

Cheshire East Council CQC LA Assurance Self-Assessment Summary

September 2024



Open

Fair

Green

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Section A: Overview and summary About Cheshire East Council

Overview

Cheshire East Council, established in 2009, is the third largest unitary authority in the Northwest and the 17th largest in England. The Borough includes several towns, with Crewe and Macclesfield being the largest. The Borough, characterised by a higher-than-average older population, faces stark health inequalities despite an overall good quality of life. Between 2011 and 2023, the over 75 population grew by 41% compared to 28% for the whole of England. The over 65 population projection is estimated to rise by approximately 20% between 2021 to 2030. The Council is committed to promoting equality, diversity, and inclusion, aiming to integrate these values into all aspects of its operations.

Key challenges:

- There are significant differences in life expectancy across the Borough, for females there is a 14-year difference in life expectancy between the highest and lowest wards, for males the figure is slightly less at 11 years.
- Financial pressures are significant, particularly in social care services.
- The Council is experiencing overspending due to high inflation, interest rates, and increasing demand in social care.



As a unitary authority the Council provides a wide range of services based on our knowledge of people we support, delivered by a committed workforce and by a range of strategic partners. The Council aims to change to better respond to the needs of residents and businesses and provide most cost-effective services.

Strategic Priorities

- Open, Fair, and Green: The Council aims to be an open and enabling organisation, caring about people and promoting sustainability.
- Equality, Diversity, and Inclusion: Efforts are focused on making these principles integral to the Council's operations. Cheshire East to be an area of equal opportunity where people from all backgrounds take part in community life.
- Direct engagement exercises with residents completed, including establishing a people panel to generate ideas around how the Council can support residents in the cost-of-living crisis. The Council has also spoken with residents about their ideas for priorities for the Council and Borough.

Financial Context:

- The Council's budget relies heavily on council tax (80%) and business rates (15%).
- Exceptional support from the Secretary of State has been secured to manage financial pressures.
- Quarterly and annual reports outline performance, performance reporting is underpinned and supported by detailed reporting and scrutiny at Service and Directorate level.

Transformation and Improvement:

- An ambitious transformation program is underway to improve outcomes and adapt to changing priorities.
- The Local Government Association (LGA) corporate peer challenge identified 18 recommendations for financial stability and organisational improvement with the need for engagement with residents and clarity around decision-making and scrutiny.

About Adults Social Care (ASC)

Adults Social Care Vision

We all want to live in a place we call home with the people and things we love, in communities where we look out for one another, doing things that matter to us. Where individuals, communities and organisation work together to build on our strengths to reduce inequalities and improve health and wellbeing.

Vision reflects the one developed by Social Care Future

Adult Social Care sits within the Adults, Health and Integration Directorate and is made up of Commissioning, Public Health, and Adult Social Care Operations. Adult Social Care is facing its toughest challenges to date, the financial pressures are great. Service demand and complexity are increasing, and we must make changes in the way we work so that the people who draw on care and support can thrive.

To achieve successful and sustained change we need:

Our Values



- to put the people at the heart of their own care and support, which requires a strong person-centred approach.
- strong, effective leaders at all levels of the organisation who understand the purpose of the change, communicate this message clearly, and support the involvement of others to achieve it.
- robust financial and performance information and management.
- the full involvement and participation of the workforce in planning and achieving change.
- genuine participation of a wide range of interested parties.

Priorities – Adults Social Care

- Work together with our residents and partners to support people and communities to be strong and resilient.
- Reduce health inequalities across the Borough.
- Protect and support our communities and safeguard children, adults at risk and families from abuse, neglect and exploitation.
- Increase the opportunities for children, young adults and adults with additional needs.
- Reduce the reliance on long term care by improving services closer to home and providing more extra care facilities, including dementia services.
- Build on the prevention and early intervention offer to expand innovative, person-centred solutions.

A council which empowers and cares about people



91% of Adults Social Care users say our services have made them feel safe and secure.



37% of total Council budget is allocated to ASC.

In 2023/24, 19,227 new requests for support, increase of 1,299 on the previous year (+7.2%). Of the requests: 87.8% were from the community; 1,972 (10.3%) were for hospital discharge, 111 were from self-funders with depleted funds, there were 5,937 contacts relating to safeguarding adults' concerns and 3,302 contacts for Deprivation of Liberty Safeguarding.

