

Integrated Adult Social Care response to the Peer Challenge report

Report of the Director Integrated Adult Social Care

Please note that the following recommendations are subject to consideration and determination by the Committee before taking effect.

1) Recommendation

That the Cabinet be asked to note the responses outlined in section 3 of this report.

2) Background

- 2.1 The purpose of this report is to outline the main recommendations of the Local Government Association Peer Challenge Report, and to summarise the Council's Improvement Plan in response.
- 2.2 The background to the Devon LGA Peer Challenge which took place on 19-21 July 2023 is contained on its [website](#) which includes:
 - Links to LGA Peer Challenge and CQC Assurance guidance.
 - Details of the Peer Team.
 - Our Position Statement and Self-Assessment.
 - The Peer Challenge Timetable.
 - An archive of Communications.
 - Reports and other documents including our opening presentation, a leadership survey, a summary of case audit activity, and the closing feedback presentation.
- 2.3 The LGA reported:
 - The peer team read relevant documentation including a self-assessment
 - Two members of the peer team undertook a case file audit and considered 23 case files from across the areas of adult social care
 - Throughout the peer challenge the team had more than 40 meetings with over 250 different people across the council and its partners
 - The peer challenge team have spent over 25 hours with the Council and more with its documentation, the equivalent of 50+ working days
- 2.4 The LGA presented [feedback](#) to a conference of stakeholders on 21 July 2023.

- 2.5 The LGA delivered [a final report](#) to DCC on 21 September 2023 which was published by the Council on 22 September 2023.
- 2.6 We have worked with stakeholders to define an Improvement Plan:
- With members of the Council at a Health and Care Scrutiny Masterclass.
 - With senior managers in a focussed meeting of our Extended Leadership Team.
 - With representative users of services and unpaid carers at our Joint Engagement Forum.
 - With representative members of staff at our Staff Reference Group.
 - With colleagues from across the Council through our Corporate Leadership Team.
 - With members of our Assurance Board that coordinates performance management, risk management and quality assurance activity across Integrated Adult Social Care.
- 2.7 Once the report is finalised and received it will be added to the [‘outcomes and reports’ tab](#) of the Devon LGA Peer Challenge website with an outline of next steps.
- 2.8 Further stakeholder communications will take place alongside and as an outcome of political governance.
- 2.9 The CQC has now [completed and published](#) the five pilot local authority assessments. Of the five pilot areas four achieved ‘Good’ (Birmingham City; Lincolnshire County; North Lincolnshire; Suffolk County), and one achieved ‘Requires improvement’ (Nottingham City).
- 2.10 The CQC has indicated that an updated framework and guidance will be published in late November after Ministerial sign-off, and the first notification sent in early December with a lead time of 9-11 weeks. All local authorities will be inspected within 2 years.

3) Main Body: LGA Feedback and the Council’s response

3.1 Raising awareness

3.1.1 LGA Peer Challenge Team recommendation:

Continuing work across the Council and with partners to raise the profile of Adult Social Care, and its role within the wider work of the Council and local communities, will be central over the coming months. Key messages from this report, updates on preparation for Adult Social Care assurance, as well as on progress against both savings and transformation plans, will all provide an important framework in which council and wider system leadership can understand and balance risks and opportunities for Adult Social Care, and notably the importance of work to mitigate the risk of receiving a less than good judgement from any future CQC assurance process. The quarterly cycle of review and refresh for the Adult Social Care Position Statement (mentioned as planned following the Challenge) along with regular internal council and wider presentation of this, might help

to raise the profile and ambition of this work, as well as developing wider and fuller understanding of its purpose, impact, risks and mitigations.

3.1.2 We have:

- Established an LGA Peer Challenge website with all relevant content accessible.
- Undertaken a series of briefings for stakeholder groups including Scrutiny Masterclasses.

3.1.3 We are:

- Updating our CQC Assurance communications plan including regarding our approach to briefing and debriefing during an inspection period.
- Involving stakeholder groups in developing and prioritising our Improvement Plan.

