Divisions Affected - All

People Overview and Scrutiny Committee
14 September 2023

Adult Social Care Assurance Update

Report by Karen Fuller, Interim Corporate Director of
Adult Social Care

RECOMMENDATION

1. **The Committee is RECOMMENDED to**

   - Note the update provided on preparations for the implementation of CQC Assurance
   - Note the update provided on key areas of strength and work being undertaken on key priority areas for development

Executive Summary

2. This report provides an update on work undertaken to prepare for the introduction of CQC Assurance of Local Authorities and the outcomes of self-assessment work. It includes information on the approach that CQC will take to assurance and the role of Scrutiny and Elected Members. The report highlights our identified key strengths and key priority areas for development.

Background

3.1 The Health and Care Act 2022 introduced a new duty for the CQC to independently review and assess how Local Authorities are delivering their Care Act functions. From 1st April CQC has powers to assess local authorities in England, looking at how well they meet their duties under the Care Act (2014).

3.2 CQC has published interim guidance on their approach to Local Authority Assessment ([here](#)) and their draft assessment framework on 20th March 2023 ([here](#)). Between April and September 2023, CQC has been undertaking an initial assessment phase reviewing published data and documentation across all local authorities with a focus on two quality statements:

- Care provision, integration and continuity
- Assessing needs

3.3 The purpose of this work was to seek insight into access to care and support, commissioning, market shaping, workforce and personalisation. They will not publish data or evidence at an individual local authority level at this stage but publish a thematic review of their findings in the autumn.

3.4 During this period, they have also been undertaking five pilot assessments in order to further develop their approach to local authority assessments and ensure it is meaningful and effective. This follows on from two test and learn activities undertaken in 2022 with Manchester City Council and Hampshire County Council. The five pilot sites are:

- Birmingham City Council
- Lincolnshire County Council
- North Lincolnshire Council
- Nottingham City Council
- Suffolk County Council

3.5 CQC are currently developing how they will select the first local authorities to be assessed and will incorporate their learning from the pilots into their approach. Formal assessments will start later in 2023 and it is anticipated that all local authorities will be assessed during a 'baseline' period up until August 2025. The CQC will work with local authorities, DHSC, the LGA and ADASS about how best to publish their findings and will only start to do so when they have gathered enough evidence to make a judgement.

3.6 Responding to the new assessment and assurance approach will require support from the whole council and from elected members. Learning from recent LGA peer reviews, which have been modelled to support local authorities in their preparation for assurance, has indicated the vital role of political leadership and the role of scrutiny in providing challenge and oversight for adult social care will be a key part of this.

Assurance Preparation

4.1 CQC will assess local authorities against four key themes supported by a series of 'I statements' and quality statements. The themes and quality statements are:

Theme 1: Working with people

- Assessing needs
- Supporting people to live healthier lives
- Equity in experiences and outcomes

Theme 2: Providing support

- Care provision, integration and continuity
- Partnership and communities

Theme 3: How the local authority ensures safety within the system

- Safe systems, pathways and transitions
- Safeguarding

Theme 4: Leadership

- Governance, management and sustainability
- Learning, improvement and innovation

Approach to Self-Assessment

5.1   During the assurance process CQC will request a range of evidence from local authorities.   A key element of this will be a self-assessment providing an authentic narrative describing adult social care, supported by data and personal experience. This self-assessment will be an iterative document providing an opportunity to set out Oxfordshire's narrative, describe our strategy, offer reflection of our key strengths and ambitions and outline our plans for continuous improvement.

5.2   There has been robust engagement with a wide range of staff groups in the development of the self-assessment and a supporting library of evidence. Care providers have been engaged through workshops held in January and February regarding our market sustainability planning, and a survey for care providers invited their views on how we work with them.   Feedback from this has been built into our self-assessment narrative.   The views of people with lived experience are a key element of the new CQC assurance framework. Adult Social Care is committed to co-design and keeping the voice of people who use services at the heart of everything we do. The initial self-assessment has drawn on both pre-existing sources of evidence of local people's views and listening events held in local areas and learning from these has been incorporated into our assessment and action plan.

5.3   The conclusions from this self-assessment will be tested with partners, staff, providers and people with lived experience and an External Reference Group which is currently in development will provide support and challenge to this process. A quarterly process of formal refresh and review has been implemented and will ensure that there is robust oversight of implementation of improvement and delivery of key priorities.

5.4   Our self-assessment identifies the 'golden thread' between the council corporate priorities and Adult Social Care service priorities.   It emphasises that the Oxfordshire Way is our vision to support the people of Oxfordshire to live well in their community and remain fit and healthy for as a long as possible. The Oxfordshire Way priorities set the context for our self-assessment, demonstrating

our ambition to promote resilience, independence and the strength of community assets.

Ownership of Assurance Preparation

6.1 It is recognised that our assurance preparation, self-assessment, and continuous improvement journey are key elements of living our values and always learning. As such our preparation for assurance is owned by senior leaders, supported by an Assurance Lead (post currently being recruited to) and programme management support.

