

Sponsored & International workers: a CQC perspective

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Our role and purpose

The Care Quality Commission is the independent regulator of health and adult social care in England.

We make sure health and social care services provide people with safe, effective, compassionate, high-quality care and we encourage care services to improve.





Review into the operational effectiveness of the CQC

Dr Penny Dash

Interim report in July 2024 and final report in October 2024.

Recommendations were around:

- **Rapidly improving operational performance**
- **Rebuild expertise**
- **Review the SAF**
- Evolve and improve **local authority assessments**
- Formally pause **ICS assessments**
- **Strengthen sponsorship arrangements**



Review of CQC's single assessment framework and its implementation

Professor Sir Mike Richards

Commissioned by CQC and published in October 2024.

Recommendations were around:

- The **structure** of the organisation
- The **assessment framework**
- **Data and insight**
- **Staffing**, and
- **Prioritisation** of future inspections



Review of CQC's single assessment framework

Care Provider Alliance

Commissioned by CQC and published in February 2025.

Recommendations were around:

- **Reduced set of Qs**
- Guidance for each service type
- Use **Provider Information Return** to plan for assessment
- Ensure decision-making evidence **corroborated**
- Re-write reports
- Shared and meaningful **co-production**
- Re-introduce a **single point of contact**
- Train inspectors on each type of care service
- Independent body to mediate complaints
- Effective communications

Leadership and Expertise

- Sir Julian Hartley was appointed as CEO, and Professor Sir Mike Richards was appointed the Chair of CQC, we have started recruitment for 4 permanent Chief Inspectors expected to start in the Spring/Summer.
- We have recruited our first permanent Chief Inspector of Mental Health, Dr Arun Chopra.
- We have recruited our permanent Chief Inspector of Primary Care and Community Healthcare, Professor Bola Owolabi.
- We will work to align our assessment teams under Chief Inspectors and around areas of sector expertise.
- We're further integrating our Operations and Regulatory Leadership reflecting recommendations from independent reports.

Reviewing our assessment framework 1/2

- We are considering the independent report findings and feedback from our engagement, to review our assessment framework.
- We have already made changes to our methods for **provider regulation**. These include:
 - Discontinuing scoring at evidence category level
 - Reviewing how we use quality statements for each assessment
 - Reviewing how we use our professional judgement when producing a final rating.

Reviewing our assessment framework 2/2

- We will continue to use these recommendations to look at how we can improve our framework and its methodology.
- This will include:
 - The content of the framework
 - Developing ratings characteristics and supporting guidance
 - Reviewing our approach to ratings judgements and the use of scoring evidence categories.

Inspection and technology

- We are taking some immediate actions to make sure we can;
 - publish reports,
 - carry out more assessments,
 - clear our registration backlog, and
 - make sure that we've acted promptly on information of concern and notifications.
- We committed to making sure we have the right systems and tools in place to support our regulatory activity.

The action we're taking

What we've done so far...

- Implemented a process to **help publish reports** we've already carried out, which people have been waiting too long for
- **Started to clear our registration backlog**
- Started to **reduce our backlog of information of concern cases and notifications**
- **Engaged with colleagues, providers, people who use services and wider stakeholders** to start co-designing a shared understanding of the organisation's purpose, vision, values, and expected behaviour.

What we're doing next...

- **More assessments:** continuing to test new approaches to how we assess so we can increase the number
- **Registration improvements:** tackling applications that are over 10 weeks old and updating our guidance
- **Clearer assessment approach:** reviewing our assessment framework, methods and guidance
- **Structural changes:** appointing permanent chief inspectors to provide sector leadership and expertise

CQC & UKVI – Roles and Collaboration

- CQC (Care Quality Commission): Regulates health and adult social care in England.
- Focus: Safe, effective, high-quality care (Health and Social Care Act 2008)
- UKVI (UK Visas and Immigration): Manages immigration, visas, and sponsor licensing.
- Focus: Immigration control and compliance (Immigration Act 1971)
- **We have a Service Level Agreement in place with the UKVI**
- SLA ensures cooperation via:
 - **Information Sharing** (e.g., care provider quality, visa sponsorship concerns)
 - **Joint Risk Management** of immigration and care breaches
 - **Sponsor License Checks**: Providers must meet CQC standards to sponsor overseas workers

