

**From:** Diane Morton Cabinet Member for Adult Social Care and Public Health  
Richard Smith, Corporate Director Adult Social Care and Health

**To:** Scrutiny Committee – 16 July 2025

**Subject:** **Local Authority Assessment Improvement Plan**

**Classification:** Unrestricted

**Summary:** This report presents the Committee with the findings of the Care Quality Commission assessment of Kent County Council's Adult Social Care function, in fulfilling their obligations under Part 1 of the Care Act 2014.

**Recommendation(s):** The Scrutiny Committee is asked to **NOTE** the local authority rating and the improvement activity identified.

## **1. Background**

- 1.1 The Health and Care Act 2022 gave the Care Quality Commission (CQC) new regulatory powers to undertake independent assessment of care at a local authority and integrated care system level.
- 1.2 The CQC Local Authority Assurance Framework, introduced in April 2023, is designed to evaluate the quality and effectiveness of services provided by local authorities under the Care Act 2014.
- 1.3 The Care Act 2014 sets out the legal framework for the provision of Adult Social Care in England. The key principles of the care act are:
  - Duty to promote wellbeing
  - Duty to prevent, reduce or delay needs for care and support
  - Duty to provide an information and advice service
  - Duty to meet assessed eligible needs of adults with care and needs
  - Duty to assess carers' with support needs
  - Duty to ensure a vibrant, diverse and sustainable market of care and support (market shaping)
  - Duty to establish safeguarding adults board with specific requirements
  - Duty to temporary care and support where providers fail
  - Duty to promote integration of health and social care
  - Duty of cooperation between council officers
- 1.4 In April 2024 CQC launched a new single assessment framework for providers, local authorities and integrated care systems. For local authorities the assessment framework uses a subset of the quality statements from the overall assessment framework. This is because local authorities are being assessed

against a different set of statutory duties (Care Act 2014) to registered providers.

1.5 [The assessment framework for local authorities](#) comprises of nine quality statements mapped across four overall themes. Each theme is also aligned to;

- I statements – what people expect and based on [Think Local Act Personal's 'Making it Real' Framework](#)
- We statements – commitments local authorities must commit to, to deliver high-quality, person-centred care.

Table 1- Quality Statements

Four Themes	Nine Quality Statement
How the local authority works with people	Assessing needs
	Supporting people to live healthier lives
	Equity in experiences and outcomes
Providing Support	Care Provision, integration and continuity
	Partnerships and communities
How the local authority ensures safety within the system	Safe systems, pathways and transitions
	Safeguarding
Leadership	Governance, management and sustainability
	Learning, improvement and innovation

1.6 The CQC provide a one-word score for each quality statement (inadequate, requires improvement, good and outstanding), and provides an overall one-word rating for the local authority. The report also provides an overall percentage to indicate whether the local authority is nearer the upper or lower threshold of a rating.

1.7 As part of their assessment of local authorities CQC use a number of evidence categories and approaches, to inform their overall assessment.

- An information return of key documents and evidence determined by the CQC Information template
- A self-assessment - the local authority's own assessment and judgements of performance, highlighting successes, risks and challenges.
- 'Case Tracking' – lived experience of people who draw on care and support journey and their interactions with social care
- Information collected from national bodies

- Feedback from staff and leaders
- Feedback from partners

1.8 During the summer of 2023 CQC undertook five pilot local authority assessments to test and improve their approach. In December 2023 formal government approval was granted and CQC began implementing their formal assessments of all 153 local authorities.

## 2 Kent County Council's Assessment Process and Timeline

2.1 Kent County Council's assessment commenced on 18 March 2024 with a notification of local authority assessment. (Please see table 2 with the timeline of associated activities)

2.2 CQC met with a number of people during their assessment which included:

- Eight Leadership interviews
- Nine Partnership interviews
- Two Co-production sessions with people with lived experience (16 people)
- 17 Staff group interviews (approx. 130 staff)
- Four brief drop-in sessions open to all staff
- Two brief drop-in sessions open to all managers

2.3 A number of additional meetings, and other means of information gathering such as surveys, took place between April and October between CQC and partners within the voluntary and community sector and providers of care and support services. These were not arranged through the local authority but were intended to support CQC in their information gathering.

