

**Report to:** People Scrutiny Committee

**Date of meeting:** 19 November 2024

**By:** Director of Adult Social Care and Health

**Title:** Preparation for CQC assessment of ASCH

**Purpose:** To appraise the Committee of the CQC's new assessment methodology and ASCH's preparations for this.

To review the role of People Scrutiny Committee in CQC assessment of ASCH's delivery of the Care Act.

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**RECOMMENDATIONS:** The People Scrutiny Committee are recommended to note, review and agree the preparations for CQC assurance.

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## 1. Background Information

### **CQC Assessment**

1.1 In December 2021, the Government confirmed its intention to re-introduce assessment for adult social care departments in the White Paper 'People at the Heart of Care'. Adult social care departments have not been assessed by a regulator in this way for 15 years. The key focus of the new Care Quality Commission (CQC) assessment regime is to determine how well local authorities are performing their duties under Part 1 of the Care Act 2014.

### **Self-assessment**

1.2 As part of our preparations for assessment by the CQC we undertook an extensive 'self-assessment' exercise in 2023. The basis for this was a workbook created by the Association of Directors of Social Services (ADASS) and the Local Government Association (LGA) which is the industry standard tool for conducting a comprehensive adult social care self-assessment exercise.

1.3 We used the findings from this exercise to create a Self-assessment document for adult social care in East Sussex. We know that the Self-assessment document is a critical part of the CQC process. The Self-assessment provides the CQC with a picture of East Sussex, our particular areas of strength and our priority areas for development. The Self-assessment document is key to the CQC framing their assessment and developing their 'key lines of enquiry'.

1.4 We undertook extensive consultation and engagement work on the draft Self-assessment document between November 2023 and January 2024. This included work with key external partners, across sectors, as well as with citizen and 'experts by experience' groups. In November 2023 the draft Self-assessment was presented to the People Scrutiny Committee CQC Reference Group for comment and approval.

### **Local Government Peer Challenge Review**

1.5 As part of our preparation for CQC assessment, we commissioned the LGA to carry out a Peer Challenge Review in February 2024. The People Scrutiny Committee CQC Reference Group was briefed in preparation for meeting with the LGA and were one of the 37 meetings held locally with the LGA.

1.6 In June of this year, the CQC Reference Group considered the findings from the LGA review. This included noting the high degree of correlation between our internal self-assessment exercise the LGA team's findings. The Reference Group considered how the findings were being used by ASCH to give focus and drive to the improvement journey. This included the development of five Departmental Priorities as well as ensuring progress was tracked against all of the areas for consideration, identified by the LGA, that do not fall within the five priorities.

1.7 The CQC Reference Group requested a further update in November 2024. This update has been rescheduled for January 2024 due to the CQC providing us with notification of the start of our assessment.

### **The CQC Assessment**

1.8 On the 12 August 2024 the CQC wrote to the Director of ASCH formally commencing the assessment process in East Sussex.

1.9 Phase 1 of the assessment involved completing the CQC Information Return. This required supplying the CQC with c.250 items, including data reports, guidance documents, plans and strategies. Critically it included a copy of our latest Self-assessment document which has been updated to reflect the key findings from the LGA Peer Challenge Review, as well as a copy of the LGA's report itself.

1.10 We now await a second notification from the CQC to commence the second phase of their assessment. This notification could arrive any time in the next four months. The summary timeline for the assessment is set out below (noting that there remains a degree of uncertainty of the precise requirements of the CQC as their new assessment regime is still in its infancy and subject to change):

- a) Email providing 6-8 weeks' notice of on-site visit.
- b) ASCH will begin an intensive programme of preparation and briefing work across ESCC and partners.
- c) ASCH will be requested to supply 50 cases to the CQC within 2 weeks of the notification. The CQC will choose 6 of these cases to conduct interviews with the adult, their representative (where appropriate) and their carer (where appropriate).
- d) ASCH will meet with the CQC Lead Inspector who will describe their exact requirements in terms of focus groups etc. whilst on site.
- e) ASCH will organise the CQC site visit, as required, and ensure that everyone invited to meet with the CQC is fully briefed, supported and de-briefed after the sessions.

1.11 Other authorities have noted that it is important not to underestimate the size of the logistical task of setting up a CQC assessment. We believe that our experience of running an LGA Peer Review means that we have an excellent understanding of this. We have already

drafted a plan for all of the work that will need to commence at pace when the second CQC notification arrives.

1.12 As above, there remains a degree of uncertainty as to what exactly the CQC will want for their assessment in East Sussex and when they will start the next phase of their assessment. Whilst it is probable that the CQC will not visit East Sussex until early in 2025, it remains possible that they could undertake their assessment before the end of 2024. We are already engaged in a wide range of preparatory work as summarised below.

