

## CABINET

17 October 2023

<b>Title:</b> Adult Social Care – CQC Assurance and Improvement Update	
<b>Report of the Cabinet Member for Adult Social Care and Health Integration</b>	
<b>Open Report</b>	<b>For Decision</b>
<b>Wards Affected:</b> All	<b>Key Decision:</b> Yes
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<b>Accountable Director:</b> Susanne Knoerr, Interim Operational Director of Adult Social Care	
<b>Accountable Executive Team Director:</b> Elaine Allegretti, Strategic Director, Children and Adults	
<b>Summary</b> <p>The Care Quality Commission (CQC) is now able to assess local authority performance in delivering adult social care responsibilities. The CQC is aiming to assess all local authorities in England over a two-year period, starting later this year.</p> <p>To prepare for CQC assurance, a full self-assessment, summary self-assessment and improvement plan have been developed and are presented in for sign-off:</p> <ul style="list-style-type: none"><li>- The full self-assessment (Appendix 1) sets out in detail where we are doing well and how we know this, where need to improve and the plans in place to address this. The full self-assessment will be given to the CQC in the event of inspection.</li><li>- The summary self-assessment (Appendix 2) is intended to be a more accessible, condensed version of this for stakeholders and residents.</li><li>- The improvement plan (Appendix 3) sets out the outcomes we want to achieve in adult social care in future and the actions to be taken over the next 3-5 years to move towards this and address areas identified in the self-assessment.</li></ul> <p>The self-assessment and improvement plan are structured around the four themes the CQC will look at as part of their assessment, and both have been informed by the view and experiences of staff, people who need care, carers, partners and providers along with performance data and benchmarking insights.</p>	
<b>Recommendation(s)</b> <p>The Cabinet is recommended to:</p> <ol style="list-style-type: none"><li>(i) Agree the Adult Social Care full self-assessment and summary self-assessment, set out at Appendices 1 and 2 to the report respectively, as an accurate reflection of the Council's Adult Social Care service; and</li></ol>	

- (ii) Agree the Adult Social Care Improvement Plan, as set out at Appendix 3 to the report.

### **Reason(s)**

The adult social care self-assessment and improvement plan are in accordance with the following Council principles:

- 'Work in partnership'. The improvement plan includes actions to strengthen this.
- 'Engage and facilitate co-production'. Engagement has been carried out to develop the self-assessment and improvement plan, and the improvement plan includes commitments to strengthen co-production.
- 'Be evidence-led and data driven'. The self-assessment has been informed by evidence and data.
- 'Focus on prevention and early intervention'. The improvement plan includes commitments to prioritise prevention.
- 'Strengthen risk management and compliance'. The self-assessment and improvement plan aim to articulate and better manage risk and compliance with the 2014 Care Act.

CQC assurance is providing a framework through which to drive improvement in adult social care in Barking and Dagenham. This, in turn, is included to contribute towards the Council priority, 'residents and safe, protected and supported at their most vulnerable' and 'residents live healthier, happier, independent lives for longer'.

## **1. Introduction and Background**

- 1.1. The Care Quality Commission (CQC) is now able to review and assess local authority performance in delivering adult social care responsibilities. They are aiming to assess all local authorities in England over a two-year period starting later this year following five pilot inspections over the summer.
- 1.2. The CQC have published an [assessment framework](#) that will be updated again following the pilots. The assessment framework is made up of four themes and nine 'quality statements' against which local authorities will be assessed. These are set out in Appendix 4. To reach a judgement, the CQC will:
- Gather feedback from staff, stakeholder, partners and people who use social care.
  - Look at evidence of processes and outcomes.
  - Carry out case tracking on a small number of cases.
- 1.3 The CQC will request the self-assessment and accompanying evidence in advance of inspection. The self-assessment is intended to describe to the CQC where we are doing well, how we know this, what improvements are needed and what plans are in place to address this. No template has been provided by CQC for this, but guidance is for it to be no longer than 20 pages. The Local Government Association has issued guidance on how to complete the self-assessment, which as informed the final draft presented here (Appendix 1).