3.1.4 We will:

- Establish a CQC Assurance website with all relevant content accessible.
- Take a summary of the LGA Peer Challenge Report and our Response to it through the Council's governance.
- Highlight to corporate colleagues, our partners and commissioned providers the contributions we are asking them to make.

3.2 Prioritisation of transformation

3.2.1 LGA Peer Challenge Team recommendation:

There are a range of different plans across the Directorate, including around savings, transformation (in different service areas), assurance, improvement work (for instance around waiting lists or practice), etc. Bringing these plans into alignment will help not only to develop synergies and avoid duplication, but can also help to balance and manage risks and priorities, identify mitigations to key risks (where there are inter-dependencies), and where possible to identify initiatives or pilots that could be scaled up at pace, or accelerate where they are shown to work (in Devon or elsewhere).

3.2.2 We have:

- Reviewed our transformation programme to recognise changing priorities.
- Updated our vision and strategies to frame our transformation work.

3.2.3 We are:

- Focussing on financial sustainability, CQC assurance, and service recovery in 2023-24.
- Rescheduling our transformation programme and allocating resources accordingly.

3.2.4 We will:

- Publish a summary of our transformation programme and maintain it in alignment with our Improvement Plan, Medium Term Financial Strategy and the Council's strategies and plans.

- Report on progress in our online Self-Assessment that will become our Annual Report.

3.3 Collecting and using feedback

3.3.1 LGA Peer Challenge Team recommendation:

Developing better and more varied ways to routinely create and collect evidence of outcomes for people will help to prepare for future assurance. This might include the aggregated out-turn from reviews, feedback from people and communities and partners, or formal coproduction. A clear focus on delivery of outcomes, through transformation and innovation, can also help to maintain quality and values in the service offer, with equal priority to the management of risk and financial out-turn.

3.3.2 We have:

- Completed a Self-Assessment for the LGA Peer Challenge involving stakeholder groups.
- Built into this a range of feedback including a leadership survey; staff surveys; surveys of service users and carers; stories about service users, services, and members of staff including those who have recently won awards.

3.3.3 We are:

- Updating our Self-Assessment according to LGA feedback and updated data.
- Exploring additional cost-effective options for collecting and using feedback from people who use services, especially our care management.

3.3.4 We will:

- Improve our collection and reporting of complaints, compliments and comments delivered through our corporate Customer Relations Team.
- Improve our systematic use and recording of feedback from Involvement Groups through our Involvement Team.

3.4 Practice quality assurance

3.4.1 LGA Peer Challenge Team recommendation:

Alongside this a renewed approach to regular case file audit, and other processes for peer learning at a practice level, should underpin a refreshed approach to quality assurance, wider practice and approach and efficacy, and safeguarding practice. This can also be used as a means to embed practice change, and to bring challenge to frontline teams in line with these changes, in particular relating to outcomes, savings and independence.

3.4.2 We have:

- Undertaken a case audit of 23 cases for the LGA Peer Challenge, communicated and acted on that learning.
- Established a Practice Quality Assurance Group to govern practice quality assurance and improvement.

3.4.3 We are:

- Developing our Practice Quality Assurance Framework, including practice standards, case audit, and practice improvement.
- Making embedding this a priority for our operational services for this year.

3.4.5 We will:

- Seek to develop a business case for investment in this area on the basis strengths-based practice can save money and improve outcomes by promoting independence.
- Ensure learning is shared, including through our Assurance Board and Self-Assessment and regional networks.

3.5 Co-production.

3.5.1 LGA Peer Challenge Team recommendation:

Building on existing work on coproduction will help to engage with wider communities, and to develop services (at both individual and macro-levels) that best meet their needs. It will allow staff and system leaders to learn from those who have lived experience of using adult social care and other public services, and to develop an offer in line with what works best for local people. And it can help to build capital with those who will continue to rely on local services in the coming years, and whose support will be needed when making difficult decisions, or managing significant transformation in how services are offered.

3.5.2 We have:

- Collated our current use of co-production to show good practice and its benefits where it exists.
- Begun conversations within the Council as to how to better coordinate our work with the voluntary and community sector.

