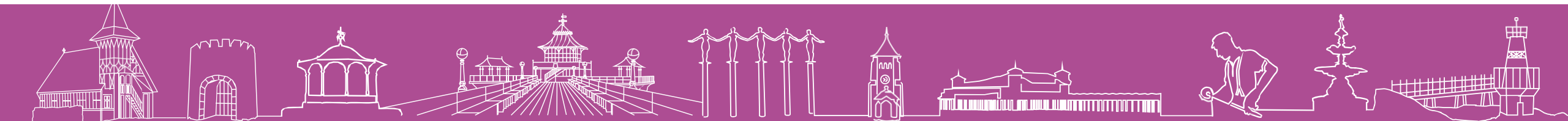# North Somerset Council

Quality Assurance (QA) and Care Quality Commission (CQC) Inspection of North Somerset Council ASC&H

Adult Services and Housing Policy Scrutiny Panel

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6th July 2023

Agenda

Background

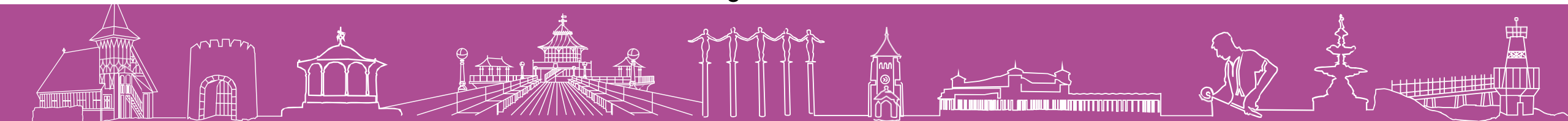- Inspection background
- Governance
- Programme principles

CQC / QA

- Methodology
- Themes
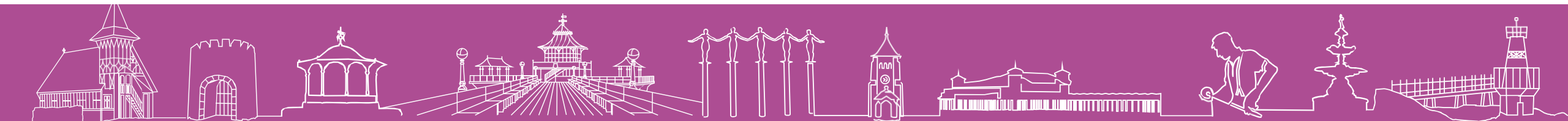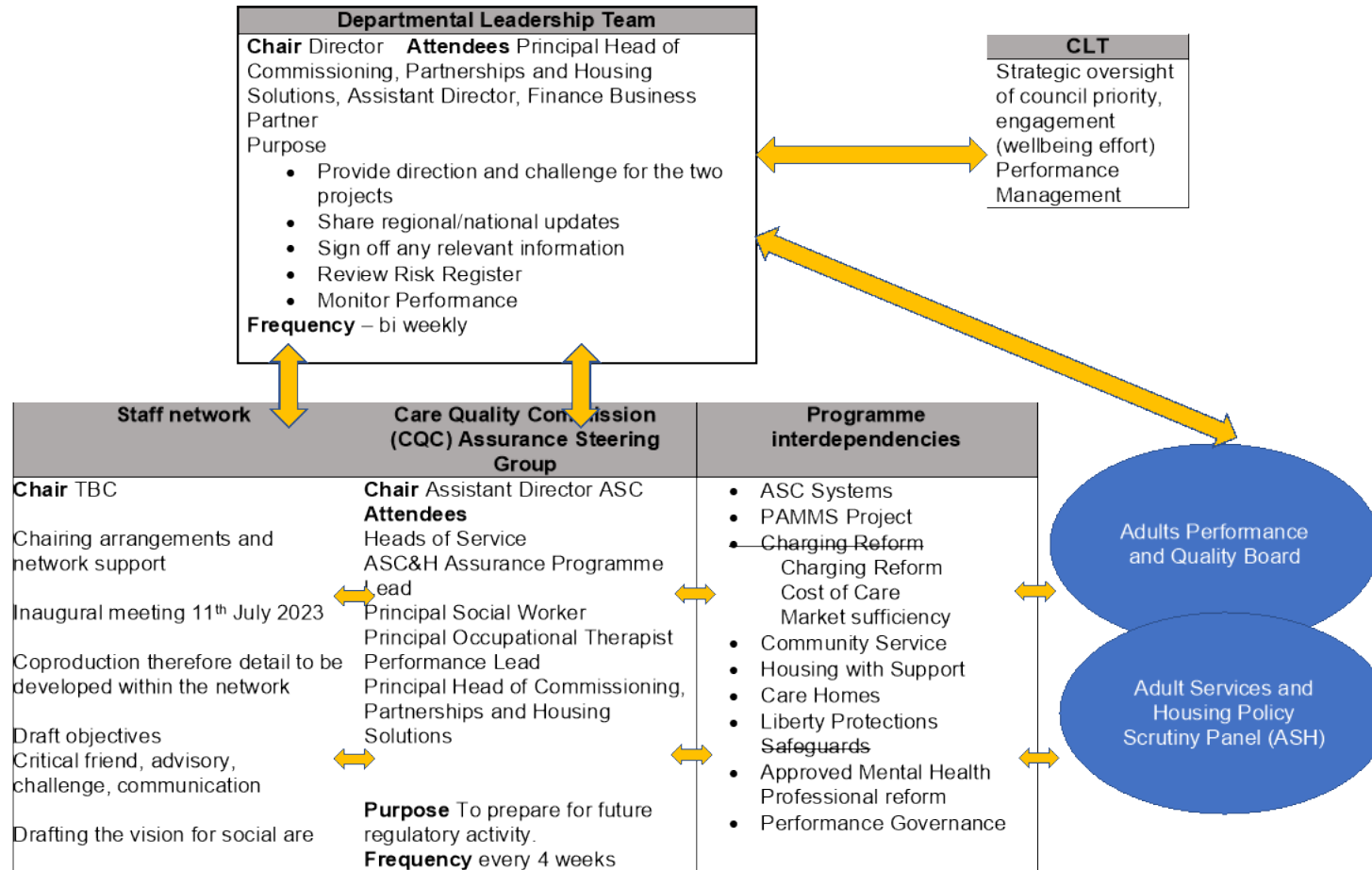- "I" and "We" statements
- Evidence
- Ratings

