

	<p align="center"><b>Community and Wellbeing Scrutiny Committee</b> 05 February 2025</p>
	<p align="center"><b>Report from the Corporate Director of Community Health and Wellbeing</b></p>
	<p align="center"><b>Cabinet Member for Adult Social Care, Public Health and Leisure (Councillor Neil Nerva)</b></p>
<p align="center"><b>CQC Adult Social Care Improvement Plan</b></p>	

<b>Wards Affected:</b>	All
<b>Key or Non-Key Decision:</b>	N/A
<b>Open or Part/Fully Exempt:</b> <small>(If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)</small>	Open
<b>List of Appendices:</b>	N/A
<b>Background Papers:</b>	N/A
<b>Contact Officer(s):</b> <small>(Name, Title, Contact Details)</small>	Harry Peacock Head of Performance, Change and Assurance: <a href="mailto:harry.peacock@bent.gov.uk">harry.peacock@bent.gov.uk</a>

## 1.0 Executive Summary

- 1.1. The report outlines the actions Adult Social Care (ASC) is taking following the publication in August 2024 of the CQC Inspection Report into Brent ASC. It was requested by Community Health and Wellbeing Scrutiny that the report come before them in January 2025 alongside the ASC Transformation Programme.
- 1.2. Adult Social Care provides statutory functions set out in legislation including the Care Act (2014), Mental Health Act (1983) amended (2007), Mental Capacity Act (2005) and the Health and Care Act (2022). As part of assuring the delivery of statutory duties the Care Quality Commission (CQC) were given powers within the Health and Care Act (2022) to carry out an independent assessment of how well local authorities are performing against their duties under Part 1 of the Care Act (2014) . For Local Authorities the assessment focuses on 4 core themes and 9 quality statements: [CQC Local Authority Assessment Framework](#)
- 1.3. Care Act duties are undertaken by other services within Brent such as Brent Customer Services who provide adult social care contact functions and undertake financial assessments in line with the care and support statutory guidance. In addition, several services contribute to improving customer

service and outcomes such as health and housing partners through joint schemes funded through the Better Care Fund. The CQC inspection process takes account of this with a strong emphasis on customer and carer experience and partnership working at both a strategic and operational level, making the inspection a whole council inspection. This is a new inspection regime for ASC so we drew heavily on the experience and insight of other directorate such as Children's Services and cross Local Authority working with other Councils to share learning and experience with other such as Housing who will be subject to a new inspection regime.

- 1.4 On 30 January 2024 Brent ASC was informed that CQC will be carrying out an assessment of the Council. The first part of the process required us to provide our self-assessment and evidence as part of an information return. On 25 March 2024 we received formal notification from CQC of our Site Visit which took place week beginning 13 May 2024. After the site visit there was a period of drafting the report, factual accuracy check and the final report was then published on 16 August 2024.
- 1.5 Brent Adult Social Care rating was 'Requires improvement: Evidence shows some shortfalls 62%' - [London Borough of Brent: local authority assessment - Care Quality Commission](#). The report also provides ratings by theme and quality statement:

Quality statement scores	
Assessing needs	Score: 2 ●
Supporting people to lead healthier lives	Score: 2 ●
Equity in experience and outcomes	Score: 2 ●
Care provision, integration and continuity	Score: 2 ●
Partnerships and communities	Score: 2 ●
Safe pathways, systems and transitions	Score: 3 ●
Safeguarding	Score: 3 ●
Governance, management and sustainability	Score: 3 ●
Learning, improvement and innovation	Score: 3 ●

- 1.6 At the review stage following receipt of the draft report, we provided significant additional information, the majority of which was accepted but with no change to the ratings and overall percentage score. In assessing the findings within the final report, we recognise there is further work to be done to address the requires improvement overall assessment of Theme 1, which focuses on the

resident experience. Although some of the presented evidence by CQC was historical dating back several years and we felt did not fully reflect the overall experience of many adult social users currently, our improvement plan focuses on ensuring a consistent, positive experience for all our customers and ensuring that they feel involved and listened to. With regards to requires improvement in Theme 2, which relates to the provision of care and our partnerships, the content of the report does not strongly evidence many shortfalls and highlighted several areas of good practice: *‘The local authority worked with local people and stakeholders using available data sources to understand the care and support needs of people and communities’*. *‘The local authority worked in collaboration with 6 neighbouring boroughs in North West London to share information on quality across the care provider sector’*.

