



## Healthier Communities and Adult Social Care Scrutiny Committee 16<sup>th</sup> March 2022

---

**Report of:** Alexis Chappell, Director of Adult Health and Social Care

---

**Subject:** New Care Quality Commission (CQC) Adult Social Care Assessment Framework - Inspection Readiness Update

---

**Author of Report:** John Higginbottom, Service Lead Business and Commercial Systems, AHSC Business Change Programme  
Email: [john.higginbottom@sheffield.gov.uk](mailto:john.higginbottom@sheffield.gov.uk)  
Telephone: 0777 5520621

---

### Summary:

The Government is introducing a new duty for the Care Quality Commission (CQC) to assess how local authorities are meeting their adult social care duties, and a new power for the Secretary of State to intervene where CQC considers a local authority to be failing to meet these duties.

Planning and preparation by the City Council for the first CQC Single Assessment Framework Inspection have been ongoing since August 2021 and a summary of these plans can be seen in the report.

The CQC are currently working closely with Local Government Associations to develop their Single Assessment Framework and periodic progress updates are being provided, although we do not yet have the full details.

From April 2022, the CQC will begin requesting local authority Adult Social Care performance data, although inspections will not start until the earliest April 2023.

The timings around the CQC Single Assessment Framework have enabled the Council to include the inspection readiness preparation within our Adult Health and Social Care (AHSC) Transformation Programme. Rather than preparing solely for a single assessment, we are working towards embedding continuous improvements in quality and performance across AHSC so that we are able to demonstrate at inspection not just that we have good plans in place but also that we are also improving standards and quality across all of Adult Social care.

There is a separate Scrutiny Report (March 2022) providing an update on the Adult Health and Social Care Transformation Programme.

The CQC Single Assessment Framework provides us with an additional opportunity to develop more rigour in our governance arrangements and our practice. It will help us to focus on quality throughout everything we do, embedding a continuous performance improvement culture, while making us more accountable to the people we support.

We must ensure that we are ready for our first inspection, as reputationally it will be damaging to the Council if we do not secure a positive outcome. This would undermine the confidence customers, partners, and providers have in our services.

---

**Type of item:** The report author should tick the appropriate box

Reviewing of existing policy	
Informing the development of new policy	
Statutory consultation	
Performance / budget monitoring report	
Cabinet request for scrutiny	
Full Council request for scrutiny	
Call-in of Cabinet decision	
Briefing paper for the Scrutiny Committee	<b>x</b>
Other	

**The Scrutiny Committee is being asked to:**

The Committee is being asked to consider the implications for Adult Health and Social Care, of the new Care Quality Commission (CQC) duty to assess how local authorities are meeting their adult social care duties, and to provide views, comments and recommendations on our preparation and planning.

**Background Papers:**

- Department of Health and Social Care White Paper ‘Integration and innovation: working together to improve health and social care for all’, 11<sup>th</sup> February 2021
- Department of Health and Social Care ‘Statutory Guidance, Care and support statutory guidance’, updated 27<sup>th</sup> January 2022
- Department of Health and Social Care (DHSC) White Paper ‘Joining up care for people, places and populations’, 9<sup>th</sup> February 2022

**Category of Report:** OPEN

**Report of the Director of Adult Health and Social Care –  
New Care Quality Commission (CQC) Adult Social Care Single  
Assessment Framework - Inspection Readiness Update**

**1. Introduction/Context**

- 1.1 The report on Inspection Readiness outlines the changes being brought in by the Government and the plans in place to ensure Adult Health and Social Care are prepared for the first Quality Care Commission (CQC) Inspection.

On 11 February 2021, the Department of Health and Social Care (DHSC) published the White Paper Integration and innovation: working together to improve health and social care for all, which sets out legislative proposals for a health and care Bill. This is in recognition of the increasing numbers of people who need adult social care and the consequent need for greater oversight of the provision and commissioning of services.

The White Paper proposes introducing a new duty for the Care Quality Commission (CQC) to assess how local authorities are meeting their adult social care duties, and a new power for the Secretary of State to intervene where CQC considers a local authority to be failing to meet these duties.

**2. Care Quality Commission Assessment Framework**

- 2.1 The CQC are currently working closely with Local Government Associations to develop their Single Assessment Framework and periodic progress updates are being provided including:
- From April 2022 the CQC will likely begin requesting Adult Health and Social Care performance data, which is likely to inform a risk assessment as to which local authorities will be inspected first.
  - The CQC's Single Assessment Framework which is the new framework that adult social care will be evaluated against will likely have 11 quality statements mapped to the Care Act 2014, against which they will assess providers, local authorities, and integrated care systems, with a consistent set of key themes, from registration through to ongoing assessment.
  - The CQC will not begin inspecting local authorities until the earliest April 2023.

