

ADULT SOCIAL CARE AND SERVICES SCRUTINY PANEL

A meeting of the Adult Social Care and Services Scrutiny Panel was held on Tuesday 12 September 2023.

PRESENT: Councillors , TA Grainge, D Jackson, L Mason, S Tranter, G Wilson and D Branson

PRESENT BY INVITATION: Councillors

OFFICERS: S Blood and E Scollay

APOLOGIES FOR ABSENCE: Councillors J Walker, J Cooke and M Nugent

22/51 **ELECTION OF CHAIR PRO TEM**

In the absence of the Chair of the meeting, nominations were sought for the Chair Pro-Tem.

Councillor David Jackson was nominated and seconded as Chair Pro Tem of the Adult Social Care and Services scrutiny Panel.

AGREED that the Councillor Jackson be appointed as Chair Pro Tem of the Adult Social Care and Services Scrutiny Panel.

22/52 **DECLARATIONS OF INTEREST**

There were no declarations of interest received at this point in the meeting.

22/53 **MINUTES- ADULT SOCIAL CARE AND SERVICES SCRUTINY PANEL - 29 MARCH 2023 AND 13 JULY 2023**

The minutes of the Adult Social Care and Services scrutiny panel meeting held on 29 March 2023 and 13 July 2023 were submitted and approved as a correct record.

22/54 **OVERVIEW OF CQC FRAMEWORK**

The Director of People, Erik Scollay was in attendance to provide an overview of the CQC approach to inspecting local authorities.

The Director advised the panel that:

- The Care Quality Commission (CQC) are responsible for inspecting and regulating health and social care services in England, including local authorities.
- The CQC carries out inspections to ensure that local authorities are delivering high-quality care and support services to their communities.
- These inspections help to identify areas for improvement and provide assurance to the public that the local authorities are meeting the required standards.

The key components to the CQC inspection are as follows:

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- Pre-inspection: The CQC gathers information and intelligence about the local authority's performance, policies, and procedures.
 - *This includes reviewing data, conducting interviews with staff and service users, and assessing documentation.*
- On-site inspection: CQC inspectors visit the local authority to assess the delivery of care and support services.
 - *Inspectors observe practice, speak to staff and service users, and review records to assess compliance with standards. It was expected that the CQC will want to talk to independent providers, chosen by a representative of providers. Storyboards will be developed as part of the collaboration*
- Evaluation and Reporting: Following the inspection, the CQC produces a report detailing their findings and ratings.
 - *The report includes strengths, areas for improvement, and ratings based on the quality of care and support provided.*

The CQC will be inspecting Part 1 of the Care Act Duties. The Council has never been inspected in this way. Due to unforeseen circumstances, there had been a decision to delay the start of the formal assessments of local authorities. The CQC were currently providing feedback to the 5 pilot local authorities and it was anticipated that full assessment would commence by the end of 2023. The CQC remains committed to conducting thorough inspections and maintaining the high standards of care and support provided by local authorities. The revised timeline will be communicated to the local authorities and the CQC will continue to provide support and guidance during this transitional period.

The Director provided the Panel with Middlesbrough's current position:

- CQC draft framework absorbed and understood (Oct/Nov 22)
- High level baseline completed against the CQC draft framework (Oct / Nov 22)
This consisted of RAG rating each evidence requirement line by line
- Delivery tools and monitoring tools developed (Nov 22)
- Peer review self-assessment submitted with supporting evidence (Dec 22)
Peer review undertaken by Carol Tozer (ex DAS)
- Peer review completed and feedback received (Jan 23)
- Detailed baseline sessions commenced (Feb 23)
This is based on the released and most updated version of the framework
- All relevant outputs from the baseline exercises and peer review feedback have been fed into an overarching service improvement action plan owned by the delivery board (Apr 23 – May 23)
This action plan is supported by a more detailed delivery plan which is how we ensure actions are delivered on time
The action plan and delivery plans are broken down into key workstreams.
- The Council were now into delivery of the action plan which was broken into priority order (June onwards). Some of the key priority actions:
 - Ensuring our plans are aligned to the ASC vision/strategy/delivery plans
 - Ensuring we meet the data requirements from CQC and understand what the data is telling us with a plan to rectify gaps / anomalies
A dashboard has been developed with key data sets imported and performance clinics scheduled to review outputs from key data sets
- Closing the gaps which were showing as a red rag status during the baselining exercise
- Identifying potential transformational opportunities both back office and front facing to utilize available grant funding and allow robust cases to be made for future bidding

