

# LONDON BOROUGH OF CROYDON

<b>REPORT:</b>	<b>Cabinet</b>	
<b>DATE OF DECISION</b>	<b>15 May 2024</b>	
<b>REPORT TITLE:</b>	<b>Adult Social Care &amp; Health Peer Challenge – Findings &amp; Next Steps</b>	
<b>CORPORATE DIRECTOR / DIRECTOR:</b>	<b>Annette McPartland, Corporate Director, Adult Social Care &amp; Health</b>  <b>Bianca Byrne, Director of Commissioning, Policy &amp; Improvement, Adult Social Care &amp; Health</b> <a href="mailto:bianca.byrne@croydon.gov.uk">bianca.byrne@croydon.gov.uk</a>	
<b>LEAD OFFICER:</b>	<b>Bianca Byrne, Director of Commissioning, Policy &amp; Improvement, Adult Social Care &amp; Health</b>	
<b>LEAD MEMBER:</b>	<b>Councillor Yvette Hopley, Cabinet Member Health &amp; Social Care</b>	
<b>KEY DECISION?</b>	<i>No</i>	N/A
<b>CONTAINS EXEMPT INFORMATION?</b>	<i>No</i>	N/A
<b>WARDS AFFECTED:</b>	All	

## 1 SUMMARY OF REPORT

- 1.1** This report outlines the findings from the Adult Social Care & Health (ASCH) Peer Challenge that took place 21-23 November 2023, alongside the Directorate response and next steps. The full report is attached at Appendix 1, with a summary of our Assurance Improvement Plan containing key actions at Appendix 2.
- 1.2** ASCH invited the Local Government Association (LGA) to Croydon as a key part of our ongoing programme of continuous improvement and preparation for inspection. ASCH has a well-established Assurance Programme, convened in January 2023, and as a result undertaking a Peer Challenge exercise was an excellent opportunity to get an external perspective and temperature check on our self-assessed position and readiness for inspection.
- 1.3** A number of areas of good practice were confirmed through the review alongside key areas of improvement (a summary of the findings is contained at 4.7 in this report). Most notably the Peer Challenge confirmed that we know ourselves well, having clearly articulated to the Peer Challenge team our strengths and areas of challenge with evidenced, *'comprehensive and realistic transformation and improvement plans in*

*place which along with the adult social care and health strategy are monitored regularly and seen as living documents*<sup>1</sup>. As a result, the findings outlined in the report were aligned with our assessment of our current position and have enhanced our existing improvement plans.

- 1.4 Delivery of our Assurance Improvement Plan has continued in the intervening period, delivering ongoing improvements identified. A summary of the key deliverables is contained at 4.10 of this report.
- 1.5 ASCH is keen to publish our Peer Challenge report and assurance plan as part of our commitment to transparency and to support our ongoing work with our local communities and partners to deliver, '*continued positive change to ensure the best outcomes for the people of Croydon*'<sup>2</sup>.

## **2 RECOMMENDATIONS**

For the reasons set out in the report and its appendices, the Executive Mayor in Cabinet is recommended:

- 2.1 to note the findings of the ASCH Peer Challenge contained in Appendix 1, and summarised in 4.7 of this report;
- 2.2 to support next steps and the journey of continuous improvement the Directorate is undertaking, as set out in section 4.9 – 4.10 of the report and our Assurance Improvement Plan at Appendix 2;
- 2.3 to support publication of the Peer Challenge Report and our associated Assurance Improvement Plan.

## **3 REASONS FOR RECOMMENDATIONS**

- 3.1 The Health and Care Act 2022 put 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 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.
- 3.2 Inviting the LGA in to undertake an ASCH Peer Challenge is a key part of the Directorate's programme of continuous improvement and preparation for inspection, and as a result the next steps outlined are crucial to enabling the Directorate to respond well to our forthcoming inspection.