3.5.3 We are:

- Publicising the opportunities of our Co-production Working Group and Commissioning Involvement Group.
- Reflecting on the areas of activity where more co-productive approaches have most potential to improve outcomes.

3.5.4 We will:

- Formalise our co-production offer and approach through a clear policy.
- Ensure opportunities for co-production are considered at the outset of any new project or initiative.
- Review our policy towards the remuneration of people taking part in co-production.
- Consider the representation of people with lived experience in our governance.

3.6 Preparing for assurance

3.6.1 LGA Peer Challenge Team recommendation:

The Council worked very hard to prepare for and facilitate an excellent Peer Challenge process. The Council developed an excellent online Position Statement which helped to guide the Challenge Team in their thinking, along with a comprehensive set of supporting materials. Further consideration could be given as to how to develop evidence of outcomes more routinely for people who use or have contact with your services, and how to align this to your position statement and other evidence as part of an assurance process. Further consideration could also be given as to how to involve people with lived experience more fully in the preparation for future assurance processes, as well as in the process itself. The Challenge Team were aware that a thorough communications approach to the Peer Challenge was developed, including briefings and updates although more rigorous oversight of the process as it developed through debriefing may be needed or desirable in a future CQC assurance visit.

3.6.2 We have:

- Used the LGA Peer Challenge as a 'dress rehearsal' for any future CQC inspection.
- Documented our lessons learned from the process and amended our plans accordingly.

3.6.3 We are:

- Finalising our Step-Up plan arrangements (including roles/responsibilities, briefing/debriefing, facilities/logistics) for what happens from receipt of a notification of inspection through to the publication of resulting report and ratings.
- Preparing to handover to business-as-usual arrangements and close down the project.

3.6.4 We will:

- Maintain inspection readiness through regular meetings of the Step-Up team reporting to our Assurance Board.
- Undertaking quarterly review and annual refresh of our Self-Assessment and Evidence Library.
- Ensure resilience in our arrangements by ensuring understanding of roles/responsibilities and facility requirements across the organisation.

4) Options / Alternatives

As per stakeholder engagement referenced in section 2 of this report a range of options were raised and discussed with stakeholders in development of our response.

5) Consultations / Representations / Technical Data

None required

6) Strategic Plan

The statutory duties set out in Part 1 of the Care Act 2014 link to following elements of the Council's Strategic Plan

- Tackle poverty and inequality (address poverty, health and other inequalities)
- Improve health and wellbeing, including any public health impacts
- Help communities be safe, connected and resilient

7) Financial Considerations

To note that the Local Government Association has indicated (based on the Ofsted intervention framework that is the same as the CQC Inspection intervention framework) that the impact of an unfavourable CQC rating for an average sized local authority, could be significant. It is not possible to accurately quantify what that figure might look like for Devon at this stage, as costs would depend on specific outcomes within the overall rating. The improvement work described in the rest of this report is to negate a poor outcome and this level of risk.

8) Legal Considerations

CQC Inspection is the inspection of our statutory duties as set out in Part 1 of the Care Act 2014

9) Environmental Impact Considerations (Including Climate Change, Sustainability and Socio-economic)

There is no specific impact to consider.

10) Equality Considerations

CQC Inspection is the inspection of our statutory duties as set out in Part 1 of the Care Act 2014, these duties include duties relating to equalities. A national Equalities Impact Assessment was produced for the Care Act 2014.

11) Risk Management Considerations

The risk of a poor CQC Inspection rating is recorded within our Risk Register including mitigations [CSLT-D9 – Adult Social Care Reform: Government intervention and support resulting from a poor Care Quality Commission \(CQC\) performance assessment | Risk Recording \(devon.gov.uk\)](#)

12) Reasons for Recommendations

To support preparation for CQC Inspection and further mitigate the risk identified in section 11

Tandra Forster

Report of the Director Integrated Adult Social Care

Electoral Divisions: All

Cabinet Member for Integrated Adult Social Care and Health, Councillor James McInnes

Local Government Act 1972: List of background papers

N/A

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