35.5% were signposted or received universal services and around 29.6% did not require a service. Approximately 20.6% people received short-term support the majority of these didn't need long-term support.

Working Together

- Strong partnerships with health services, community and the voluntary sector.
- Partner in the Cheshire and Merseyside Integrated Care System (ICS) nine local authorities, Cheshire East, Cheshire West and Chester, Halton, Knowsley, Liverpool, Sefton, St Helen's, Warrington, and Wirral.
- Initiatives like the Home First program and Connected Communities Centres aim to provide integrated, community-based support.
- Joint Local Health and Wellbeing Strategy approved by all partners setting out vision to enable people to live a healthier, longer life; with good mental and physical wellbeing, living independently and enjoying the place where they live. Delivery plan prepared.
- Joint outcomes framework agreed by partners to help measure progress building on development of the Joint Strategic Needs Assessment (JSNA).
- Place, Health and Care Partnership Board meet regularly.
- The ICB Place Director is a member of the Corporate Leadership Team.
- ICB managers based in LA offices.
- Joint ICB/Council posts exist overseeing different aspects of commissioning. Allows a focus on key operational areas ie Home First programme.
- Live Well for Longer Plan adopted by the Cheshire East Place Partnership for Health and Social Care as framework for co-production to develop our services with local people.
- Eight care communities include clinicians, social care and public health, tackle local priorities such as poor housing, poverty, and poor education and address significant operational issues.
- Health Protection Forum, chaired by the Director of Public Health, monitors and plans for responses to infectious and environmental threats to health.

Commissioning

Market Position Statement provides key market intelligence and information about the local economy and current and future plans for adult social care and health. Jointly developed by Cheshire East Council and Cheshire East Integrated Care Board. Commissioning narrative will be used for future communications and engagement strategies, reviewed annually.

Prevention and early intervention

Delivery of services requires effective use of technology and digital solutions to allow people to take responsibility for their own health and wellbeing. Technology development will equip teams with the data, digital tools and equipment to work efficiently and effectively in an agile and flexible way. Digital Inclusion Plan sets out how we will support people to get online and where this is not possible that can still access or receive services.

Working with people

Focus for all services to be developed together with our residents and communities, so services work together with families and residents to achieve the best outcomes, embedding a culture of co-production.

Consulted on:

Learning Disability Plan	Neglect Strategy	Autism Strategy	Mental Health Strategy
Day Opportunities Strategy	Connected Communities Strategy	Live Well for Longer Strategy	Market Position Statement
Assistive Technology Charging Policy	Dementia Strategy.	End of Life Strategy	Sensory Impairment Strategy

Equality, Diversity and Inclusion

Mainly white British (94.4%) Cheshire East is home for many immigrant communities from Eastern Europe, East Timor, Syria, India, Bangladesh and the Caribbean. We have work to do to embed the voices of seldom heard audiences and those with protected characteristics within ASC and Corporately to promote equal opportunity and putting EDI at the centre of everything we do. This includes accessible information, advice and guidance, (Live Well Directory).

Adult Social Care Outcomes Framework (ASCOF) Set out below are the 2023/24 performance indicators, commentary in the themes illustrates the directorate's response including plans to manage and improve performance as appropriate.

2023/24 Performance			
22/23 Quartile*	Declining Performance in 23/24 from 22/23	About the Same as 22/23	Improving Performance in 23/24 from 22/23
Quartile 1		<p>1C(1A) The proportion of people who use services who receive self-directed support</p> <p>1I(1) The proportion of people who use services who reported that they had as much social contact as they would like</p> <p>2D The outcome of short-term services: sequel to service</p> <p>4B The proportion of people who use services who say that those services have made them feel safe and secure</p>	<p>1E The proportion of adults with a learning disability in paid employment</p>
Quartile 2		<p>1D Carer-reported quality of life*</p> <p>1G The proportion of adults with a learning disability who live in their own home or with their family</p>	<p>2B(1) The proportion of older people (aged 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services</p> <p>3D(2) The proportion of carers who find it easy to find information about support*</p>
Quartile 3	3B Overall satisfaction of carers with social services*	1I(2) The proportion of carers who reported that	1A Social care-related quality of life score