- 1.4 The self-assessment (Appendix 1) starts with a two-page summary of adult social care and an overview of Barking and Dagenham and health and wellbeing in the borough. The remainder of the self-assessment is structured around each of the nine quality statements. The primary audience for the self-assessment is the CQC. A more accessible, condensed summary aimed at stakeholders and residents has also been developed (Appendix 2).
- 1.5 An improvement plan for adult social care (Appendix 3) has been written in light of the self-assessment and wider feedback. It is structured around the four CQC themes and describes the outcomes we want to achieve and the actions we will take to do this over the next 3-5 years. The lead for each action in the improvement plan and the deadline for completion is being finalised.
- 1.6 Both the self-assessment and improvement plan have been informed by the views and experiences of staff, people who need care, carers, partners and providers, along with performance data and benchmarking insights. The engagement carried out is described in Section 4.
- 1.7 The self-assessment and improvement plan was discussed at Overview and Scrutiny Committee on 13 September 2023. Changes have been made in light of this, including confirmation in the self-assessment of our whistleblowing policy and additional information on health inequalities.

## **2. Proposal and Issues**

- 2.1 Cabinet is asked to comment on and agree the self-assessment (Appendix 1), summary self-assessment (Appendix 2) and improvement plan (Appendix 3).
- 2.2 Some of the main areas of good practice highlighted in the self-assessment are as follows:
  - There is a timely and robust approach to assessments and reviews, driven by strengths-based practice.
  - Choice and independence is promoted through use of direct payments and technology-enabled care.
  - There is a strong commitment to supporting unpaid carers, and satisfaction levels are comparatively high.
  - There is strong relationship with providers, underpinned by engagement, support and quality assurance.
  - Joint work with health is strong in a number of areas and integration is progressing at a strategic level.
  - Safeguarding is practice-led and there is good practice in relation to complex cases and self-neglect.
  - Our workforce is committed, responsive and stable.
  - A learning, self-aware organisational culture enables continuous improvement.
- 2.3 Some of the main areas of improvement in the self-assessment being addressed in the improvement plan are as follows:
  - Improving communication and information related to adult social care.
  - Moving to a more cohesive, targeted offer of prevention in every local area.

- Developing our offer of reablement and short-term support
- Improving our response to adults at risk of abuse or neglect by developing a Multi-Agency Safeguarding Hub.
- Improving how we work with working-age adults with a disability by re-designing the service.
- Planning for more bed-based capacity in the borough to meet the demands of a growing, changing, ageing population.
- Having a clear articulation of what we do in policy and procedure.
- Moving from engagement towards co-production with people who need support and carers.

2.4 In addition, the self-assessment and improvement plan seek to address how the key risks in adult social care are being managed. Our most significant risks are around our capacity to manage a future increase in demand and complex needs and financial risks arising from budget pressures. The self-assessment concludes that our success has been to manage these risks whilst continuing to provide good support.

2.5 It should be noted that the self-assessment will continue to be updated with new insights. Once agreed, it will be updated every six months, or more frequently if needed.

2.6 Key insights from the self-assessment and improvement plan are intended to be reflected in all key strategic documents, including the next Market Position Statement and Safeguarding Adults Board Annual Report.

2.7 The primary audience for the full self-assessment is both the CQC, and the secondary audience is adult social care staff. To ensure that accessible information is available for residents and other key stakeholders who may not have the technical knowledge of adult social care, a stakeholder and resident-facing summary of the self-assessment has been drafted (Appendix 2). The intention is to finalise and publish this after the full self-assessment has been approved.

### **3. Options Appraisal**

3.1 Option to not have a self-assessment or improvement plan: This is not recommended as it risks leaving Barking and Dagenham under-prepared for CQC assessment.

3.2 Option to agree or amend the self-assessment and improvement plan: This is recommended. We are expecting it to be a requirement of CQC assessments that a self-assessment be submitted. This alongside the improvement plan provides an opportunity to improve on key areas in adult social care, to the benefit of people who need support and carers.

### **4. Consultation**

4.1 Whilst no formal consultation has taken place, a detailed programme of engagement has occurred and continues to take place.

4.2 To date, this has included:

- A series of staff workshops in adult social care, including a Development Day on 27 July 2023 attended by over 100 practitioners.
- A series of meetings with people who need care and carers. This includes with the Forward Together group (for adults with a learning disability) and the Carer Forum. An analysis of existing feedback has already been carried out.
- Ongoing engagement with Care Provider Voice, Healthwatch and the B&D Collective. A provider focus group took place in July 2023 with Care Provider Voice and discussions at an all-provider event took place in September 2023.
- A workshop with partners in relation to the Safeguarding Adults Board and CQC assurance.
- Engagement with health partners via the Executive Group, reporting to the committee-in-common of the Health and Wellbeing Board and Integrated Care Board sub-committee.