## **4 BACKGROUND AND DETAILS**

- 4.1 ASCH has a well-established Assurance Programme, convened in January 2023 to ensure improved delivery of ASCH functions and in preparation for the response to the CQC's new single assessment framework. The Programme Board meets monthly, chaired by the Director of Commissioning, Policy & Improvement, and is supported by

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<sup>1</sup> Preparation for Assurance, Peer Challenge Report, London Borough of Croydon, November 2023, LGA – p. 40

<sup>2</sup> Ibid – p.41

five thematic sub-groups – aligned to the four CQC themes along with a further themed sub-group focused on data and performance as this is a key risk identified on the ASCH and corporate risk register. The Assurance Board reports directly into the ASCH Departmental Management Team.

**4.2** As part of our preparations, and to confirm our self-assessed position and readiness, ASCH invited the LGA to undertake a Peer Challenge in November 2023, the focus of which was as follows:

- **The resident journey:** How well do we know our customer journey and what are the experiences and outcomes for people who use services and their carers?
- **Assurance, strategy and improvement approach:** How well do we identify areas of risk, challenges or opportunities that may impact on residents across Adult Social Care, (e.g., quality, performance, workforce and finance), and then drive and monitor improvement?
- **Partnership working:** To consider the upcoming assessments of Integrated Care Systems and highlight any place-based gaps, areas of innovation and best practice.

**4.3** Alongside this, the Peer Team’s work was focused on the CQC framework four themes for adult social care assurance. These are:

<b>Care Quality Commission Assurance themes</b>	
<p><b>Theme 1: Working with people.</b> This theme covers:</p> <ul style="list-style-type: none"> <li>• Assessing needs</li> <li>• Planning and reviewing care</li> <li>• Arrangements for direct payments and charging</li> <li>• Supporting people to live healthier lives</li> <li>• Prevention</li> <li>• Wellbeing</li> <li>• Information and advice</li> <li>• Understanding and removing inequalities in care and support</li> <li>• People’s experiences and outcomes from care.</li> </ul>	<p><b>Theme 2: Providing support.</b> This theme covers:</p> <ul style="list-style-type: none"> <li>• Market shaping</li> <li>• Commissioning</li> <li>• Workforce capacity and capability</li> <li>• Integration</li> <li>• Partnership working.</li> </ul>
<p><b>Theme 3: How the local authority ensures safety within the system.</b> This theme covers:</p> <ul style="list-style-type: none"> <li>• Section 42 safeguarding enquiries</li> <li>• Safeguarding Adult Reviews</li> <li>• Safe systems</li> <li>• Continuity of care.</li> </ul>	<p><b>Theme 4: Leadership.</b> This theme covers:</p> <ul style="list-style-type: none"> <li>• Strategic planning</li> <li>• Learning</li> <li>• Improvement</li> <li>• Innovation</li> <li>• Governance</li> <li>• Management</li> <li>• Sustainability.</li> </ul>

**4.4** Each theme is underpinned by a set of quality statements, as outlined in the report attached at Appendix 1.

- 4.5** The team were on site in Croydon for three days between 21st to the 23rd of November 2023. In arriving at their findings, the Peer Team:
- Held interviews and discussions with the Executive Mayor, Cabinet Members, Councillors, senior officers, partners, voluntary and community sector agencies, people who draw on services and carers.
  - Held meetings with managers, team leaders and frontline staff.
  - Read a range of documents provided by London Borough of Croydon, including a self-assessment (an objective, honest and authentic self-assessment of ASCH's strengths and areas for improvement, required as a key element of the CQC inspection), and completed a case file audit of twelve cases and further re-audit of five cases using the Customer Journey Case Tracking Audit Tool.
- 4.6** The Peer Team was given access to approximately 300 documents including a self-assessment. Throughout the Peer Challenge, the team had more than 34 meetings with at least 140 different people, spending over 184 hours with us - the equivalent of 24.5 working days.
- 4.7** A key finding from the Peer Challenge is that we know ourselves well, having clearly articulated to the peer team the areas of challenge, gaps, improvements and support required in both our self-assessment and introduction session with the peer challenge team. This will be critical to the forthcoming inspection alongside having, *'comprehensive and realistic transformation and improvement plans in place which along with the adult social care and health strategy are monitored regularly and seen as living documents'*<sup>3</sup>. As a result, the areas outlined in the report were aligned with our understanding of our current position, and as such enhance our existing improvement plans.
- 4.8** A summary of the findings – strategic and operational – contained in the report are as follows:

Theme 1: working with people
<b>Strengths</b>
<ul style="list-style-type: none"> <li>• Community Led Support and community support framework, including Simply Connect, Community Hubs and PICs.</li> <li>• 'Large and impressive' Managing Demand programme with focus on early intervention and prevention.</li> <li>• Culture shift 'away from care management to a strengths and asset-based approach'.</li> <li>• Carers Quality Improvement Initiative including early identification, Strategy, commissioning of whole family approach.</li> <li>• Reduction in waiting lists for needs assessment.</li> <li>• One Croydon Health &amp; Care Plan – focus on early intervention and prevention.</li> </ul>

<sup>3</sup> Ibid, p.40

**Areas for improvement**

- Hearing the voice of the resident – ‘often not very well heard in recorded good conversations and support plans’.
- Direct Payments offer and pathway.
- Occupational Therapy offer and pathway.
- Carers respite and waiting list.
- Timely completion of reviews and delivery of step-down and reduction in packages of care where appropriate.
- Role and involvement of Public Health in ASCH delivery of early intervention and prevention.
- Technology Enabled Care offer and pathway.

**Theme 2: providing support****Strengths**

- ‘Robust’ Market Position Statement, market shaping and sustainability with focus on care outcomes.
- Robust performance management arrangements for provider market, and relationship with CQC.
- Locality Commissioning Model ‘stands out as a superior alternative to traditional commissioning delivery’.
- Healthy Communities Together Programme, including development of ICN+.
- Review and redesign of hospital discharge pathways (Frontrunner programme).

**Areas for improvement**

- Communication and responsiveness to providers requesting review due to increase in needs, and timeliness of payments.
- Continuing Health Care (CHC) process and protocol.
- Relationship with Housing and associated pathways, e.g. supported housing provision, extra care.
- Equity of mental health social care provision (administered through section 75 arrangements) to other client groups regarding quality, service delivery and fulfilment of statutory duties.

**Theme 3: How the Local Authority ensures safety within the system****Strengths**

- Safeguarding Adult Review reports, Croydon Safeguarding Adults Board maturity and partnership working.
- Active Lives service and support for transitions.

**Areas for improvement**

- Safeguarding pathway and allocation of resource.

<b>Theme 4: Leadership</b>
<p><b>Strengths</b></p> <ul style="list-style-type: none"> <li>• Voice of the Director of Adult Social Services (DASS) at CMT and relationship with DMT, Executive Mayor and Cabinet Member.</li> <li>• ASCH vision and strategy, ‘continued positive change to ensure the best outcomes for the residents of Croydon’.</li> <li>• Visible and approachable leadership, with open door policy in place.</li> <li>• Representation of residents on key boards, e.g. Managing Demand, CSAB and Scrutiny.</li> <li>• Assessed &amp; Supported Year in Employment (ASYE) Programme.</li> <li>• Principal Social Worker role.</li> </ul>
<p><b>Areas for improvement</b></p> <ul style="list-style-type: none"> <li>• Data maturity, performance and intelligent use of data reporting – imperative for enhanced business intelligence and support, including for LAS.</li> <li>• Delivery of routine audits.</li> <li>• Staff morale, wellbeing and culture.</li> <li>• Enhancing awareness of Directorate’s functions and statutory requirements for members and Scrutiny.</li> </ul>

- 4.9** Next steps following receipt of the Peer Challenge report have been as follows:
- Findings and recommendations have been cross-referenced with established assurance improvement plan to ensure consistency;
  - Report and findings have been shared with the Corporate Management Team, Mayor’s Advisory Board, in key partnership forums such as the One Croydon Alliance Senior Executive Group (SEG) and our Resident Voices Group, with partners who contributed to the Challenge such as Voluntary & Community Sector and provider colleagues, and with the Improvement & Assurance Panel;
  - A workshop with Scrutiny members to talk through the report and findings, and a planned deep dive into the Directorate functions to support Scrutiny with a deeper understanding of the role and statutory functions of ASCH;
  - Preparing for publication of the report on the Croydon Council website, with supporting communications strategy and plan;
  - Key documentation, including the self-assessment document, have been reviewed and updated to ensure they are current and consistent with findings;
  - Officers continue to work across directorates, supported by CMT, to address the wider issues identified.
- 4.10** In addition, the ASCH Assurance Programme and supporting sub-groups continue to drive forward continuous improvement across the Directorate in accordance with our Assurance Improvement Plan. Key deliverables achieved since the Peer Challenge exercise was undertaken in November include:
- A reduction in waiting list times for Carers Assessments through increased funding for the Carers contract;
  - The launch of the Multiverse data academy for staff, through which 40 officers from across ASCH and our performance and finance business partners have started their Level 3-6 Diplomas to improve our digital and data capabilities;
  - The completion of an audit of 100 cases in strength-based practice, and corresponding development of an enhanced training offer for staff;