		<p>they had as much social contact as they would like*</p> <p>2A(1) Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population</p>	<p>3A Overall satisfaction of people who use services with their care and support</p> <p>3D(1) The proportion of people who use services who find it easy to find information about support</p>
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22/23 Quartile*	Declining Performance in 23/24 from 22/23	About the Same as 22/23	Improving Performance in 23/24 from 22/23
Quartile 4	<p>1C(1B) The proportion of carers who receive self-directed support</p> <p>1C(2A) The proportion of people who use services who receive direct payments</p> <p>1C(2B) The proportion of carers who receive direct payments</p>		<p>1B The proportion of people who use services who have control over their daily life</p> <p>2A(2) Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population</p> <p>3C The proportion of carers who report that they have been included or consulted in discussion about the person they care for</p> <p>4A The proportion of people who use services who feel safe</p>

* Measures sourced from the Survey of Adult Carers in England (SACE) - this survey takes place every two years, therefore, there was no survey in 2022/23. Survey results from 2021/22 are used for comparison with 2023/24.

Section B: Self-assessment against the CQC themes

1. Working with People

1.1 Assessing Needs

We maximise the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing, and communication needs with them.

I have care and support that is coordinated, and everyone works well together and with me.

I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and goals.

Our strengths

Strong focus on wellbeing and prevention and continued development of our offer to residents and families.

A flexible and effective reablement service.

Well-established integrated working in mental health.

Positive partnership working with health, housing, voluntary sector and other key agencies.

Areas for Improvement

Increase the number of people receiving a Direct Payment.

Improvement of service and offer to carers.

Further develop our coproduction offer.

Develop our support planning with people with lived experience and carers.

Ambition

People with care and support needs, including unpaid carers, those who fund or arrange their own care and communities have the best possible wellbeing outcomes.

Because:

- Their care and support needs are assessed in a timely and consistent way.
- Assessments, care and support plans are co-produced, up-to-date and regularly reviewed.
- Support is co-ordinated across different agencies and services.
- Decisions and outcomes are transparent.
- People's care and support reflects their right to choose, builds on their strengths and assets, and reflects what they want to achieve and how they wish to live their lives.

Assessing Needs

People with care and support needs can access adult social care services through various methods, including online and self-assessment options. Referrals are triaged and risk assessed, with the main access points being contact teams at Macclesfield Town Hall and Delamere House. These teams provide information, advice, and signposting to universal services and community resources, aiming to prevent, reduce, or delay health and social care needs. They also help individuals connect with their communities to reduce reliance on statutory services and prevent loneliness.

Outcomes are identified using a strength-based conversational approach, focusing on individuals' assets and strengths working closely with individuals and where appropriate their families or carers. If there are risks, the conversation addresses what needs to change for safety and control. Further support may include personal budgets, assistive technology, or occupational therapy. If initial needs are unmet, a needs assessment is conducted following the Care Act 2014. Adult Social Care collaborates with various services, including the Cheshire East Consultation Service (Children's Service first point of contact), Domestic Abuse Hub, housing, health colleagues, and partners in police, probation, and children's services.

Care Planning

Following assessment, a Care and Support Plan for individuals with eligible care needs is developed. It includes both informal support and potentially funded care from Adult Social Care. The Reablement Service offers short-term, non-chargeable support to help individuals maintain independence (physical, mental health and dementia), direct payments are also an option. Care planning is recorded in the Liquid Logic system, the current format is under review for better clarity. This approach aims to incorporate the voices of local people, especially diverse communities and those with protected characteristics, into the planning and design of support. There is a need for developing consistent recording of outcomes to analyse the impact of services.

The Quality, Performance and Authorisation Board (QPAB) ensures the Council meets its statutory responsibilities and delivers effective, value-for-money services. It consists of senior managers who review care solutions to ensure they maximise independence and involve community support. The Board also ensures a consistent, person-centred approach and that individuals can express their right to self-determination.

Reviews

We aim to review long term care annually, but due to areas of staffing shortages/sickness we do not have capacity to achieve this. Unscheduled reviews are recorded and whilst most scheduled reviews are face-to-face, we do have some provider led and telephone reviews where appropriate to do so. We ensure the person, carers and providers know how to contact us if there are concerns or changes in the person's needs.

Occupational Therapy (OT) Service

Our Occupational Therapy Service, similar to the national picture, has long waiting times and had issues recruiting, resulting in a high level of agency staff. Service model has two OT practice managers, and will have a part-time OT professional lead, we have implemented a progression pathway for OT social care assessors and OTs. The service is all age and includes complex needs, there are challenges in waiting times, but these are improving.

