

Cabinet

16 October 2024

Adult Social Care Update on the Outcome of the Local Authority Assessment by the Care Quality Commission (CQC) under the Health and Care Act (2022)



Ordinary Decision

Report of Corporate Management Team

Michael Laing, Interim Corporate Director of Adult and Health Services

Councillor Chris Hood, Cabinet Portfolio Holder for Adult and Health Services

Electoral division(s) affected:

None

Purpose of the Report

- 1 This report provides Cabinet with an update on the outcome of the Care Quality Commission (CQC) Assessment of the way in which the Council discharges its adult social care duties under part 1 of the Care Act 2022 undertaken earlier this year. The report seeks Cabinet approval for the Service Improvement Plan to address areas for development set out in the CQC report and our wider service improvement aspirations, progress against which will be subject to annual reporting in the future.

Executive summary

- 2 On 1 April 2023, CQC regulatory powers came into effect under the Health and Care Act 2022 to assess how well local authorities are performing against their duties under Part 1 of the Care Act. When assessed, local authorities are given a rating of outstanding, good, requires improvement, or inadequate.
- 3 Significant work was undertaken to prepare for the CQC assessment, specifically including the development of a Self-Assessment which was informed by a variety of engagement work.

- 4 On 30 January 2024, CQC notified the council of the commencement of the assessment process consisting of various stages and taking place over a period of up to six months.
- 5 The stages included the submission of a comprehensive information return consisting of key evidence, information and data; a pre-meeting with senior leaders and representatives from CQC; case tracking activity to assess the lived experience of people drawing support from social care; remote activity with partners and providers including the voluntary and community sector, and the on-site assessment which took place during May 2024 involving leaders, staff, partners and representative groups.
- 6 In August 2024 CQC published the final assessment outcome, rating adult social care provision within the Council as 'Good'. The majority of areas within the assessment were found to be of a good standard and the report highlighted that the Service was performing well and meeting the expectations of CQC. The outcome and key messages have been communicated to a wide range of key stakeholders. At the time of publication the Council's rating placed it joint third nationally out of 11 published reports.
- 7 A number of areas within the report were also highlighted as needing improvement and an Service Improvement Plan has been developed to address these, building upon the work that was already in progress and following the development of the Self-Assessment. The service has a strong focus on ensuring continuous improvement and strives to foster a culture of continuous learning and development.
- 8 A review of the governance arrangements in relation to the work associated with CQC assessment has taken place to ensure that the robust oversight and leadership of improvement activity continues, as well as learning and preparation for future assessments.

Recommendation(s)

- 9 Cabinet is recommended to:
 - (a) note the outcome of the CQC assessment;
 - (b) approve the Adult Social Care Service Improvement Plan 2024-2025 at Appendix 2;
 - (c) agree to annual update reports on progress with the Service Improvement Plan.

Background

- 10 In December 2021, the Government published the White Paper 'People at the Heart of Care', which announced plans for a reintroduction of external assessment by an independent, regulatory body, such as CQC. In April 2022, the Health and Care Act 2022 came into force which included legislation about CQC assessment.
- 11 The Act gave CQC regulatory powers from April 2023 to enable them to assess how local authorities discharge their adult social care duties under Part 1 of The Care Act 2014. CQC were also given powers to assess whether Integrated Care Systems (ICSs) are meeting the needs of their local populations.
- 12 When assessed, local authorities are given a rating of outstanding, good, requires improvement, or inadequate. Assessing the performance of local authorities provides assurance to CQC and the Department of Health and Social Care (DHSC) about the quality of care in an area, including consideration as to whether any improvements are required.
- 13 The CQC assessment process shares some features of the best value themes such as leadership, partnerships and community engagement, governance, culture and service delivery. The CQC assessment report demonstrates that the Council is open to challenge and continuous improvement which are both part of the best value standards.
- 14 Details are available in the previous report 'Adult Social Care update on the introduction of local authority assessment by the Care Quality Commission under the Health and Care Act (2022)', which was presented to Cabinet on 12 July 2023.
- 15 Significant work was undertaken in preparation for the assessment, including the development of a Self-Assessment document. Further detail regarding this can also be found in the 12 July 2023, 13 December 2023 and 17 January 2024 Cabinet Reports. Links to the reports are available under the heading 'Background papers'.

Adult Social Care CQC Assessment Process

- 16 On 30 January 2024, CQC confirmed the commencement of the Council's assessment process, consisting of various stages and taking place across a period of up to six months.
- 17 Throughout the preparation, assessment period and following the assessment outcome, a robust communication and engagement plan has regularly updated and informed staff, Members, partners and stakeholders of progress.
- 18 Key stages of the assessment process were as follows:

Local Authority Information Return (LAIR)

- 19 The initial stage was the submission of the LAIR which comprised of key documents, information and data to be reviewed by CQC prior to their on-site visit.
- 20 The evidence within the LAIR supported the four themes within the assessment framework (Working with People; Providing Support; Ensuring Safety within the System, and Leadership) and the 'I' and 'We' statements to be assessed.
- 21 "I" statements are based on what service users expect and need and are used as a basis for gathering structured feedback. "We" statements are the standards against which CQC hold local authorities to account.
- 22 A comprehensive LAIR submission consisting of 186 pieces of evidence produced from across the service and wider council was submitted to CQC on 20 February 2024. A key document within the LAIR was the Self-Assessment that was developed in line with guidance from the Local Government Association (LGA) and Association of Directors of Social Services (ADASS) to reflect the strengths and identified areas of improvement across adult social care, together with any mitigating actions being taken to address these where appropriate.

