TRAFFORD COUNCIL

Report to: Health Scrutiny Committee

Date: 25 July 2024 Report for: Information

Report of: Nathan Atkinson, Corporate Director, Adults &

Wellbeing

Preparing for CQC Assessment in Trafford

Local authorities are now subject to mandatory inspections of their Adult Social Care functions by the Care Quality Commission (CQC) under the Health and Care Act 2022. It is imperative that the Council is prepared for inspection and has plans in place to meet the requirements of the national CQC Assurance framework. Since February 2024 CQC have commenced 44 mandatory inspections and have published reports from three local authorities in the south of England all of whom have achieved a 'Good' rating. There is an expectation that all local authorities with adult social functions will be inspected by March 2025.

Summary

This report should be read in conjunction with the accompanying PowerPoint presentation.

The report briefly outlines the CQC Assurance process, learning from other local authorities and how the Council responded to the LGA Peer Challenge against the CQC Assurance framework in September 2023 by launching the *Improving Lives Every Day* Programme. This Programme of work will enable the Council to be prepared for any future inspection and most critically deliver better outcome for our residents requiring care and support from Adult Social Care.

Recommendation(s)

Health Scrutiny are asked to note the content of this report and progress to date.

Contact person for access to background papers and further information:

Name: Nathan Atkinson, Corporate Director, Adults & Wellbeing

Adult Social Care, Trafford Council, 1st Floor, Trafford Town Hall, Talbot Road, Stretford. M32 0TH

Tel: 0161 912 2705

Email: nathan.atkinson@trafford.gov.uk

1.0 The CQC Assurance Process

- 1.1 The Care Quality Commission (CQC) have a responsibility to independently assess how local authorities are delivering their Care Act functions under the Health and Care Act 2022.
- 1.2 The CQC assessment approach has been designed in partnership with a range of stakeholders and people who use health and adult social care services.
- 1.3 CQC use a single assessment framework to assess local authorities, using a subset of 9 quality statements focused across four themes:

| Care Quality Commission Assurance themes | |
|---|---|
| Theme 1: Working with people. | Theme 2: Providing support. |
| This theme covers: | This theme covers: |
| Assessing needs Planning and reviewing care Arrangements for direct payments and charging Supporting people to live healthier lives Prevention Wellbeing Information and advice Understanding and removing | Market shaping Commissioning Workforce capacity and capability Integration Partnership working. |
| People's experiences and outcomes from care. Theme 3: How the local authority | Theme 4: Leadership |
| ensures safety within the system. | This theme covers: |
| This theme covers: | |
| Section 42 safeguarding enquiries Reviews Safe systems Continuity of care. | Strategic planning Learning Improvement Innovation Governance |
| | ManagementSustainability. |

- 1.4 Local authorities will receive a CQC rating consistent with previous approaches to health and care services:
 - Outstanding
 - Good
 - Requires Improvement
 - Inadequate

2.0 CQC Assurance Framework Learning thus far

- 2.1 The CQC has commenced the inspection of 44 local authorities as of the end of June 2024. To date no local authorities in Greater Manchester have been contacted by CQC to inform as to impending inspection, though Wirral, Warrington, Sefton and St Helens have been within the North West region. Thus far, 11 site visits have been conducted and three inspection reports have been published. All three of the published reports for Hertfordshire, Hounslow and West Berkshire Councils have received a 'Good' rating.
- 2.2 The ask of CQC from notification of the intention to inspect is that within three weeks local authorities provide them through a secure portal:
 - a) A self-assessment document outlining key strengths, with evidence and plans to address risks and challenges. There is no prescribed format currently, though CQC are deliberating as to the introduction of a template in the future. The LGA have helpfully developed a template to guide local authorities and this format has been adopted by most, including in Trafford.
 - b) Identification of 50 live cases with assessments having been conducted within the last 12 months. The expectation is that the individuals identified have provided consent to be contacted by CQC as part of the inspection. CQC will then dip sample a proportion of these cases.
 - c) Mandatory Information Return (IR) CQC have identified 38 key documents including strategies as well as policies and procedures that they expect all local authorities to have in place and be able to evidence prior to any on-site inspection.
- 2.3 Following receipt of the information above CQC will inform as to the date of the site visit, which will usually last 3-days. There has been some delay in this for some local authorities who have waited longer than the 6-8 weeks originally envisaged by CQC.
- 2.4 The intention is that CQC will have concluded inspection of all local authorities with adult social functions by March 2025.
- 2.5 The emerging themes from the concluded inspections are that local authorities have further work to improve in the following areas:
 - Waiting Lists / times for assessments
 - Transitions Preparing for Adulthood
 - Hospital Discharge processes
 - Support for Unpaid Carers

- Co-production and engagement with people with lived experience in shaping service delivery
- Safeguarding including s.42 enquiries, Making Safeguarding Personal, effectiveness of Safeguarding Adults Boards, Learning from Safeguarding Adults Reviews (SARS) and Deprivation of Liberty Safeguards (DoLS)