SWADASS* road map

Risks / strengths

*South West region – Association of Directors of Adult Social Services

Programme governance

Departmental Leadership Team

Chair Director   **Attendees** Principal Head of Commissioning, Partnerships and Housing Solutions, Assistant Director, Finance Business Partner

Purpose
- Provide direction and challenge for the two projects
- Share regional/national updates
- Sign off any relevant information
- Review Risk Register
- Monitor Performance

Frequency – bi weekly

CLT

Strategic oversight of council priority, engagement (wellbeing effort) Performance Management

Staff network	Care Quality Commission (CQC) Assurance Steering Group	Programme interdependencies
Chair TBC	**Chair** Assistant Director ASC	• ASC Systems
	Attendees	• PAMMS Project
Chairing arrangements and network support	Heads of Service	• Charging Reform
	ASC&H Assurance Programme Lead	Charging Reform
Inaugural meeting 11th July 2023	Principal Social Worker	Cost of Care
	Principal Occupational Therapist	Market sufficiency
Coproduction therefore detail to be developed within the network	Performance Lead	• Community Service
	Principal Head of Commissioning, Partnerships and Housing Solutions	• Housing with Support
		• Care Homes
Draft objectives		• Liberty Protections Safeguards
Critical friend, advisory, challenge, communication		• Approved Mental Health Professional reform
	Purpose To prepare for future regulatory activity.	• Performance Governance
Drafting the vision for social are	**Frequency** every 4 weeks	

Adults Performance and Quality Board

Adult Services and Housing Policy Scrutiny Panel (ASH)

Programme principles - Aim to deliver this programme using the following principles.
Approach targets wider quality improvement, aligned with CQC inspection Care Act focus

People at the heart of care

People have choice, control, and support to live independent lives
People find that adult social care is fair and accessible
People can access outstanding quality and tailored care and support

- Coproduction
- Proportionate
- Corporate and departmental priority
- Transparent
- Well-paced – ambitious and well delivered programme
- Inclusive
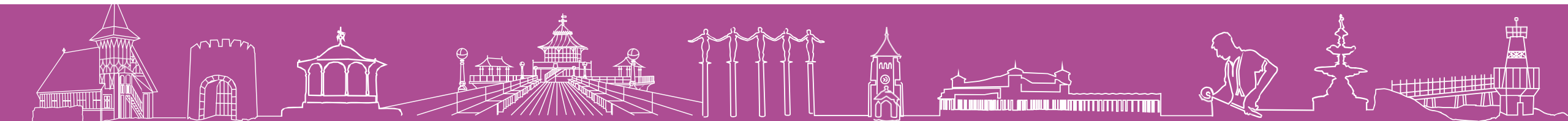
There are four themes........