The Panel were advised that there were at present two projects managers coordinating work for the CQC inspection. He also advised that historically there has been difficulties providing

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'live' data, however the service is now able to provide 'real time' data. Therefore the Director outlined that quarterly improvement data would be provided to the panel in the future.

Quality Audits

The Panel were advised that Council had introduced a new Quality Audit Tool in December 2022.

This Audit Tool enables the Council to focus on the quality of Social Work interventions and the experiences of our clients and their representatives.

Developed by the Principal Social Work Network, the Quality Audit Tool is balanced between the BASW Ethical Framework for Social Work and the TLAP "Making it Real" statements. The Quality Audit Tool is being used both regionally and nationally.

This approach to audit will enable the Council to benchmark with other local authorities and the Council will also be able to demonstrate that we are effectively auditing for CQC Assurance purposes and that we are actively seeking the views of our clients.

In terms of the process, the Director outlined that 15 cases are audited per month. These are randomly selected which will include open/ allocated cases that have been received an assessment within the last three months. The audits are carried out by Team Managers, Heads of Service and Business Support. The auditor will examine LAS assessments, documentation and case records to check whether Middlesbrough Recording Standards have been adhered to and that actions have been legal and adhere to Care Act principles. The auditor will then meet / discuss the service user's experience with either the client or their representative.

In terms of feedback, the auditor will then meet with the allocated Social Worker.

This is an opportunity to:

- Share feedback from Clients / representatives.
- Enable Social Workers to provide input into the audit.
- Discuss the findings.
- Identify areas of good practice and areas for improvement.

The final audit document is then shared with the appropriate Team Manager and Social Worker, for discussion during Supervision.

The Principal Social Worker completes a summary of the findings for each month's audits. These are shared with team managers and others to help identify trends and issues as well as any training and development needs.

The Director outlined that the overall quality of social work interventions as a percentage of audits scoring either outstanding or good over the last 6 months has been high (above 90% in February and March 2023).

The Majority of work undertaken has been good or outstanding:

- Some outstanding quality work has been identified.
- Appropriate actions are taken quickly to minimise risk / Safeguard clients.
- Feedback from clients or their representatives was very positive.

Some areas of poor practice requiring improvement were also identified.

More work is needed around:

- Recording Standards.
- Support Plans do not always link needs & outcomes.
- Carers' Assessments not offered / completed consistently.
- Potential gaps in case note recording

In terms of next steps, the panel were outlined that the quality Audits provide the Council with Assurance for inspection and an understanding of the impact the services we provide have on our clients and their Carers.

This is invaluable if we are to continue to improve practice.

The Council are continuing to identify themes from the audits and listening to your comments.

Training & Guidance will continue to be provided accordingly so that we can continually improve practice and grow to meet the changing needs of our clients.

Following the presentation, a panel member queried what grade the Director felt the Council receive at present if a CQC inspection was carried out. In response, the Director felt the service would be graded requires improvement, but there are aspects which are good. This self assessment grading he felt was a fair judgment, as there are areas for improvement, and assessments are behind in some areas. The service were aware of the areas to improve on prior to the CQC inspection.

The panel also queried whether there were any specific areas where the Council can do more. The Director advised more could be done in support for carers. Although there has been extensive amounts of work has been undertaken to look at this area, further work would be beneficial.

Middlesbrough, at times, is a challenging town to work in and therefore it is important to be mindful of this when assessing services e.g. social worker caseloads.