Meeting the Senior Leadership Team

- 23 Prior to on-site assessment, an introductory meeting with representatives from the CQC Assessment Team took place in April 2024 with senior leaders from the council. In attendance were the Chief Executive, Cabinet Portfolio Holder for Adult and Health Services, Corporate Director for Adult and Health Services, Director of Integrated Community Services, Head of Adult Care, Director of Place (Head of Integrated Strategic Commissioning), Director of Public Health as well as the Principal Social Worker and Strategic Managers from Adult Care Senior Management Team.
- 24 The purpose of the meeting was to enable the assessment team to understand more in relation to:
 - (a) how the leadership team was organised - areas of responsibility, strengths and areas for improvement in each area;
 - (b) lines of accountability from the Director down to Team Managers;
 - (c) how front-line teams are set up;
 - (d) a person's journey from initial contact with the local authority through to allocation to a team for assessment;

- (e) how front-line teams support people with specific needs. For example, autistic people, people with a learning disability, mental health need, or sensory need;
- (f) the pathway for young people transitioning from children to adult services;
- (g) any Section 75 agreements in place;
- (h) any commissioned partnership arrangements for the provision of Care Act duties. For example, contact centre, wellbeing service, financial assessments, carers support;
- (i) arrangements for joint working with Housing.

Case Tracking

- 25 The lived experience of people drawing support from social care is key to the assessment. This enables CQC to gain an in-depth understanding of people's journey through the social care system, their experiences of how care and support decisions are made by commissioners and social work teams, how they were communicated and implemented, and the impact this has on their lives.
- 26 Case tracking involves retrospectively following the pathway of a small number of people to gather evidence for the assessment. During April, CQC selected 10 cases to review (6 cases with 4 as reserve) from an initial coded list of 50. Where consent was provided by service users, case records were provided to CQC for review and where appropriate CQC talked to the person, and/or family, friends or advocate, as well as staff from the council and other partners and agencies where required.

Engagement with Partners and Providers

- 27 Alongside this, in the interim period following the submission of the LAIR and case tracking, CQC undertook additional activity remotely. This specifically included direct contact with voluntary and community groups and key partners and providers to understand more about their services and their engagement and relationship with the council.

CQC Onsite Assessment

- 28 The on-site visit from the assessment team took place during 21 - 23 May 2024, with some additional virtual meetings on 24 May 2024. A total of 10 members of the assessment team were on-site.
- 29 Working with CQC, a detailed timetabling activity was undertaken in advance and a comprehensive schedule of interviews developed including staff and leaders, partner agencies, and representative groups. In total, 166 people were interviewed.

- 30 Feedback was sought via a survey to everyone involved in interviews to support learning. A high response rate of over 72% was received, and overall feedback about the experience was extremely positive. Typically, respondents noted that interviews were 'relaxed' and 'open' and conversations with the assessment team were 'engaging' and 'flowed really well'.

Post Assessment

- 31 A high-level feedback meeting was held with the CQC Lead Assessment Manager, the Chief Executive and Corporate Director of Adult and Health Services following the assessment. The Assessment Team specifically thanked the service for their support and meticulous planning and organisation for the on-site visit.
- 32 Following the assessment, and the provision of some additional evidence requested, CQC drafted a report which included the scores for each of the quality statements within the four themes of the assessment framework, and an overall rating. On 28 June 2024, the service received the draft report from CQC for a factual accuracy check. This stage of the process is an opportunity for the council to highlight any detail within the draft report that is factually incorrect, or where it is considered that additional information or evidence be reviewed. A detailed submission was submitted to CQC in response.
- 33 As a result, CQC confirmed where amendments had been made, although these did not substantially alter the report, and the rating remained unchanged. An internal bench-marking process was also undertaken by CQC to review and calibrate scores and ratings to ensure consistency across local authorities.

CQC Assessment Outcome and Report

- 34 On 16 August 2024 the final report was published and can be accessed [here](#). The council was rated as '**Good**' with CQC stating that: "*The service is performing well and meeting our expectation*". James Bullion, Interim Chief Inspector of Adult Social Care and Integrated Care at CQC, said that the council had "*..... built a great foundation on which to build their future plans and make improvements*".
- 35 The Assessment Team found that over 85% of CQC regulated provision in the county was rated as 'good' or 'outstanding' and praised the way in which people are supported to lead healthier lives, highlighting work with community groups to deliver services locally as well as council commissioned preventative services, such as peer support groups and carer breaks.
- 36 Other key extracts from the report highlighted that:

- (a) leaders and staff were proud of the work that they did and to work for the local authority;
- (b) there was a good understanding of the health and care needs of people living in the area and leaders and staff worked well with partners to agree plans and priorities for people living across County Durham. This was also reflected in what the assessment team heard from people receiving services, as well as their carers;
- (c) Social Care Direct (front-of-house service) was able to effectively direct people to a range of preventative services within the community;
- (d) partnership working resulting in minimal to no waiting times for people using services such as homecare or a residential placement;
- (e) work with providers to look at a more preventative approach to reablement care aimed to reduce admission to hospital and prevent or reduce people's long-term needs at an earlier stage;
- (f) good work was being done to rise to the significant challenge of poor mental health in County Durham, with close links formed with other organisations to make a single point of access for referrals;
- (g) the creative work of the Care Academy was supporting staffing challenges in the wider care market;
- (h) feedback was mainly positive from people about their experiences of care, with people feeling listened to and that their assessments and care plans reflected their needs and wishes;
- (i) most carers felt the support they had received from the local authority had helped them with their own mental wellbeing. They were signposted to appropriate services for their needs and 88% of carers found information and advice helpful;
- (j) staff felt that leaders were 'visible, capable and compassionate' with the report commenting on a 'positive culture of continuous learning and improvement in the local authority'.