6.2 There is a robust governance process in place with a Quality and Assurance Project Board that has driven development of our self-assessment and maintains oversight of the improvement plans. The Senior Responsible Officer is the Interim Deputy Director for Adult Social Care. The Board reports to Adult Social Care Directorate Leadership team, Senior Leadership Team and Informal Cabinet through monthly updates. There is an established process for the escalation of risk.

Self-Assessment Key Strengths

7.1 Our self-assessment identified a wide range of strengths:

- The Oxfordshire Way provides a vision and commitment to prevention, delay of formal support, and innovation delivering real impact for our residents

- There is understanding in teams that strengths-based practice supports people to have control over their lives

- There is a strong focus on supporting people in communities

- There is strong leadership with clear vision, well understood roles and practice leadership

- There is strong partnership working including with the community and voluntary sector

- Robust joint commissioning arrangements are in place with significant pooled budgets

- We have a commitment to innovation and digital transformation

- There is a strong commitment to equality and diversity evident in strategies and priorities

- Oxfordshire is active in sector-led improvement

7.2 The Oxfordshire Way is our vision for adult social care, a compelling narrative for the transformation of adult social care which we have been implementing over the past two years. It is unique because it is co-created and owned by Adult Social Care, the Social and Healthcare Team and the voluntary sector at all levels. The Oxfordshire Way is focused on providing people with the ability to identify and use their own strengths and assets to support themselves through person, local and system assets to 'keep them in the centre'. We want the people of Oxfordshire to live well in their community, remaining fit and healthy for as long as possible.

7.3 Oxfordshire Way priorities are for

- Greater resilience within our communities
- Increased independence and social connections
- A better experience for people who are seeking or receiving support
- Greater satisfaction for people in need of support, our communities and our partners
- Improved relationships and ways of working for staff and colleagues
- Reduced demand on formal care services due to proactive and preventative community outreach.

7.4 The Oxfordshire Way underpins everything we do and illustrates our commitment to prevention, innovation, and work in partnership with the voluntary sector and other partners. Partners are embedded in governance including in the Promoting Independence and Prevention Group and Transformation Group, which support and drive delivery of our prevention agenda and the Oxfordshire Way.

7.5 Prevention is at the heart of our approach through a range of strategies including a robust multi-agency prevention framework overseen by the Health and Wellbeing Board, a mental health prevention framework and Community Mental Health Framework.

7.6 We have robust processes in place to signpost and provide information to those who do not need formal services. We have a strong information offer through our Live Well Oxfordshire website which attracted over 80,000 visits last year, an increase of 36% since the previous year, and which we have been working to redesign in co-design with people with lived experience. We commission Age UK to provide Community Links Oxfordshire which gives residents local information and connects them into their community. Community Links Oxfordshire supports people to be as independent as possible and live life to the full, the way they want to. It ensures people are enabled to find out about what support and opportunities exist in their local area. As a result of this kind of innovative preventative working our customer service centre resolved 75% of issues at the point of first contact in the last year.

7.7 We have a strong focus on supporting people in communities through initiatives such as community capacity grants, additional extra care housing places and an all-age accommodation framework for people with complex needs.

Community capacity grants are demonstrating real impact on people's lives through supporting small organisations who work more directly with our communities. For example, a grant of £9282 to Gig Buddies has enabled them to bring together volunteers with members with learning disabilities to support them to do fun and interesting things like going to football matches, concerts or museums. Daybreak, a charity specialising in providing activities for people with dementia and offering respite for carers has benefited from a grant of £9809 that has supported them to work with more than 1500 people by funding specialist equipment, nutritious meals and further staff training.

7.8   As part of the Oxfordshire Way and our commitment to doing things differently the council commissioned Community Catalysts to stimulate the growth of micro-enterprises, focused on parts of the county where traditional care providers have a lower presence. This resulted in 81 community micro enterprises (CMEs) currently supporting 1,028 people with 3,214 hours of support.

7.9   Oxfordshire Community and Voluntary Action host 'communities of practice' bringing together people who work with adults in the community. They are a way for staff and volunteers from the community and voluntary sector, social services, primary care, housing associations and more to come together, discuss, learn, and collaborate.

7.10   Through implementation of the Oxfordshire Way, we have seen a 23% reduction in the number of people waiting for a social care assessment since April 2021, and the longest wait time for an assessment fell by 40%. This is an ongoing improvement journey which requires relentless focus, and we continue to work with our partners to implement change and improve timeliness and outcomes. A video highlighting the impact of the Oxfordshire Way for local people can be found here.

7.11   Our ASCOF outcomes for 2021/2022 (most recently published data) demonstrate that we perform better than average on 64% of all measures. Service users and carers say our services impact positively on their lives, that they have choice and control over their lives and services and carers tell us we consult them in decisions about the person they care for. In 2022/23 we have seen an increase in overall satisfaction with services (increased by 0.8%) and a continued improvement in the already high number of working age adults we support at home rising by 0.3% over the last 12 months, together with a reduction in care home admissions.

