

Bath & North East Somerset Council		
MEETING/ DECISION MAKER:	Adults and Children’s Health and Wellbeing Policy Development and Scrutiny Panel	
MEETING/ DECISION DATE:	14 th April 2025	EXECUTIVE FORWARD PLAN REFERENCE:
TITLE:	Care Quality Commission (CQC) Local Authority Assessment Update	
WARD:	All	
AN OPEN PUBLIC ITEM		
List of attachments to this report:		
Attachment 1: CQC Assessment Framework – Local Authority Assurance		
Attachment 2: CQC Local Authority Assessment Timeline		
Attachment 3: Adult Social Care Improvement Plan		

1 THE ISSUE

- 1.1 The Health and Care Act 2022 gave Care Quality Commission (CQC) new powers to assess how Local Authorities meet their duties under Part 1 of the Care Act 2014. CQC Local Authority Assessment Framework assesses the performance of Local Authorities to assure CQC and the Department of Health and Social Care about the quality of care in the area and consider any improvements that are required. A full overview of the CQC Local Authority Assessment Framework can be found in Attachment 1.
- 1.2 From April 2024 to September 2024 B&NES underwent it's CQC Local Authority Assessment under a 2 stage inspection approach, with the onsite element of the assessment process taking place from 10th September to 12th September 2024. A timeline of the CQC assessment process can be reviewed in Attachment 2.
- 1.3 The CQC published their report for B&NES on 30th January 2025, assigning a rating of Requires Improvement. Prior to the final report being published a factual accuracy and completeness review was undertaken by the ASC Leadership Team on the draft CQC report. 75 points of factual accuracy and 69 completeness points were submitted to CQC on 27th November 2024. For factual accuracy 56 points were accepted/partially accepted and for

completeness points 20 were accepted/partially accepted. The rating for B&NES remained unchanged even though CQC accepted the majority of the changes.

- 1.4 CQC confirmed on 23rd January 2025 they had received the Director Adult Social Care (DASS) submission challenging the methodology of the inspection process and requested a review of the CQC Quality Assurance process being adhered to. On the 4th March 2025 CQC responded to the challenge submission stating that 'CQC have considered the B&NES submission against their rating assurance process review criteria and have determined there are no grounds for a review'.
- 1.5 The Lead Member wrote to the CQC Chief Executive, Sir Julian Hartley on the 27th January 2025, again on 17th February and with a further follow up email on the 3rd March 2025. She received confirmation of the contact on each occasion and the promise of a response but no response has been received from Sir Julian Hartley to date. The Lead Member also wrote to Penny Dash who had in 2024 been commissioned to review the effectiveness of CQC. Her response confirmed that the concerns B&NES identified were similar to those she had found in her review of the CQC.
- 1.6 Suzanne Westhead, Director Adult Social Care also wrote twice to the CQC Chief Inspector, James Bullion, about the poor inspection process and inexperienced inspectors but no response was received.
- 1.7 Due to the Requires Improvement rating B&NES has been assigned a Care and Health Improvement Advisor (CHIA) from Partners in Care (Southwest Region) who partner with the Local Government Association and Association of Directors of Adult Social Services.

2 RECOMMENDATION

The Panel is asked to:

- 2.1 Acknowledge the CQC Local Authority Assessment report published with a rating of Requires Improvement.
- 2.2 Feedback on the Adult Social Care Improvement Plan with key themes and actions that outline our improvement journey to CQC rating of Good.
- 2.3 Agree that an update report on the progress against the ASC Improvement Plan is submitted to Panel in September 2025.