1. **Working with people** - assessing needs (including unpaid carers), supporting people to live healthier lives, prevention, well-being, information and advice

2. **Providing support** - markets (including commissioning) and partnership working

3. **Ensuring safety** - safeguarding, safe systems and continuity of care

4. **Leadership and workforce** – capable and compassionate leaders, learning improvement, innovation, experience of equalities

.......and nine quality statements ("I" and "We" statements)
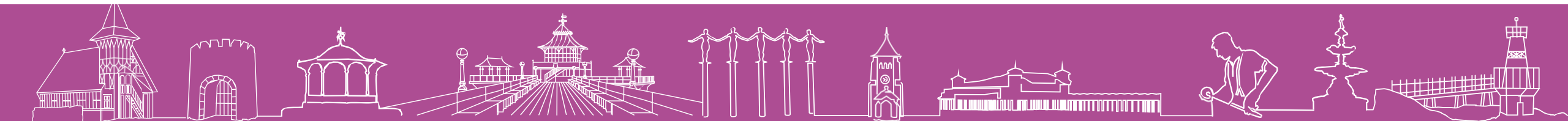
Quality statement – I / We Statement: Assessing needs. Sample "I" and "We" statement

"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 helps me live as I want to. I am a unique person with skills, strengths and goals"
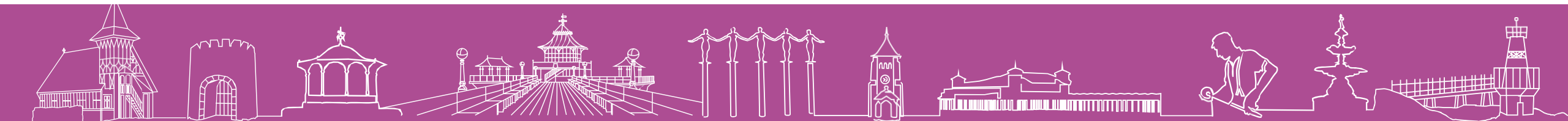
Summary (What good looks like?)

• People with care and support needs, unpaid carers, those who fund or arrange their own care and communities have the best possible wellbeing outcomes because their care and support needs are assessed in a timely and consistent way.
• Assessments and care and support plans are co-produced, up-to-date and regularly reviewed
• Support is coordinated across different agencies and services and decisions and outcomes are transparent.
• People's care and support reflects their right to choice, builds on their strengths and assets,
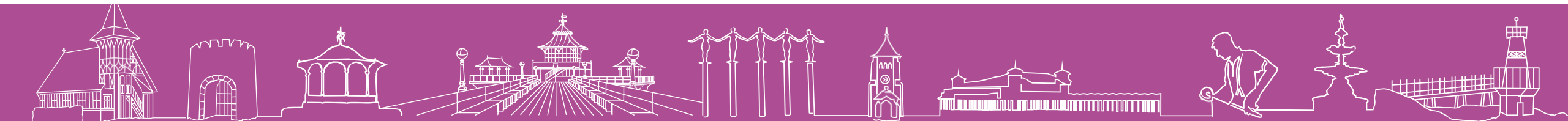
Evidence that CQC will rely on the test our self-assessment

- People's experience

- Feedback from partners – providers, NHS, Police, Fire and Rescue and third sector providers

- Feedback from teams and council staff and leaders

- Observation

- Processes/policy

- Outcomes and performance data

There is likely to be an overall rating for the council. (Subject to change)
- This could be along the lines of the current OFSTED ratings – Outstanding, Good, Requiring Improvement or Inadequate which CQC use when rating providers
- As well as a rating, there will possibly be a "direction of travel" judgement – in other words is the council performance likely to improve, deteriorate or remain the same
- Alongside an overall rating, parts of the services or themes might have an individual rating which would be aggregated to the overall rating
- It is possible that another set of ratings could be developed for council inspections for examples star ratings
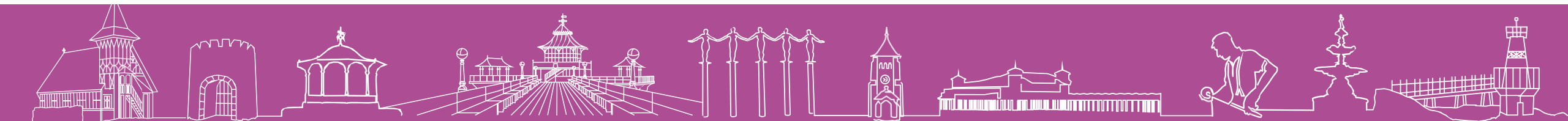
Local authority unable to improve in agreed timescales. We are working through whether and how to incorporate **CQC** ratings here.

