



Adult Social Care Scrutiny Commission Report

Adult Social Care Assurance

Lead Member: Cllr Sarah Russell

Lead Strategic Director: Martin Samuels

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Wards Affected: All
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1. Purpose

- 1.1 To provide the Adult Social Care Scrutiny Commission with an overview of preparation for the Care Quality Commission's (CQC) Adult Social Care assurance process, which is currently expected to commence in April 2023.

2. Summary

- 2.1 Adult Social Care (ASC) is subject to a substantial programme of reforms, as previously described (ASC Scrutiny Commission, 18 August 2022: Health and Care Reforms ([Public Pack](#))[Agenda Document for Adult Social Care Scrutiny Commission, 18/08/2022 17:30 \(leicester.gov.uk\)](#))
- 2.2 Within this programme, the white paper, "People at the Heart of Care" created a new duty for CQC, to become responsible for assessing local authorities' delivery of their adult social care duties, under part 1 of the Care Act.
- 2.3 A draft framework has been shared by CQC, which sets out a series of quality statements against which Local Authorities will be assessed, together with detail about the sources of evidence that will be sought to support a judgement on the delivery of ASC. The draft framework has been developed in the context of CQC's new Single Assessment Framework, which sets out what people should expect a good service or system to look like using quality statements: the ASC framework will use a subset of these, as the statutory duties being assessed as substantially different to that of registered providers of care.
- 2.4 At time of writing, there is minimal detail about the CQC's plans for the implementation of the assurance process, even though this is due to begin in little more than four months, and this report focuses on the steps the ASC divisions are taking to prepare for the assurance process, as it commences.

3. Recommendations

3.1 The Adult Social Care Scrutiny Commission is recommended to:

- a) Note the report and to provide comment/feedback.

4. Report

4.1 In advance of the commencement of an assurance process, CQC has published its draft framework, so as to enable Councils to prepare for the new obligations that start in April 2023. The detail about how CQC will enact their assurance approach is still unknown, including what information will be sought in advance, the core dataset that might be required, the timelines for any submissions and the detail of any on-site inspections. Although there are likely to be a number of similarities between the new CQC system and the approach towards inspection of children's social care that has been adopted by OFSTED for many years, there will also be significant differences. Key amongst these are likely to be the different Assurance Framework approach used by CQC, their more mechanical system of ratings, and the fact that the vast majority of ASC delivery is external to local authorities, which may well affect the approach to seeking evidence from external partners.

4.2 It is over 10 years since ASC has been subject to a statutory assurance or inspection programme. Councils have been working together across the East Midlands, to prepare as best they are able, drawing in learning from colleagues in Children's services from the OFSTED approach and using external resources to offer constructive challenge and support.

4.3 A regional ASC Assurance network meets monthly, enabling lead officers to share best practice and to work together on common areas for development, such as approaches to co-production.

4.4 The region has also secured support from a well-respected former DASS, to lead a process of preparation including an 'annual challenge conversation', which will test a Council's position against the CQC draft framework.

4.5 The key area of focus is presently on the completion of two components that will inevitably form a part of CQC's approach: a written self-assessment and a data set.

CQC Draft Assurance Framework

4.6 The draft framework sets out 4 domains, supported by quality statements, and using the Making it Real 'I' and 'We' statements. The framework references the policies, strategies and guidance it would expect a Council to have in place (and be able to show) and there is limited reference to data sources. It is anticipated that a replacement for the Adult Social Care Outcomes Framework (ASCOF), which is the existing national dataset for ASC, will be published.

4.7 The high level (draft) detail of each of the 4 domains and 2 quality statements per domain is set out below (4.7.1 – 4.7.4)

4.7.1 How local authorities work with people

Assessing needs

We maximise the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

✓ I have care and support that is coordinated, and everyone works well together and with me.

✓ I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and goals.

Supporting people to live healthier lives

We support people to manage their health and wellbeing so they can maximise their independence, choice and control, live healthier lives and where possible, reduce future needs for care and support.

✓ I can get information and advice about my health, care and support and how I can be as well as possible – physically, mentally and emotionally.