Waiting Lists, Waiting Times and Risk

In Adult Social Care, a risk-based approach is applied to the management of waiting lists that has been agreed by senior managers. Managers are aware of and monitor waiting lists for assessments in their teams and use a RAG rated approach to review on a weekly basis. Managers can oversee and review the work waiting times for assessment using Power BI. The DoLS team use the official ADASS tool for their triaging and decision making.

Hospital Discharge

We have two general hospitals within Cheshire East Leighton, Mid Cheshire Trust and Macclesfield District General Hospital East Cheshire Trust. We have two social care teams working within and alongside Health colleagues. The two hospital teams have different processes and offers of post hospital care. Cheshire East residents also access hospitals in Stoke-on-Trent and Greater Manchester, our community teams in the East of the Borough and the hospital team in the South assess those people who require further support upon discharge. We are aware of these variations in offer and try and ensure equity and consistency where possible.

Community Reablement

Cheshire East Council and Cheshire and Merseyside Integrated Care Board jointly fund the Community Reablement Service, which offers short-term, person-centred support to maximise independence. This service, free of charge and funded by the Better Care Fund, operates 21 hours a day, year-round, across

Cheshire East. It aims to help individuals regain independence within a maximum of six weeks, with potential extensions discussed individually. The service integrates with health services under the Home First model to avoid long-term dependency. Between April and July 2024, 531 people were assessed, with 354 needing no ongoing services.

Quote for Community Reablement Service from



Seldom has Healthwatch come across such high praise and support for a service for which there is a genuine need.

It is clear from conversations with people receiving reablement support and their families that this is a highly respected and valued service providing invaluable support to people during the transition from hospital to home. The responses strongly suggest that people are given tailored support to help with their physical recovery and their overall confidence.

Feedback from people

This has been a critical part of being able to live independently. It gave the family and my mother the confidence for her to try living independently which has been successful, and residential care is no longer in our thoughts thanks to the Reablement.

Went through small tasks to help me achieve my independence. I had physio two to three times a week, and the house was altered so I could move upstairs.

Learning Disability and Housing

The learning disability teams, in collaboration with the Strategic Housing team and commissioning colleagues, have created the Cheshire and Merseyside Housing Strategy 2032/33. This strategy includes developing 132 new self-contained units, with 136 more planned. Strong partnerships with benefit services, social housing providers, and social care providers help influence housing design, development, location, and cost. Social workers use strengths-based approaches for care and support planning, involving individuals and their families. There is a need to develop new strategies for vulnerable and older people's housing and accommodation for care and support, focusing on specialised, transition, and stepdown options. This will be a key part of the Directorate's transformation program.

Support for Carers

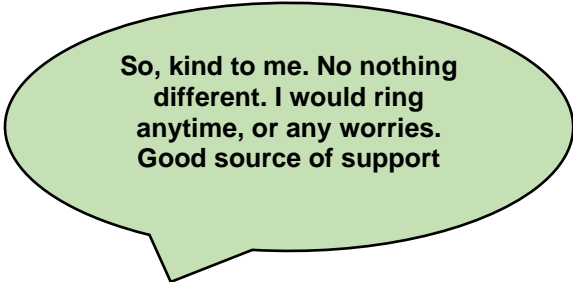
Cheshire East Council commissions services to support carers, addressing both preventative and urgent needs. This includes accommodation-based respite and the All-Age Carers Service (Cheshire East Carers Hub), which offers a single contact point for support, assessments, information, and advice. Eligible carers receive a support plan, which may include direct payments or short breaks. Bed-based respite care is available year-round for planned or emergency respite for residential, nursing and dementia beds.

The Carers Hub collaborates with Social Care, Health, and VCS partners to tailor support for adult and young carers. Social workers may refer carers to the Hub or complete assessments themselves. A joint improvement action plan with Carers Hub, Adults Social Care and Children's Services is being developed to enhance support, with regular multi-agency meetings to monitor progress.