CQC assessment identifies serious/persistent risk to people's wellbeing

DHSC statutory intervention

**Local authorities continue to lead their own improvement, with additional oversight from CQC/DHSC**

(non-statutory intervention)

Local authorities will be expected to produce a robust improvement plan, and arrange for additional support, with oversight from DHSC

Local authorities lead their own improvement, including through drawing on national improvement offer

DHSC and sector partners work to share good practice where it is identified through CQC assessment
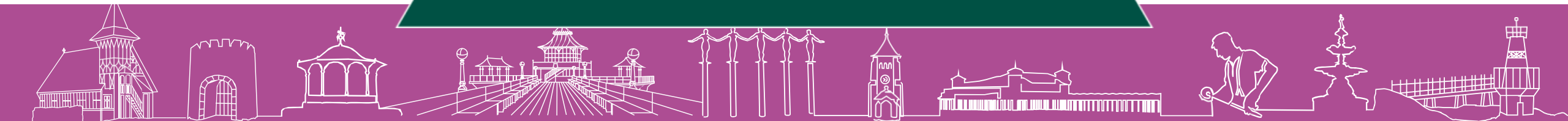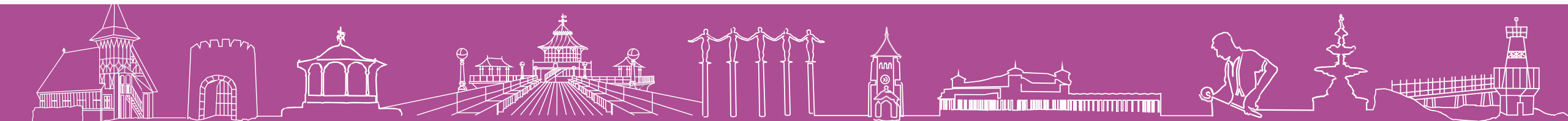
Implications of a positive rating.....

Reputational benefit
Earned autonomy
Less regulation
Easier to recruit and retain staff
Focus on local people's priorities

....and a negative one

Reputational harm
Label of "inadequate" with council for up to 30 months
Increased intervention (which we may have to pay for)
Loss of morale and harder to recruit
Focus on recovery

Assurance Roadmap 2023/24 - Evidence Based Approach – Quality and Improvement

directors of adass adult social services **South West**

1 Resource Hub

Steps

Collecting and Sharing information and materials to support ASC assurance and improvement

Activity

Who? Assurance Leads
1. Maintain and further develop the regional Resource Hub
2. Councils to routinely upload information to be shared

2 Practice Standards

Steps

Developing and using a framework for evidence-based practice; linking evidence to action

Activity

Who? Principal Social Workers
3. Promote the use of the regional practice standards
4. Consistent approach to casefile audits using standards
5. Co-produced framework for personalised practice
6. Each DASS confident in line of sight for quality of practice
7. Lead members and corporate management teams understand the Council's core statutory responsibilities for ASC

3 Data and Triangulation

Steps

Cross validating data, information and intelligence to explain the outcomes and impact of practice

Activity

Who? Performance Leads
8. Gather and evaluate different types of data, information and intelligence to find patterns and other insights
9. Use data to examine performance amongst Councils to understand where the true differences may lie
10. Complete work on gathering ASC- WDS and local workforce measures
11. Review new ASCOF measures
12. Develop a consistent approach for core workforce information across our Councils

4 Self Evaluation

Steps

Each LA has an initial self-assessment that is open, honest, evidenced and strongly reflects the views of with people with lived experience

Activity

Who? Assurance Leads
13. Complete initial self-assessments and share
14. Directors to present and give feedback on summaries in buddy groups
15. Directors to present and give feedback on summaries in buddy groups

5 Improvement Plans

Steps

Each LA has a medium-term improvement plan that flows from its self-evaluation and supports the delivery of its ASC Strategy