- 1.7 We are committed to working towards delivering an outstanding service for the residents of Brent and whilst there are wider sector issues beyond our control that make that challenging, the improvement plan proposed below looks at the actions we can take across all themes to work towards that goal.
- 1.8 The CQC does not provide specific recommendations, nor a clear definition of what good and outstanding look like which makes it more challenging in terms of being sure that the actions we take will meet their expectations – having a clear baseline for what each rating means has also been identified through the Dash Review of CQC as a failing. But based on our reading of the report and understanding of our current performance, the below plan is seen to address the key areas required.

## **2.0 Recommendation(s)**

- 2.1 That the committee note the CQC Improvement plan and next steps for CQC Local Authority Assurance process and advise accordingly.
- 2.2 That the committee consider whether they would like a further update on progress in 12 months.

## **3.0 Detail**

### **3.1 Contribution to Borough Plan Priorities & Strategic Context**

- 3.1.1 The CQC assurance work and improvement plan contributes strongly to the Borough Plan priorities: ‘Thriving Communities and ‘A Healthier Brent’. Our transformation work, delivery of the Adults Social Care Service Plan 2024/25 and CQC Improvement Plan contribute to:

- Thriving Communities – support for Brent Carers, Coproduction and Community Partnerships and Safeguarding Adults
- A Healthier Brent – supporting people to live healthier lives, equity in experience and outcomes, information, advice and signposting to support independent living and prevention to prevent, reduce and delay needs.

### **3.2 Background**

3.2.1 The ASC Improvement Plan builds on the work already underway to transform services referenced in the CQC report. It addresses the areas for development across the 4 CQC themes.

### **3.3 ASC Improvement and Action Plan**

3.3.1 **Working with people summary of key actions:** There are several actions in place to improve the way in which we work with people which will ensure that we hear the resident and carer voice, improve the resident and carer experience and that we actively engage with people and community partners to codesign and coproduce service development and improvement.

3.3.2 Our focus is on ensuring carers are appropriately supported to continue caring for family members and loved ones. We are determined to improve the experience of carers through delivery of the carers strategy and commitments. This includes promoting the rights of carers, providing accessible information and advice and working closely with the carers centre and partners to identify, reach and support more carers. A Carers Implementation Board has been established which oversees the work of the carers project and workstreams.

3.3.3 We continue to build on the work already underway around coproduction and community partnerships. A Coproduction and Community Partnership Forum and Steering Group has been set up including staff, partners and people with lived experience. In addition coproduction champions have been recruited and four Resident Inclusion and Advisory Groups have been set up focussed on: information and advice, family and friend carers, self-care technology and loneliness and mental health. Two Coproduction Coordinators have been appointed to work with both residents and carers.

3.3.4 Work is underway with partners such as Brent Health Matters to work with wider groups including those underserved to raise awareness of adult social care services and support people to live healthier lives. We have developed a Community Health and Wellbeing Guide to help people identify and connect with services. We have also held two community assessment days at weekends with Brent Health Matters and wider partners to carry out adult social care assessments and offer free health checks at the same time. These will continue throughout 2025.

3.3.5 There is an ongoing piece of work to refresh the ASC website, making it more user friendly and accessible and developing self-help digital tools such as a self-assessment for residents and carers and digital tools to help people understand the support and equipment available to help them remain independent and well at home e.g. AskSARA and an interactive House.

3.3.6 We have recruited an Autism Coordinator and are refreshing our Autism and Neurodiversity strategy and approach to ensure age appropriate and personalised care and support is available. We have made the Oliver McGowan Autism training mandatory for all ASC staff to raise awareness. We continue to work with the advocacy service to raise awareness of advocacy provision and increase the capacity year on year to provide more advocacy.