The All Age Carers Strategy 2021-2025, developed with carers and partners, aims to ensure carers receive timely support. Plans are underway to update the strategy beyond 2025. Forums like the Carers Partnership Board and Parent Carers Forum, LD and MH Partnership Boards allow stakeholders to shape local support. The Carers Partnership Board last convened in March 2024, and is due to be re-launched in Autumn 2024 with a refreshed membership, governance, and priorities, including greater representation from carers. This will provide a more effective mechanism for monitoring the commitments that were set out in the Carers Strategy and coproducing the new strategy, further enhancing partnership working at a strategic level and developing the offer for carers across the Borough.

Efforts are focused on modernising flexible carer support, enabling independence for cared-for people and providing carers with breaks. Joint initiatives across Cheshire and Merseyside partners aim to enhance carer breaks, offering more choice and positively impacting carers' wellbeing.

A survey of assessed carers provided feedback on service quality, leading to an action plan for improvements. This includes planned breaks and crisis intervention for carer respite, provided by the Care4CE Team.



So, kind to me. No nothing different. I would ring anytime, or any worries. Good source of support

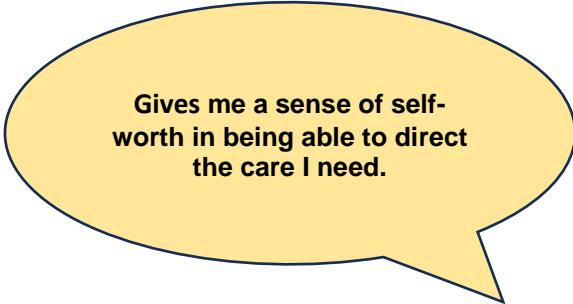


I feel what is on offer is very limited – services and funding available.

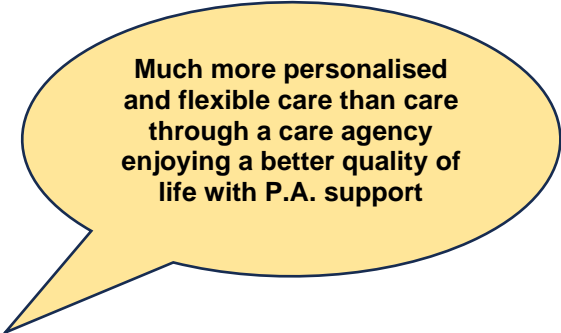
Access to shared records with Health

The Cheshire Care Record (CCR) enables Health and Social Care staff to access summary records from various systems, providing a comprehensive view of peoples details and reducing the need for them to repeat their information. Managed collaboratively by primary care, mental health support provider, community services, and hospitals, the CCR supports continuity of care. It is part of the Cheshire and Merseyside Connected Care Record (C&MCCR), with ongoing efforts to enhance its development and usage. Information is also shared via the mental health system, SystemOne.

Direct Payments (DPs)



Gives me a sense of self-worth in being able to direct the care I need.



Much more personalised and flexible care than care through a care agency enjoying a better quality of life with P.A. support

Cheshire East Council commissions PeoplePlus to provide a Direct Payment Support Service for adults, offering independent advice on managing direct payments and brokering care. Training for Personal Assistants (PAs) and employers is funded by Skills for Care hosted by a local provider (Disability Positive). Several initiatives aim to increase direct payment uptake and improve support, including a new All-Age Direct Payment Policy [All-Age Direct Payment Policy](#) launched in July 2024. A DP Transformation Project Group supports policy implementation, with DP Champions within social work teams, training, and new procedures. Other initiatives include pre-paid cards for direct payments, a personal assistant recruitment campaign, and a refreshed online directory [Direct Payments and Personal Assistants \(cheshireeast.gov.uk\)](#).

1.2 Supporting people to live healthier lives.

We support people to manage their health and well-being so they can maximise their independence, choice and control, live healthier lives and where possible, reduce future needs for care and support.

I can get information and advice about my health, care, and support and how I can be as well as possible – physically, mentally, and emotionally.

Early intervention/prevention/Assistive Technology

The wellbeing principle is central to how information and support are provided to residents and carers. Contact teams, including social care assessors, social workers, and occupational therapists, use direct phone lines to engage with residents and their families, promoting independence and control through strength-based approaches. Local Area Coordinators (LACs) work with people who have eligible care needs to connect them with community services, initially providing support until individuals gain confidence.

As part of the Council Transformation programme, ASC is enhancing its “prevent, reduce, enable” approach to promote wellbeing, prevention, independence, and self-care. Local Citizen’s Advice organisations offer an Information and Advice Service to help manage finances and benefits, aiming to build residents’ long-term financial resilience. This Service is accessible face-to-face, by phone, and by email.