Adult social care delivers extensive services and Teams all over Middlesbrough to serve the needs of the community, including teams in Roseberry Park, Occupational health and the Tees Safeguarding Adults Board (which would be presented to the Panel in due course).

AGREED

That the information be noted.

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WHAT MAKES EFFECTIVE SCRUTINY?

The Democratic Services Officer provided a short presentation from the Centre for Governance and Scrutiny, which has been provided to councillors during their induction.

The presentation covered information relating to:

- What is the work programme for? and
- What makes a good scrutiny topic.

AGREED- That the presentation be noted.

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ADULT SOCIAL CARE AND SERVICES SCRUTINY PANEL- WORK PROGRAMME REPORT 2023/24

The Adult Social Care and Services Scrutiny Panel was asked to consider its work programme for the 2023/24 municipal year.

The Democratic Services Officer presented the submitted report and the following points were referenced:

- At the start of every municipal year, scrutiny panels discussed the topics that they would like to review during the coming year.
- Work programmes were useful as they provided some structure to a scrutiny panel's activity and allowed for the effective planning and preparation of work.
- Referenced in the report was a list of topics that were anticipated to be of particular interest to the scrutiny panel. Those topics were detailed in the first table of the submitted report and included:
 - Impending CQC inspection
 - Dementia- 10 year plan.
 - Hospital discharge and rehabilitation
 - Support for vulnerable adults
- Suggestions had also been received from the Councillors including for example:
 - Care homes and DDA compliance
 - Housing providers and DDA compliance
 - Assistance for keeping over 60's fit to avoid doctors and hospitalisation.

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- Middlesbrough Poverty Strategy
- Staying put agency – supporting people to stay in their own homes.
- Social housing provision- The availability of bungalows and ground floor apartments.
- When considering its work programme, the scrutiny panel was asked to ensure that topics agreed for inclusion met the criteria detailed at paragraph 13 of the report.
- It was recommended that the scrutiny panel used the aid, attached at Appendix 1 of the submitted report, to prioritise issues where scrutiny could make an impact, add value or contribute to policy development.
- The scrutiny panel was asked to identify two topics it would like to include in its work programme. Once agreed, those topics would be submitted to the Overview and Scrutiny Board, on 20 September 2023, for consideration and approval.

A discussion ensued and Members referenced the following areas of interest and concern:

- With the winter approaching, they wanted to consider hospital discharges to ensure these were done effectively.
- DDA compliance in care homes provided discussion within the panel as there were some concerns that some care homes were not able to adapt to the needs of the individual.
- Whilst a full topic has been carried out last municipal year, the panel raised concern in relation to the recruitment and retention of social workers.

The Director of Adult Social Care was not able to be in attendance for the discussion, however suggestions for the work programme would be circulated to him after the meeting and further discussion would take place.

Following discussion, the scrutiny panel was in agreement that the topics of Care homes and DDA compliance, Staying Put Agency (adaptations and ensuring older people stay in their own home for longer) and Hospital discharge .

In addition to those prioritised topics, a Member commented on the importance keeping abreast of developments in the CQC inspection and quarterly improvement plans. Members also asked for an update on the Recruitment and retention of social workers, physical activity for the over 60s and Tees Safeguarding Adults Board

A discussion ensued and Members agreed topics for inclusion in the scrutiny panel's work programme for 2023/24.

AGREED

That the topics listed below be submitted to the Overview and Scrutiny Board for approval and inclusion in the work programme of the Health Scrutiny Panel for 2023/2024:

In-depth reviews:

- **Care Homes and DDA compliance**
- **Staying Put Agency**
- **Hospital discharge**

Update:

- **CQC inspection and quarterly improvement plans.**
- **Recruitment and Retention of Social workers**
- **Physical activity for the over 60s**
- **Tees Safeguarding Adults Board**

Standard item

- **Integration of Health and Social Care- Verbal update**

22/57 **CHAIR'S OSB UPDATE**

Item deferred.

22/58 **ANY OTHER URGENT ITEMS WHICH IN THE OPINION OF THE CHAIR, MAY BE CONSIDERED.**

No items.