

CQC Assurance: Delivering the Best for Brent

CQC Briefing for Brent Health and Wellbeing Board

January 2024



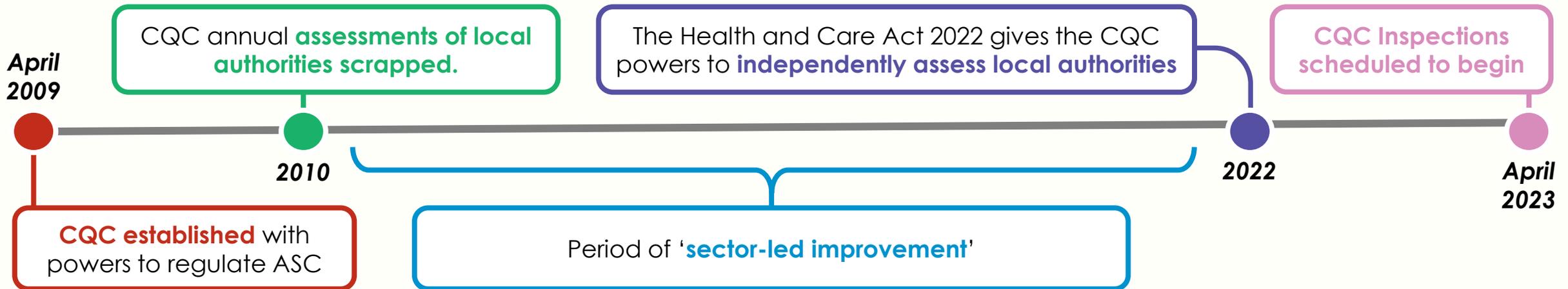
CQC Assurance: Introduction and Context

The New Assurance Environment

Care Quality Commission (CQC) annual assessments of ASC duties were scrapped by the government in 2010, and as such the CQC stopped carrying out inspections of ASC services, which had focused primarily on adult safeguarding. After 2010, local authorities like Brent participated in 'sector-led improvement'.

The Health and Care Act 2022 re-introduced a duty on the CQC to inspect local authorities' delivery of their ASC functions as set out in Part 1 of the Care Act 2014.

The CQC have developed a new 'Single Assessment Framework', which ASC Departments will be assessed against.



The CQC Single Assessment Framework

The Single Assessment Framework is categorised into four Quality Domains. Each domain includes a series of Quality Statements, expressed as “we statements”, which can be found in the following slides.

Theme 1: Working with people

Includes assessing needs, supporting people to live healthier lives, prevention, well-being, and information and advice.
Includes unpaid carers.



Theme 2: Providing support

Includes care markets (including commissioning), health integration, workforce equality, and partnership working.



Choice, control, co-production and personalisation run throughout all areas of focus

Theme 4: Leadership

Includes governance, capable and compassionate leadership, learning, improvement and innovation.

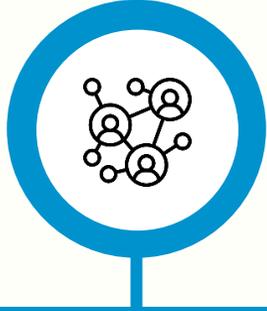


Theme 3: Ensuring Safety

Includes safeguarding, safe systems, transitions and continuity of care.



Assessment Framework: Quality Statements 1-2



Theme 1: Working with people

- 1. 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.
- 2. 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.
- 3. Equity in experiences and outcomes:** We actively seek out and listen to information about people who are most likely to experience inequality in experience or outcomes. We tailor the care, support and treatment in response to this.



Theme 2: Providing support

- 1. Care provision, integration and continuity:** We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.
- 2. 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.

Assessment Framework: Quality Statements 3-4



Theme 3: Ensuring safety

- 1. 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.
- 2. Safeguarding:** We work with people to understand what being safe means to them as well as with 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.