3 THE REPORT

- 3.1 Summary of strengths and areas of development from the CQC report are outlined below. The full report with an overview of the rating and scoring can be accessed at <https://www.cqc.org.uk/care-services/local-authority-assessment-reports/bathandnortheastsomerset-0125>.
- 3.2 This assessment took place during a time of ongoing transformation. The Local Authority had recently brought their Care Act 2014 functions in-house and many policies, processes and governance procedures were being reviewed and embedded. Following the transfer back in-house, adult social care was also reviewing job roles and team structures. In addition, the whole council was going through a transformation with the vision "Being Our Best" which was intended to

ensure every contact with the local authority was the best and improved each person's interaction with the local authority. Leaders and managers were also being introduced to an improved, more in-depth, version of their Power BI data system to support them with oversight and governance. The improved version had not yet been fully implemented at the time of our assessment however, leaders told us the original version was still being used by leaders and managers to support with oversight. The new version is now fully implemented

- 3.3 Feedback from staff regarding the technicalities of the transfer back in-house was positive. Staff told us the move went smoothly, and they felt well informed and prepared for the transfer. Staff told us the training offer has improved since moving back in house and that training was easily accessible, informative and relevant to their job roles. However, the overall council transformation, change in job profiles, and potential future structures of teams, were causing staff anxiety and staff did not feel the process was well communicated. Staff spoke positively about their managers and senior leaders and felt supported in supervision. However, staff told us they felt there needed to be more oversight and decision-making support in some teams.
- 3.4 Feedback from health partners was positive. We heard how health, adult social care, the HCRG group and the community and voluntary sector were working together in the Community Wellbeing Hub to prevent, reduce and delay people's care needs. Leaders identified a need for more collaborative working so people would only have to tell their story once more promotion of people's independence and to reduce the need for care and support. Health partners and leaders described positive working relationships and joint working to achieve shared aims. Health partners, leaders and staff understood the importance of the voluntary and community sector to meet their strategic aims around prevention. Feedback from the voluntary sector was positive. However, some organisations flagged issues around capacity and explained they had waiting lists due to the increase in referrals sent to them from the local authority.
- 3.5 National data showed the experiences of people living in B&NES were mainly positive or in line with national trends. Data showed people felt in control of their own lives and were satisfied with the care and support they received. National data showed the direct payment uptake was low.
- 3.6 Leaders had a good understanding of where they needed to improve. Where shortfalls were identified, plans were in place to address them though some plans and changes were yet to take place and embed. Changes had already been made to improve co-production, and leaders identified the need to continue to improve co-production and other ways to gain people's feedback on their experiences. The carers co- production was particularly positive, carers told us they felt listened to and respected. They were looking forward to seeing the changes and suggestions they made regarding the carer's strategy being put into practice.
- 3.7 Unpaid carers feedback was mixed, carers did not always know what support and advice was available to them and what impact a carers assessment could have. Some carers told us they had been in a caring role for some time before being offered a carers assessment. The local authority has identified the need to improve the carers offer.

- 3.8 There were gaps in knowledge of some leaders regarding the understanding of their diverse communities and seldom heard groups. We heard how adult social care, and public health had worked together to reach the boating and traveller community and how the Director of Adult Social Services (DASS) represented the local authority in the lesbian, gay, bisexual, transgender or queer (LGBTQ+) community group.
- 3.9 Data collected by the local authority did not support the identification of people whose voices are seldom heard. For example, it was not compulsory to add a person's religion or ethnicity to the recording system when creating a record at the front door, this meant there were potential inconsistencies in the monitoring of people from seldom heard groups and whether they had interacted with the local authority.
- 3.10 Waiting times for Care Act assessments and reviews varied from team to team. Some people waited longer than the adult social care targets set by the local authority. Staff told us staffing issues were having an impact on waiting lists for people awaiting an occupational therapy assessment, and the reviewing team had people who were waiting over a year for their annual review.
- 3.11 Leaders had positive and ambitious plans to improve adult social care in the future including improving performance, gaining people's voice, working collaboratively and improving governance, oversight and use of data to inform changes and improvements to practice. Leaders identified the gaps in governance and understood the importance of embedding changes in order to improve practice.
- 3.12 There are systems and processes in place to protect people from abuse and neglect and these have been reviewed and refreshed with partners and staff. We are in the process of reviewing multi agency policies with B&NES Community Safety and Safeguarding Partnership. All safeguarding concerns and enquiries are tracked and outcomes recorded. The number of people waiting for assessment or review is reviewed on a daily basis by managers and people are allocated based on level of risk and need.
- 3.13 The Adult Social Care Improvement Plan outlines progress already made and the steps that will be taken to further enhance services. It reflects our own assessment of priority areas for improvement, alongside the key findings and areas for improvement against quality statement scores from the CQC Local Authority Assessment Report for B&NES. By aligning our efforts with national expectations and local needs, we are driving forward a shared vision for a more responsive, effective, and sustainable Adult Social Care service. All Adult Social Care statutory duties are now performed directly by the Council following the transfer of staff from HCRG Care Group in April 2024. This means we have greater governance, oversight, and assurance over our performance. This also enables us to better understand how well we are meeting the needs of our community and where further improvements are required.
- 3.14 The following four principles underpin the 9 Improvement Priorities of the ASC Improvement Plan:

Principle 1: Foster equal partnerships and alliances with provider partners

- Principle 2: Ensure consistency of experience across the service, promoting highly personalised, strengths-based, solution-focused conversations, and micro-commissioning
- Principle 3: Embed equality, diversity, and inclusion into all activities, ensuring that these values are integral to our operations and enhance the opportunities available to everyone
- Principle 4: Fostering a culture of strong leadership grip, governance and risk management, creating a framework that enhances leadership practices, increased productivity and positive outcomes for individuals

3.15 The ASC Improvement Plan is aligned to specific CQC feedback and structured according to the Local Authority Assessment Themes listed in Attachment 1. This ensures a clear and systematic approach to addressing identified improvement priorities. There are 9 improvement priorities across the four CQC Themes which are outlined in the table below.

Theme & Reference		Priority Areas of improvement
Theme 1: How the Local Authority Works with People	1.1	Improve public access to information, advice, guidance, and enhance our prevention services.
	1.2	Reduce waiting times for all services areas ensuring that people are prioritised according to risk
	1.3	Enhance the quality offered to Social Care staff by implementing a new practice model. Establish a Practice Development Group focused on legal compliance, outcome-oriented practice, and enhanced recording and data output.
Theme 2: Providing Support	2.1	Work collaboratively with practitioners and partners to ensure we commission services that meet the needs of our population to ensure diversity and sufficiency in the local market
	2.2	Introduce innovative ways of supporting people, staff & stakeholders, through the use technology and digital solutions
	2.3	Giving residents a bigger say in local services and develop how we gather feedback on people's experience of Adult Social Care
Theme 3: How the Local Authority Ensures Safety Within the System	3.1	Ensure our governance and risk management processes are used consistently to ensure safeguarding procedures are followed in accordance with making safeguarding personal principles
	3.2	Refresh and implement a new Preparing for Adulthood Pathway
Theme 4: Leadership	4.1	Improve the quality of our data to ensure better oversight of individuals journeys through the use of performance BI dashboard

3.16 The ASC Improvement Board will commence in April 2025 and will be chaired by Suzanne Westhead, Director Adult Social Care. The Improvement Board will be held monthly to review progress made against the 9 improvement priorities set out in the ASC Improvement Plan. Bath and North East Somerset Council's approach to improving Adult Social Care is structured around the Care Quality Commission (CQC) themes and quality statements. The improvement board will have oversight that our improvements are aligned with national standards and best practices, providing a clear framework for delivering high-quality, person-centred care.