- Recruitment of a Mental Health worker to support early intervention through the Adult Early Intervention & Support Service (the ASCH 'front door'), providing enhanced support for complex cases with dual diagnosis;
- Established a structural review of the Mental Health operating model and contractual arrangements in partnership with health colleagues;
- Improved service efficiency and response time to residents through implementation of a portal for Occupational Therapy referrals;
- Launched the Transfer of Care Hub in Croydon University Hospital as a key part of the redesign of hospital discharge pathways;
- Implemented the revised Health & Wellbeing Board constitution.

## **5 ALTERNATIVE OPTIONS CONSIDERED**

None. Delivery of our Peer Challenge and associated Improvement Plan is part of our approach to continuous improvement and preparation for inspection.

## **6 CONSULTATION**

The report outlines the breadth and depth of consultation that took place during the Peer Challenge to inform the findings and recommendations.

## **7 CONTRIBUTION TO EXECUTIVE MAYOR'S BUSINESS PLAN**

- 7.1 Delivery of the Assurance Improvement Plan contributes to the following Council Priorities set out in the Mayor's Business Plan:
- i. The Council balances its books, listens to residents and delivers good, sustainable service.
  - ii. People can live healthier and independent lives for longer.

## **8 IMPLICATIONS**

### **8.1 FINANCIAL IMPLICATIONS**

- 8.1.1 There are no financial implications arising from this report, all improvement work is being managed through existing resources.
- 8.1.2 Comments approved by Head of Strategic Finance – Adult Social Care & Health on behalf of the Director of Finance (10/04/2024).

### **8.2 LEGAL IMPLICATIONS**

- 8.2.1 CQC assurance arrangements are intended to provide assurance that Local Authorities are delivering their legal responsibilities under Part 1 of the Care Act 2014 and other relevant legislation.
- 8.2.2 Section 6 of the Local Authority Social Services Act 1970 requires the Council to appoint a Director of Adult Social Services [DASS] for the purposes of its social

services functions, other than those for which the Council's Director of Children's Services [DCS] is responsible under Section 18 of the Children Act 2004.

- 8.2.3 Those statutory social services functions are set out in Schedule 1 to the Social Services 1970 Act, as updated and amended.
- 8.2.4 Sections 7 and 7A of the 1970 Act require the Council to exercise their social services functions under the general guidance and directions of the Secretary of State and Section 78 of the Care Act 2014 applies similarly to guidance issued in respect of the specific social services functions under that Act.
- 8.2.5 The outcomes from the Peer Challenge will therefore assist the Council in the provision of its statutory social services functions.
- 8.2.6 Comments approved by the Head of Social Care & Education Law on behalf of the Director of Legal Services and Monitoring Officer (15/04/2024).

### **8.3 EQUALITIES IMPLICATIONS**

- 8.3.1 The Council has a statutory duty to comply with the provisions set out in Section 149, Equality Act 2010. The Council must therefore have due regard to:
  - (a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act.
  - (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.
  - (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 8.3.2 The protected characteristics defined by law are race and ethnicity, disability, sex, gender reassignment, age, sexual orientation, pregnancy and maternity, religion or belief, marriage and Civil Partnership.
- 8.3.3 Delivery of our assurance improvement programme will address any inequalities in service provision identified.
- 8.3.4 Comments approved Senior Equalities Officer on behalf of Head of Strategy & Policy (10/04/2024).

## **9 APPENDICES**

A LGA ASCH Peer Review Report

B ASCH Assurance Improvement Action Plan