- 3.3.7 We now undertake regular analysis of feedback from residents and carers through regular internal surveys and the annual surveys of adult social care users and carers, including adding questions around people's experience of assessments to ensure our practice respects people's background, communication needs, cultural life and religious beliefs. Regular analysis of complaints and Members Enquiries is helping us to identify themes and insight to help us share learning and agree improvement actions.
- 3.3.8 **Providing services summary of key actions:** There are several actions identified to help us better provide support, ensuring we are working closely with partners and providing the right care, at the right time and in the right place. This will ensure we are providing personalised and targeted early help and long-term care and support, that prevents, reduces or delays needs or enables people to live independently, safe and well in the place they call home.
- 3.3.9 We are rolling out a number of technology solutions as part of the ASC Digital and Assistive Technology strategy. These include work to automate processes to gain greater efficiency, pilots around AI (Magic Notes and Microsoft Copilot) to support social care staff, digital tools to support residents to remain well and safe and work to share care records between health and social care.
- 3.3.10 Our Commissioning and Capacity Building service and ASC operations are working together and with partners to ensure the care and support we provide is better helping to meet people's needs including ensuring there is age-appropriate provision for people transitioning from children's services to adult social care, working with Housing partners to ensure we reduce extra care voids and there is appropriate housing based support in place for people e.g. for people living in hostels with drug and alcohol issues.
- 3.3.11 Work continues through the London Consortium for Community Equipment provision and with the provider Nottingham Rehab Service to ensure community equipment is in place in a timely manner to support people, especially those being discharged from hospital.
- 3.3.12 In addition work continues to strengthen our preventative offer and to increase awareness of the services available to support people e.g. home adaptations and reablement support to ensure people can continue to live at home and maximise their independence through short-term targeted care and support. We have increased the capacity of the reablement service to support more people at the start of their care and support and to support those who are receiving care and support but have had a change in their circumstances e.g. an increase in their home care package following a hospital admission.
- 3.3.13 A key focus in response to the CQC findings is to strengthen and develop work with the community and voluntary sector as part of the wider strategic change programme and also the work of adult social care. This includes work around wellbeing and the establishment of hubs with ASC services and space within them e.g. New Millennium Day Centre, Integrated Neighbourhood

Teams with health and social care and the coproduction and community partnership work.

3.3.14 Further work continues with partners around the Better Care Fund in Brent and work within North West London such as our joint bid around adult social care accelerated reform fund – Better Care Support self-assessment, an enhanced carers offer through care centres and a joint approach to increasing shared lives provision which matches people with care and support needs with an approved carer.

3.3.15 **Ensuring safety summary of key actions:** Brent ASC was rated as providing a good standard of work in this area around ensuring safety within the system and safeguarding but we continue to seek to drive improvement. We want to ensure people who are waiting for assessment and/or review are safe and those where a safeguarding concern has been raised are protected from abuse and neglect.

3.3.16 As part of the adult social care restructure we are bringing together community and commissioning review resources together into one review service. This will enable us to ensure timely reviews of care and support take people reducing the length of time people wait for a review. The same principle is being applied to assessments to ensure people are safe and well while they wait for an assessment and we can make better use of self-assessment and digital tools.

3.3.17 We are working proactively with partners on the Safeguarding Adults Board (SAB) and other services such as Children's and Young People to develop and embed safeguarding practices, including work around transitional safeguarding, to ensure a Borough approach to support young people at risk. The SAB has an agreed set of priorities and has established a number of working groups including a performance and audit sub-group to gather and use performance data and insight. Areas of focus include high risk, cuckooing, substance misuse and housing and self-neglect, where a self-neglect toolkit has been launched across the partnership. Following an independent Safeguarding Review completed by Dr Adi Cooper in early 2024 ASC have implemented actions to meet the recommendations made. We will shortly be asking Dr Adi Cooper back in early 2025 to provide a review of our progress.

3.3.18 **Leadership summary of key actions:** Brent ASC was rated as providing a good standard of work around governance, management, sustainability, and learning, improvement and innovation. Work continues to maintain and develop this.