7.12   Health, Education and Social Care Joint Commissioning Team (HESC) was established in spring 2021 to deliver the Joint Commissioning Executive's (JCE) programme for Oxfordshire. The JCE is the formal governance forum between the council and NHS with delegated authority for the integration and transformation of commissioning arrangements. JCE Terms of Reference are being reviewed in the light of the establishment of the Integrated Care Board (ICB) and the development of Provider Collaboratives.

7.13 The HESC team forms part of the Corporate Directorate of Adult Services in Oxfordshire County Council (OCC); it comprises staff employed by the council and the NHS (BOB ICB) with some posts designated specifically as integrated roles.

7.14 An important element of HESC's role is the commissioning of integrated services funded through extensive pooled budgets (over £400m in 2023/24), governed by the Section 75 Agreement between the county council and ICB. However, children's services are not covered by the S75, and the work of the Brokerage, Quality Improvement and Strategy & Innovation teams are not jointly funded.

7.15 Our Better Care Fund plan was developed with partners including health and voluntary sector, through stakeholder workshops targeting prevention, delay to formal support, a Home First approach to hospital discharge, health inequalities and integrated care and support.

7.16 During the first two years of HESC we have invested significantly in the ongoing professional development of staff members through IPC accredited courses for commissioning and brokerage, as well as the general commitment to in-house council training. This commitment will be sustained for new recruits where they require technical skill development.

7.17 We engage our care providers in order to better understand and shape our market. In 2022 we commissioned LaingBuisson to work with our providers to undertake the cost of care exercise required by the government to support the planned implementation of charging reform. The outcome of the cost of care exercise can be found here. The Oxfordshire Association of Care Providers (OACP) and Healthwatch Oxfordshire were members of the Fair Cost of Care Project Board to ensure transparency of the process and seek their views on wider market engagement. We worked with care providers in the development of our Market Sustainability Plan and refreshed Market Position statement. Proposals for winter funding around recruitment and retention were planned through a workshop with providers, and we undertake consultation with providers on fee uplifts.

7.18 We are working with care providers to support them in what we recognise can be significant workforce challenges attributable to four key factors:

- Increasing demand for care and support, as the population of Oxfordshire grows and ages
- Challenges in recruiting new entrants to social care
- Increasing skill levels required for adult social care work, as people's needs become more complex
- Challenges in retaining staff in the sector due to comparable or better pay in other sectors, for less demanding roles

7.19 A draft workforce strategy has been developed in collaboration with key stakeholders, including care providers, which sets out the challenges facing the workforce and how together we plan to respond to these. We are now seeking feedback on this draft strategy (here) to help us shape a delivery plan for the next

three years to ensure Oxfordshire has a highly skilled, resilient and diverse workforce that can provide quality care and support to residents who need help and support.

7.20 The Housing service delivers three core functions:

- Strategic – defining housing needs to determine the levels and location of supply of accommodation, policy and strategy development, leading and involvement in strategic and implementation groups, such as Homeless Mortality Reviews, Domestic Abuse Safe Accommodation, Accommodation Programme Board.
- Commissioning – supporting HESC commissioners to enable housing provision, homeless agencies commissioning, Children, Education and Families (CEF) housing commissioning
- Housing expertise – support and advice system wide

7.21 Supporting people to live independently in their own self-contained home, with care and support where needed, is a key focus of the Oxfordshire Way and we are investing £5m to deliver 25 additional supported living placements in Oxfordshire for people with a learning disability and/or autism through our Resonance project. In addition, we have commissioned additional extra care housing provision with 3 new Extra Care Housing schemes opening their doors over the past year establishing a total of 235 new units. We have an ongoing focus on developing extra care housing as an alternative to residential care, and over the last 12 months have seen a 12% increase in people being supported in extra care housing with planned care.

7.22 We are in the process of commissioning a specialist housing & supported living needs analysis. With this robust data we will be in a better position to influence the number of homes in the community by providing an evidence base for the planning process and engaging in the develop of the Districts & City local plan policies that are at various stages of review consultation.

7.23 Oxfordshire's political and executive leaders are well informed about the potential risks facing adult social care and governance arrangements are in place to ensure they are kept updated on issues. There are regular briefings with the Cabinet and portfolio holder and wider Members. Savings plans are aligned with our overall priorities and take a transformational approach to improving efficiency.

7.24 We have a strong commitment to equality and diversity embedded in strategies, service plans and priorities. Oxfordshire's 'Including Everyone' framework sets out our vision which highlights inequalities within our communities, and Public Health have worked with local partners to create community profiles setting out both the local health needs of these areas and their community assets. The values of integrity, equality and diversity are a strong focus of the council's Delivering the Future Together programme which sets out our organisational values and behaviours and is firmly embedded in all our council teams including Adult Social Care. Senior leaders have completed training in the programme and live the values alongside the workforce. Our supervision

guidance refers to the programme and the values base and encourages managers to consider members of the team who may have protected characteristics and how any support may need to be adapted to accommodate this.

