

COUNCIL
28 SEPTEMBER 2023

OVERVIEW OF ADULTS SCRUTINY COMMITTEE

1. Since the last meeting of the Council, the following are the main areas of work the Adults Scrutiny Committee has undertaken.

Care Quality Commission Regulatory Framework (as it applies to Older Persons Residential and Domiciliary Care)

2. The Committee were pleased to welcome representatives from the Care Quality Commission (CQC), who gave a presentation on the role and purpose of the CQC, and provided an overview of how the CQC will be registering, monitoring, inspecting and rating in the future, in light of the reforms outlined in the Health and Care Act 2022.
3. Members were informed that the changes would allow the CQC to provide greater focus on care across local areas or systems, use the new regulatory powers effectively to improve people's care, make regulation less complex and more efficient, regulate in a smarter way, and work better with the sector as it also changes. It was stated that the new approach would embrace new technology, the adoption of a new Single Quality Assessment Framework for all service types and at all levels, the introduction of multidisciplinary teams, and use new powers to review and assess Integrated Care Systems and local authorities.
4. Particular focus was given to the development of the Single Quality Assessment Framework, which was being introduced to replace the four separate frameworks currently adopted, and would be used to assess all service types. It was noted that the ratings and five key questions would remain central to the CQC's approach, however the existing key lines of enquiry and prompts would be replaced with 'quality statements', and that the CQC was moving away from separate monitor, inspect and rate steps, assessing providers in a more flexible way.
5. Members were advised on the interim guidance, subject to Government approval, which set out the high level framework for the oversight of local authorities, focusing on an initial baselining period. The four themes which would provide the initial focus of local authority assessments were outlined, together with the two quality assessments, and Members were provided information on the five pilot assessments that were currently taking place. Similar information was also provided in relation to the assessment on Integrated Care Systems.
6. Members entered into discussion on the level of influence local authorities had on private contractors within the Care Sector, and how the Single Quality Assessment should assist with the strive for consistency, and Members questioned how consistent rating in the past could have been achieved without a Single Quality Assessment. Members questioned whether the methodology of the Single Assessment Framework could be manipulated, but were reassured that the focus would always remain on the fundamental standard of care,

and observed that the pilot authorities did not necessarily reflect the situation in Darlington. Discussion continued on the pilot process for the Single Assessment Framework, and it was acknowledged that the Framework would evolve throughout the pilot process, as would the way in which the CQC reported its findings.

7. Focus turned to the Integrated Care System assessments, and Members were keen to learn more on how the CQC would compare equity of access and ensure consistency, and there was a recognition that there would be a need for place benchmarking.
8. The Committee were grateful for the opportunity to hear from representatives from the CQC, especially during a period of substantial change, and it certainly assisted to develop the knowledge of the Committee.

Autism Strategy Update

9. We received an update on the Autism Strategy from the Assistant Director – Adult Services, the Director of Place, North East and North Cumbria Integrated Care Board (ICB), the Care Group Director, Durham Tees Valley Care Group, Tees, Esk and Wear Valley NHS Foundation Trust (TEWV), and colleagues from the Tees, Esk and Wear Valley NHS Foundation Trust.
10. The Committee was initially provided with an overview of the national context, including the range in terms of the level of support required, the legal obligations and the statutory framework, and the overall costs associated with Autism, before receiving information on the context in relation to Darlington, which included TEWV diagnostic waiting times, and the number of cases within Adult Social Care, broken down by the primary support reason.
11. The six priority areas of focus for the strategy were outlined, namely Improving Understanding and Acceptance of Autism within Society; Improving Services for Autistic Children and Young People, Access to Education and Supporting Positive Transitions into Adulthood; Supporting More People into Employment; Tackling Health and Care Inequalities for Autistic People; Building the Right Support in the Community and Supporting People in Inpatient Care; and Improving Support into the Criminal and Youth Justice Systems, and detailed actions alongside each priority area were discussed. The presentation concluded with a number of recommendations and actions that were taking place throughout 2023.
12. We were keen to explore the diagnostic waiting times, noting 46 cases where the waiting time for diagnosis exceeded more than 12 months, and questioned the frequency of contact during the waiting period and enquired whether those targets were met. The Committee were interested to learn whether there were sufficient assessors to meet demand, and the length of time it took an individual to qualify as an assessor. Discussion progressed on to the nature of assessment, and we were eager to establish how long the assessment process took. Focus then turned to the training and support available to those staff and carers who care for people with autism.
13. Our discussion returned to the support offered following an autistic diagnosis, with an acknowledgement that support had not always been as forthcoming in the past, however it was recognised that there was now much greater awareness and a developing cultural