4.3 Further engagement is planned, including with people who need support, carers and residents. A series of focus groups is being planned across the remainder of 2023 with a view to shaping the delivery of the improvement plan. Further engagement will also be held with Care Provider Voice, Healthwatch and the B&D Collective.

4.4 Ongoing engagement with neighbouring boroughs is also taking place to share good practice. A North East London CQC Assurance Leads group meets fortnightly, reporting to the North East London Directors Group. A pan-London group is also enabling good practice and information-sharing at a regional level.

4.5 The proposals in this report were considered and endorsed by the Adults Improvement Board and Cabinet Member for Health and Social Care Integration in July 2023 and by the Executive Management Team at its meeting on 17 August 2023.

4.6 As mentioned in Section 1.7, the self-assessment and improvement plan was discussed at Overview and Scrutiny Committee on 13 September 2023. Changes have been made in light of this, including confirmation in the self-assessment of our whistleblowing policy and additional information on health inequalities.

## **5. Financial Implications**

Implications completed by: Paul Durrant, Finance Business Partner

5.1 There are no direct financial implications arising from this report. The actions in the improvement plan can be met through existing and/or agreed resources and do not require additional resources.

5.2 It is possible that local authorities who receive a poor rating following CQC assessment will need to consider further expenditure to take corrective action on issues found.

## **6. Legal Implications**

Implications completed by: Nicola Monerville, Principal Solicitor

6.1 This report is for review and consideration and Cabinet is recommended to agree.

- (i) the adult social care full self-assessment (Appendix 1) and summary self-assessment (Appendix 2) as an accurate reflection of where we are doing well, how we know this, where we need to improve and the plans in place to address this.
- (ii) the adult social care improvement plan (Appendix 3).

6.2 The Health and Care Act 2022 has given the CQC new powers which allow assessment of care at local authority level. As part of the assessment, the CQC looks at how well local authorities meet their duties under the Care Act 2014.

6.3 Between April and December 2023, the outcome of assessments will not be published but form part of an annual statutory State of Care report to Parliament.

6.4 From early 2024 formal assessments will take place, the findings of which will be reported and however each individual local authority rating will also be published.

## 7. Other Implications

7.1 **Risk Management** - There is a reputational risk associated with CQC assessment if the local authority were to receive a poor inspection outcome. The self-assessment and improvement plan are intended to minimise this risk. There is a risk of intervention if the local authority were to receive a poor inspection outcome, in line with [recently published government guidance](#). The self-assessment and improvement plan are intended to minimise this risk.

7.2 **Staffing Issues** – CQC assurance preparation is currently being led by a one-year fixed-term postholder. A new Safeguarding and Quality Assurance team has been approved within adult social care: Part of the team will include a Quality Assurance and CQC Lead. The permanent postholder will ensure that the self-assessment is continually updated and will continue to oversee delivery of the improvement plan.

7.3 **Corporate Policy and Equality Impact** - The self-assessment includes analysis on what works well and where improvements are needed in relation to the CQC quality statement on 'equity in experience and outcomes'. It also includes analysis on workforce equality. The improvement plan then sets out actions to address issues identified in the self-assessment. The actions in the improvement plan in relation to equalities are:

- Improve recording of protected characteristics on Liquid Logic.
- Carry out annual insight work to understand inequalities in adult social care (access, experience, outcomes), including safeguarding.
- Agree clear objectives to promote equality, diversity and inclusion in adult social care and review progress each year.
- Develop and agree the Workforce Race Equality Standard action plan.

7.4 **Safeguarding Adults and Children** - The self-assessment includes analysis on what works well and where improvements are needed in relation to the CQC quality statement on safeguarding. The improvement plan then sets out actions to improve the safety and wellbeing of adults at risk in the borough: These are listed under the 'ensuring safety' theme in Appendix 3.

- 7.5 **Health Issues** - The improvement plan aims to have a positive impact on the health and wellbeing of residents through, for example, prioritising the prevention of health and care needs and promoting integrated working with health.

**Public Background Papers Used in the Preparation of the Report:** None

**List of appendices:**

- Appendix 1: Self-assessment of adult social care in Barking and Dagenham
- Appendix 2: Summary of the self-assessment.
- Appendix 3: Adult Social Care Improvement Plan
- Appendix 4: Overview of CQC themes and quality statements