

# HAMPSHIRE COUNTY COUNCIL

## Report

<b>Committee:</b>	Health and Adult Social Care Select Committee
<b>Date:</b>	24 January 2023
<b>Title:</b>	CQC Local Authority Assurance – Hampshire ‘Test and Learn’ exercise and ongoing preparations
<b>Report From:</b>	Director of Adults’ Health and Care

**Contact name:** Jess Hutchinson, Principal Social Worker and Assistant Director, Younger Adults  
Philippa Mellish, Head of Care Governance and Quality Assurance

**Tel:** 0370 779 6723  
0370 779 0652

**Email:** [Jessica.hutchinson@hants.gov.uk](mailto:Jessica.hutchinson@hants.gov.uk)  
[Philippa.mellish@hants.gov.uk](mailto:Philippa.mellish@hants.gov.uk)

### Report purpose

1. The purpose of this report is to update the Health and Adult Social Care Select Committee on the future introduction of the Care Quality Commission’s (CQC) assessment of local authority social care functions. It also sets out how Adults’ Health and Care is preparing for assessment, including the results of the Test and Learn exercise completed in June-July 2022.

### Recommendations

2. The Health and Adult Social Care Select Committee are asked to note the report and acknowledge the achievement of staff, alongside the contributions of wider partners, stakeholders, and those accessing health and care services and carers, to achieving the Test and Learn rating of *Good*.

### Executive summary

3. As part of a broad programme of engagement to develop its new single inspection framework for the assessment of local authority social care services, the CQC engaged Hampshire County Council and Manchester City Council respectively in a Test and Learn exercise to test out its emerging approach. The Hampshire exercise ran between June and July 2022 and focused on two aspects of the framework. It involved several components: a self-assessment and data return, fieldwork, and follow up evaluation and reporting.

4. The exercise was a positive experience and resulted in valuable learning for both the CQC and Adults' Health and Care. The CQC has yet to finalise its approach to ratings, and acknowledged that further work was needed on the presentation of its final report. Nevertheless, the CQC rated both quality statements to be *Good* and feedback was positive. This is a significant achievement given the context in which the Directorate is operating.
5. Where areas for improvement were identified, these were known to the Directorate and the CQC recognised that improvement plans were in place and being progressed. The main areas highlighted for improvement related to support for unpaid carers, the timeliness and quality of assessments, and further strengthening strategies to address workforce pressures. The Directorate is taking steps to address these areas as part of a broader improvement plan, driven by the Adults' Health and Care internal self-assessment process. This was introduced in Spring 2022 and will be repeated in 2023.

### **Legislative context**

6. The Government's Adult Social Care White Paper 'People at the Heart of Care' places personalised care at the heart of the Government's vision for the Sector. The White Paper includes measures to help reform the system to achieve its vision through new assurance, improvement, and data measures. These include:
  - An adult social care data framework to improve the quality and availability of data nationally, regionally, and locally.
  - A duty for the CQC to independently review and assess local authority performance in delivering their adult social care duties.
  - New legal powers for the Secretary of State to intervene in local authorities to secure improvement.
  - An increase in sector-led improvement funding to support local authorities to improve and deliver reform.
7. This report focuses on the second of these – the introduction of CQC assessment of local authorities, which was put on a statutory footing by the Health and Care Act 2022. High level enabling legislation was introduced through amendments to the Health and Social Care Act 2008. This created a new duty for the CQC to review local authorities' performance in discharging their adult social care functions under the Care Act 2014. In discharging this duty, the CQC will consider strategic priorities and objectives set by the Secretary of State for the Directorate of Health and Social Care, akin to the NHS Mandate.
8. The exact scope of the review framework is to be set out in secondary legislation. Alongside this, the Health and Social Care Act gives the CQC powers to have oversight of Integrated Care Systems. The date from which the CQC will commence its assurance of local authorities has yet to be determined but is expected to be no earlier than the end of 2023.