Table 2 - Kent County Council's Assessment Process and Timeline

Date	Activity
March 2024	<p>Notification of local authority assessment</p> <ul style="list-style-type: none"> <li>• Requires the council to provide an information return and self-assessment within a three-week period.</li> <li>• The information return is a key part of part of the assessment to demonstrate how the local authority is carrying out its functions as part of the Care Act 2014.</li> <li>• It enables CQC to review key documents, information and data before their on-site activity.</li> <li>• It supports CQC to plan their assessment activity, and forms part of the evidence they use to assess.</li> <li>• KCC provided over 250 pieces of evidence, alongside our April 2024 self-assessment.</li> <li>• The notification also identified that the on-site assessment could take place six months following notification.</li> </ul>
March 2024	Self-Assessment completed

April 2024	Start of information gathering, meetings, and surveys with voluntary and community sector partners and providers of care and support services
July 2024	<p>Second notification for assessment received confirming our on-site visit for the week of 30 September 2024.</p> <ul style="list-style-type: none"> <li>• KCC was required to return an anonymised list of 50 people who have drawn on care and support, to support CQC's 'case tracking', in response to the notification.</li> <li>• 'Case Tracking' is designed to understand people's experiences of adult social care and the CQC may meet with them either virtually or in person during their assessment.</li> <li>• Ten people (out of the 50) were selected by CQC to then engage with, and or their family and carers, where consent was given.</li> </ul>
September 2024	<p>CQC Assessment Team met with the Corporate Director of Adult Social Care and Health and his Senior Leadership Team.</p> <ul style="list-style-type: none"> <li>• The team provided an overview of the directorate structure, an example of person's care journey, partnerships, strengths, and areas for improvement within Adult Social Care and Health.</li> <li>• This provided the CQC with insight and allowed them to refine their assessment schedule.</li> <li>• Additionally, we updated our self-assessment in line with the CQC assurance process. (Appendix1)</li> <li>• On 10 September 2024, the CQC Assessment Team met with the Corporate Director of Adult Social Care and Health and his Senior Leadership Team. The team presented the structure, care journey, partnerships, strengths, and improvement areas of Adult Social Care and Health. This provided the CQC with insight and allowed them to refine their assessment schedule. Additionally, we updated our self-assessment (Appendix 1) in line with the CQC assurance process.</li> </ul>
26 September 2024	The formal assessment interviews begin Virtual interviews with a number of partners
1 October 2024	CQC Assessment Team arrive in Kent until 3 October 2024, with a number of virtual interviews continuing until the 8 October 2024
October 2024	End of initial information gathering phase
15 October 2024	Request for additional information from the local authority