3.3.19 Throughout 2025 we will continue to deliver our workforce strategy with a key focus on two areas of the social care workforce. We will work closely and proactively with sector providers e.g. home care providers and supported living providers to ensure capacity and capability within the workforce and reduce the vacancy level within the sector. We are also restructuring ASC to ensure resources are more appropriately matched to demand and we reduce the use of agency staff through recruitment and retention initiatives. Since January 2024 up to 20 agency staff have taken on permanent roles.

3.3.20 We continue through training, learning and development to focus on ensuring our workforce demonstrates best practice and consistent practice that is strengths based, person-centred and reflects people's preferences. This includes a clear focus on relationship based social work being clear around communicating with people in a timely manner and ensuring we work with people and their wider support network as partners in their care and support.

### 3.4 Evidencing impact, improving performance and customer experience

3.4.1 It is important that through this work we are able to evidence the impact of improvement actions against a range of measures such as those used by CQC in the report - see examples below:

This feedback was supported by national data which shows 55.07% of people are satisfied with their care and support in Brent, which is lower than the England average of 61.21% (Adult Social Care Survey, 2023, ASCS).

National data supported this and showed 47.95% of long-term support clients reviewed (planned or unplanned) in Brent, which is lower than the England average of 57.14%, (Short and Long-term Support, 2023, SALT).

National data supports these findings showing that 30.19% of carers in Brent were satisfied with social services compared to the England average of 36.27% and that 56.75% feel involved or consulted as much as they wanted to be in discussions, compared to the England average of 64.95%, (Survey of Adult Carers in England, 2022, SACE).

3.4.2 To demonstrate the impact of the work we have developed a comprehensive range of metrics across key performance indicators including statutory data and information returns e.g. Adult Social Care Survey, Survey of Adult Carers in England, alongside local performance indicators e.g. assessment and review waiting list.

3.4.3 There are several areas where we are targeting progress during 2024/25 or at the next surveys for adult social care and carers. To help inform targets, Brent data from previous years has been used and data from the latest 2023/24 Adult Social Care Outcomes Framework (ASCOF) has been benchmarked against other London Boroughs. Further work will be undertaken to refine the process.

3.4.4 The main areas where we are seeking to raise performance and improve customer and carer experience throughout 2025 include:

Area	Actions
Service User satisfaction (statutory returns)	Targeting an increase in satisfaction from 54% to 60%, this will bring us in line with a number of other London Boroughs.
Carers satisfaction (statutory returns)	Targeting an increase from 31.25 to 37%. This will move us into the top 25 percentile.

Accessing information and advice (statutory returns)	Targeting an increase from 35.3% for service users to 50% in response rates for those indicating it is 'very easy' or 'fairly easy' to access information and advice which will move us closer to other London Boroughs and an increase from 26.55 to 50% for carers.
Complaints (local)	Targeting a 20% decrease in the number of stage 1 complaints received and a 10% decrease in the number of complaints 'upheld or partially upheld'.
Waiting lists and length of waits for assessments and reviews (local)	Targeting a 20% reduction in the number of people waiting for assessment and reviews. Our goal is no one waits longer than 3 months for an assessment in 2025 and 6 months for a review.

### 3.5 Improvement and progress to date

- 3.5.1 Since the CQC inspection and publication of the report there has been progress made in several areas. The timeliness and quality of Stage 1 complaint responses has improved over the last 6 months with the majority of complaints responded to within the timeframe.
- 3.5.2 A significant amount of work has taken place to reduce the number and length of time people wait for assessment and review. In February 2024 as part of our information return to CQC we had 317 waiting for a Care Act assessment with the longest wait being 264 days. In May 2024 when CQC were on site this had reduced this to 276 with the longest wait 218 days. As of 24<sup>th</sup> January 2025 the assessment waiting list is 97 with the longest wait around 180 days. We have reduced the number of people waiting for a review and cleared all the outstanding reviews that were over 12 months. During 2025 we are targeting further reductions as outlined in the table above.
- 3.5.3 Following the development of the carers strategy and commitments we have set up a multiagency Carers Implementation Board which meets monthly to oversee the delivery of the strategy. The Carers Board continues to meet every three months and provides oversight and assurance against each of the six priorities in the strategy. A Carers Rights Day event took place on the 21st November. This was a market stall event that gave ASC an opportunity to engage with carers in the community and provide them with information and advice. The event was well attended by carers and elected members. A Young Carers workstream is developing an awareness programme to educate teachers, school staff, and healthcare professionals about how to identify



young carers. An additional communications campaign is also being developed to raise awareness amongst students at schools about the role of young carers and the support available to them.