37 Whilst the majority of areas were rated as being of a 'Good' standard, the assessment team found some room for improvement. The service recognises that there is always scope to improve, and indeed strives to foster a culture of continuous learning and development. This was

reflected in the Self-Assessment developed for the purposes of the assessment.

38 Key extracts from the report included:

- (a) challenges in accessing services due to the large geography and areas of deprivation;
- (b) some delays in mental health provision, although it was recognised that commissioners are working together with a local NHS trust to source placements for people;
- (c) challenges in sourcing flexible respite services;
- (d) a better understanding needed of the needs of people whose identity and characteristics were different, such as those from the LGBT or traveller community;
- (e) not everyone receiving the same quality of safeguarding support;
- (f) staff felt that financial assessments took too long, affecting the timeliness of assessments.

39 The Council's score for each of the evidence categories, described as Quality Statements, across the four themes is as follows:

Theme	Quality Statements	DCC Score
Theme 1: Working with People	Assessing Needs	2
	Supporting People to Lead Healthier Lives	3
Theme 2: Providing Support	Equity in Experience and Outcomes	2
	Care Provision, Integration and Continuity	3
	Partnerships and Communities	3

Theme 3: Ensuring Safety	Safe Pathways, Systems and Transitions	3
	Safeguarding	2
Theme 4: Leadership	Governance, Management and Sustainability	3
	Learning, Improvement and Innovation	3

- (a) 4 = Evidence shows an exceptional standard
- (b) 3 = Evidence shows a good standard
- (c) 2 = Evidence shows some shortfalls
- (d) 1 = Evidence shows significant shortfalls

Adult Social Care Service Improvement Plan

- 40 The Service has a strong focus and aspirations to ensure continuous improvement, reflecting on learning from others and from the views of service users which are central to ensuring a strong service offer.
- 41 A Service Improvement Plan 2024-2025 has been developed which underpins the Service Plan and Council Plan in line with the corporate strategic planning framework (**Appendix 2**).
- 42 The Service Improvement Plan is in two parts. Part A, which sets out the strategic and transformational projects to improve existing high-quality services - maximising productivity and ensuring that MTFP financial commitments are met.
- 43 Part B is specifically focussed on the improvement activity aligned to the four themes in the CCQC assessment framework, building upon the Self-Assessment and recent assessment outcome.
- 44 The oversight of the delivery of the Service Improvement Plan will be managed in line with the established service governance arrangements for quality assurance, with ultimate responsibility being held by the Quality Assurance Board (QAB). This will also form part of the current

reporting arrangements to Corporate Management Team (CMT) and Elected Members.

- 45 The Service Improvement Plan is aligned with the Council's overall Transformation Programme to deliver financial and operational sustainability. This includes:
- (a) managing demand, which is preventable, avoidable, the result of service failure or is unavoidable due to external factors;
 - (b) empowering communities;
 - (c) being asset focused;
 - (d) building the resilience of the most vulnerable residents;
 - (e) working better together across sectors to reduce duplication and have a greater impact;
 - (f) sharing decision making with people who use services, their families and carers;
 - (g) making our interventions 'empowering' as far as possible;
 - (h) reaching informed decisions based on strong evidence;
 - (i) seeking alternative delivery models from communities, the VCS and others;
 - (j) harnessing the use of technology.

Next Steps

Governance

- 46 A review of governance arrangements has been undertaken to ensure that the effective management of work associated with the CQC assessment framework continues going forward. This is specifically important as the service transitions from post assessment, to embedding the assessment framework into business-as-usual activity, whilst maintaining strong oversight on learning and improvement and planning for future assessment.
- 47 A new CQC Project Team has been established to replace the former Inspection Preparation Group, which will be chaired by the Head of Adult Care. This new group will manage the maintenance of the self-assessment and associated evidence, in addition to managing arrangements for future assessments. Dedicated task and finish groups

will underpin the work of the Project Team in relation to such as the Self-Assessment and LAIR.

- 48 The Project Team will continue to feed into existing governance arrangements including QAB to ensure strong oversight and assurance. Work will also continue on a regional and national footing, including with ADASS and the LGA and Partners in Care and Health (PCH), to collaborate and share learning as further local authority assessments are carried out and in terms of sector-led initiatives, as well as keeping abreast of any developments with the assessment framework and methodology.
- 49 Arrangements have been agreed for the maintenance of the Self-Assessment document including an annual refresh and clear governance and approval arrangements.

Communications

- 50 Communication and engagement are a vital component of the work around assessment. A robust communication plan has been in place since preparation for the assessment commenced and will continue going forward. The plan is regularly monitored through QAB and focuses on both internal and external communication with a range of stakeholders.
- 51 After the on-site assessment, a survey was sent to staff and partners to gather their views about the overall process, including such as the internal methodology, support arrangements and the effectiveness of communications, to support learning and improvement and shape the future approach.
- 52 Feedback included that the internal methodology used was comprehensive, robust and very well planned, tracked and governed, and that internal communications were clear and consistent. Staff felt that they were kept up to date and that engagement was consistent.

Conclusion

- 53 In April 2023 regulatory powers were introduced for CQC to formally assess how local authorities discharge their duties under Part 1 of the Care Act 2014. Significant work was undertaken in order to prepare for assessment.
- 54 In January 2024 the council were notified by CQC that their formal assessment had commenced, taking place over a period of up to 6 months. During this period the assessment process consisted of a number of stages including the submission of a comprehensive information return, case tracking around the lived experience of people

drawing support from care, activity with partners and providers including the voluntary and community sector, and an on-site visit in May 2024 involving leaders, staff, partners and representative groups.