### ***Learning from others***

1.13 We have worked extensively with colleagues in Children's Services to understand and learn from their experience of OFSTED inspections. Whilst the OFSTED process is significantly different from the CQC process, the insights from Children's Services have been extremely helpful – including colleagues from Children's Services talking about their experiences at ASCH staff preparation sessions.

1.14 We have spoken with nine other local authorities, most of whom have already been through the CQC assessment process. They have been generous in sharing their learning and some of their preparatory materials with us.

### ***Members***

1.15 We have held briefing sessions for the Leader of the Council (primarily in his role as Chair of the Health and Wellbeing Board) and for the Lead Member for ASCH. In addition to reporting to the People Scrutiny Committee on CQC Preparations at its November meeting, we will hold a briefing session on 12 November for the Chair of the People Scrutiny Committee and ASCH spokespeople, who are most likely to be asked to meet with the CQC. The next CQC Reference Group is planned for January 2025 and will consider progress against the 5 ASCH Development Priorities.

1.16 We have commissioned a former Director of Adult Social Care, who is also the Chair of our Safeguarding Adults Board, to undertake practice interviews with the Leader, Lead Member and Chair of the People Scrutiny Committee so we can understand if there are any areas where further preparatory work would be beneficial. A written briefing note has been prepared and will be provided to these Members ahead of their practice interviews.

### ***Staff - Senior Officers***

1.17 Senior Officers have also been invited to practice interviews, including:

- The Chief Executive
- The Director of Adult Social Care and Health
- The Director of Public Health
- The ASCH Assistant Directors
- Heads of Service with primary responsibility for delivering the Safeguarding development work noted in Self-assessment
- The Principle Social Worker
- The Head of Inclusion and Support Services

### ***Staff – Frontline Staff Nominated for CQC Focus Groups***

1.18 We have run three information and engagement sessions open to all staff in ASCH.

1.19 We have engaged Partners in Care and Health (PCH) to run preparatory workshops, in December, for staff likely to be interviewed by the CQC. All these staff have also been offered briefing sessions ahead of the PCH workshops. A next round of preparation sessions is planned for January 2025 which will be subject matter specific e.g. Safeguarding, using data to manage performance, tools we use to ensure quality of practice, Equality, Diversity and Inclusion, and ensuring equity of experience and outcomes etc. The precise content will be informed by feedback from the PCH workshops.

### ***Expected Key Lines of Enquiry***

1.20 We expect that the CQC will use our Self-assessment to identify many of their key lines of enquiry. We are therefore recommending that anyone meeting with the CQC reads the ASCH Self-Assessment (or the parts of it relevant to them) before they meet with the CQC.

1.21 We expect that the CQC will focus on the five Departmental Priorities which we have identified through our own Self-assessment work and the LGA Peer Review. A summary for each of these is provided below:

### ***ASCH Departmental Priorities - Prevention***

1.22 Section 2 of the Care Act requires local authorities to ensure the provision of services which help prevent, delay or reduce the development of care & support needs (including carers' support needs). Given the East Sussex context, we are looking to further strengthen our approach to this:

- **Prevention Strategy** – this is being worked on now and due to be published by the end of this year.
- **Public Health initiatives** – Specifically work under: Building blocks of good health, Importance of the Life course approach, Improving Healthy Life Expectancy, Reducing Health Inequalities, Mental Health and Wellbeing
- Our embedded **strengths-based practice** supports the prevent, reduce, delay approach.
- The LGA praised Health and Social Care Connect (HSCC) as a tangible example of joint work between social care and health. It also recognised there may be scope for a more preventative approach when people first approach ASCH. There will be a review of HSCC (linked to the overarching Prevention Strategy) starting in March 2025 to ensure we have the best possible approach to prevention at our 'front door'.

### ***Waiting Times***

1.23 A formal project to improve waiting times for Care Act assessments and reviews began in April 2024. We have implemented an enhanced approach to waiting times data which supports greater visibility, accountability and grip. This has already enabled us to improve management of waiting lists. At the end of August, the average waiting time for adult assessments had reduced by 8% and carers by 5%, since March 2024.

1.24 In line with one of the LGA's key findings, we have developed an improved standardised process for management of waiting lists which has been consulted on across ASCH and will be signed off in November, with a plan for it to be implemented and fully embedded by the end of 2024/25.

1.25 We have already improved our communication with people on waiting lists. Anyone who is not identified as being urgent (i.e. will not be assessed within 3 days) now receives a standard letter which provides: information on the expected wait time, how to contact ASCH if

their circumstances change during this period and information on other, local sources of support.

1.26 We are working to improve our performance for annual reviews for people receiving long-term support which is a statutory duty under the Care Act. This is an area of challenge for us, as it is for many authorities. In line with the LGA Review Findings, we have added annual reviews to the ESCC Corporate Risk Log to ensure the right level of importance and scrutiny is given to this.

