# Oldham Overview and Scrutiny Adult Social Care

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**Care Quality Commission (CQC) assessment** 



Introduction	Areas of Inspection	Peer Review process	Peer Review Outcomes	Our Approach	Governance and Assurance	Next Steps
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# Adult Social Care Proposed Scrutiny Schedule

- 1. CQC preparation July 13<sup>th</sup> 2023
- 2. Safeguarding September 6<sup>th</sup> 2023
- 3. Care market December 5th 2023
- 4. Transition / Preparing for Adulthood January 16th 2024
- 5. Workforce March 7th 2024

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# Introduction to the CQC

- In March this year, it was announced that Care Quality Commission (CQC) inspections are changing. Their aim is to streamline and simplify the assessment process and replace the four individual frameworks that are used currently to one single assessment framework.
- Whilst streamlining the assessment process, the CQC have also been given the power to scrutinise and assess how well local authorities are delivering the legislation from the Care Act 2014.
- These inspection changes are not supposed to take place until April next year but in that time, preparing for these changes are key.

### The 4 Areas of Inspection

### Theme 1: Working with People

#### **Assessing Needs**

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

#### **Supporting People to Live Healthier Lives**

Quality Statement: 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 their future needs for care and support

#### Equity in experience and outcomes

Quality Statement: We actively seek out and listen to information about people who are most likely to experience inequality in experience or outcomes. We tailor the care, support and treatment in response to this.

### **Theme 2: Providing support**

**Care provision, integration and continuity** Quality Statement: We understand the diverse health and care needs of people and local communities, so care is joined-up, flexible and supports choice and continuity.

#### **Partnerships & Communities**

Quality Statement: 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

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# The 4 Areas of Inspection

### **Theme 3: Ensuring Safety**

#### Safe systems, pathways and transitions

Quality Statement: 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.

#### Safeguarding

Quality Statement: We work with people to understand what being safe means to them and work with them as well as our partners on 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, and we make sure we share concerns quickly and appropriately.

### **Theme 4: Leadership**

#### Governance

Quality Statement: 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 & Innovation

Quality Statement: 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

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## How we will be rated

For each quality statement in the assessment framework, we will assess the 'required evidence' in the evidence categories and assign a score to the quality statement. The scoring framework to support decisions is:

- 1. Evidence shows significant shortfalls in the standard of care
- 2. Evidence shows some shortfalls in the standard of care.
- 3. Evidence shows a good standard of care.
- 4. Evidence shows an exceptional standard of care

The scores for the quality statements aggregate to ultimately produce the ratings, and an overall score.



Outstanding The service is performing exceptionally well.

#### Good

The service is performing well and meeting our expectations.

#### Requires improvement

The service is not performing as well as it should and we have told the service how it must improve.

#### Inadequate

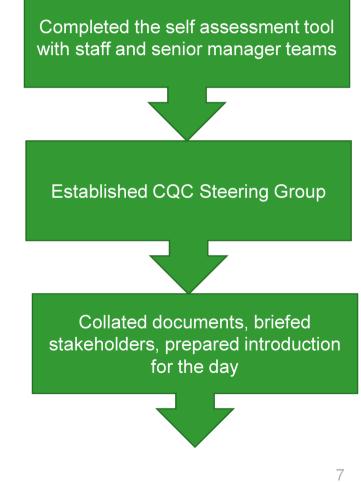
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The service is performing badly and we've taken action against the person or organisation that runs it.

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## The Peer Review Process

- The Oldham Assurance Preparation Awareness Challenge Day was held on 16 March 2023 This built on an initial data analysis of identified key metrics related to the CQC Assurance themes, a case file audit, and an assurance checklist provided by Oldham colleagues.
- Full day prior to the peer challenge day with a visiting Principal Social Worker, Oldham's PSW and our Head of Strategic Safeguarding to audit a series of current service user case files
- Series of interviews held remotely with specific groups of representatives across the service, various levels, and with stakeholders



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### **The Peer Review Outcomes**



