

# CQC Report – Summary People Scrutiny

# Recap

- LAIR (local Authority Inspection return ) submitted 11th June
- Onsite inspection- end Oct
- Draft report – 11th Dec
- Final report - 21<sup>st</sup> February
- *Nb – concerns expressed regarding inspection process nationally*

# Assessment

Quality Statements	Assessing Needs	Supporting People to love healthier Lives	Equity in experience & outcomes	Care provision, Integration and continuity	Partnerships and Communities	Safe Systems, pathways and transitions	Safeguarding	Governance, management & Sustainability	Learning Improvement and Innovation
Evidence categories									
People's experience	2	2	2	2	3	3	2	2	3
Feedback from staff & leaders	3	3	3	3	3	3	3	3	2
Feedback from partners	2	3	2	2	2	3	3	2	2
Processes	2	3	2	2	3	3	3	2	2
<b>Overall % Qs score</b>	<b>57</b>	<b>69</b>	<b>57</b>	<b>57</b>	<b>69</b>	<b>75</b>	<b>69</b>	<b>57</b>	<b>57</b>

# Score & Rating

Evidence was gathered in 4 key areas:

- Peoples Experience
- Feedback from staff & Leaders
- Feedback from Partners
- Processes.

Overall % key

- 25-38% - Inadequate
- 39-62% - Requires Improvement
- 63-87% - Good
- >88% - Outstanding

Our Score **62%**

Rating – **“Requires Improvement”**  
**(1% point from “Good”)**

# Overarching Summary

## They recognised the Key Challenges in which we work:

- **Workforce shortages** affecting service delivery, with staff overwhelmed by workloads.
- **Inequality in access** to services, particularly among ethnically diverse and disadvantaged communities.
- **Housing challenges**, including insufficient adapted accommodations for people with disabilities.
- **Delayed implementation of strategic initiatives**, such as the '3 Conversations' approach and the coproduction framework.
- **Financial constraints**, with overspending on adult social care beyond initial budget estimates.

# Overall Summary – People Experience

## Positives

- Overall people were satisfied with their experience of receiving support
- People said they received support to enable them to stay at home longer
- Most people experienced a positive journey as they moved between services
- People felt safe with services received

## Areas for Improvement

- People experienced long waiting times when first contacting us
- Unpaid carers spoke of negative experiences – not being given information they could understand
- Carers options not being explained to them fully

# Overall Summary

- We know ourself and the people of Middlesbrough well
- Staff Positivity – teams well established, long servicing staff, valued & motivated
- DASS leadership was visible & approachable. Staff felt listened to.
- Ambitious approach to transformation
- A focus on prevention and reducing reliance on services
- People felt safe and robust policies and procedures are in place
- TSAB was working well
- Good approach to transitions
- Positive links with Public Health
- Reference to opportunity of Community hubs

# Overarching Summary

## Areas for Improvement

- **Significant waiting** times are impacting on peoples outcomes, including for those waiting for a planned review.
- **Unpaid carers** – large waiting lists, lack of communication
- **Housing availability** – particularly for those presenting as homeless / and people who required accessible adapted accommodation.
- **Equality, diversity and inclusion** was not embedded at a strategic level – no clear strategy on how we engaged with all communities
- **No defined plan around “co-production”**. Providers did not feel involved in “co-production”
- **Lack of assurance at CEO level** with regard to obligation's relating to the Care Act and safeguarding
- **Lack of ownership corporately with regard to ASC** – though signs this is changing
- **Scrutiny & Data** – data development n early stages, there is a need to create process to share with frontline staff. Gaps in data were noted.



# Theme 1

## How the Local Authority Works with People

# Theme 1 – Positive Feedback

- People felt supported to remain in their own homes for as long as possible.
- Pathways and processes ensured people's support was planned and co-ordinated across different agencies and services
- Assessments followed a strength-based, person-centred approach.
- Staff demonstrated a good understanding of their responsibilities under the Care Act.
- The introduction of the '3 Conversations' model aimed to improve care planning.
- People had access to independent advocacy services when required.
- The local authority had multiple communication channels for information access.
- Community hubs provided an effective space for engaging with residents.
- The majority of service users felt safe and well-supported.
- Carers had access to direct payments and financial support.
- Initiatives were in place to improve digital accessibility.
- Staff in the finance team were supportive and informative
- Opportunities were clear in regard to specialist training, practice development and career development.
- Preventative services were having a positive impact on well-being outcomes for people
- Providers said we were good at disseminating information to people

# Theme 1 – Areas for Improvement

- Reduce waiting times for assessments and care reviews. **-Most people said they did not receive a timely or accurate response. They identified inconsistencies across the directorate in regard to waiting lists.**
- Improve communication channels - **Providers said they struggled to contact frontline social workers, and people said that contacting by telephone was difficult**
- Strengthen coproduction efforts to involve users in decision-making.
- Enhance accessibility of services for diverse communities.
- Provide clearer information about carers' support options. – **carers responses were mixed with some stating they had no choice in the options of support.**
- Expand digital inclusion initiatives.
- Improve service navigation through clearer guidance. – **people stated there was poor communication between teams.**
- Ensure care planning is fully personalised. – **they stated peoples human rights were not always respected as decisions were sometimes financially driven.**
- Establish a feedback system to track service user concerns.
- There was no system in place for completing statutory reviews