- 55 In August 2024 the CQC assessment outcome was published rating adult social care provision within the council as 'Good'. The majority of areas within the assessment were found to be of a good standard and the report highlighted that the service was performing well and meeting the expectations of CQC. The outcome and key messages have been communicated to a wide range of key stakeholders.
- 56 A number of areas within the report were highlighted as needing improvement and a service improvement plan has been developed to address these, building upon the work that was already in progress and following the development of the Self-Assessment. The service has a strong focus on ensuring continuous improvement and strives to foster a culture of continuous learning and development.
- 57 A review of the governance arrangements in relation to the work associated with CQC assessment has taken place to ensure that the robust oversight and leadership of improvement activity continues, as well as learning and preparation for future assessment activity.

Background papers

- 12 July 2023 Cabinet Report
[Adult Social Care update on the introduction of local authority assessment by the Care Quality Commission under the Health and Care Act \(2022\)](#)
- 13 December 2023 Cabinet Report
[Adult Social Care Update Cabinet CQC Assessment Update Report.pdf \(durham.gov.uk\)](#)
- 17 January 2024 Cabinet Report
[2024 01 17 Adult Social Care Assessment Framework Self-Assessment Cabinet Report.pdf \(durham.gov.uk\)](#)

Other useful documents

- February 2021: NHS Reform White Paper
[Integration and Innovation: working together to improve health and social care for all \(publishing.service.gov.uk\)](#)
- December 2021: People at the Heart of Care: adult social care reform white paper
[People at the Heart of Care: adult social care reform white paper](#)
- December 2022: Update from CQC
[Our new single assessment framework - Care Quality Commission \(cqc.org.uk\)](#)

- March 2023: Draft guidance from CQC
[Assessment framework for local authority assurance - Care Quality Commission \(cqc.org.uk\)](#)
- April 2023: Adult social care system reform: next steps to put People at the Heart of Care.
[Next steps to Put People at the Heart of Care](#)
- 06 June 2023
[Adult Social Care Assurance: a guide to support the development of your adult social care self-assessment, Local Government Association](#)
- June 2023 Unpaid carers and Care Quality Commission assurance
<https://www.local.gov.uk/our-support/partners-care-and-health/cqcs-new-assurance-framework/unpaid-carers-and-care-quality>
- Communication Examples
[Quality Assurance Intranet Page](#)
- DCC Press Release: [News-County Durham's adult social care provision rated as 'good' - Durham County Council](#)
- BBC Press Release: [Durham County Council adult care services gain 'good' rating - BBC News](#)
- CQC Press Release: [CQC rates County Durham Council's adult social care provision as good - Care Quality Commission](#)

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Appendix 1: Implications

Legal Implications

The Council has duties under the Care Act 2014 to assess and meet the defined needs of vulnerable adults. The Council's discharge of these duties is assessed by CQC under the provisions of the Health and Social Care Act 2022.

Finance

There are no immediate financial implications to this report. However, the actions in the Service Improvement Plan will contribute to the overall financial targets in the Medium-Term Financial Plan and the Transformation Programme by managing demand, empowering communities, being asset focused building resilience and other measures.

Consultation & Engagement

Where appropriate, consultation has taken place with internal and external colleagues and stakeholders and partners. The CQC assessment report makes recommendations about how the Council can improve co-production, engagement and consultation.

Equality and Diversity / Public Sector Equality Duty

The principles of equality and diversity have been considered. The CQC assessment report considers the access to services and experiences of people with protected characteristics and makes suggestions for improvement.

Climate Change

When Commissioning services the impacts on the climate are considered such as reducing travel distances.

Human Rights

The principles of human rights have been considered.

Crime and Disorder

The CQC assessment report makes recommendations about ensuring the safety of vulnerable residents.

Staffing

Staff will be involved in any assurance activity and are required to adhere to relevant legislation and any professional regulatory or statutory requirements relating to their roles.

Accommodation

Not Applicable.

Risk

Assurance activity carried out by the organisation and the service, and assessment of the local authority by an external independent organisation mitigates against risk by ensuring that the local authority adheres to relevant legislation and any professional regulatory or statutory requirements. Risk registers also held in the Adult and Health services, as well as for programmes of work.

Procurement

Not Applicable.

Adult Social Care Improvement Plan 2024 – 2025



Introduction from Michael Laing, Interim Corporate Director of Adult and Health Services (AHS)

As a service we have a strong focus on our aspirations to ensure continuous improvement. Our aim being to foster a culture where we continue to learn and develop, identify the things we do well, celebrate success, and where required take action to improve. This will instil confidence that we are setting and maintaining high standards, reflecting on the good working experiences between health and social care partners, and always looking for new and innovative ways to meet the needs of the people of County Durham. We will reflect on learning from others and the views of our service users which are central to ensuring a strong service offer.



Michael Laing

Michael Laing

Interim Corporate Director of Adult and Health Services



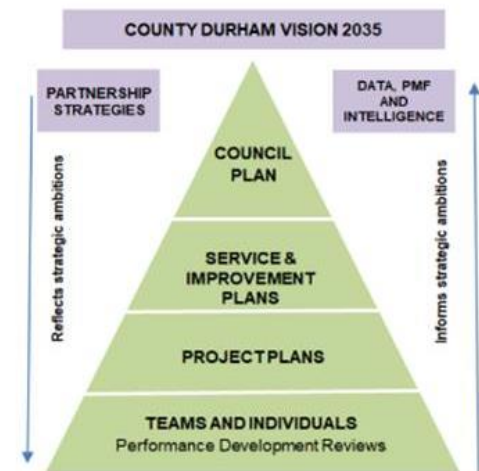
About our Improvement Plan

A place where there are more and better jobs, people live long, healthy and independent lives and our communities are well connected and supportive.