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The Pee	comes			n ASC Assura ation Challer				
Area/Theme 1. Working with people								And Social Review North West
<ul> <li>Multiple references</li> <li>engaged a workforce</li> <li>ARCC/ new right direct a differences</li> </ul>	ion and ma e already ent focus or	ed r Iking	<ul> <li>ass Tar</li> <li>MC with</li> <li>Del for</li> <li>Cal ma</li> <li>Ens und ped</li> </ul>	Recommo re focus and invest sessments and pro get Operating Mo SAIC system – the the system ivery of Local Aut more assurance us pacity & demand- nagement sure that ASC system derstanding of the ople accessing se ult safeguarding p	stmo ovis del nem hori undo risk tem equ rvic	ent to suppo ion, preventi (TOM) ie across disc ity statutory o erpinned via c stratification as and proces uality and div es at each st	on and to suppor cussion around c duties in Mental H formal agreemen n to underpin wait sses generate a r versity characteris	d t the new hallenges lealth – need its ting list reliable stics of

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	ng Support -	ontinuity	ion, integratio ities	n	March 2023		Freeses at Badasss List excite services Ruit West

#### Feedback

The overall self-assessment of partnership working in Oldham was one of good strategic alignment and operational working relationships with some positive examples of managerial and team integration around discharge and secondary mental health. This suggests firm foundations for the ICB developments Health partners acknowledged that budget pressures on all partners can sometimes challenge joint working and can complicate

the development of pooled budgets for instance. Similarly, managing the interoperability of IT systems can present issues

#### **Recommendations / issues / themes**

- Ensure that 'co-production' as an idea is accurately conceptualised and articulated within ASC and not conflated with engagement.
- Share the evolving thinking around the prevention framework with VCFSE partners as soon as possible and use their knowledge and expertise to re-shape the early intervention and prevention offer in Oldham
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The Peer Review Outcomes						n ASC Assur ation Challer	
	Area	/Theme			March 2023		
<b>3. Ensuring Safety</b> Safe systems, pathways & Transitions Safeguarding							edit scill sevice North West
<ul> <li>Feedback</li> <li>Oldham colleagues were positive about and proud of the work done in recent years to improve adult safeguarding, including the operation of the SAB</li> <li>The voice of the person recognises it has further safeguarding basis, it with person is involved in line Safeguarding Personal</li> </ul>					and coprodu work to do k as reported t	out on an operation hat as much as p	hat the SAB onal ossible the

- Early and effective planning for adulthood and Transitions are an acknowledged area of development for Oldham and some strategic progress has been made through the creation of the Transitions Hub.
- Oldham was proud of it's progress and practice around Transforming Care and Discharge to Assess and these successes were linked to
- The case audit identified issues with information sharing between agencies that led to differences in decision making and responses for the same individual when concerns were raised.
- The challenge team noted that wider system or strategic risks to ASC were not seen in the round in the conversations e.g. the transfer of financial risk, provider risks/failure, market quality etc
- Given the demands upon the system and the move to the new TOM, greater focus needs to be given to prevention within the context of Safeguarding and for the SAB



#### Feedback

- The Challenge Team noted that the ASC senior management team is still relatively newly-formed but nonetheless staff reported good visibility of senior managers along with optimism and buy-in to the proposed ASC TOM
- Urgently develop an interim EDI position statement for ASC which initially identifies a small number of priorities for 2023/24 and a plan to achieve them

#### **Recommendations / issues / themes**

- Improve the engagement and involvement of Scrutiny in the work and performance management of Adult Social Care, building on the training being provided to Elected Members
- Ensure that the voice of ASC and the statutory role of the DASS is properly represented at the ICB Board and within the Provider Collaboration

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## Our Approach to Inspection

Know ourselves, strengths and weaknesses



# Well planned and structured





A culture of continual improvement, not focussing on ticking boxes



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### **Governance and Assurance**

### Adult Social Care Change Board

### CQC Assurance Steering Group

- Data
- Self assessment
- Resident engagement and Feedback
- Stakeholder engagement
- Plan Oversight

### **CQC** Logistics Group

- Planning the inspection
- Documentation and evidence gathering and storage and retrieval
- Stakeholder lists

### The Role of Elected Members



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# Next Steps

- A focus on priority improvement areas within the ASC improvement plan (workforce and the TOM as 2 of the biggest priorities)
- 2. Leadership and project sub groups established supported by detailed plans
- 3. Reporting, measurement and risk log developed
- 4. Month assurance update to ASC Change Board