Activity

Who? Directors
16. Complete improvement plans and share, including equalities impact assessments
17. Directors to lead presentation and feedback on plans in buddy groups
18. Each LA supported to have a clear governance structure for improvement delivery and their quality assurance cycle

6 Impact

LAs are supported to understand the impact of their improvement action - learning about and changing improvement activities as needed to gain maximum impact

Who? Assistant Directors
19. Initial appreciative inquiry to test impact of improvement plans - themed on 'Assessing needs'
20. Further appreciative inquiry - themed to meet learning needs
21. Develop and deliver regional support offer for 'deep dives' on specific improvement topics/service themes (buddy groups, regional network groups etc)

7 Continuous Improvement

Quality assurance and improvement become embedded as 'business as usual' for LAs and the SW ADASS regional work programme

Who? Directors
22. Assurance item on all agendas for network groups, linking to a shared forward plan
23. Assurance support needs from each LA collated and used in regional plan with six-monthly reviews
24. Each LA has a record of support needs and how these are being met through regional participation and external sources (LGA per reviews, consultancy etc). Updated quarterly
25. Our improvement activity is informed by learning from CQC's assurance programme and LGA assurance peer reviews etc

Timeline

2023 Jan Feb Mar April May Jun July Aug Sept Oct Nov Dec Jan Feb Mar 202

Key risks at this stage.......

- Lack of evidence of Coproduction – though improving
- Consistency, assurance and access to policy, procedure and strategy documents
- Delivering services every day / Operational pressures
- System assurance building an Integrated Care System
- Waiting times
- Data gathering and analysis
- Ensuring partnership buy in
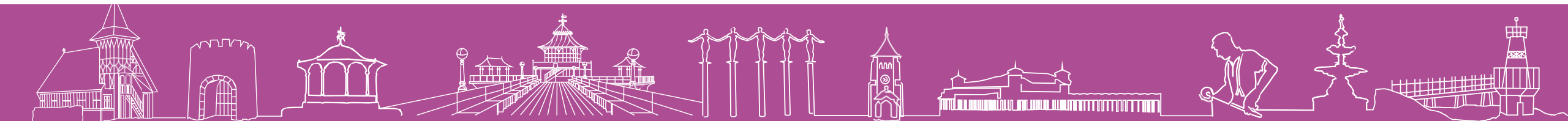
.......and what we have going for us

- Leadership – corporate and departmental (though of course we have a new administration)
- High quality professional leadership
- Good quality provider market – based on CQC ratings Q4 2022/23 (LGAInform)
- Good leadership and ownership of the QA programme by Heads of Service
- Transparent
- Strong programme management approach
- Very high response rates to public surveys
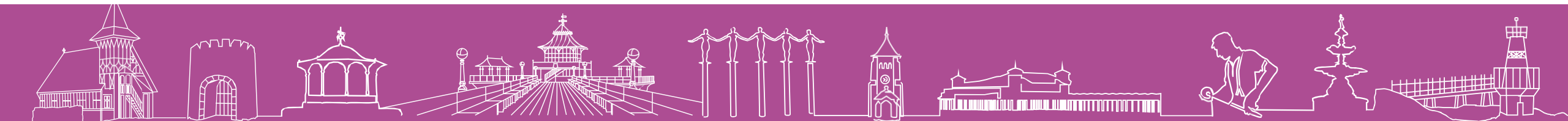- Brilliant, stable workforce!
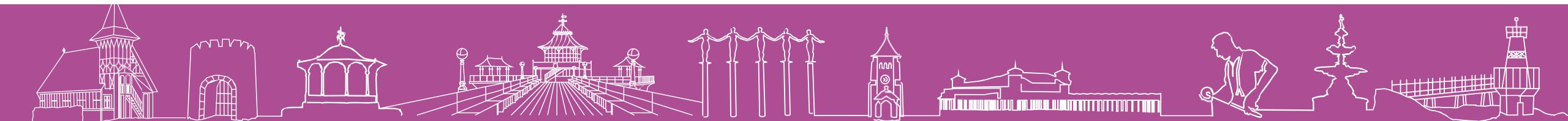
Corporately – good support from

- Ofsted team – challenge, documents, inspection readiness meetings

- Business Intelligence – surveys, questionnaires and public and internal engagement

- Inclusion and Corporate Development – Equalities and access to groups internal and external