The above County Durham Vision 2035, developed with residents and partners, sets out the vision and long-term ambitions for the county. A corporate strategic planning framework helps manage our contribution to this partnership vision.

This improvement plan underpins the Adult Social Care Service Plan and the Council Plan and sets out the service level actions that will be achieved to deliver the vision. This plan is also aligned to the Adult and Health Services Quality Assurance and Performance Frameworks, to the voice of the service user through customer feedback and engagement, as well as to our strategies and integrated agreements.

The plan is in two parts. Part A, which sets out our strategic and transformational projects to improve existing high-quality services, maximising productivity and ensuring that we meet our MTFP financial commitments. Part B is our focussed improvement work aligned to the Care Quality Commission (CQC) assessment framework for local authorities, comprising of the four themes below. This work builds upon our Self-Assessment and assessment outcome. Our assessment report can be accessed [here](#).



Theme 1 Working with People
Theme 3 Ensuring Safety

Theme 2 Providing Support
Theme 4 Leadership

The oversight of the delivery of the plan will be managed in the established governance arrangement for quality assurance with ultimate responsibility being held by the Adult and Health Services Quality Assurance Board (QAB). This will then form part of the reporting arrangements to Corporate Management Team and Elected Members. To ensure quality control, regular updates will be provided by named leads, highlighting any risks or exceptions.

Adult Social Care Improvement Plan: Part A

Accountable Officer(s): Lee Alexander, Head of Adult Care and Sarah Burns, Director of Local Delivery/Head of Integrated Strategic Commissioning

Accountable Board(s): Adult and Health Services Quality Assurance Board (QAB) and Quality Innovation Leadership Transformation Group (QILT)

Note: These actions are being delivered as part of strategic projects and programmes of work with associated governance and delivery plans. Where appropriate, these are referenced and should be viewed for further detail.

RAG **Complete** ■ **In Progress and On Track** ■ **Overdue with Close Monitoring Required** ■
Not Yet Started ■

Improvement Priority	Milestone/Action	Lead	Target Date	RAG	CQC Theme	Governance/Work Programme
A1. Digital Innovation and Maturity	A1.1 Develop a digital strategy and delivery plan for adult social care aligned to the 'What Good Looks Like' (WGLL) framework, that incorporates work with the independent sector, and which aligns to regional and ICB digital work.	Service Manager Operational Support and Strategic Commissioning Manager OP PDSS	Jun 25		Leadership	-AHS Digital Board - DCC AI Board
	A1.2 Pilot and evaluate an Artificial Intelligence (AI) tool for social work practitioners.	Service Manager	Apr 25			

		Operational Support				
Outcome(s): Set a broad direction of travel and key priorities to compliment and support related digital strategies, including across our region and partners, and improve our digital capability to underpin the delivery of high quality and more joined up social care.						
A2. Hospital Discharge and Transfer of Care Hub (TCH)						
A2. Hospital Discharge and Transfer of Care Hub (TCH)	A2.1 Explore digital opportunities to improve the flow, quality and timeliness of referrals, and develop a plan to pilot a digital solution.	Strategic Manager OP/PDSS and In House services	Jun 25		Working With People	-TCH Task and Finish Group and associated action plan
	A2.2 Strengthen integration arrangements, specifically with regard to Discharge Management Team (DMT).	Strategic Manager OP/PDSS and In House services	Jun 25			
	A2.3 Develop home to hospital service standards.	Strategic Manager OP/PDSS and In House services	Jun 25			
Outcome(s): Improved local arrangements on hospital discharge with a 'home first' approach. A seamless and efficient discharge pathway with a focus on the needs of older people.						

A3. Extra Care Strategy Housing and Care	A3.1 Complete an initial draft of the strategy.	Deputy Director of Local Delivery/Deputy Head of Integrated Commissioning and /Strategic Commissioning Manager OP PDSS	Oct 24		Working with people Providing Support Ensuring Safety Leadership	Commissioning Senior Management Team - QILT - AHSMT
	A3.2 Receive and evaluate feedback from management teams (QILT, Commissioning Senior Management Team, AHSMT).	Deputy Director of Local Delivery/Deputy Head of Integrated Commissioning and /Strategic Commissioning Manager OP PDSS	Dec 24			
	A3.3 Complete final Strategy and share relevant details with stakeholders (including external partners/ providers as required).	Deputy Director of Local Delivery/Deputy Head of Integrated Commissioning and /Strategic Commissioning Manager OP PDSS	Feb 25			

<p>Outcome(s): People are supported to remain independent, for as long as possible. People are supported to access high quality and varied services.</p> <p>People's choice and control over how they are supported to live their lives is maximised while their needs are met. To ensure Value for Money is achieved.</p>						
<p>A4. Older People (OP) Care Home Market Shaping</p>	<p>A4.1 Complete workstreams in relation to Nursing Provision; Quality of Services; Occupancy and Finance.</p>	<p>Deputy Director of Local Delivery/Deputy Head of Integrated Commissioning and /Strategic Commissioning Manager OP PDSS</p>	<p>Jan 25</p>		<p>Working with people Providing Support Ensuring Safety Leadership</p>	<p>- Commissioning Senior Management Team - QILT - AHSMT</p>
	<p>A4.2 Complete an options appraisal for a plan for commissioning across 2025-26 and 2026-27, including a potential procurement approach which could be implemented from April 2025, or a staggered approach taken across 2025-26 and 2026-27 (depending on workstream findings and strategic course decided on).</p>	<p>Deputy Director of Local Delivery/Deputy Head of Integrated Commissioning and /Strategic Commissioning Manager OP PDSS</p>	<p>Nov 24</p>			

	A4.3 New contract date; may be tied to procurement approach highlighted above.	Deputy Director of Local Delivery/Deputy Head of Integrated Commissioning and /Strategic Commissioning Manager OP PDSS	Apr 25			

Outcome(s): People are supported to remain independent, for as long as possible. People are supported to access high quality and varied services. People’s choice and control over how they are supported to live their lives is maximised while their needs are met. To ensure Value for Money.