4.7.2 How local authorities provide support

Care provision, integration and continuity

We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.

✓ I have care and support that is coordinated, and everyone works well together and with me.

Partnerships and communities

We understand our duty to collaborate and work in partnership, so our services work seamlessly for people. We share information and learning with partners and collaborate for improvement.

✓ Leaders work proactively to support staff and collaborate with partners to deliver safe, integrated, person-centred and sustainable care and to reduce inequalities.

4.7.3 **How local authorities ensure safety**

Safe systems, pathways and transitions

We work with people and our partners to establish and maintain safe systems of care, in which safety is managed, monitored and assured. We ensure continuity of care, including when people move between different services.

✓ When I move between services, settings or areas, there is a plan for what happens next and who will do what, and all the practical arrangements are in place.

✓ I feel safe and am supported to understand and manage any risks.

Safeguarding

We work with people to understand what being safe means to them and work with our partners to develop the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect. We make sure we share concerns quickly and appropriately.

✓ I feel safe and am supported to understand and manage any risks.

4.7.4 **Leadership**

Governance, management and sustainability

We have clear responsibilities, roles, systems of accountability and good governance to manage and deliver good quality, sustainable care, treatment and support. We act on the best information about risk, performance and outcomes, and we share this securely with others when appropriate.

Learning, improvement and innovation

We focus on continuous learning, innovation and improvement across our organisation and the local system. We encourage creative ways of delivering equality of experience, outcome and quality of life for people. We actively contribute to safe, effective practice and research.

4.8 A template is being produced within the East Midlands region, to support a consistent approach to the preparation of a self-assessment against the quality statements. This will cover the elements of narrative (what we think our performance is), supporting information (policies, strategies) and supporting data. In the absence of a national revised dataset, an East Midlands dataset has been agreed, to enable benchmarking between the region's councils.

4.9 The development of the template has been shared with the key individuals supporting the national development of the CQC Assurance process. It is not yet known to what extent this will inform or reflect a final CQC version of a self-assessment template.

4.10 A process has been set out, overseen by the ASC Reforms Board, for completion of this template, in line with the following steps to be completed by January 2023:

- Preparation of a supporting documents appendix
- Preparation of a data appendix
- First draft of a narrative against the quality statements
- Engagement with key stakeholders on the draft
- Preparation of a final draft for submission to the regional Annual Conversation lead
- Annual Conversation (tbc in Feb 2023)

4.11 Every Council will receive a rating under the CQC framework, likely mirroring their existing framework of Outstanding / Good / Requires Improvement / Inadequate. Like many aspects of the assurance process, however, this remains to be confirmed, in part due to the recent changes in the DHSC ministerial team, which has required all policy decisions to be reviewed.

4.12 At this point, it is too early to be definitive about the risk of adverse judgement from the CQC assurance process. The challenges experienced in remaining compliant with Care Act duties to assess in a timely way and to complete annual reviews are shared with every Council across England, as set out in the ADASS Waiting for Care report (May 2022) and their subsequent survey of councils, published August 2022. Alongside these areas for concern are clear areas of strength, including the work the Council has done to support market stability and in progressing a strengths based approach using the Making it Real framework. As regional work progresses, this will enable a degree of benchmarking or judgement to be formed about a likely position within the CQC framework.

5.1 Finance

5.1.1 There are no direct financial implications arising from this report.

Rohit Rughani, Principal Accountant

5.2 Legal

5.2.1 There are no direct legal implications arising from the contents of this report.

Pretty Patel, Head of Law-Social Care & Safeguarding

5.3 Equalities

There are no direct equality implications arising from this report, however we need to ensure equality considerations are embedded within the East Midlands template which has been developed to support a consistent approach to the preparation of a self-assessment against the quality statements in the QCQ assurance process. Need to ensure that the demographic profile of the city is taken into account as part of the self-assessment for ASC.

Sukhi Biring, Equalities Officer

5.4 Climate Change

5.4.1 There are no significant climate emergency implications directly associated with this report.

Aidan Davis, Sustainability Officer

5.5 Other

None

6. Appendices
None

7. Background Papers
None

8. Is this a Key Decision - No