- Complaints and complements – learning

- Communications – help with Webinars and communication plan
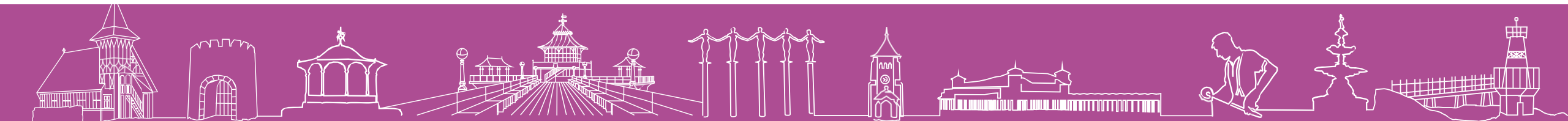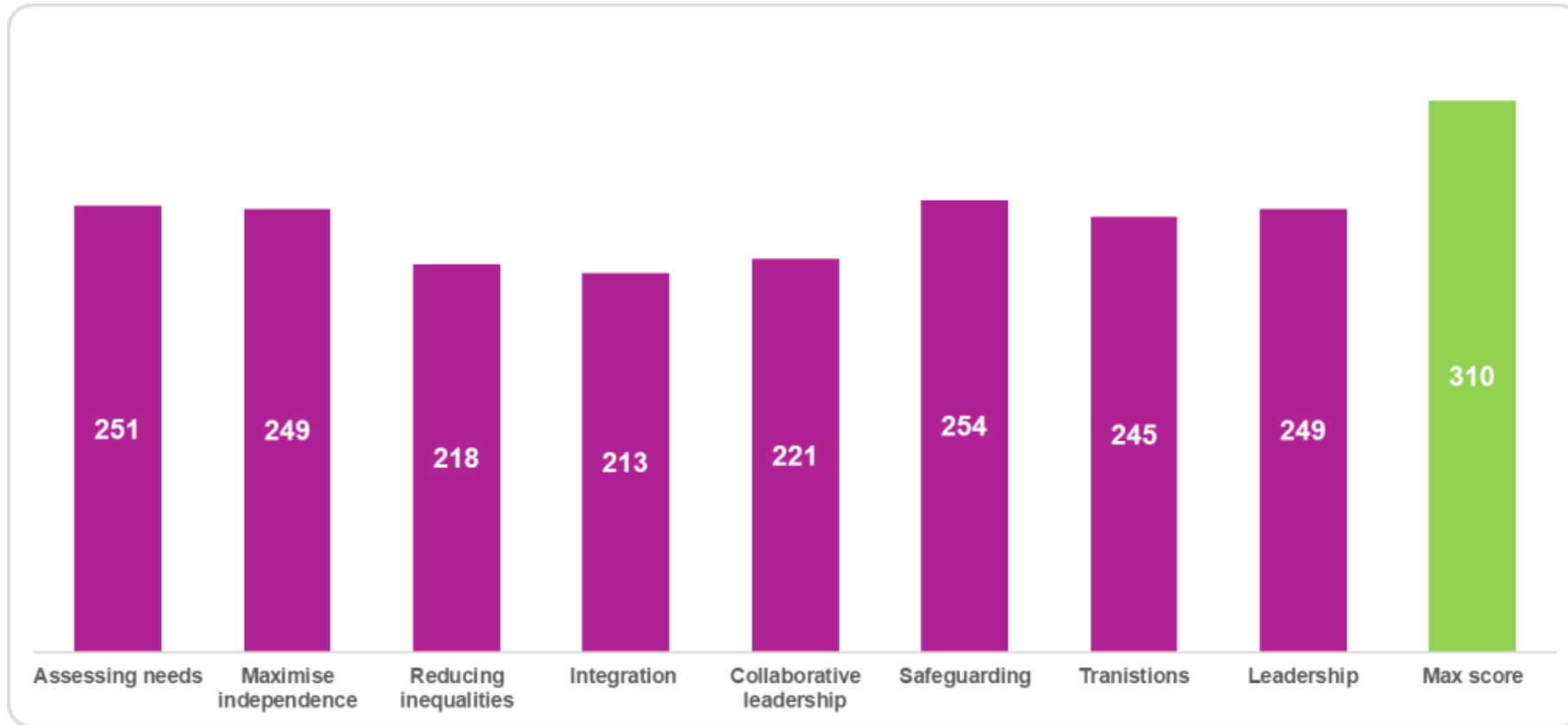
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Open, Fairer, Greener