7.25 In establishing the Oxfordshire Home First pathway, we have moved into a 'system led' space with our health and voluntary sector colleagues. Joint accountability for change and investment in the pathway was achieved through collaborative working on a daily basis with our acute and community health colleagues. This integrated way of working continues to ensure all stakeholders are aligned in our ambitions for the service and outcomes for the people of Oxfordshire being supported by Home First. Positive working relationships have been forged between organisational leads which have then been modelled and adopted throughout the pathway to achieve a 'one team' feel. Joint recruitment strategies are in place between OCC and Oxford Health, and we continue to develop secondment and rotational opportunities.

7.26 This joint accountability has been mirrored in the recent development of the Oxfordshire Transfer of Care Hub.(ToC) which has been successfully implemented across all discharge pathways. Council teams have worked together with our Health colleagues to establish a truly multidisciplinary forum for all discharges to be discussed. This collaborative way of working ensures equitable decisions are made, that a Home First approach to discharge is adopted and that learning and cross fertilisation of skills are the new culture, and ultimately the outcomes for the person are optimised.

Key Identified Development Priorities

8.1 Our self-assessment has supported a focus on key areas for further development:

- Timeliness of Assessment, Reviews and Safeguarding
- Embedding co-design and tackling inequalities
- Use of Data and Monitoring Our Performance
- Widening Channels of Assessment
- Digital and Innovation
- Engaging with the Care Market
- Learning and Development
- Good Access to Information and Advice

Timeliness of Assessment, Reviews and Safeguarding

9.1 The Oxfordshire Way has had a significant impact leading to a reduction of 23% in the number of people awaiting a social care assessment between April 2021 and July 2023 and the longest wait time for an assessment fell by 40% over the same period. However, we recognise this is an ongoing improvement journey, and over the last 12 months both demand and the numbers of people

waiting for an assessment have begun to rise again and some people tell us assessment is taking too long for them. Managing demand is a key challenge for local authorities across the countries and it is therefore vital that we target this as a key priority area.

9.2 The number of people receiving long-term support has risen by 3.1% over the past year and in July 2023 6476 people were being provided with support. Proportionally the greater part of these are being supported at home, with a 11.3% increase in provision of home care, but we have also seen a 2% increase in the number of people supported in care homes. However, it should be noted that the number of people aged 65 and over being supported in care homes is still significantly lower than pre-pandemic (5.8% lower in July 2023 than July 2019), and the number of permanent care home admissions for those 65+ (358 per 100,000 population) is relatively low compared to available England figures (369.5 per 100,000 population in 2021/22 in Oxfordshire compared to 539 per 100,000 in England which is the most recent published data). There has also been a 12% increase in people supported with planned care in extra care housing.

9.3 Increased demand has been mirrored in increases in waiting times. Although over the last two years the number of people on the waiting list has fallen from just under 1800 in April 2021 to just under 1400 in July, the current trend data shows that waiting times have started to rise over the last 12 months (Figure 1).
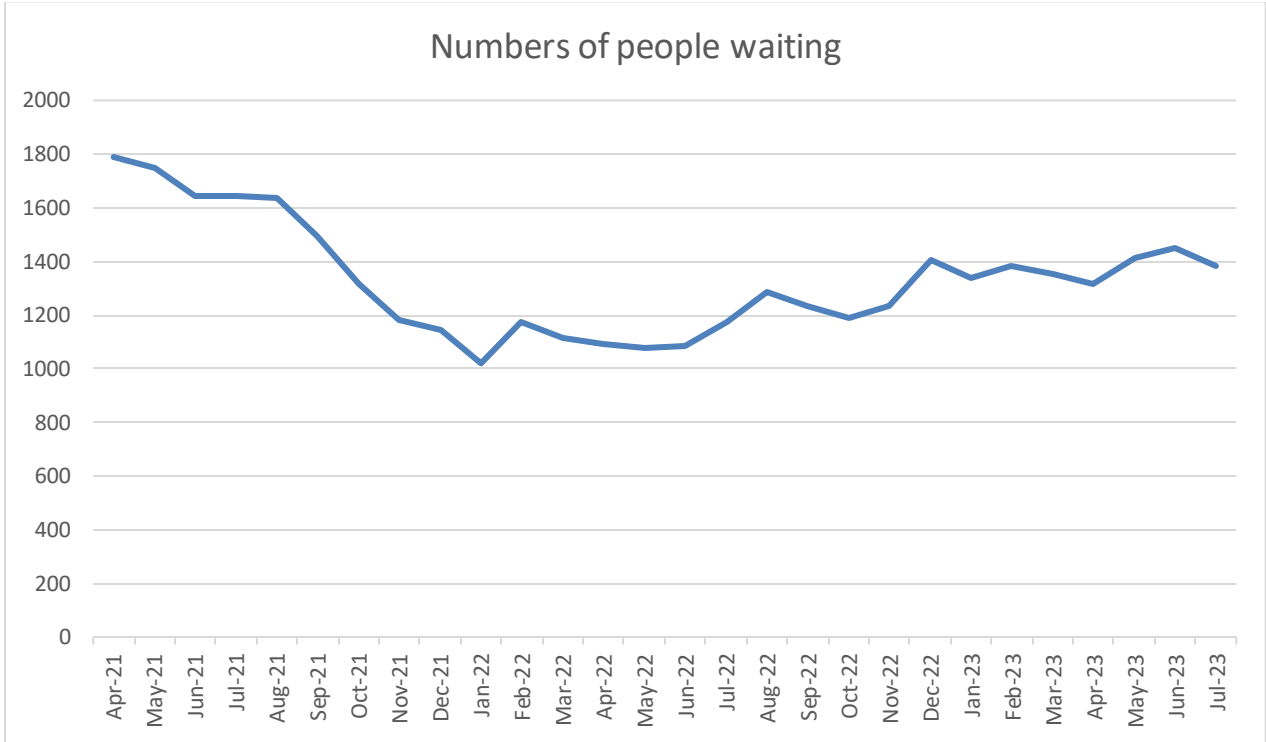