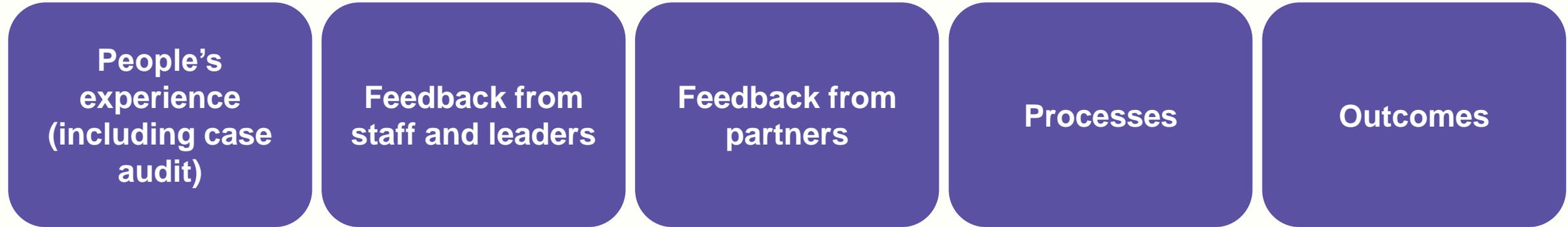


Theme 4: Leadership

- 1. 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.
- 2. 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.

Evidence Categories

The CQC has developed five categories for the evidence it will collect to complete its assessment:



There is extensive and continually emerging guidance from the CQC itself, and from the Local Government Association (LGA) and the Association of Directors of Adult Social Services (ADASS) on what constitutes positive performance for each of the Quality Statements and more. Key documents as of October 2023 are:

1. [CQC Assessment Framework](#).
2. [LGA Unpaid Carers toolkit](#).
3. LGA Self-Assessment Guidance [Part 1](#) and [Part 2](#) and excel [workbook](#).
4. LGA and Partners in Care and Health [top tips](#).

Summary of Part 1 of the Care Act 2014

Statutory Duties under Part 1 of the Care Act 2014

Ultimately, CQC Assurance will measure how well the ASC Department is performing against its statutory duties as set out in Part 1 of the [Care Act 2014](#). CQC Assurance isn't about passing a test; it's about delivering best practice consistently. We will use the Assurance process as an opportunity to review our practices critically, identify areas that may need improvement, and continually enhance the services we provide to local people.

Summary of Care Act 2014 Part 1 duties

Section	Summary of duties	Chapters
General responsibilities and universal services	Promoting wellbeing; preventing, reducing or delaying needs; providing information and advice; market shaping and commissioning of adult social care and support; managing provider failure and other service interruptions	1-5
First contact and identifying needs	Assessments and eligibility; independent advocacy	6-7
Charging and financial assessment	Charging and financial assessments; deferred payment agreements	8-9
Person-centred care and support planning	Care and support planning; personal budgets; direct payments; review of care and support plans	10-13
Safeguarding	Adult safeguarding; abuse and neglect; carers and adult safeguarding; procedures; multi-agency working; criminal offences and adult safeguarding; safeguarding enquiries; Safeguarding Adults Boards; Safeguarding Adults Reviews; information sharing, confidentiality and record keeping; roles, responsibilities and training in local authorities, the NHS and other agencies	14
Integration and partnership working	Integration, cooperation and partnerships; transition to adult care and support; prisons, approved premises and bail accommodation; delegation of local authority functions	15-18
Moving between areas: inter-local authority and cross-border issues	Ordinary residence; continuity of care; cross-border placements	19-21
Other areas	Site registers	22