CQC & UKVI – Roles and Collaboration

The service level agreement ensures:

- Overseas workers are employed by safe, legal care providers
- Protects vulnerable individuals from exploitation
- Helps prevent immigration abuse through unfit providers
- Supports shared enforcement and compliance actions

How we work together:

- Regular Communication: Dedicated contacts in both agencies coordinate to discuss cases of concern.
- Support Investigations: In cases of suspected visa abuse or illegal employment, CQC and UKVI may collaborate.
- Compliance Monitoring: CQC ensures that providers meet care standards, while UKVI ensures providers comply with immigration and sponsorship laws. Shared compliance data supports both mandates.
- **The CQC will work closely with all system partners/stakeholders**, particularly with the Local Authorities, Police services, and the HMRC.

CQC & UKVI – Roles and Collaboration

The potential risks include:

- the continuity of care – people not receiving their care package
- risks of harm to people using the service
- risk of harm to the care workers from being victims of modern slavery
- the service losing a significant percentage of the workforce
- the ongoing financial viability of the provider
- impact on the local health and social care economy – contracts with local authorities/commissioners.
- fitness of provider/company directors
- CQC registration is being used to conceal unlawful immigration practices.

We will engage with the provider to determine (examples):

- the number of service users/care packages impacted
- ask about care package complexity
- total % of workforce employed on visa
- **details of contingency plans to mitigate risks**
- any children's care packages
- commissioner/funding details and number of packages
- details of financial impact and sustainability of the provision of the service
- the skills and competency of the migrant workers, to safely provide care
- does the information and grounds raise concerns directly relating to the provider/directors?
- openness and engagement of provider with CQC – were we advised of the suspension?
- explore any indications of modern slavery?

If needed we will serve a section 64 letter: Requirement to provide the Care Quality Commission with specified information and documentation under Section 64 of the Health and Social Care Act 2008,

What is CQC's remit:

Modern Slavery and Unethical International Recruitment is present in all sectors.

What we <u>cannot</u> do	What we can do
<p>Investigate/assess/inspect concerns relating to</p> <ul style="list-style-type: none">• modern slavery• immigration and visas• international recruitment	<p>CQC will refer to and share the information with relevant partner agencies – Home Office UKVI – GLAA etc</p> <p>Regulate as per Health and Social Care Act & Regulations</p> <ul style="list-style-type: none">• Regulation 19 Fit and Proper persons employed• Regulation 18 Staffing• Regulation 17 Good Governance• Regulation 12 Safe Care and Treatment <p>Assess the risk and determine there is a need for a regulatory response.</p>

CQC Assessments (employment checks)

Purpose:

- Ensure all staff are suitable to work in health and social care settings.

Core Employment Checks Required

- **Proof of Identity (photo ID and address)**
- **Right to Work in the UK**
- **DBS Checks (Enhanced with barred list if applicable)**
- **Employment History (with gap explanations)**
- **References (including most recent employer)**
- **Qualifications & Professional Registration (where relevant)**
- **Health & Fitness to Work (via declaration or assessment)**

Regulation 19 Fit and Proper persons employed

Regulation 18 Staffing

Regulation 17 Good Governance

Regulation 12 Safe Care and Treatment

Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

CQC Assessments (employment checks)

What CQC Looks For During Inspection:

- Checks completed before employment started.
- Sample staff files include all required documentation.
- Recruitment processes reflect Regulation 19 compliance.
- Evidence that references and DBS outcomes were verified and risk-assessed

Providers must ensure they have taken all reasonable actions to assess any international or migrant workers via their selection and assessment processes.

Additional for Senior Roles (FPPR - Regulation 5):

- No history of misconduct, bankruptcy, or care failures
- Fit and Proper Person Requirement checks in place for directors

Top Tip:

Keep clear, dated, and accessible records of all recruitment checks.

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Any Questions???



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