Supported Employment

The number of Supported Interns for 2024/25 is expected to grow to at least 60, up from 42 the previous year, with a 74% progression rate into paid employment. Development areas include job coaching, recruiting in-work PA job coaches, and exploring supported apprenticeships. A successful business event in March 2024 promoted these internships. A draft Supported Employment Strategy, focusing on best practices and funding opportunities, will be presented to Adults and Health Committee in September. Cheshire East, West, and Warrington expect £13.5m in April 2025 for employment support, including for young NEET people. The Shared Prosperity Fund (SPF) supports employment and numeracy for care leavers and funds a Business Engagement Officer to promote inclusive recruitment.

Live Well [Live Well Cheshire East](#)

Live Well offers information and advice on health and wellbeing for Cheshire East residents, including adults, children, families, and professionals. The site features a directory of around 3,000 services, such as care for adults and children, community clubs, mental health support, and family hubs. The Care Finder tool helps users source care services. An online form hub allows for submitting forms and referrals, integrating with the case management system. Accessibility features like text-to-speech, language translation, and page simplification are provided by Reach Desk software. Feedback from users is collected and used to improve the site, with follow-up provided if requested.



Information and Advice

Information and advice are available at all stages of a person’s journey through various means, including verbal, digital, and postal communication. The Contact Team directs people to the Live Well Cheshire East site [Live Well Cheshire East](#) for further information and arranges home visits if needed. Interpreters are provided for non-English speakers.

Contact teams and duty workers across various community and specialist teams have extensive knowledge of universal services and work closely with the Deafness Support Network. Local Area Coordinators share updates on community resources, and the service collaborates with eight Care Communities to strengthen links with community workers and social prescribers. Social Care staff assist with accessible information, using easy-read documents and translation services as needed.

1.3 Equity in experiences and outcomes

We actively seek out and listen to information about people who are most likely to experience inequality in experience or outcomes. We tailor care, support and treatment in response to this.

I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths, and goals.

EDI in ASC

Cheshire East Council's EDI and co-production initiatives focus on supporting and connecting communities through innovative approaches. Key work includes:

- Developing and reviewing a joint Dementia Strategy and conducting an end-of-life survey working with partnership agencies to assess the knowledge and understanding within our workforce.
- Addressing gaps in data for protected characteristics to improve strategic planning and equity. Relevant analysis for ASC managers being developed for strategic knowledge/monitoring of population and social care support needs, monitored by the ASC EDI group.
- Commissioning bespoke support to meet cultural needs and using translation services as needed.
- Quarterly meetings of the Adults Service EDI group to share information and develop EDI resources, including training and embedding peoples' wishes into support plans.
- When required bespoke support is commissioned to meet the cultural needs of residents ie accommodation with care due to specific religious and cultural needs.
- A Gypsy and Traveller transit site being developed to reduce unauthorised encampments, with a focus on improving outcomes for these communities. Efforts include cultural awareness training for schools and GP surgeries, and a training program for ASC staff.
- A single point of contact for ASC with translation tools and a dedicated post to support refugees into work has been established. Regular engagement with BAME, Gypsy, Roma, Traveller, and veteran communities ensures their input in service development. Support groups and hubs for veterans and the armed forces community have also been created.

Equality in care provision.

Recruitment and retention of staff is a significant challenge for care providers, especially in rural and affluent areas of the Borough. To support external provider recruitment, campaigns have included videos, bus advertising, posters, and social media, resulting in the employment of multi-lingual staff who speak languages such as Polish, Romanian, Turkish, Ukrainian, Dari, Pashto, Farsi, and Urdu. Many staff have personal experience integrating into Cheshire East, which they share with others. Care providers are required to have active Equality and Diversity policies, monitored through Quality Assurance processes. Equality Impact Assessments are conducted on policies, strategies, and during service recommissioning to ensure fairness and equity.

Homes for Ukraine and Afghan resettlement scheme

Integration and development support within the Afghan Relocation and Assistance Policy (ARAP) scheme for Afghan families, with 12 families resettled into Cheshire East. There are 282 Ukrainian guests with sponsors matched with 165 households (all in education, training or work.) and a further 284 Ukrainian guests living independently in either social housing, or private rented sector accommodation.