## 2.2 The CQC's Single Assessment Framework will:

- Be aligned to "I" statements, based on what people expect and need
- Be expressed as "We" statements; the standards against which the CQC will hold providers, local authorities, and integrated care systems to account
- Seek evidence from people's experience, feedback from staff and leaders, feedback from partners, observation, processes, outcomes.
- Measure quality indicators based on data and information specific to the scope of assessment, delivery model, or population group.

There have also been recent Department of Health and Social Care White Papers published including the 'Joining up care for people, places and populations', 9<sup>th</sup> February 2022.

The White Paper, 'Joining up care for people, places and populations':

- Sets out the approach to designing shared outcomes between councils and local NHS organisations, putting person centred care back at the heart of DHSC plans for reform, while helping to tackle elective care backlogs.
- Introduces the expectation for a single person accountable for the delivery of shared outcomes and plans at local level across both health and social care services.
- Break down the barriers that separate our health and care workforces, with the sharing of digital tools and data and the extension of financial pooling to provide better care to more people than ever before.

Integration will form an integral part of the CQC Single Assessment Framework, and we will need to include the above in our shared 'Integrated Performance Improvement Plan', with Health and voluntary sector partners across the care system.

## 2.3 The CQC Single Assessment Framework provides us with an opportunity to ensure and evidence that we are:

- Delivering and commissioning high-quality services which enables individuals to achieve their outcomes and live a fulfilled life,
- Working effectively with our partners in an integrated way; and
- Making a positive impact on individuals and carers lives and are compliant with legislation.

### 3. Care Governance and Continuous Improvement

Performance Improvement and Quality assurance is more than just routinely counting numbers, meeting targets, and periodically carrying out audits.

Effective quality assurance is dynamic and evolving, where there is an embedded cycle of monitoring, continuous reflection, and learning, based on the principle that there is always room for improvement. Its about having individuals, their families, our workforce, and partners views central to developing quality across our services and ensuring positive experiences.

To that end, as part of the Transformation Programme, we are developing work around Improving Quality and Performance with 5 key elements:

- **Practice Quality Standards** – co-produced with individuals, partner organisations and AHSC practitioners, the new standards will be embedded across AHSC from April 2022 and measured through individuals’ feedback and internally through Service Area Self-Assessment.
- **Care Quality Standards** – being developed collaboratively across the Yorkshire and Humberside Region with other local authorities. These new and improved care quality standards will embed across Sheffield City Council’s external and in-house care providers from September 2022, and performance managed via the ‘Provider Assessment and Market Management Solutions Tool’.
- **Performance Improvement Framework** – the Performance Information Framework will set out how we will measure performance. It will establish a flow of reporting so that the information we capture is used to identify better ways of working. Key indicators will provide the measures for how well we are doing and where we can improve. It is aimed to implement this approach fully from April 22.
- **Shared Health and Wellbeing Outcomes** – joint health and social care wellbeing outcomes and associated measures of success are being co-produced in Sheffield to provide a foundation for integrated working and approaches to quality across Sheffield. It is aimed to implement these from September 22.
- **Performance Clinics** – to support a dynamic approach to quality assurance, ongoing focus on quality, performance and monitoring and review of AHSC Performance Improvement Plans take place at a newly established Performance Clinic to help identify, track, evidence and drive continuous improvement.

The 'AHSC Service Area Self-Assessment Tool' was developed within AHSC, using the statutory requirements from the Care Act 2014 and the 5 CQC Domains i.e., are Services 'Safe', 'Effective', 'Caring', 'Responsive' and 'Well-Led'.

The self-assessments have now been completed in every Service Area, with engagement levels being excellent across all Services, despite the pressures from the pandemic and the Omicron variant. This has begun to establish the culture of performance improvement.

The outputs from the self-assessments, including Service Area and Overarching Performance Improvement Plans, are being pulled together and will inform our initial inspection readiness 'Position Statement', for the end March 2022. This will highlight our priority areas for improvement and where we will need to focus our resources, in improving our quality and performance.

