stakeholders to deliver together.
- Represent CQC internally and externally as an effective and independent regulator for health, deputising for the Chief Executive when necessary.
- Motivate and drives teams to achieve challenging performance standards, deliver with a sense of urgency and to demonstrate resilience.
- Apply sound judgement to make difficult decisions, and take responsibility for the resolution of issues at a senior level.
- Support others to improve and grow, translating strategic priorities into tangible team and personal objectives and ensuring the consistent application of effective performance management practices.
- Promote and embed equality, diversity and human rights as a foundation for individual and team success.

## **Values & Behaviours**

The Chief Inspector will exemplar the values and behaviours expected of all CQC employees:

**Excellence** in my work for CQC:

- I set high standards for myself and others, and take accountability for results
- I am ambitious to improve and innovate
- I encourage improvement through continuous learning
- I make best use of people's time, and recognise the valuable contribution of others

**Caring** in my work for CQC:

- I am committed to making a positive difference to people's lives
- I treat everyone with dignity and respect
- I am thoughtful and listen to others

- I actively support the well-being of others

**Integrity** in my work for CQC:

- I will do the right thing
- I ensure my actions reflect my words
- I am fair and open to challenge and have the courage to challenge others
- I positively contribute to building trust with the public, colleagues and partners

**Teamwork** in my work for CQC:

- I provide high support and high challenge for my colleagues
- I understand the impact my work has on others and how their work affects me
- I recognise that we can't do this alone
- I am adaptable to the changing needs of others

## **Terms and Conditions**

This will be full-time role commanding a competitive compensation package.

### **Location**

Flexible base, national travel, with expectation of frequent travel to London.

### **Pension**

CQC operates the NHS Pension Scheme, and all new starters are automatically placed into the scheme on starting employment.

The scheme is currently a contracted out, final salary, defined benefit arrangement and contributions are banded depending on the appointee's rate of whole time equivalent pay.

For more information, please visit the NHS Pension Scheme's official website:

<http://www.nhsbsa.nhs.uk/pensions>

### **Leave entitlement**

There is an annual leave allowance of 27 days, plus 8 days bank holidays, pro rata.

### **Conflict of Interest**

Candidates will have to declare any interests they may have that might cause questions to be raised about their attitude to the business of CQC. Candidates are required to declare any relevant business interests, shareholdings, positions of authority, retainers, and consultancy arrangements or other connections with commercial, public or voluntary bodies, both for themselves and for their spouse/partner. The successful candidate will be required to give up any conflicting interests and other business and financial interests may be published.

### **Transparency**

The Government has set out its clear commitment to improved transparency about how it spends public money. Greater transparency is at the heart of the Government's commitment to enable the public to hold politicians and public bodies to account. Details of the successful candidate's remuneration including pension benefits will be subject to disclosure.

## Nationality

The post is open to EU nationals, members of the Commonwealth, European Economic Area (EEA), Swiss nationals and certain non-EEA family members. Candidates from the Commonwealth must be free from any restrictions to reside and take up employment in the UK.

## Equal Opportunities

CQC aims to be a modern and equitable employer. They recognise and encourage the potential of a diverse workforce, positively welcome all applications, and appoint on merit,

## Guaranteed Interview Scheme for Disabled People

CQC operates a guaranteed interview scheme for disabled people (as defined by the Disability Discrimination Act 1995), who meet the minimum essential criteria for this appointment outlined in this document.

## Complaints

CQC's recruitment processes are underpinned by the principle of selection for appointment on merit based on fair and open competition as outlined in the Civil Service Commission's Code which can be found at [www.civilservicecommission.org](http://www.civilservicecommission.org). If you feel your application has not been treated in accordance with the Code and you wish to make a complaint, you should contact the Head of Recruitment in the first instance. If you are not satisfied with the response you receive, you can contact the Civil Service Commission.

## Diversity and Equality:

CQC is committed to appointing a diverse, talented and high-performing individual and welcomes applications from candidates irrespective of their background, gender, race, sexual orientation, religion or age, providing they meet the required criteria. Annex 1 includes Monitoring Form(s) for completion.

## The Selection and Recruitment Process

Russell Reynolds Associates has been appointed to support this recruitment. An indicative timetable is given below, subject to change.

Advertisement closes	Noon, 28 April 2017
RRA interviews	Target Weeks 8, 15 May
Stakeholder engagement / Media assessments/other	Target Week 22 May
Final Interviews	31 May 2017

The selection panel is likely to comprise at least:

- Sir David Behan, Chief Executive, CQC
- Peter Wyman, Chair, CQC

For an informal conversation about the role please contact:

Avalon Lee-Bacon	<a href="mailto:avalon.lee-bacon@russellreynolds.com">avalon.lee-bacon@russellreynolds.com</a>
Patrick Johnson	<a href="mailto:fiona.birkmire@russellreynolds.com">fiona.birkmire@russellreynolds.com</a>