change, with greater training available and the provision of a service offering reasonable adjustments personal to the individual, though it was suggested that some services could be cost prohibitive.

14. Concerns were raised that not all cases were being signposted to the correct support, or were being addressed by practitioners who had not received appropriate autism awareness training. It was also suggested that young girls and young women were 'masking', and that there was a need for greater diagnosis in this cohort. We were reassured that there was a greater awareness around autism in women and teenagers, however we were advised that if they were aware of negative experiences this should be fed back and practice reflected upon.
15. It was noted that this work cut across the remit of three of the Council's Scrutiny Committees (Adult Scrutiny Committee, Children and Young People Scrutiny Committee and the Health and Housing Scrutiny Committee), and that consideration should be given by the Monitoring and Coordination Group as to how any future work in this area be taken forward.

Managing a Nursing Care Home in Darlington

16. We heard from a Care Home Manager from one of the Care Homes in Darlington, who provided the Committee with the view of a front-line manager, giving an overview of what it was like to work in a Care Home during the Coronavirus pandemic, which resulted in the greater use of new technology, closer working relationships with the Council's Contracts Team, and a greater appreciation and understanding of other roles within the Care Sector.
17. It was suggested that workloads remained high following the Coronavirus pandemic, and whilst the greater use of technology assisted, there was still an emphasis on face-to-face contact with service users and families.
18. We observed that there still seemed to be a number of constraints around service provision, and speculated as to whether this was still a fall out from the Coronavirus pandemic, or whether the current high cost of living was having an impact.
19. The Committee was keen to understand whether there were any practices introduced during the Coronavirus pandemic that improved service delivery, and whilst the technological and communication improvements were welcomed, it was stated that the focus should remain on person-centred care.
20. Discussion ensued on the issues in relation to recruitment and retention within the Care Sector, and the training opportunities available for staff, both to upskill at the current level and to progress within the sector, and whether organisations and care settings shared training and good practice.

Care Homes in Executive Strategy Management Arrangements

21. The Head of Commissioning and Contracts provided Members with a presentation on the quality and contract monitoring of Care Homes, and the support provided by Adult Services in relation to the Executive Strategy Management (ESM) process.

22. We were advised on the development of an Executive Strategy Management Action Plan, and the themes contained within such plans, which have previously included Management and Leadership of Care Home, Culture, Recruitment and Retention practices, Safety and Welfare of Residents, Staff Training and Development, Management of Medication and Poor Record Keeping.
23. Members were informed of the number of Executive Strategy Management interventions over the course of 2021/22, 2022/23 and 2023/24 to date, and provided with the most recent ratings by the CQC for the Care Homes in Darlington.
24. We entered into discussion on the appropriate utilisation of staff within Care Homes, the spike in ESMs in 2022/23 and the lessons learnt, and the consequences and reparations attached to ESM. Members were keen to understand how the Council ensured that self-funders continued to receive the same level of care should a contractual breach lead to a reduction in fees payable from the local authority, and what timescales were involved to improve if the CQC deemed services to be inadequate or required improvement.

Councillor Helen Crumbie
Chair of Adults Scrutiny Committee