#### **4. Inspection Readiness - Progress to Date**

Significant progress has been made around our inspection readiness, since September 2021 including:

- Developed and approved Inspection Readiness Approach and Methodology.
- Comprehensive workforce communication and engagement, staff now talking about improving quality and performance, and the pending CQC Inspection.
- Desk Top Review undertaken from known performance data, including the CQC Local Service Area Review in 2018.
- Development of a 'Case File Audit Approach and Methodology', adopting shared learning from Sheffield City Council Children's Services. This will be a key focus of the CQC Inspection.
- Development of an 'AHSC Pre-Inspection Service Area Self-Assessment Tool', with Self-Assessments completed across all Service Areas in January and February as highlighted above.
- Triangulation of the findings from the self-assessments currently being completed, together with the development of 'Service Area and Overarching Performance Improvement Plans', with feedback scheduled for the end March 2022.
- Development of New Practice Quality Standards – behavioural based practice standards, which represent a benchmark of good quality in practice for all AHSC staff carrying out needs-based assessments.
- System Wide Integrated Working – Agreement for Adult Social Care to lead a system wide review of how well we are working in an

integrated way in Sheffield to inform a system wide improvement plan.

## 5. Inspection Readiness - Next Steps

As can be seen in Appendix 1 (please see Pages 9 to 12), inspection readiness preparation has been broken down in to 4 phases:

- **Phase 1 (September 2021 to March 2022)** - initial workforce communication and engagement, shared learning and Service Area Self-Assessment, to help identify and prioritise ongoing performance improvements.
- **Phase 2 (April to August 2022)** - monitoring and review of ongoing performance improvements, including working more effectively in an integrated way with health partners across the care system.
- **Phase 3 (September to December 2022)** - monitoring and review of ongoing performance improvements, commissioning a Local Government Association representative to undertake an AHSC Service Area Assessment, using the new CQC Single Framework, and implementation of Care Quality Standards.
- **Phase 4 (January to March 2023)** - monitoring and review of ongoing performance improvements, further preparation of Service Areas and the workforce for the first inspection, and pre-inspection documentation preparation.

At the end of each phase, we will take stock and develop a 'Position Statement', identifying where we are on our journey of continuous improvement, and where our resources need to be focused, to ensure we are ready for our first inspection. This will form the basis of our updates to Senior Management and Executive Member.

6. There are currently no known financial or equality implications identified from the CQC Single Assessment Framework. However, as we analyse the outputs from the AHSC Service Area Self-Assessments over the next 4 weeks, and the improvement and coordination work required, it may become apparent that we need to review our resourcing.

There are significant risks associated with a poor Inspection including:

- Significant reputational damage to the Council
- A loss in confidence from the people we work with and their carers/representatives, our partner organisations and care providers.
- Recruitment and retention of staff
- Step in power for the Secretary of State to intervene if CQC considers that we are failing to meet our statutory duties.

However, the above risks are mitigated against by our focused planning and preparation, with the summary plans highlighted above.

**7. What does this mean for the people of Sheffield?**

The CQC Single Assessment Framework provides AHSC with a catalyst for change. It is an opportunity for us to focus on quality throughout everything we do, providing a benchmark of our performance/activity against other local authorities, embedding a continuous performance improvement culture, while making us more accountable to the people we support.

Focusing on working in a more integrated way with our Health Partner Organisations and Voluntary Sector Partners; working with care providers to further improve care quality; and ensuring ongoing improvements in our practice quality, will all lead to improved outcomes for the people we work with and a positive first inspection.

**8. Recommendation**

The Committee is being asked to provide views, comments and recommendations on our inspection preparation and planning.



## Appendix 1 – Inspection Readiness Planned Activity:

### Phase 1 - (September 2021 to March 2022):

Initial workforce communication and engagement, shared learning and Service Area Self-Assessment, to help identify and prioritise ongoing performance improvements – work in Phase 1 will include:

- **Workforce Communication and Engagement** – taking staff with us in improving quality and performance and embedding continuous improvement, leading to inspection readiness.
- **Horizon Scanning** – taking shared learning from SCC Children’s Services and other local authorities.
- **Desk Top Review** – informing our Performance Improvement Planning from data we already have e.g., CQC Local System Review Assessment, 2018.
- **Undertaken AHSC Service Area Self-Assessments** – based on the Care Act 2014 requirements, using the 5 CQC Domains, providing us with a starting point/baseline on our journey of continuous improvement. This includes RAG ratings of current performance, while informing the development of Service Area Performance Improvement Plans. The Performance Improvement Plans will be reviewed and monitored monthly through our Performance Framework – see below.
- **Implementation of our Performance Framework** – to regularly monitor and review progress against our Performance Improvement Plans, at our monthly Performance Clinics, aligned to KPIs from our Service Dashboards.
- **Re-baselining of the AHSC Transformation Programme** – using the findings from the Service Area Self-Assessments to identify whether any additional business change is required, to support our continuous improvement.
- **Development of New Practice Quality Standards** – behavioural based practice standards, which represent a benchmark of good quality in practice for all staff carrying out needs based assessments.
- **Stock Take and Position Statement** – identifying where we are on our journey of continuous improvement and where our resources need to be focused on, to ensure we are ready for our first inspection.
- **Senior Management / Executive Member Updates** – keeping all appropriate groups updated on progress against our quality improvement and performance plans and our inspection readiness.