1.27 The main factor impacting our performance on reviews is demand (including hospital discharge and safeguarding) outstripping capacity. However, the Waiting Times project is now looking at ways of improving performance and we will continue to monitor progress on this key area of business.

1.28 Our next area of focus will be Deprivation of Liberty Safeguarding Assessments (DoLS). Our current performance puts us in approximately 9<sup>th</sup> place out of 17 authorities across the South East, for the number of people (per 10,000 population) awaiting a DoLS assessment, and 11<sup>th</sup> for people waiting over six months for a DoLS assessment. Performance on DoLS assessments has been added to the Corporate Risk Register. We are working on an improvement plan to reduce the number of people waiting and the number of long waits for DoLS assessments and will monitor the impact of this, including quarterly reporting to Members.

1.29 In order to improve the visibility and oversight of waiting times, additional measures will be included in the Council Plan monitoring from Quarter Two 2024/25.

### ***Safeguarding***

1.30 The LGA praised our Safeguarding case work and also suggested we could achieve higher levels of assurance in some areas. In response we have:

- Strengthened our information gathering and oversight of decision making in the Safeguarding Hub within HSCC. We have provided additional staffing for the Hub, are gathering more information before making decisions and have increased the oversight of decisions not to proceed to a Safeguarding enquiry. This more robust process went live at the start of November.
- We have improved our weekly reporting on Safeguarding, across ASCH, to managers at all levels to ensure visibility, accountability and grip of performance on the end-to-end Safeguarding process.
- The LGA recommended that we undertake a higher number of audits of Safeguarding cases. An updated approach has already begun in the latest audit cycle running from October 2024 – March 2025 and will be fully embedded in January 2025. The new audit framework includes specific consideration of the statutory three-stage decision as to whether a case should be taken into the safeguarding process and is more proportionate to enable a greater number of cases to be audited.
- We are working to increase the number of people who provide us with feedback following a Safeguarding process so that we can continue to learn from this and improve how we work.

- We have undertaken specific case review work to understand whether our apparently 'high' conversion rate (when compared to other authorities' data) for taking potential Safeguarding concerns into a full enquiry process was due to risk averse practice. The case reviews, and conversations with other authorities, have allowed us to assure ourselves that the apparent issue is related to different recording practice rather than risk averse decision making.

### **Quality**

1.31 Our quality priority is in two main parts:

- Quality of ASCH performance and practice; and
- Quality of service provision – particularly across commissioned services

1.32 Our response to these areas so far this year includes:

#### Quality within ASCH

1.33 Our Quality Practice Framework has been improved incrementally over the last 12 months with a full re-launch scheduled for mid-December 2024. Already this year we have:

- Implemented a Case File Audit dashboard which enables managers to see how many audits have been completed by their teams and for themes from the audits to be identified at team and department level; and
- Updated Supervision process (launched in 2024). We are currently working on a proposal for auditing the quality of supervisions within ASCH.

1.34 We have improved our use of risk logs within ASCH and corporately so that we have the right visibility and monitoring of key areas of risk. We are developing the data reporting to support this at every level of the Council.

1.35 The regular liaison between Director of ASCH and Members – particularly the Leader, Lead Member and Chair of the People Scrutiny Committee provides assurance of our delivery under the Care Act. The specific role of the People Scrutiny Committee in preparation and assurance for CQC assessment is set out in section 2 below.

#### Quality of commissioned services<sup>1</sup>

1.36 We have adapted how we work in recognition of fewer resources across ESCC/ASCH and providers to undertake quality monitoring tasks. Our 'Supplier Relationship Management' approach is underpinned by mature relationship with providers, the CQC & the NHS engaged in market quality work. Issues are identified early and we work collaboratively to resolve these. This includes our regular multi-agency Market Oversight Panels and regular meetings with providers so that we have excellent market intelligence. The success of this approach is evidenced by the capacity and quality of the care market in East Sussex – with no providers being rated by the CQC as inadequate.

#### Value for money

1.37 Ultimately the CQC are concerned with how we are delivering the Care Act, regardless of our financial position. However, we know that the CQC appreciate the financial pressures local authorities are under and recognise this can impact our ability to deliver services. We

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<sup>1</sup> Noting that services provided by ASCH are subject to their own discreet assessment by the CQC

also know that the CQC are interested in how authorities are responding to challenges – including financial ones – and developing new and innovative ways of working in response to these. We will ensure that our initial briefing to the CQC<sup>2</sup> sets out our current financial position and what we are doing to manage and mitigate this.

### **Other Potential Areas of Focus**

1.38 We expect that there may be some additional focus on:

- Hospital assessment – the position across Health and social care services is challenging across Sussex. Hospital discharge performance has now been included on the corporate ESCC Risk Register in order to ensure there is the requisite focus on this area.
- Transitions – both young people who transition between Children’s Disability Services and the ASCH Transitions Team (given that the CQC are likely to visit shortly after an assessment of the Council’s Special Educational Needs and Disability service); and also the other young people who have been known to Children’s Service, for example through child protection or having been a looked after child, who then engage with adult social care services.