## CQC Single Assessment Framework

9. The CQC has been working collaboratively with the DHSC, LGA, ADASS and wider Sector to develop a Single Assessment Framework which will be used for providers, local authorities, and systems. Some elements of CQC's current assessment framework will remain. CQC is expected to continue to use its five key questions (safe, effective, caring, responsive and well-led) for provider assessment, and its four-point ratings scale (*Outstanding, Good, Requires Improvement, and Inadequate*).
10. Other elements will be revised. For example, the CQC's Key Lines of Enquiry and prompts will be replaced with a series of quality statements, described as 'we' statements. An overview of the current questions, quality statements and associated regulations are set out on the [CQC's website](#). These remain in development and subject to change. CQC will use a subset of the quality statements for local authority and Integrated Care System assessments. CQC will also draw upon several evidence categories, applying these differently depending on the type of assessment. Within these, the CQC is placing equal weight on the experiences and perspectives of residents and those accessing health and care services and their families and carers.
11. Part of the CQC vision is to become a data-driven regulator. CQC has been mapping data sources and indicators to quality statements within the framework, looking at existing structured data sets before determining whether any new structured sets need developing. CQC are expected to include metrics from the mandated national adult social care data returns, as specified by NHS Digital, in conjunction with other evidence sources.
12. Whilst the Framework is starting to take shape, much of the detail is still to be worked through, including how the CQC might seek to combine or sequence its local authority assessment with that for Integrated Care Systems and how this might work for systems that are more complex in nature. How the assessment will 'look and feel' is also in development – a process that has been supported by the County Council through its participation in the CQC's Test and Learn exercise.

## Test and Learn Local Authority pilot

### Exercise components

13. The CQC ran two 'Test and Learn' pilots with Hampshire County Council and Manchester City Council respectively. The Hampshire exercise commenced in mid-June and was limited, looking at two quality statements spanning two themes:
  - **Theme 1. How Local Authorities work with people: 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.*
  - **Theme 4. Leadership: learning, innovation, and improvement.**

*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.*

14. The exercise consisted of the following components:

- Completion of a self-assessment and information return, and evaluation of these elements.
- Fieldwork, comprising CQC interviews and attendance at internal and external meetings primarily concentrated during the week of the 4 July.
- Feedback meetings and a final report.

### **Experience and learning**

15. The Directorate welcomed the opportunity to participate in the exercise, which was experienced by staff and the CQC as a positive, collaborative endeavour. After each stage of the process, there was opportunity to reflect, capture comments from staff and wider participants, and feedback to the CQC team. Following the exercise, representatives from Adults' Health and Care participated in a workshop alongside colleagues from Manchester City Council to co-produce the assessment framework further and the CQC continues to build on this feedback in developing its approach.

16. Key learning taken from the exercise included the following:

- **The value of preparation** – the Directorate completed an internal self-assessment in Spring 2022 which supported the CQC self-assessment component of its assessment and helped to speed up what was a resource-intensive exercise.
- **Scene setting is key** – there was value in supporting the CQC team to understand Hampshire's context.
- **Supporting engagement with people using services** – CQC positively valued hearing from people accessing services and carers and reflected on the importance of preparation and skilled facilitation to enable people's participation.
- **The importance of a central, coordinating role** – CQC praised Adults' Health and Care for the way the exercise was managed and coordinated. This was time consuming and required dedicated, senior resource.
- **Briefing Members and partners** – both Adults' Health and Care and the CQC recognised the need to share information in advance about what to expect when engaged with the CQC assessment team.

17. In addition to the above areas, CQC reflections identified further challenges and opportunities including:

- Gaps in hearing from regulated providers.
- Limited standard data sets, reducing the ability to benchmark consistently.

- The usefulness of balancing face-to-face, online meetings and interviews.

## Final report

18. The CQC issued a final report following the exercise in which it scored both quality statements. This is included an appendix one. The 'Assessing Needs' statement received a score of 65, with 'Learning, Innovation and Improvement' rated 75 – both within the *Good* range of 63-85. The report was largely positive and where areas for improvement were identified, these were already known to the Directorate and the CQC recognised that improvement plans were in place and being progressed. The Directorate provided feedback to the CQC on the report highlighting the need to develop the approach to scoring, and to recognise more fully the broader context within with the Directorate, and wider Sector, is operating. CQC has indicated this feedback has been shared internally and is helping to shape their approach. The level at which scores and ratings are to be applied is still to be worked through with the Secretary of State for Health and Social Care but the intention remains to publish an overarching rating as part of the local authority baselining.
19. Key strengths included:
  - **Strong leadership**, enabling frontline teams to adapt to new ways of working, maximising the support available for people using services.
  - **Use of technology, innovation, and co-production**, including working with technology partners to improve efficiency whilst maximising people's health, wellbeing, and independence.
  - **Work to develop stronger links with the Nepalese community** to enable a better understanding of people's needs.
  - **Person-centred, strengths-based assessment**, using a 'least restrictive practice' model and supporting positive risk taking and maximising people's independence.
  - **Positive organisational culture**, where staff felt supported by leaders, resulting in good opportunities for learning, development, and career progression.
  - **Sharing good practice** with other local authority areas.
  - **Proactive Enhanced Care pilot**, which demonstrated positive outcomes and reduced demand for increased packages of care.
20. Key areas for improvement:
  - Whilst some initiatives were in place to address **workforce capacity** risks, this was identified as the biggest challenge by some senior staff.
  - **Support for carers**, including unpaid carers, and carers assessments could be strengthened to improve carer satisfaction overall.
  - The **timeliness and quality of assessments**, ensuring these contained detailed and accurate information. This was picked up particularly in response to providers' feedback.