## Phase 2 (April to August 2022):

Monitoring and review of ongoing performance improvements, including working more effectively in an integrated way with health partners across the care system - work in Phase 2 will include:

- **Analysis of the CQC's New Single Assessment Framework** - to inform and update our inspection readiness plans.
- **Ongoing Customer Feedback** – development of a new system to capture the experience of our customers at each stage of their journey, which will inform our continuous improvement plans.
- **System Wide Integration** – assessment, with our partners, of our integrated working and the development of an Integration Performance Improvement Plan, which will be reviewed and monitored regularly.
- **Performance Framework** – ongoing, to regularly monitor and review progress against our Performance Improvement Plans, at our monthly Performance Clinics, aligned to our KPIs from our Service Dashboards.
- **Development of Improved Care Quality Standards** – linked to ongoing regional work with other local authorities across Yorkshire and Humberside, defining improved care quality standards, for both our external and inhouse provision, with these being measured and reported on via our PAMS, performance management system.
- **Case Files Audits** – shared learning from SCC Children's Services, around their approach and methodology.
- **Staff Survey** – to be developed to help identify engagement levels, motivation and morale, feeding into our Performance Improvement Planning on a 'we asked you said we did' basis.
- **Implement and Embed New Practice Quality Standards** - aligned to the launch of the new AHSC Vision and Strategy.
- **Key Link with the AHSC Programme - Workforce Development Workstream** – contributing to the development of a long-term Workforce Development Strategy/Plan, cultural change and ongoing Learning and Development, including Induction Programmes, moving us towards becoming a 'Learning Organisation'.
- **Stock Take and Position Statement** – identifying where we are on our journey of continuous improvement and where our resources need to be focused on, to ensure we are ready for our first inspection.
- **Senior Management / Executive Member Updates** – keeping all appropriate groups updated on progress against our quality improvement and performance plans and our inspection readiness.

### **Phase 3 (September to December 2022):**

Monitoring and review of ongoing performance improvements, commissioning a Local Government Association representative to undertake an AHSC Service Area Assessment, using the new CQC Single Framework, and implementation of new and further improved Care Quality Standards – work in Phase 3 will include:

- **AHSC Inspection Team Established** – with clear Terms of Reference, roles, and responsibilities.
- **Performance Framework** – ongoing, to regularly monitor and review progress against our Performance Improvement Plans, at our monthly Performance Clinics, aligned to our KPIs from our Service Dashboards.
- **Implement and embed the new Care Quality Standards** – working collaboratively with our providers, with performance management through the ‘Provider Assessment and Market Management Solutions Tool’.
- **Staff Inspection Preparation** – preparing staff for the inspection and inspector interviews – shared learning from SCC Childrens Services.
- **Commission a Local Government Association Representative** – to undertake an independent review of our inspection readiness and complete an AHSC Service Areas Assessment, using the new CQC’s Single Assessment Framework and prepare staff for inspection interviews. This will further update and inform our Performance Improvement Plans.
- **Stock Take and Position Statement** – identifying where we are on our journey of continuous improvement and where our resources need to be focused on, to ensure we are ready for our first inspection.
- **Senior Management / Executive Member Updates** – keeping all appropriate groups updated on progress against our quality improvement and performance plans and our inspection readiness.

### **Phase 4 (January to March 2023):**

Monitoring and review of ongoing performance improvements, further preparation of Service Areas and the workforce for the first inspection, and pre-inspection documentation preparation – Phase 4 work will include:

- **Performance Framework** – ongoing, to regularly monitor and review progress against our Performance Improvement Plans, at our monthly Performance Clinics, aligned to our KPIs from our Service Dashboards.
- **Staff Inspection Preparation** – preparing staff for the inspection and inspector interviews – shared learning from SCC Childrens Services.
- **AHSC Inspection Team Briefing** – in readiness for the 1<sup>st</sup> CQC inspection.

- **Pre-Inspection Work** – ensuring all appropriate documentation and evidence is pulled together in advance of our 1<sup>st</sup> CQC Inspection.
- **Stock Take and Position Statement** – identifying where we are on our journey of continuous improvement and where our resources need to be focused on, to ensure we are ready for our first inspection.
- **Senior Management / Executive Member Updates** – keeping all appropriate groups updated on progress against our quality improvement and performance plans and our inspection readiness.