3.17 The Director Level Service Plan includes ASC Improvement as a key priority for 2025/26.

4 STATUTORY CONSIDERATIONS

- 4.1 The Health and Care Act 2022 puts the Care Quality Commission's (CQC) assurance of Local Authorities on a statutory footing. The new duty on the CQC to assess Local Authorities' delivery of their Adult Social Care (ASC) duties under Part 1 of the Care Act 2014 came into effect on 1 April 2023. Linked to this new duty is a power for the Secretary of State to intervene where, following assessment under the new duty, it is considered that a local authority is failing to meet their duties.
- 4.2 CQC Local Authority Assessment process assessed how well we deliver our statutory duties within the 6 key principles of; empowerment, prevention, proportionality, protection, partnership and accountability. The Care Act 2014 breaks these down into:
- General responsibilities, for example, how well we promote wellbeing, prevent reduce and delay the need for care and support and offer information, advice and guidance
 - Assess and meet needs
 - Direct Payments
 - Financial assessments, charging for care and deferred payment schemes
 - Deferred Payments
 - Continuity of Care
 - Market oversight and provider failure
 - Transition for children to adult care support
 - Advocacy
 - Safeguarding
- 4.3 The allocation of a Care and Health Improvement Advisor is mandated for all Local Authorities that are either Requires Improvement or Inadequate. The Director for Adult Social Care and wider ASC Leadership Team met with the Care and Health Improvement Advisor (CHIA) from Partners in Care allocated to B&NES on 28th January 2025 to review the ASC Improvement Plan priorities and plan next steps.
- 4.4 The CQC Assurance Stage One report to Department Health and Social Care was submitted by the Partners in Care CHIA by 12th February 2025. The second CQC Assurance report will be submitted to Department Health and Social Care by Partners in Care CHIA on 30th April 2025.

5 RESOURCE IMPLICATIONS (FINANCE, PROPERTY, PEOPLE)

- 5.1 The appointment of a Care and Health Improvement Advisor from Partners in Care has been welcomed by the ASC Leadership Team providing a valuable advisory resource to inform the B&NES ASC improvement journey and report on progress to Department Health and Social Care.
- 5.2 Initial scoping discussions have taken place regarding potential resourcing requirements through the development of the ASC Improvement Plan and additional resource requests will be managed through the ASC Improvement Board.

6 RISK MANAGEMENT

- 6.1 A risk assessment related to the issue and recommendations has been undertaken, in compliance with the Council's decision making risk management guidance.
- 6.2 The ASC Risk Register has an entry for 'risk of capacity to deliver CQC improvement plan following September 2024 on site inspection' which has been escalated to the Corporate Risk Register in December 2024. The ASC risk register is reviewed on a quarterly basis.
- 6.3 Progress against ASC Improvement Plan milestones will be RAG rated on a monthly basis and reported to the Improvement Board which is planned to commence in April 2025.

7 EQUALITIES

- 7.1 No specific issues have been raised about the Adult Social Care service delivery model. The service is very aware of the importance of delivering equitable services to all those people who have drawn on care and support and their carers.

8 CLIMATE CHANGE

- 8.1 No negative impacts are expected from the proposed new delivery models on climate change. The proposed service delivery arrangements will be comparable to the existing provision for Adult Social Care.

9 OTHER OPTIONS CONSIDERED

- 9.1 A key part of the CQC assessment process was the development of a Self Assessment report for 2023/24, which gave details on our identified areas of improvement. The Adult Social Care Self Assessment was published on 5th July 2024 and can be accessed using the following link - <https://www.bathnes.gov.uk/document-and-policy-library/our-adult-social-care-self-assessment>
- 9.2 As part of our annual quality assurance process our self assessment will be updated for reporting period 2024/25. The updated self assessment will be developed in April 2025 to capture the learning from CQC Local Authority Assessment and resulting ASC Improvement Plan.

10 CONSULTATION

- 10.1 Service users, ASC workforce, wider council staff and partners have been engaged in the CQC Local Authority Assessment process. A communication plan has been developed for B&NES staff and partners to socialise the ASC Improvement Plan.
- 10.2 ASC operations team (statutory services) met in December 2024 to review areas for improvement and commence action planning to inform the post CQC Assessment ASC Improvement Plan.

10.3 ASC staff have been briefed on the ASC Improvement Plan through team meetings with Assistant Directors, staff briefings lead by the DASS, Assistant Directors and Quality Assurance Lead and sent a copy of the ASC Improvement Plan.

10.4 The ASC Leadership Team will provide regular updates on progress against the ASC Improvement Plan to B&NES Community Safety and Safeguarding Partnership, Corporate Management Team, Integrated Care Board, Lead Member, Cabinet and Scrutiny Panel.

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Background papers	
Please contact the report author if you need to access this report in an alternative format	