Overview of Brent's CQC Assurance Programme

Purpose of the CQC Assurance Programme

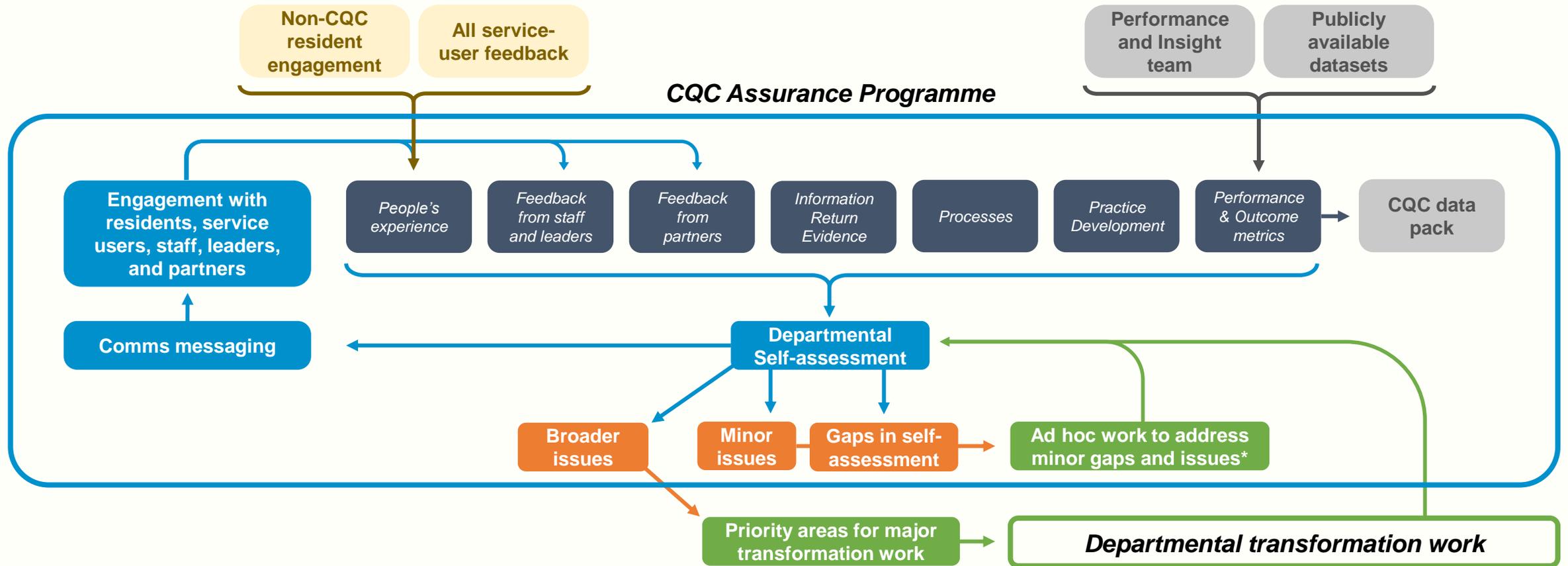
Brent's CQC Assurance Programme has been created to ensure Brent's Adult Social Care (ASC) Department is prepared for the CQC's new inspection process, and to ensure the Department uses inspection as an opportunity to embed continuous improvement in how well it meets its statutory obligations moving forward.

The desired outcomes from the programme are:

- 1 Ensure Brent's ASC Department gets a **'Good' or 'Outstanding' CQC rating**.
- 2 Gain an improved view of departmental and team performance, including areas of weakness, and **develop plans to address gaps** that are not within the scope of any ongoing work.
- 3 Develop processes, governance, and evidence management systems that **ensure the assurance process becomes part of the Department's BAU** commitment to continuous improvement.

Overall CQC Assurance Process

The Programme aims to create **continuous and dynamic assurance process** that feeds evidence from across the Department into the self-assessment and uses the self-assessment to drive improvement work.



Partner Contribution to CQC Assurance



How Partners can Support

- **Policy Alignment:** Ensuring local policies align with CQC standards, offering guidance and resources to meet inspection criteria.
- **Collaborative Oversight:** Working closely with social care to understand their challenges, providing support, guidance, and resources where needed.
- **Quality Improvement Initiatives:** Participating in and/or Facilitating initiatives to improve care quality, such as training programs, workshops, or sharing best practices.
- **Advocacy and Communication:** Advocating on behalf of social care, communicating social care needs to within your organisations and ensuring support for meeting inspection standards.

How Partners can Support

- **Data and Evaluation:** Assisting in data collection, analysis, and evaluation to identify areas for improvement and monitor progress in meeting care standards.
- **Community Engagement:** Involving the community in understanding the importance of social care and gathering support for initiatives that enhance care quality.
- **Policy Development:** Participating in policy development to address gaps identified and enhance the overall quality of adult social care services.
- **Be available to speak to Inspectors when they arrive**



Information for The Health and Wellbeing Board

Additional Information and Resources

Resource	Source	Link
CQC Assessment Framework	CQC	Link
Overview of reasoning behind the new assessment framework	CQC	Link
Adult social care assurance: A guide to support the development of your adult social care self-assessment (Part 1)	LGA	Link
Adult social care assurance: A guide to support the development of your adult social care self-assessment (Part 2)	LGA	Link
Top tips for CQC assurance preparation	LGA	Link
Unpaid carers and CQC assurance	LGA	Link
Care Act 2014 Part 1	Legislation.gov.uk	Link
Care Act 2014 guidance	GOV.UK	Link
Care Act 2014 factsheet	GOV.UK	Link

If you have any comments or queries, please reach out to Claudia Brown, Director Adult Social Services (DASS) (claudia.brown@brent.gov.uk)