13 December 2024	Second request for additional information from the local authority
16 May 2025	Report Published

### 3. Outcomes of Local Authority Assessment

- 3.1 The findings of the CQC assessment aligned with KCC's own self-assessment of its adult social care services and the CQC acknowledged the council's improvement successes and ongoing plans in line with its ["Making a Difference Every Day"](#) adult social care strategy.
- 3.2 We are aware that there are significant improvements to be made with the length of time that people are waiting for an assessment, review of care and support and safeguarding enquiries and also due to the transition to the new ways of working, some areas of practice varied across the locality safeguarding hubs and we are working to improve consistency in both our approach and our practice. We are also working to ensure there is sufficient care and support available to meet demand, via our locality placed based commissioning model.
- 3.3 However, there were two areas in which we were rated as "Good" higher than we scored ourselves in our own self-assessment. These were Equity in Experiences – which evaluates how well a local authority identifies and addresses the needs of people, their experiences and outcomes of social care especially for people at risk of disadvantage. It also evaluates how the local authority works in a personalised way to ensure care and support meets the varied needs of individuals and communities and how we act on feedback from people with care and support needs, carers, and community groups to improve services.
- 3.4 Kent County Council also scored "Good" on outcomes and Learning, Improvement and Innovation. This section of the Assurance Assessment evaluates and recognises how well we promote continuous learning and professional development among our workforce, and that we encourage a culture of reflection and improvement across the organisation. Additionally, the Assurance Assessment recognises that we use audits and quality assurance to identify areas for improvement and that we support innovation and new ways of working to improve care and support need outcomes for people and that as an organisation, adult social care in Kent collaborates with both people and partners, including through co-production, to shape and improve services.
- 3.5 The findings of the CQC assessment aligned with KCC's own self-assessment of its adult social care services and the CQC acknowledged the council's improvement successes and ongoing plans in line with its ["Making a Difference Every Day"](#) adult social care strategy.

## 4. Strengths and Improvement areas

### 4.1 The CQC identified a number of strengths for the local authority:

- People spoke of positive experiences of Care Act assessments, with packages of support meeting their needs which were person-centred and strength-based, reflecting people's right to choice, and built on their strengths and assets to meet their chosen outcomes.
- Positive arrangements are in place for co-production, working with local people to understand the care and support needs of people and communities, with access to diverse local support options. People felt they had choice over their support services and control over their daily lives. People with lived experience of care and support were included on boards making strategic decision, they felt listened to and that their impact had made a difference.
- There was a focus on equality and diversity, and KCC had regard to its Public Sector Equality Duty (Equality Act 2010) in the way it delivered its Care Act functions, working to reduce inequalities and to improve the experiences and outcomes for people who were more likely to have poor care.
- KCC had implemented integrated Transfer of Care Hubs across Kent which had improved joint planning for hospital discharge. The Home First approach was fundamental to ensuring people left hospital on the correct discharge 'pathway' and were able to return home, or to an appropriate placement, as soon, and as safely as possible. Demonstrating good partnership working with shared goals.
- The needs of unpaid carers were recognised as distinct from the person with support needs, and carers' assessments, support plans and reviews for unpaid carers were undertaken separately.
- KCC provided timely, independent advocacy support to help people participate fully in Care Act assessments and the care planning processes. People said they were always asked if they would like an advocate present, whether this was a family member, friend, or professional independent advocate.
- KCC worked with people, partners, and local communities to commission a range of preventative services to promote independence, and to prevent, delay or reduce the need for care and support. KCC worked collaboratively with people and partners to actively promote and support innovative and new ways of working which improved people's social care experiences and outcomes.
- People told us they could easily access information and advice on their rights under the Care Act 2014. This included unpaid carers and people who funded or arranged their own care and support.

- Frontline teams used technologies, including telecare and telehealth, direct payments, personal health budgets, care packages and social prescribing, to support people to achieve their goals and live the life they want in a place called home.
- Safety was a priority for everyone. KCC understood the risks to people across their care journeys. Risks were identified and managed through proactive risk management, overview, and scrutiny. Where the presenting risks were considered low, frontline staff applied a proportionate approach to assessments and ensured risk assessments were 'suitable and sufficient' for the person receiving support.
- The local authority learned from people's feedback about their experiences of care and support, and feedback from staff and partners. This informed strategy, improvement activity and decision making.