Figure 1

9.4 Longest waiting times have also fallen since April 2021 by 40% but are still a key area of focus at 131 days. The mean average wait was 108 days in July 2023 and the median 81 days, compared to an average of 103 days and a median of 84 days in April 2021. Of those on our waiting list in July 2023 28% already had a support plan.

9.5 People on the waiting list are screened and prioritised in order to ensure we are appropriately managing risk, utilising a prioritisation tool at point of referral to categorise referrals and alert teams to urgent referrals. This is further screened by practice supervisors to provide verification and determine action required. Screening best practice guidance is provided as a supportive tool for practitioners to use to manage risk on the waiting list and to continue to progress people waiting, ensuring all onward referrals are made in line with the Oxfordshire Way, for example through referrals to Community Links Oxfordshire, Dementia Oxfordshire, and referrals for carers assessments. The Adult Social Care Forum brings practitioners together to check on consistency of practice, strength-based practice and embedding of the Oxfordshire Way at the point of support planning.

9.6 In addition to the risk management and prioritisation of our waiting list we continue to take an ambitious approach to delivering the Oxfordshire Way and have a robust action plan in place to scrutinise and reduce waiting times further. The Principal Social Worker and Principal Occupational Therapist have undertaken an audit of our waiting list, reviewing 144 people, 72 on the allocation waiting list for a social worker and 72 on the allocation waiting list for an occupational therapist. The audit suggests that the majority of prioritisation screening is accurate but that there is some inconsistency of practice across different teams and that teams are not always consistently evidencing how they are managing risk, and people are not always being contacted in a timely manner. This scrutiny through audit enables a targeted approach to work with our teams to ensure that only those in need of adult social care remain on the waiting list and those who would benefit from alternative signposting or community connection receive swift advice. There is a plan in place to deliver sustainable reductions in the number of those waiting over the next three to six months. This action plan has SMART targets, and its delivery will be monitored by a weekly Meaningful Measures meeting commencing in September overseen by the Deputy Director for Adult Social Care and the Social and Health Care Team. Progress will be reported to Internal Assurance and Governance Board and Adult Social Care's Directorate Leadership Team.

9.7 In 2022/23 Adult Social Care in Oxfordshire dealt with 6770 safeguarding concerns. Demand into the Safeguarding Team continues to increase as the number of concerns raised has increased by 14% from 2021/22 to 2022/23. Enquiries have also risen over the same period by 10.5% (Figure 2).

9.8 National Adult Safeguarding procedures do not set definitive timescales for safeguarding, but in Oxfordshire we have set robust internal guidelines:

- Concerns should be raised on the same working day
- Triage of concerns should be completed within 2 working days
- Allocation of enquiry to a worker withing 10 working days from completion of triage
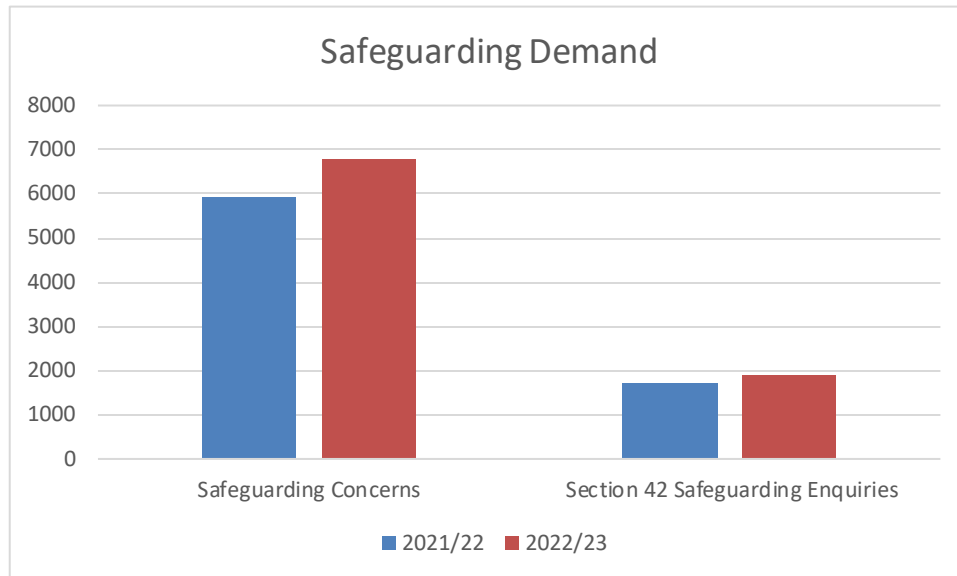- Enquiries should be completed within 20 working days from allocation

Figure 2

9.9 These timescales are not currently being consistently met and in 2022- 2023 32% of enquiries were completed within five weeks. A new service manager for safeguarding is now in post and an action plan is in place to reduce waiting times and work together with partners to ensure partners are confident in raising appropriate safeguarding referrals.

9.10 Making Safeguarding Personal is embedded in the team practice and procedures. People going through the safeguarding process are asked what outcome they want to see, and this is recorded and later reviewed to monitor if it is achieved. The percentage of section 42 safeguarding enquiries where the desired outcomes were asked for and expressed and were then achieved was slightly higher than the England average for 2021/22. Outcomes were fully achieved for 63% of people in 2021/22 rising to 68% in 2022/23 of those who expressed a desired outcome. Nearly all (98%) had their outcomes either fully or partially met in both 2022 and in 2023. Auditing of safeguarding practice is feeding into action planning to ensure that desired outcomes are asked for at the earliest stage.

9.11 Safeguarding training begins at induction and the training subgroup of the SAB (joint with the OSCB) coordinate ongoing training. Training is evaluated through the subgroup. The Principal Social Worker also provides training for practitioners on Making Safeguarding Personal.

9.12 We have strong partnership arrangements in safeguarding through our Safeguarding Adults Board. Within the partnership working structures of the Oxfordshire Safeguarding Adults Board there are many examples of close working between Oxfordshire County Council's Adult Social Care (ASC) directorate and health organisations across Oxfordshire. One example is the strategic and procedural work overseen by the Board, such as the development of the Threshold for Accessing Safeguarding Services (threshold of needs) matrix. This was produced through a collaboration between Adult Safeguarding, the Acute Trust (Oxford University Hospitals NHS Foundation Trust),

community hospitals (Oxford Health NHS Foundation Trust) and the care provider forum to develop a document covering the categories of abuse and neglect as well as those areas commonly reported as safeguarding concerns when another response may be required (Medication Errors, Pressure Ulcers and Trips & Falls).

9.13 Deprivation of Liberty Safeguards (DoLS) are part of the Mental Capacity Act 2005 and aim to ensure that people in care homes and hospitals are looked after in a way that does not inappropriately restrict their freedom. It is the role of the local authority to arrange for assessments to ensure deprivation of liberty is in a person's best interests. The Government had planned for Liberty Protection Safeguards (LPS) to take over form DoLS with the intention of establishing a simpler approach. The implementation of LPS has now been deferred until the next parliament. Councils in England have significant backlogs in processing DoLS applications, and the requirement to complete a standard DoLS authorisation within 21 days and urgent authorisations within 7 days is frequently not being met. In 2021-22 (the most recently published data) Oxfordshire completed 334 applications per 100,000 population compared to an average in England of 564 and the percentage of DoLS authorisations completed within 21 days was lower than the England average. An action plan overseen by Internal Assurance and Governance Board will address performance in this area.

Embedding co-design and tackling inequalities

10.1 Underpinning all our work is a focus on the impact we have on people's lives and the outcomes for our residents. We recognise that working in co-production is vital to ensure that people with lived experience work alongside us to shape services.

10.2 We have excellent practice evident in this area. For example, our new [All-Age Unpaid Carers Strategy](#) has been launched having been designed hand in hand with carers through co-production. Officers worked in partnership with carers from the outset ensuring carers' experiences and expertise drove the development of the strategy to make it meaningful and beneficial. Partners from health, education and social care, city and district councils and voluntary organisations including Carers Oxfordshire were also involved.

10.3 A new pub room '[Cheer M'Dears](#)' has opened in Banbury for people who use the Council's community support service. The space was co-designed with the people who use the service and created in partnership with the local community who provided donations and funding from the Friends of Redlands charity. The new space provides a social setting and also opportunities to learn new skills and experience to support meaningful employment in the future.