3.0 Recap of Key Messages from the LGA Feedback

- 3.1 The LGA Peer Challenge was concluded at the end of September 2023, with initial feedback provided at the end of the process and the final report was received in December 2023. The LGA Peer Challenge team's key messages to the Council were:
- 3.2 Developing the Neighbourhood Model
- 3.2.1 The Council has a strong focus on integrated work with health and health outcomes, particularly around hospital discharge and admission avoidance. The development of a Neighbourhood model should offer opportunities to coproduce with communities and develop a broader Adult Social Care focus in integrated teams, supporting people to live the life they want and fully embedding an early intervention and prevention approach.
- 3.3 Getting it right at the Front Door
- 3.3.1 The Council has a range of preventive and early intervention offers, but access relies heavily on social workers to undertake the initial conversations, which may not be the best use of resources and skills. More could be done to develop information advice and guidance, make access easier through a variety of channels, and provide self-serve options.
- 3.4 Safeguarding
- 3.4.1 There is work to do to ensure that the Council consistently applies thresholds for concerns and that safeguarding enquiries are working well. The Council should consider the right balance in skills and resources across all adult teams to ensure concerns and enquiries can be responded to in a timely and personcentred way.
- 3.5 Strategic direction and commissioning strategies
- 3.5.1 The golden thread from corporate strategy and vision needs to be developed to support a simple clear vision for Adult Social Care, which can shape plans and strategies. These need to be supported by SMART plans for delivery and improvement for the next 3-5 years.
- 3.6 Mental Health
- 3.6.1 There is a need to increase assurance regarding mental health services provided under the existing s.75 agreement with Greater Manchester Mental Health NHS Foundation Trust (GMMH).

4.0 Immediate Response to the LGA Peer Challenge Feedback

- 4.1 Following conclusion of the LGA Peer Challenge at the end of September, activity immediately commenced to address some of key findings from the feedback provided at the end of the session and from the final report received in December 2023.
- 4.2 The Council had an existing, self-managed, programme of improvement for Adult Social Care based on the concept of *Improving Lives Every Day*. This approach was launched to improve outcomes for people supported by Adult Social Care and to promote strength-based working, with a focus on prevention and early intervention. The Programme was revisited and expanded to specifically address the findings of the Peer Challenge, prepare Adult Social Care for inspection and to incorporate approaches to transformational savings. Priority areas of improvement have been identified in detailed programme plan.
- 4.3 An *Improving Lives Every Day* Development Board was established in February 2024. This meets monthly, with established governance and an independent chair, Maggie Kufeldt, who was appointed in May 2024 to oversee delivery of the plan and to track progress against areas requiring improvement. Key partners from health and the VCFSE, along with the Council Leader and Executive Member for Healthy and Independent Lives sit on the Board to provide a joined-up approach and to ensure transparency.
- 4.4 A working group for performance data has been established and three temporary business analysts employed, using external grant funding, to support the development of 15 Power-Bi dashboards to ensure better use of data to inform decision making.
- 4.5 There has been a significant overhaul of the safeguarding adults strategic arrangements within the Trafford Strategic Safeguarding Partnership (TSSP) with marked improvements in governance and delivery of Safeguarding Adult Reviews, the annual report and priority setting.
- 4.6 Support from the LGA consultancy for adult social care through Partners in Care and Health was secured to provide independent support for commissioning and safeguarding activity. This was at no additional cost to the Council. This activity has now concluded, and a Commissioning Strategy and two Market Position Statements have been produced and published on the Council website. Further, the review into operational safeguarding concluded earlier in July with report recommendations to follow, including appraisal of the improvements made in performance data reporting.
- 4.7 A review of the Principal Social Worker and supporting functions has commenced reflecting the importance of the role in the CQC Assurance process.
- 4.8 Partners in Care and Health conducting briefing sessions to support staff preparation for inspection, applying learning from the pilot sites in January

2024. The Feedback from these sessions informed an intensive period of frontline staff engagement led by the DASS which concluded in June. Over 100 staff were involved in face-to-face sessions to help inform the *Improving Lives Every Day* Programme content and for them to form part of the project working groups.

5.0 Progress against commitments made to Health Scrutiny in January 2024

- 5.1 Programme Management support providing extra capacity and dedicated focus on *Improving Lives Every Day* has been secured with a Band 11 Programme Manager, Band 9 Project Manager recruited and a further Band 9 Project Manager post to be filled and out to recruitment. This has enabled production of:
 - a full Programme Plan with phased activity over 10 workstreams with a milestone plan.
 - Terms of Reference for the *Improving Lives Every Day* Development Board and for the 10 working groups that feed the Board.
 - a Governance flow chart
 - templates for flash reports, detailed business reports and presentations for the Board have been in operation since the May Board.
 - a risk register linked to the Programme Plan is in operation.
- As indicated above, a Monthly Development Board chaired by an independent person has met since February 2024. The July Board has been updated on progress against the refresh of the CQC Assurance Framework Self-assessment, IR evidence base and 50 cases. The intention is that this information will be refreshed on a quarterly cycle to enable the Council to be as inspection ready as possible.
- 5.3 The *Improving Lives Every Day* Programme plan has a dedicated workstream for improvement to mental health provision. This aligns the activity with GMMH Trafford's improvement plan and the work led by Greater Manchester ADASS to ensure social work elements are incorporated.
- As indicated above, face to face engagement with frontline Adult Social Care staff has taken place as planned with a commitment from the DASS to running 3 sessions every quarter with a 'You said, we did' approach.
- A detailed communications strategy for engagement with all stakeholders is under production with the aim to conclude this by the end of July. This has two elements, firstly to cover the *Improving Lives Every Day* Programme ambitions and secondly to specifically focus on the CQC inspection process and the steps required to deliver an effective response.
- The Adults & Wellbeing vision statement has been agreed with Directorate staff through an engagement process of face-to-face discussions and digital voting. The vision for Adult Social Care in Trafford is to be "Improving Lives Every Day, supporting people to be Independent, Safe and Well."

5.7 Activity has commenced on the development of the Adults & Wellbeing Directorate Strategy, with aligned Target Operating Model (TOM) and Outcomes Framework. This work is due to be concluded by October 2024. The strategy will align to the new Council Corporate Plan's Healthy and Independent Lives ambitions and will drive the *Improving Lives Every Day* Programme. The focus must be on improving the outcomes of Trafford residents requiring care and support through more effective service delivery, not solely on passing inspection. If the Council gets the offer right and has the platform in place to support the inspection process, then the outcome should reflect this.