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A5. Reablement Service Transformation	A5.1 Agreement from management teams including AHSMT for a Reablement Strategic Plan, including piloting of new approach (as below) to build on the PeopleToo review.	Strategic Commissioning Manager OP PDSS	Nov 24		Working with people Providing Support Ensuring Safety Leadership	- Commissioning Senior Management Team - QILT - AHSMT
	A5.2 Commence a new reablement approach - pilots in 3 x domiciliary care zones (exact zones to be confirmed)	Strategic Commissioning Manager OP PDSS	Jan 25			

	based on a full analysis of areas where reablement capacity is most challenging.					
	A5.3 Complete an initial data analysis on the early stages of pilots. Complementary TEC offer / community equipment approach to be fully embedded including early learning from new approach.	Strategic Commissioning Manager OP PDSS	May 25			
	A5.4 New contract date for fully revised reablement service; including TEC and equipment elements and further integrated approach to staff training and therapy. Links to revised procurement date for domiciliary care framework and spot contracts.	Strategic Commissioning Manager OP PDSS	Apr 26			
<p>Outcome(s): People are supported to remain independent, for as long as possible. People are supported to access high quality and varied services. People's choice and control over how they are supported to live their lives is maximised while their needs are met. To ensure Value for Money/MTFP savings are achieved.</p>						
A6.	A6.1 Complete a specialist residential care/operational review.	Deputy Director of Local Delivery / Deputy Head of Integrated	Jan 25		Working with people	-LD High-Cost Project Group

Learning Disabilities (LD) Market Shaping: High-Cost Care Homes and Supported Living		Commissioning/ Strategic Commissioning Manager LD MH		Providing Support Ensuring Safety Leadership	-LD Budget Group -QILT -LD Commissioning Strategy -Specialist Accommodation Plan
	A6.2 Identify people moving from high-cost residential care.	Deputy Director of Local Delivery / - Deputy Head of Integrated Commissioning/ Strategic Commissioning Manager LD MH	Review annually – from 31 March 25		
	A6.3 Develop a detailed business case for new services where appropriate.	Deputy Director of Local Delivery / Deputy Head of Integrated Commissioning/ Strategic Commissioning Manager LD MH	Review annually – from 31 March 25 and each subsequent financial year		
	A6.4 Movement of people to supported living, where available, or commission of bespoke services in conjunction with operational teams.	Deputy Director of Local Delivery /Deputy Head of Integrated Commissioning/ Strategic	Review annually – from 31 March 25 and each subsequent financial year		

		Commissioning Manager LD MH				
Outcome(s): People are supported to remain independent, for as long as possible. People are supported to access high quality and varied services. People's choice and control over how they are supported to live their lives is maximised while their needs are met. To ensure Value for Money/MTFP savings are achieved.						
A7. LD and Mental Health (MH) Capacity and Demand Planning	A7.1 Collect and analyse LD data for capacity planning.	Strategic Commissioning Manager LD MH	Dec 25 – then annual refresh as required (min 3 yearly)		Working with people Providing Support Ensuring Safety Leadership	-Provisions Development Group -LD Commissioning Strategy Group -Specialist Accommodation Plan
	A7.2 Open new supported living developments to increase capacity. (2 new services in place - Woodland View and Cedar House. Whitebeam gardens completed but not yet fully operational).	Strategic Commissioning Manager LD MH	Jun 24			
	A7.3 Refresh the Specialist Accommodation Plan with latest data in order to identify detailed commissioning plans.	Strategic Commissioning Manager LD MH	Jan 25			
	A7.4 Transitioning of young people with very complex needs to adults.	Strategic Commissioning Manager LD MH	Review annually – from 31 March 25 and each			

			subsequent financial year			
	A7.5 Identify as a priority people with low level forensic background.	Strategic Commissioning Manager LD MH	Initially March 2025 and then each subsequent financial year			
	A7.6 Identify and develop a business case and commissioning plan for the next priority in line with the Specialist Accommodation Plan.	Strategic Commissioning Manager LD MH	Jun 25			

Outcome(s): People are supported to access high quality and varied services. People’s choice and control over how they are supported to live their lives is maximised while their needs are met. To ensure Value for Money.

A8. LD MH Transforming Care Developments Phase 2	A8.1 Complete an options appraisal for 2 further Transforming Care projects.	Strategic Commissioning Manager LD MH	Mar 26		Working with people Providing Support Ensuring Safety Leadership	-Transforming Care (TC) Local Implementation Group -TC Task Group - LD Commissioning Strategy

						-Specialist Accommodation Plan
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Outcome(s): People’s choice and control over how they are supported to live their lives is maximised, while their needs are met.

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A9 Front Of House Review: Social Care Direct (SCD)	A9.1 Scope a proposal and associated Project Initiation Document.	Strategic Manager – Safeguarding/ Strategic Manager PPMO	Jun 24		Ensuring Safety	- Project board - Operational Group
	A9.2 Brief SCD service on the full-service review: <ul style="list-style-type: none"> - Review of core processes - Information to the public - Use of technology to enhance the service offer - Telephony developments Leading to overall project completion.	Strategic Manager – Safeguarding/ Strategic Manager PPMO	Jan 25			

Outcome(s): Looking to develop ways of working in the most efficient way to improve outcomes to customers.