10.4 We take a continuous learning approach to co-production to embed this good practice and staff are offered regular training opportunities on co-production as well as having a wide range of tools to gather feedback, engage with people and hear their views. Our [Let's Talk](#) platform provides us with a channel to

share engagement opportunities with people and to provide feedback through 'You Said We Did' reports, such as recent work to update our care home standards as a result of engaging directly with care home residents. During co-production week in early July there were a number of talks from external speakers highlighting the power of co-production practice including discussion of digital exclusion for older people and carers' experiences.

10.5 Adult Social Care has a co-production Board (Team Up Board) with representation from a wide range of people with lived experience. The Board has recently recruited additional members improving the diversity and representative reach of the board with people with lived experience of homelessness, the criminal justice system and domestic violence. This diversity of experience is supporting our work to strengthen our reach to wider community organisations, and we have worked with Team Up Board to update our network of local community groups who we already work with or where there may be future opportunities for co-design. Working in this way with Team Up Board enables us to widen our reach into the community and recent work to co-design a refresh of the ASC Customer Portal provided a positive example of working collaboratively with Team Up Board members to support co-design. A joint self-assessment of our co-production work is planned for early autumn working with Team up Board to ensure a continuous process of learning from good practice and further embedding our approach ensuring that we continue to work with and develop Team Up Board.

Use of Data and Monitoring Our Performance

11.1 Data and performance monitoring are powerful tools to ensure continuous learning and to drive improved outcomes for the people we support. Our self-assessment should give an authentic narrative based on our knowledge of what data is telling us and the experiences of partners and people we support. A new data reporting and analysis approach has been developed that will further strengthen strategic oversight, inform prioritisation and drive continuous improvement through internal and external benchmarking. Adult Social Care are also working alongside public health to utilise data effectively in order to tackle inequalities.

11.2 Oxfordshire's Internal Assurance and Governance Board and Performance Board both meet monthly and provide internal scrutiny and challenge and report to ASC Directorate Leadership Team.

11.3 The ASC Staff Forum has been refreshed and feedback from staff is being captured and shared with Internal Assurance and Governance Group through regular reports from the Principal Social Worker and Principal Occupational Therapist.

Widening Channels of Assessment

12.1 We are working to widen our channels of assessment implementing Online Financial Assessment in summer 2023 and developing further online referral options to support people to self-serve and self-assess at times that suit them.

12.2 The Online Financial Assessment is now live on our website (link here). This provides people with a digital channel to find out how much they are likely to have to contribute towards their care and support. Using the online financial assessment allows people or their representatives to complete the form at a time convenient to them and enables the Financial Assessment team to complete the financial assessment quicker than via a paper form. Work is ongoing to engage with people who are using the online financial assessment to continue to develop it with them. The financial assessment team have also been working to review their processes and ensure these are as lean and efficient as possible.

12.3 Options are being evaluated to develop an online offer for completing a Care Act self-assessment, based on learning from other Local Authorities where this is being developed. Adult Social Care are working closely with IT colleagues to develop this further.

Digital and Innovation

13.1 Innovation is a key part of how we are transforming the way we deliver adult social care in Oxfordshire, and it is recognised that making use of modern technology can enable people to live well. We are committed to digital development and innovation ensuring innovation opportunities are harnessed and learning drives transformation within Adult Social Care.

13.2 Oxfordshire County Council's dedicated Innovation Hub (iHub) works closely with Adult Social Care as well as technology providers and academic institutions to harness the benefits of cutting-edge technology. This has included initiatives such as trialling the use of virtual reality in care homes and piloting smart medicine boxes. ASC's Digital Transformation Board brings together ASC, IT colleagues and iHub to champion digital innovation and provide strategic oversight for development of innovation including use of artificial intelligence, co-designing innovation, and supporting digital inclusion. Our staff are also encouraged to dare to do things differently, and a new app is being launched to enable staff to quickly share their ideas of opportunities for innovation or to improve digital ways of working.

13.3 Our Assistive Technology strategy has been refreshed and a new digital tool has been launched for people to order daily living aids to help keep them safe and independent at home (link here). The tool has been designed to be intuitive and user-friendly and people can navigate around pictures of rooms in their home to find equipment they can borrow.

Engaging with the Care Market

14.1 We have worked closely with our provider partners to develop our workforce strategy and action plan and they found this a valuable and positive way of working. Provider feedback indicates that they welcome the way in which we are seeking to work with them and would welcome ongoing development of this relationship through increased communication and partnership working.