- The need to capture **cultural and protected characteristics** when people start using Adults' Health and Care services so that staff can be responsive to people's specific needs. Alongside this, Adults' Health and Care recognises the need to develop further the cultural awareness of staff and to continue to develop the inclusivity and accessibility of its services.
  - Addressing any barriers to effective assessments arising from partners' IT systems.
21. Alongside these areas, the CQC recommended that further consideration be given to the leadership oversight and level of challenge offered corporately and politically in relation to assessment and improvement, and that further evaluation of projects would be beneficial in being able to further gauge the success of these in practice. The CQC also highlighted two key next steps: firstly, refreshing the carers' strategy and supporting action plan and secondly, further work to maximise the Directorate's staff recruitment campaign.

### **Next steps**

22. The Directorate is in the process of developing an overarching improvement plan which captures the breadth of actions arising from the Directorate self-assessment, whilst being clear about the priority areas for improvement highlighted by the recent CQC assessment.
23. The internal self-assessment framework is being revised to align with the CQC's single assessment framework and will be repeated in 2023. The Directorate will also keep abreast of key developments, such as confirmation of the required data return, and prepare for these as necessary.
24. Adults' Health and Care will also continue to work in co-production with the CQC to develop its approach further, engaging with and supporting the wider Sector via the LGA and ADASS. The County Council is part of a regional peer group, buddied with West Sussex County Council and Kent County Councils and has also shared learning from the Test and Learn pilot with the County Council's Network, South-East ADASS and individual councils on request.

### **Conclusion**

25. This report demonstrates that Adults' Health and Care is taking proactive steps to prepare for CQC assessment, whilst providing support and leadership to the wider Sector. Despite the pressures on staff, and the short time within which to prepare for the assessment exercise, the Directorate received positive feedback and secured an overall rating of *Good*. This is a significant achievement in the current operating context and demonstrates an ongoing commitment to delivering positive outcomes for Hampshire's adult population. Work is being undertaken to understand better the areas highlighted so that targeted actions can be taken to drive further improvement in outcomes for those accessing health and care services, their families and carers.

**REQUIRED CORPORATE AND LEGAL INFORMATION:**

**Links to the Strategic Plan**

<b>Hampshire maintains strong and sustainable economic growth and prosperity:</b>	No
<b>People in Hampshire live safe, healthy and independent lives:</b>	Yes
<b>People in Hampshire enjoy a rich and diverse environment:</b>	No
<b>People in Hampshire enjoy being part of strong, inclusive communities:</b>	Yes

**Other Significant Links**

<b>Links to previous Member decisions:</b>	
<u>Title</u>	<u>Date</u>
<b>Direct links to specific legislation or Government Directives</b>	
<u>Title</u>	<u>Date</u>
Health and Care Act 2022	

<b>Section 100 D - Local Government Act 1972 - background documents</b>	
<p>The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)</p>	
<u>Document</u>	<u>Location</u>
None	





## **EQUALITIES IMPACT ASSESSMENT:**

### **1. Equality Duty**

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation);
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

### **2. Equalities Impact Assessment:**

The County Council's participation in the CQC's assessment of local authority social care functions is likely to drive improvement in the inclusivity and accessibility of Adults' Health and Care Services. This is because the CQC's emerging framework is focused on how services improve outcomes for people who use services, their families, friends, and unpaid carers. This includes people with protected equality characteristics and those most likely to have a poorer experience of care or experience equalities. As well as being a theme throughout the framework, there is a focused quality statement on equality in experience and outcomes. The Directorate's participation in the Test and Learn exercise demonstrated how this focus on equalities has helped to identify areas for improvement - for example, in ensuring services take account of, and respond to, the needs of people with different protected characteristics.