## **2. Role of People Scrutiny Committee**

2.1 The CQC note that their expectations of the role of People Scrutiny Committee are (in relation to CQC assessment):

- *‘Be aware of the preparation being done by the Director of Adult Services (DASS)’*
- *‘Ensure the Self-assessment document is reflective of East Sussex’*

### **Role of People Scrutiny Committee in preparing for assessment by the CQC**

2.2 The People Scrutiny Committee was first informed that ASCH was preparing for a CQC assessment at its July 2023 meeting. The Committee agreed to set up a CQC Preparation Reference Group. The Reference Group has had two formal meetings regarding CQC preparation:

- December 2023 – To review the ASCH preparations for CQC assessment and to review and agree the ASCH Self-assessment document; and
- June 2024 – To review the LGA Peer Challenge Review findings and consider the ASCH response i.e. the development of the 5 ASCH Departmental Priorities and associated workstreams, as part of CQC preparations.

2.3 The CQC Reference Group also received a briefing in February 2024 as part of specific preparations for the LGA Review.

2.4 As above, the CQC Reference Group was due to meet in November 2024 to consider progress against the ASCH 5 Departmental Priorities. As the CQC notification has been received in the meantime, this meeting has been replaced by:

- A report to the full People Scrutiny Committee on preparation for CQC assessment
- A briefing for the People Scrutiny Committee Chair and ASCH spokespeople

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<sup>2</sup> There is an opportunity for a three hour presentation to the CQC at the start of their assessment where we can provide additional information and narrative

### **3. Community Engagement**

#### ***Citizen's Panel***

3.1 The Adult Social Care Citizens' Panel is made up of a group of residents that have personal experience of drawing on care and support in East Sussex, or who are caring for someone who does. The panel works together through co-production, to develop and implement the Department's direction, policies and services.

3.2 CQC preparation has been on the agenda at all Citizens' Panel meetings this year. Meetings were held on 11 January, 15 April, 11 July and 11 October 2024. At the January meeting, panel members provided their views on the Department's strengths and development areas under the key themes in the Self-assessment document. 17 Citizens' Panel members also met with LGA assessors as part of the Peer Challenge Review in February 2024.

#### ***PartnershipPlus***

3.3 PartnershipPlus which brings together ESCC with voluntary, community and social enterprise organisations, district and borough authorities and the NHS, has also been involved and engaged in our CQC preparations. In October 2023, the group was appraised of the CQC assessment regime and later that year the group gave their feedback on the Self-assessment document, which was updated as a result of their feedback.

3.4 PartnershipPlus was briefed on the LGA Peer Challenge Review in January 2024 and many of PartnershipPlus's members met with the LGA in February. The final LGA report was shared with PartnershipPlus this summer. The Director of ASCH notified PartnershipPlus of the start of CQC assessment in East Sussex in September and a brief presentation on this was delivered at their October 2024 meeting.

### **4. Conclusion and Recommendations**

4.1 ASCH recognises that the return of the regulator has been a catalyst for providing additional focus and drive to our continuous improvement journey.

4.2 In line with CQC recommendations, the People Scrutiny Committee has:

- *'contributed to shaping the council's adult social care strategy'; and*
- *'provided checks and balances on the executive, testing performance, raising issues of concern, holding decision makers to account'*

4.3 The People Scrutiny Committee CQC Reference Group has overseen the key stages of our preparation for CQC assessment and ensured that the Self-assessment document is reflective of Adult Social Care and Health in East Sussex.

4.4 As part of the on-site assessment work, we anticipate that the CQC will want to speak with the Chair of the People Scrutiny Committee and possibly with the opposition spokespeople who also sit on the CQC Reference Group. We have run a briefing session for these Members and have arranged for a practice interview session for the Chair with an ASCH subject matter expert. When we receive notification of the second phase of the CQC assessment we will undertake further briefings and preparatory work.

4.4 We have used our own preparatory work for the CQC assessment and the findings of the LGA Peer Review Team to create the 5 ASCH Departmental Priorities which have given focus and drive to our improvement journey. We continue to undertake a huge amount of



preparatory work with staff who have been nominated to meet with the CQC to ensure they are informed and are fully supported throughout the process.

4.5 The CQC preparations have also been a catalyst for developing our internal assurance processes with three key areas of risk now added to the ESCC Risk Register:

- Hospital discharge
- Deprivation of Liberty Safeguard assessments
- Annual reviews for people receiving long-term care

4.6 The People Scrutiny Committee are recommended to note, review and agree the preparations for CQC assurance.

**MARK STANTON**

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