14.2 A new provider newsletter is being launched providing quarterly updates for our care providers and the first will be sent out in early September. We hold regular workforce round table events with a focus on working collaboratively with providers to support workforce development. This has increased networking opportunities for the provider community and led to tangible outcomes such as a new website that has been launched aimed at bringing more people into caring positions in Oxfordshire. [Proud to Care Oxfordshire](#) has been developed by Oxfordshire County Council in partnership with Oxfordshire Association of Care Providers (OACP). The website highlights the broad range of jobs available in the care sector as well as providing a free platform for care providers to advertise any opportunities they have available. In addition, we have worked with providers to open access to the social worker degree apprenticeship to the external market which is promoted via webinars and school engagement events. Other developments that have come out of the workforce round tables include international recruitment webinars hosted by OACP, development of the Care Friends incentive app, and a refocus on Care Worker Charity Grants.

Learning and Development

15.1 We are 'always learning' and this is embedded throughout Adult Social Care. It is vital that people who access our services are able to provide feedback on their experience and that we can respond to and learn from it. A feedback survey has been launched which has been piloted through our review team and Occupational Therapy. This is being rolled out across ASC during September and will enable us to continuously learn from people's experiences.

15.2 The creation of Principal roles for both social work and occupational therapy have been implemented in recognition of the importance of professional leadership and development for the workforce in a large county. Our ambition is to embed and promote a culture of continuous learning and improvement across our workforce. We want to build a modern service that promotes innovative solutions to the needs of our residents. We promote and support apprenticeships to ensure both existing and new staff have opportunities to learn and develop and to support career progression.

15.3 Our Staff Forum has been refreshed and staff are invited to share good news stories with the forum. This will be complemented by the Power App being created which will enable staff to provide feedback on issues or practice at any time. Professional supervision supports our strengths-based approach and

refreshed supervision guidance supports reflective practice and ensures staff wellbeing is a consistent area of focus.

15.4 The Principal Social Worker and Principal Occupational Therapist support the development of professional practice and there are regular learning sessions for staff on a range of topics such as Making Safeguarding Personal and mental capacity for occupational therapy.

15.5 The Principal Social Worker and Principal Occupational Therapist have reviewed our audit and quality assurance processes and a refresh of our Occupational Therapy audit tool is underway and will be implemented in the autumn. We have an ongoing focus on case audit work and most recent work has identified the need to focus on embedding and evidencing strength-based practice. Recent audits have been completed on both the waiting list for assessment and the triage process in safeguarding. Both results highlighted the need to focus on the voice of the person, their desired outcomes and timely contact from the service. Whilst adult social care staff self-assess that they are strength based in their practices, audit of the records indicates that this is not always immediately clear. Refreshed guidance and Principally led learning sessions have been delivered, with further audits planned for the autumn to test efficacy of feedback and intervention.

15.6 The Principal OT and Social Worker are undertaking a deep dive of case audits completed by teams to evaluate the effectiveness of current audit practice and tools and to ensure that learning from audit is being implemented at a practice level in accordance with the Quality Assurance Framework. The outcomes of this piece of work are due in September.

Good Access to Information and Advice

16.1 We continue to work to improve access to information and advice. We have a good range of information available and will ensure this is easy to access and expect to continue to grow this. We are working to strengthen our web presence through improvements to our website and a refreshed customer portal. Our Live Well Oxfordshire website attracts large numbers of visits (over 80,000 last year, an increase of 36% since the previous year), and we have worked with people with lived experience to improve this offer further to improve search functionality, make the information easier to find and the website easier to navigate.

16.2 Whilst we support digital first we will ensure that people can find information easily in other ways that suit them. There will continue to be a focus on ensuring people are not digitally excluded and freeing up capacity by providing people with opportunities to self-serve where this would be more convenient for them will enable a greater focus on those who continue to need to contact us via telephone or in person.

Corporate Policies and Priorities

17 Adult Social Care's priorities are shaped by our corporate vision and priorities, with particular focus on:

- Tackling inequalities: working with partners to address inequalities focussing supporting on those in greatest need, embedding and implementing our digital inclusion strategy

- Prioritising the health and wellbeing of our residents: working with partners to implement our health and wellbeing strategy prioritising preventative initiatives.

- Supporting carers and the social care system: deliver seamless services, explore new ways to provide services promoting self-directed support and increasing choice, focus on preventative services, invest in creative options to support carers.

Financial Implications

18 There are no direct financial implications arising from this report.

Legal Implications

19 This report provides an update only.

Staff Implications

20 The Senior Responsible Officer for assurance preparation is the Interim Deputy Director for Adult Social Care . Our preparation for assurance is supported by an Assurance Lead (post currently being recruited to) and has programme management support.

Equality and Inclusion Implications

21.1 Equity in experiences and outcomes is a key theme in CQC's framework for assessing local authorities.

21.2 Equality and inclusion is identified as a key priority within this report and our self-assessment considers the way in which we are meeting our duties and responsibilities in this area.

Risk Management

22   The Quality and Assurance Project Board has oversight of the development of our self-assessment and improvement plan and maintains a risk register. The Board reports to Adult Social Care Directorate Leadership team, Senior Leadership Team and Informal Cabinet through monthly updates. There is an established process for the escalation of risk.

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