# Theme 2

## Providing Support

# Theme 2 -Positives

- The local authority had strong partnerships with public health services / ICB /HWB/ BCF
- Community-based services were beginning to be developed – Community hubs / neighbourhood working
- Prevention and early intervention were a focus of service provision.- Staying Included
- People had access to a diverse range of local support options that were safe, effective, affordable and high quality.
- Commissioning staff supported new & innovative approaches – leading to better outcomes
- People had access to reablement and rehabilitation services.
- Integrated posts with the ICB, including production partnerships – Transfer of Care hub / Frailty Team
- The voluntary sector was engaged in specific areas of service delivery.
- The workforce was committed and engaged despite recruitment challenges.- we understand our workforce challenges
- The quality assurance framework – ensured high quality, evidence based practice

## Theme 2 – Areas for Improvement

- A need to further improve integration between health and social care services. – particular focus on advocacy
- Address workforce shortages with targeted recruitment and retention initiatives.
- Need to progress housing alternatives and options
- Identified need to engage community more for service developments
- Reduce waiting times for essential care services.
- Develop more flexible, community-based care options- gaps such as sitting service.
- Expand preventative care services further.
- Improve commissioning frameworks for clarity and efficiency. – spot contracts not the most efficient way of contracting
- Strengthen quality assurance mechanisms for service providers.
- Enhance partnerships with voluntary and community organisations.
- Not always sufficient care and support to meet demand and people could not always access it when, where and how they needed it.

## Theme 3

# How the Local Authority Ensures Safety within the System

# Theme 3 - Positives

- The local authority understood the risks to people across their care journeys – risks were identified and managed proactively.
- The local authority had robust safeguarding policies and procedures.
- Care and support were planned and organised with people, together with partners in ways that improved their safety across their care journey.
- Multi-agency collaboration was evident in safeguarding responses.
- The local authority had strong risk management frameworks in place.
- Community hubs were improving early identification of safeguarding issues.
- The workforce had access to safeguarding training and resources.
- Advocacy services supported people in navigating safeguarding concerns.
- The safeguarding board was actively working on regional collaboration.
- The local authority had improved data monitoring of safeguarding cases.
- Carers and families were increasingly included in safeguarding discussions.



# Theme 3 – Areas for Improvement

- Strengthen safeguarding arrangement relating to feedback of outcomes / communications
- Improve access to advocacy services for safeguarding cases.
- Enhance data analytics to track safeguarding risks.

# Theme 4

## Leadership

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# Theme 4 - Positives

- The Director of Adult Social Care was highly respected and well-established.
- Staff felt supported and valued by senior leadership.
- The local authority had a clear commitment to service transformation.
- Corporate governance improvements were being implemented.
- There was recognition of the need to improve strategic planning.
- Financial forecasting and market shaping efforts were underway.
- Partnerships with external organisations were strengthening.
- Staff training and professional development were prioritised.
- Performance monitoring was being developed to improve oversight.
- The local authority had arrangements in place for data security, availability, integrity and confidentiality.
- Scheme of delegation – good mechanism to monitor practice standards and identify training requirements.
- Supervisions held regularly , practice support forum in place and audits regularly conducted
- The Lead Member for Adult Social Care was described as community minded, approachable, and very invested in adult social care.

# Theme 4 – Areas for Improvement

- Strengthen governance structures and assurance mechanisms – not much a of corporate view on ASC performance
- Improve transparency in decision-making processes.
- Enhance data utilisation for performance monitoring and strategic planning – assessment / review / outcome recording
- The backlog of annual reviews was a concern
- Strengthen financial planning to ensure sustainable service modernisation.
- Develop stronger partnerships with service providers to foster innovation.
- Expand coproduction efforts with service users and community stakeholders.
- Distribute leadership responsibilities more effectively to reduce reliance on key individuals
- Improvement required in our work with carers – including improved engagement and feedback mechanisms. – carers reported they felt assessments are more of a tick box exercise – however work was in early stages of a more conversational approach.
- Interim CEO not aware of risk level for ASC – no formal mechanism of reporting feedback to CEO

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# What do we mean by...Co Production

**Co-production** in an adult social care setting refers to a collaborative approach where people who use services, their families, carers, professionals, and organisations work **together** to design, deliver, and evaluate social care services. Rather than decisions being made solely by professionals, co-production ensures that **service users have an equal voice** in shaping services that affect them.

# What are we already doing....

1. Developing a clear 'Vision and Strategy' for Adult Social Care
2. Developing our Equality, Diversity and Inclusion measures – supported by the LGA
3. Developing a Workforce Strategy – supported by the LGA
4. Implementing the 3 conversations approach
5. Considering our approach to co-production
6. Considering what options are available to positively transform the way we work

*An improvement programme will be developed which will be aligned to the CQC report and incorporate the above activity considering the areas of focus.*

# Next Steps

- **Expand workforce recruitment efforts**, reducing reliance on agency staff and increasing staff retention.
- **Launch a refreshed EDI strategy**, incorporating structured self-assessment tools such as 'Diverse by Design'.
- **Develop a clear coproduction strategy**, ensuring people with lived experience have a voice in service design.
- **Enhance data-sharing practices**, making performance insights accessible to frontline staff.
- **Improve scrutiny and accountability mechanisms**, ensuring that adult social care is prioritised at the highest levels of leadership.
- **Focus on prevention and early intervention**, reducing long-term demand for intensive social care services and consideration of neighbourhood working.



# Monitoring

- 10 day response submitted
- Finalised action plan – to People Scrutiny
- Monitoring at People Scrutiny – Quarterly?
- Quarterly Monitoring - DHSC