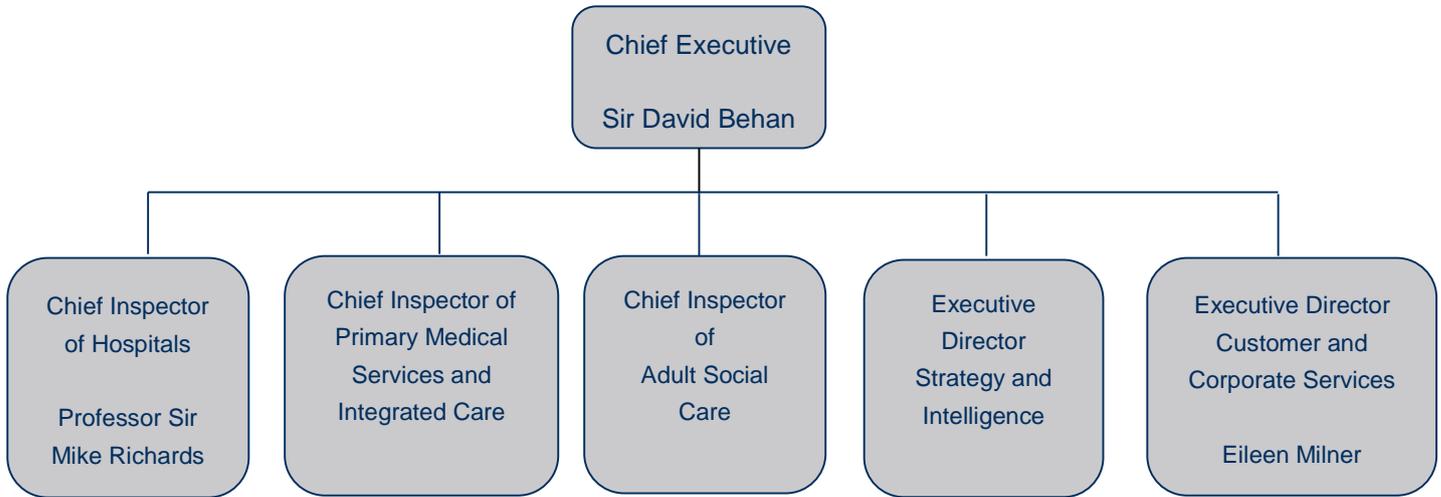
## Application Instructions

All applications must include the following and submitted by email to: [Responses@RussellReynolds.com](mailto:Responses@RussellReynolds.com)

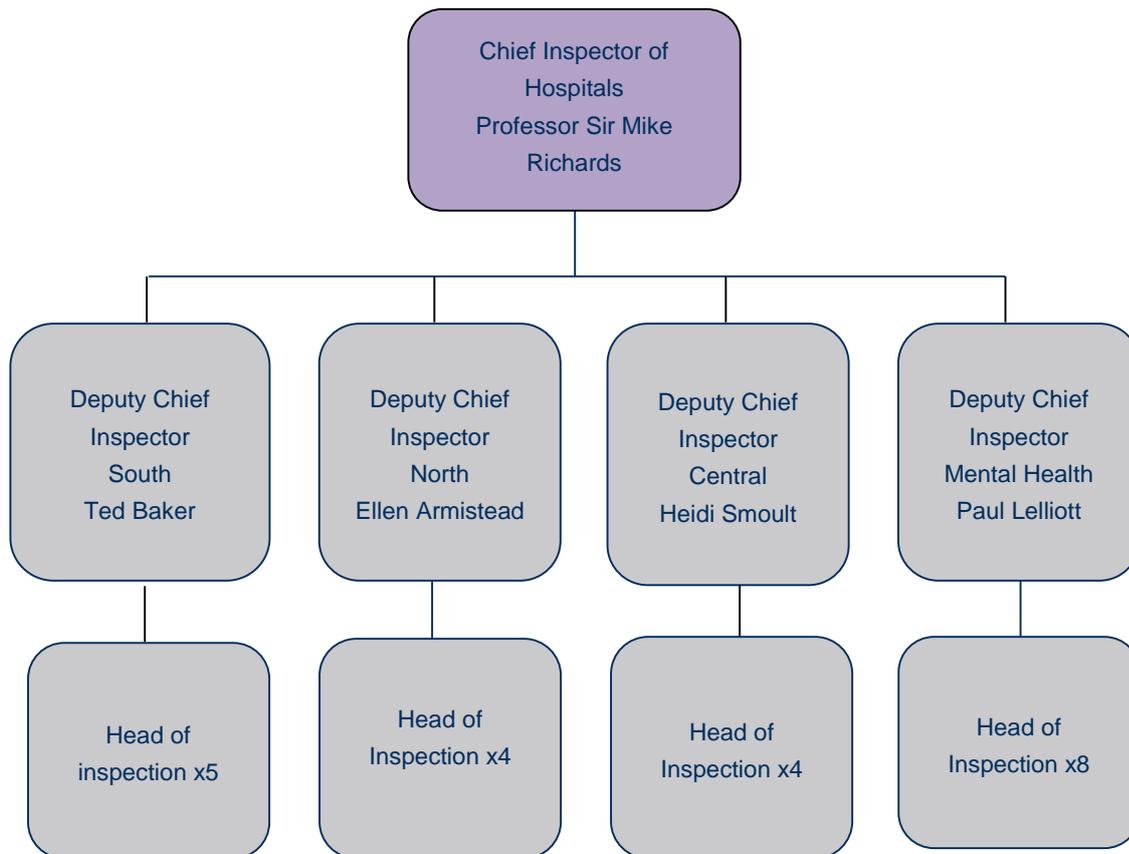
- The reference number in the subject line 1703-045L.
- A short covering letter of not more than two A4 sized pages explaining why this appointment interests you and how you meet the appointment criteria and competencies as detailed in the candidate profile.
- A current CV with educational and professional qualifications and full employment history where possible giving details where applicable, of budgets and numbers of people managed, relevant achievements in recent posts, together with reasons for absence within the last two years.
- Names of at least two referees who may be contacted at short list stage, i.e. *before* final interview.
- Confirmation from you that you are happy for Russell Reynolds Associates or its client to undertake any necessary background checks, including career, credit and qualifications, or similar, post short list stage.
- The willingness and ability to confirm that you are a 'fit and proper person'.
- Notification of any dates you are unable to accommodate within the indicative timetable set out in the previous section.
- Your mobile number – and any other useful contact telephone numbers – together with your preferred e-mail address, which will be used for all correspondence between us.
- The completed monitoring forms contained in the attached **Annex 2 and 3**.