#### 4.2 CQC also identified a number of areas for development:

- High demand for support, combined with shortages in frontline staffing had led to waiting lists for assessments, reviews, equipment provision, and safeguarding enquiries.
- The local authority has undergone significant transformation over the last few years and changes were still being embedded. There were notable inconsistencies in practice.
- Some partners and providers felt relationships were poor and there was a lack of communication and engagement in joint priorities.
- Some people told CQC their experience of safeguarding enquiries was not always positive, with outcomes not shared and concerns not being closed in a timely manner.
- Some people told CQC there was a lack of suitable, affordable care provision in certain areas of Kent. This meant when people needed supported accommodation, they were often placed in different areas away from loved ones.
- Quality monitoring wasn't consistent across all areas leading to varied experiences for people using services.
- Some partners told CQC they were concerned about a lack of support available for people with mental health and substance misuse needs, leading to poor outcomes
- Some staff reported low morale, capacity issues and that they lacked the skills needed to effectively support people with specialist needs

## **5 Improvement Actions**

- 5.1 The CQC assessment clearly demonstrates mixed feedback from people who draw on care and support, our partners and our workforce on inconsistency of practice. We have made great progress to date in addressing inconsistencies of application of practice across the county but are aware that this needs further action.
- 5.2 The Directorate has seen some significant structural transformation over the last few years, we now have an embedded and established leadership team which gives us a strong foundation to deliver the aims and objectives set out in our Making a Difference Every Day Strategy. Additionally, to create a culture of continuous development and learning with our workforce and establishing stronger relationships with our Partners.
- 5.3 Following on from the published report we have aligned all our current improvement activities into one plan which supports the findings of CQC. We have applied these thematically to the CQC Assessment Framework. The Improvement Plan (The initial Improvement Plan, which was shared with the Department for Health and Social Care (DHSC) is attached as Appendix 2) will provide enhanced oversight to monitor the progress of all activities ensuring alignment to our strategic goals and legislative frameworks, interdependencies, prioritisation and resourcing and required mitigations to challenges and barriers in achieving our plans.
- 5.4 The Improvement Plan will be monitored monthly through the Adult Social Care Delivery Board, chaired by a person with lived and life experience of drawing on adult social care and is attended by the Director of Adult Social Services (DASS), directors and senior managers within the Directorate. Quarterly reporting will also be provided to the DASS through the Adult Social Care Assurance Board, and regular reporting to KCC's Strategic Reset Programme Board.
- 5.5 Kent County Council's journey from current challenges to a future where every adult in Kent lives a "glorious ordinary life" is one of transformation, collaboration, and resilience. We are on a journey of practice improvement in line with ensuring our strategic objectives are embedded into everyday practice.

## **6 Response to the published report**

- 6.1 We have taken up a support offer from Partners in Care and Health (PCH). PCH is a collaboration between the Local Government Association (LGA) and the Association of Directors of Adult Social Services (ADASS). PCH play a key role in supporting local authorities through the Care Quality Commission (CQC) Assurance process, especially post-publication when a council is rated as "Requires Improvement" or lower.



## 7 Stage 2 Reporting

- 7.1 Whilst it is not compulsory for the us to share our final improvement plan with the DHSC, it is encouraged that we share it or a version of it, to support the overall context and progress to be made/ or is being made.
- 7.2 Submission of the stage 2 report is due to be shared with the DHSC in August and quarterly updates will be provided thereafter.

## 8 Recommendations

8.1 Recommendations: The Scrutiny Committee is asked to **NOTE** the local authority rating and the improvement activity identified.

## 9. Background Documents

[Assessment framework for local authority assurance - Care Quality Commission](#)  
["Making a Difference Every Day" adult social care strategy](#)  
[Kent County Council's Local authority assessment](#)  
[Think Local Act Personal's 'Making it Real' Framework](#)

## 10. Report Author

Jade Shepherd  
Business Improvement Manager, Adult Social Care and Health  
03000 410211  
[Jade.Shepherd@kent.gov.uk](mailto:Jade.Shepherd@kent.gov.uk)

### Relevant Directors

Sydney Hill  
Director of Adult Social Care  
03000 416510  
[Sydney.Hill@kent.gov.uk](mailto:Sydney.Hill@kent.gov.uk)

Tricia Pereira  
Head of Service Improvement  
03000 418160  
[Tricia.Pereira@kent.gov.uk](mailto:Tricia.Pereira@kent.gov.uk)