A10 Reduce Restraints and Restrictive Practices Across Adult Care	A10.1 Develop an action plan to reduce restraint and restrictive practices across all of our services in conjunction with partners, providers and people with lived experience, including work with the Supporting the Provider Market Team and Care Academy.	Strategic Commissioning Manager OP PDSS/LD Operations Manager	Mar 25		Working with people Providing Support Ensuring Safety Leadership	- Specialist Accommodation Plan - Whorlton Hall Action Plan
Outcome(s): People's choice and control over how they are supported to live their lives is maximised, while their needs are met.						

Adult Social Care Improvement Plan: Part B

Accountable Officer(s): Lee Alexander, Head of Adult Care and Sarah Burns, Director of Local Delivery/Head of Integrated Strategic Commissioning

Accountable Board(s): Adult and Health Services Quality Assurance Board (QAB) and Quality Innovation Leadership Transformation Group (QILT)

Theme 1: Working with People

What do we want to achieve?

- ✓ **Assessing Needs** - 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** - we support people to manage their health and wellbeing so they can maximise their independence, choice and control. We support them to live healthier lives and where possible, reduce future needs for care and support.
- ✓ **Equity in Experiences and Outcomes** - we actively seek out and listen to information about people who are most likely to experience inequalities in experience or outcomes. We tailor the care, support and treatment in response in this.

How will we achieve it?

Ref	Action	H/M/L	Lead	Target Date	RAG	Governance/Work Programme
B1.1	Understand workload demand with a focus on waiting lists and backlogs: <ul style="list-style-type: none"> - 28-day completion of assessments on open cases and timely completion of safeguarding concerns/enquiries 	H	Principal Social Worker (Adults)	Jun 25		Adult Care Management Team (ACMT)/QILT

B1.2	<p>Embed and evaluate mental health social work hubs and ensure that health infrastructure is complimentary within the community:</p> <ul style="list-style-type: none"> - Gain clarity on social care caseloads, levels of work and type of work/provision, - Provide services in a timely way, - Work to a clear performance framework, - Provide strong leadership and management of Human Resource issues, including recruitment and retention. 	H	Strategic Manager (LD, MH, Subs Misuse, Trans)	May 25		ACMT
B1.3	<p>Promote carer experience and outcomes:</p> <ul style="list-style-type: none"> - Ensure DCCS staff continue to communicate to unpaid carers their rights for formal carers assessment through the LA and continue to promote NHS Carer breaks to unpaid carers, - Ensure that Adult Care staff promote DCCS services for unpaid carers, - Ensure Adult Care staff consider ongoing carer respite needs linked to assessment and signpost to NHS carer breaks where carers are not eligible for respite through the LA, - Further build on the learning from the Mobilise contract work, - DCCS to identify any specific needs of carers with protected characteristics (e.g. older carers) and develop their unpaid carer service provision to better meet those needs, - Continue to monitor carer experience through the Survey of Adult Carers in England. 	H	<p>Deputy Director of Local Delivery / Deputy Head of Integrated Commissioning, Strategic Commissioning Manager OP PDSS and</p> <p>Principal Social Worker (Adults)</p>	May 25		QILT

B1.4	Ensure that information and advice is more inclusive and easier to access.	M	Principal Social Worker (Adults)	Jun 25		QAB
B1.5	Better address equity of experience (link with task in Theme 4 and development of an overarching ASC strategy): <ul style="list-style-type: none"> - Establish a baseline: <ul style="list-style-type: none"> ▪ Complete PCH Embedding EDI prompts, ▪ Complete PCH Community and Workforce Relationship Self-Assessment Tool. 	H	Service Manager Operational Support	Oct 25		QAB
B1.6	Strengthen the recording of protected characteristics on Azeus.	H	Principal Social Worker (Adults)	Jun 25		QILT
B1.7	Carry out insight work to understand inequalities in adult social care and consider care market requirements.	H	Corporate Performance Manager/ Joint Head of Integrated Strategic Commissioning	Oct 25		QILT
B1.8	Agree clear objectives to promote equality, diversity and inclusion.	H	Service Manager Operational Support	Oct 25		QILT

B1.9	Carry out insight work to understand the experiences of people following Care Act assessments and reviews.	H	Principal Social Worker (Adults)	Jun 25		QILT
B1.10	<p>Continue to develop online solutions to support individuals and their carers to undertake a financial assessment either at the commencement of a service or before making a decision on whether they wish to proceed with a service option:</p> <ul style="list-style-type: none"> - Continue to utilise Voicescape to support the initial contact with individuals who do not wish to undertake an online financial assessment, - Implement online financial assessment option for the majority of services, - Implement max charge calculation for those individuals who wish to understand what a service may cost them based on their income and assets, - Develop regular communication briefings with staff updating on developments, - Develop regular communication briefings with staff to update on benefits of the use of the online financial assessment. <p>Review dashboard of new KPI to ensure performance of completion of financial assessments is maintained.</p>	H	Strategic Manager Assessment and Awards	Jun 25		AHSMT

Theme 2: Providing Support

What do we want to achieve?

- ✓ **Care Provision, Integration and Continuity** - 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 and Communities** - 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.

How will we achieve it?