If you have any questions please contact [\[fiona.birkmire@russellreynolds.com\]](mailto:fiona.birkmire@russellreynolds.com).

**CQC Organisation Chart – Executive Team**



**Hospitals – Current Senior Management Structure Chart**



**Annex 2: Personal Details**

<b>Surname:</b>	<b>Forename(s):</b>	<b>Title:</b>
<b>Address for correspondence:</b>		
<b>Postcode:</b>		
<b>Mobile and/or other Telephone Number(s) for the purpose of this application, including international dialing code(s):</b>		
<b>E-mail address for the purpose of this application:</b>		

### Annex 3: Monitoring Questionnaire

This section of the application form will be detached from your application form. The information collected will only be used for monitoring purposes in an anonymised format and will help the organisation analyse the profile and make up of applicants and appointees to jobs in support of their equal opportunities policies. NHS organisations recognise and actively promote the benefits of a diverse workforce and are committed to treating all employees with dignity and respect regardless of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation. We therefore welcome applications from all sections of the community.

* Date of Birth	
* Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> I do not wish to disclose this

#### Equality Act 2010

* I would describe my ethnic origin as:		
<p><b>Asian or Asian British</b></p> <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Any other Asian background	<p><b>Mixed</b></p> <input type="checkbox"/> White & Asian <input type="checkbox"/> White & Black African <input type="checkbox"/> White & Black Caribbean <input type="checkbox"/> Any other mixed background	<p><b>Other Ethnic Group</b></p> <input type="checkbox"/> Chinese <input type="checkbox"/> Any other ethnic group <input type="checkbox"/> I do not wish to disclose this
<p><b>Black or Black British</b></p> <input type="checkbox"/> African <input type="checkbox"/> Caribbean <input type="checkbox"/> Any other Black background	<p><b>White</b></p> <input type="checkbox"/> British <input type="checkbox"/> Irish <input type="checkbox"/> Any other White background	

#### Equality Act 2010

* Please select the option which best describes your sexual orientation		
<input type="checkbox"/> Lesbian <input type="checkbox"/> Gay <input type="checkbox"/> Bisexual	<input type="checkbox"/> Heterosexual <input type="checkbox"/> I do not wish to disclose this	
* Please indicate your religion or belief		
<input type="checkbox"/> Atheism <input type="checkbox"/> Buddhism <input type="checkbox"/> Christianity <input type="checkbox"/> Islam	<input type="checkbox"/> Jainism <input type="checkbox"/> Sikhism <input type="checkbox"/> Judaism	<input type="checkbox"/> Hinduism <input type="checkbox"/> Other <input type="checkbox"/> I do not wish to disclose this

## Equality Act 2010

The Equality Act 2010 protects disabled people - including those with long-term health conditions, learning disabilities and so called "hidden" disabilities such as dyslexia. If you indicate that you have a disability we can make reasonable adjustments to ensure that any selection processes - including the interview - are fair and equitable.

* Do you consider yourself to have a disability?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I do not wish to disclose this information
Please state the type of impairment that applies to you. People may experience more than one type of impairment, in which case you may indicate more than one. If none of the categories apply, please mark 'other'.	
<input type="checkbox"/> Physical Impairment <input type="checkbox"/> Sensory Impairment <input type="checkbox"/> Mental Health Condition	<input type="checkbox"/> Learning Disability/Difficulty <input type="checkbox"/> Long-standing illness <input type="checkbox"/> Other