- 3.5.4 A number of digital and assistive technology solutions have been successfully deployed or piloted. Working with the Digital Transformation Team we have automated the hospital discharge and ASC payment processes. Also, we have transferred over 1,000 telecare and community alarm users from analogue to digital platforms. We have successfully piloted an AI recording and transcribing tool in ASC called Magic Notes which assists frontline staff with the assessment process. Early evaluation data shows this has saved staff 50% time on administrative tasks and 33% of staff report an increase in the quality of conversations with customers. As part of a joint bid with 5 North West London Local Authorities including Brent for accelerated reform funding, we will be rolling out further digital solutions in the first half of 2025 to support resident self-assessment and to support carers centres.
- 3.5.5 ASC has just restructured across the whole service to ensure we have the right resources in place in each team to deliver the ASC vision and target operating model. The restructure was informed by work to map demand and time taken by teams to complete processes based on the complexity of client groups. Consultation started in late October 2024 and completed at the end of November 2024. Recruitment is taking place now with a view to full implementation of new team structures and ways of working in March 2025.
- 3.5.6 The restructure will support greater integrated working and more focussed locality based services dovetailing in with the work already underway around integrated neighbourhood teams. There are already actions in place for closer working with social workers embedded with health partners such as rapid response teams, increased working and presence within GP practices and a new protocol in place for ASC staff to attend the Complex Patient Management Group (CPMG) meetings which has been designed to support the 3 GP Federated Networks – Harness, K&W and Kilburn, which clarifies roles and responsibilities, enhancing collaboration and decision making.

#### **4.0 Stakeholder and ward member consultation and engagement**

4.1 In preparation for the CQC Assurance process and following the publication of the report we sent copies of our self-assessment and the published report along with communications to our partners and included a statement on our Council website. We have actively engaged with stakeholders such as:

- Voluntary and Community Sector partners such as Healthwatch and the Carers Centre
- Staff Groups through the ASC Quarterly Staff Events and Teams Meetings
- People with lived experience through the Resident Inclusion and Advisory Groups
- Policy Coordination Group
- Corporate Management Team

- Community Health and Wellbeing Scrutiny
- Lead Member Liaison
- Brent Integrated Care Partnership through the Community Services Executive Group
- Local Government Association and Partners in Care and Health (who we report quarterly progress through to the Department of Health and Social Care)

4.2 We will continue to work throughout the improvement journey with relevant stakeholders in terms of consultation and engagement.

## **5.0 Financial Considerations**

5.1 No immediate financial or budgetary implication identified as part of this particular plan.

## **6.0 Legal Considerations**

6.1 CQC Local Authority Assurance is a legal requirement under the Health and Care Act 2022 and the inspection was centred around how we are delivering our statutory duties under Part 1 of the Care Act (2014).

## **7.0 Equity, Diversity & Inclusion (EDI) Considerations**

7.1 Equity in experience and outcomes is one of the nine quality statements where the CQC findings identified areas for improvement. The CQC Improvement Plan will address these.

## **8.0 Climate Change and Environmental Considerations**

8.1 No climate change or environmental considerations identified.

## **9.0 Human Resources/Property Considerations (if appropriate)**

9.1 Adult Social Care is currently restructuring its services following consultation and will be implementing the new structure from March 2025. In addition, work will continue with HR colleagues as part of the identified adult social care workforce development activities.

## **10.0 Communication Considerations**

10.1 Engagement around the improvement plan continues to take place and we will constantly review our engagement and communication approach throughout the delivery of the action plan.

**Report sign off:**

**Corporate Director Name: Rachel Crossley**  
Corporate Director of Community Health and Wellbeing