Ref	Action	H/M/L	Lead	Target Date	RAG	Governance/Work Programme
B2.1	Develop an action plan to improve the availability of Personal Assistants (PAs), including work with the Care Academy.	M	Strategic Manager – Safeguarding/ Strategic Commissioning Manager OP PDSS	Oct 25		QILT
B2.2	Improve the take up of Direct Payments (DPs), including work with the Care Academy.	M	Strategic Manager – Safeguarding/ Strategic Commissioning	Oct 25		QILT

			Manager OP PDSS			
B2.3	<p>Sustain the planned improvement work focussing on bariatric care:</p> <ul style="list-style-type: none"> - improve communications on the provision to the workforce. 	M	Deputy Director of Local Delivery / Deputy Head of Integrated Commissioning/ Strategic Commissioning Manager OP PDSS	Apr 25		QILT
B2.4	<p>Review arrangements for joint work with VCSE organisations with a focus on funding support:</p> <ul style="list-style-type: none"> - Care Academy to promote NEPO tendering training to VCSE, - Explore additional wording in next MPS re support for VCSE with bidding/identifying funding opportunities, including AAP funding, - Care Academy to ensure Durham Community Action opportunities are more widely promoted by encouraging newsletter sign up. 	M	Deputy Director of Local Delivery / Deputy Head of Integrated Commissioning/ Strategic Commissioning Manager OP PDSS	Jun 25		QILT/ Integrated Partnership Executive

Theme 3: Ensuring Safety

What do we want to achieve?

- ✓ **Safe Systems, Pathways and Transitions** - 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** - 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. We make sure we share concerns quickly and appropriately.

How will we achieve it?

Ref	Action	H/M/L	Lead	Target Date	RAG	Governance/Work Programme
B3.1	Enhance the use and timeliness of advocacy and ensure the accurate and appropriate recording of the existence of advocates: <ul style="list-style-type: none"> - including system updates - Further communication to the workforce. 	H	Strategic Manager – Safeguarding	Apr 25		QILT
B3.2	Ensure staff consistently apply the principles of Making Safeguarding Personal' in practice: <ul style="list-style-type: none"> - Link to safeguarding work with Systems Team - Communication to workforce 	H	Strategic Manager – Safeguarding	Apr 25		ACMT/QAB

B3.3	Carry out development work in Safeguarding Operations: - to monitor performance/new procedures in place - further training across the workforce.	H	Strategic Manager – Safeguarding	Mar 25		ACMT/QAB
B3.4	Ensure that roles, responsibilities, and processes for raising a concern are well understood and articulated, and that appropriate feedback is routinely provided to referrers on the outcome of reported safeguarding concerns.	H	Strategic Manager – Safeguarding	Mar 25		ACMT/QAB
B3.5	Ensure that the roles and responsibilities of the Adult Protection Team are well understood, including briefings and the Team Manager attendance at team meetings where required.	H	Strategic Manager – Safeguarding	Mar 25		ACMT/QAB
B3.6	Communicate wider learning to the workforce from serious incidents and SARs.	H	Strategic Manager – Safeguarding	Jan 25 (and as required)		ACMT/QAB
B3.7	Increase sufficiency of pathways around homelessness: - Work together to review current support arrangements to reduce breakdowns in relationships which lead to homelessness e.g. through mediation,	M	Head of Planning and Housing/ Strategic Commissioning Manager LD MH /	Jun 25		QILT/wider council/DSAP

	<ul style="list-style-type: none"> - Develop a more targeted and preventative approach to helping people develop skills to maintain tenancies, - Identify how help/support can improve outcomes for people with complex needs in a timelier manner, - Improve processes and support to sustain independence and tenancies following homeless/hospital support, - Work with housing providers to identify those at risk who could benefit from commissioned outreach services, - Explore partnership working to reduce repeat homelessness e.g. by identifying and addressing decline in mental health and developing solutions such as step-up-step-down accommodation. 		Strategic Manager – Safeguarding			
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Theme 4: Leadership

What do we want to achieve?

- ✓ **Governance, Management and Sustainability** - we have clear responsibilities, roles, systems of accountability and good governance. We use these 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 and Innovation** - 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.

How will we achieve it?

Ref	Action	H/M/L	Lead	Target Date	RAG	Governance/Work Programme
B4.1	Develop a plan for progressing co-production across all four themes.	H	Service Manager Operational Support	Oct 25		QILT
B4.2	Enhance learning from complaints/ensure organisational learning and improvements in practice are cascaded to the workforce.	M	Service Manager Operational Support	Apr 25		QAB – 6 monthly quality report

B4.3	<p>Maintain a sustained focus on recruitment and retention (internal workforce):</p> <ul style="list-style-type: none"> - Develop an approach to marketing and social media - raising our brand awareness as an employer of choice. - Promote the variety of adult social care roles at job and careers fairs and strengthen relationships with universities and colleges to support with skills sessions and a 'day in the life of'. - Improve induction processes and align more closely with the employee journey and candidate experience. 	M	Service Manager Operational Support	Mar 25		AHS Workforce Development Cross Service Strategy Group
B4.4	Review arrangements (both locally and regionally) for oversight of key themes and learning from fitness to practice issues and how this informs social work practice.	L	Principal Social Worker (Adults)	Jun 25		PSW annual report
B4.5	Promote more widely to the workforce standards and support available to ensure attendance of statutory/mandatory training to meet CPD needs.	L	Service Manager Operational Support	Mar 25		Data Insight Report/QAB
B4.6	Develop an overarching strategy for adult social care focussing on the needs of people who use adult social care services, ensuring equity of experience and including work on preventative activity in the County (see tasks in Theme 1).	L	Head of Adult Care	Oct 25		QILT

B4.7	Ensure a strong focus on adult social care at Overview and Scrutiny Committee and Health and Wellbeing Board.	L	Adult and Health Services Management Team	Review annually Mar 25		QAB
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24 September 2024