Work to support Armed Forces and Veterans

The Council has been awarded the gold standard for the Ministry of Defence's employer recognition scheme (Armed Forces Covenant). Supports the annual Crewe Armed Forces weekend and created a veterans' staff network to identify and help veterans and serving families within the Council. Veterans Officer works with groups such as the Royal British Legion to organise Armed forces events across the Borough. This includes continued support of the eight Veteran breakfast clubs all throughout the Borough.

Listening to people

In June 2022 Cheshire East hosted the first Learning Disability Conference since lockdown, held at Cranage Hall with support service partner, the David Lewis Centre. Delegates heard first-hand the views and experiences of children, young people and adults with learning disabilities, parents, carers, and support services on what's good and what needs to get better. More than 200 delegates attended, following the event three actions were agreed: Make things better for people who want to stay up late, give people more chance to have their say on services and what they want to do, and provide better access to information for people with learning disabilities and carers.



Progress on actions:

Stay Up Late	Giving people more chance to have their say on services and what they want to do.	Provide better access to information for people with learning disabilities and carers.
<ul style="list-style-type: none"> Engaged with Complex Needs providers, who are committed to enhancing “stay up late” opportunities and adopting new approaches. New contracts for Complex Needs services, set to start in September 2025, will include these improvements in their service specifications and contract monitoring. 	<ul style="list-style-type: none"> A self-advocates forum has been established which feeds into the main LD Partnership Board A new all-age Learning Disabilities Plan, co-produced with key priorities, was launched in April 2024, including an easy-read version. A review of Learning Disabilities Respite in 2023/24 involved surveys, face-to-face, and online meetings with people with lived experience and their carers. The new service, fully co-produced, includes carers and self-advocates on the tender panel. 	<ul style="list-style-type: none"> New Learning Disability Partnership Board website went live in 2022/23. Membership of the LD Partnership Board reviewed with more representatives from community, voluntary and carers groups increasing opportunities to participate and receive information. Produced information in a range of different accessible formats including videos and easy read material as part of the new LD Plan.

Working with people.

Well-established Learning Disability Partnership Board co-chaired by the Director of Adult Social Care and a self-advocate, includes representatives of people with lived experience taking an active role in the work of the Board. Self-advocates participate in the group are supported by the ASC staff and provided with easy read material. Recent consultations to shape service transformations and projects have been:

- Learning Disability Respite – consultation events in 23/24 face to face and online with self-advocates and carers and conducted surveys (including easy read).
- Complex Needs Framework – easy read surveys and face to face meetings for self-advocates and carers.

Both major recommissions are currently in progress and will be due to go live in 2025/26.

Current Performance - plans to improve.

Sign off process for Statutory Returns between Business Intelligence and ASC Director agrees scores and emerging themes, communicated to ASC managers at meetings including the ASC Budget and Performance Group. Good, maintained, or poor performance areas noted with improvement actions agreed. CQC will have viewed the national statistics for the various Statutory Returns for Cheshire East. Based on the LG Inform CQC theme-based report – For Working with People Cheshire East is above the England or Regional average for 5, the same for 4 and below average for 4, total 13.

	Current Performance	Plans to improve
	% of carers who receive self-directed support 2022/23 % (Higher is better) Cheshire East – 30.1% England – 89.3%	Cheshire East is reviewing the assessment and support planning process for Carers to enhance their services. We face challenges in recruiting Personal Assistants (PAs) but are implementing initiatives to increase Direct Payments (DPs) uptake and improve support and information for residents and staff through a DP Transformation Project Group. Additionally, we have secured accelerated reform funding and are exploring community-based carer respite options alongside their existing bed-based respite offer.
	% of care users who receive direct payments 2022/23 % (Higher is better) Cheshire East – 17% England – 26.2%	Ongoing challenges with recruiting PAs; with initiatives currently underway to increase the uptake of DPs and improve the support and information offer for residents and staff, facilitated through a DP Transformation Project Group.
	% of carers who receive direct payments 2022/23 % (Higher is better) Cheshire East – 30.1% England – 76.8%	We are working on enhancing the assessment and support planning process for Carers with our provider. There are challenges in recruiting Personal Assistants (PAs), but various initiatives are in progress to boost Direct Payments (DPs) uptake and improve support and information for residents and staff. Facilitated by the DP Transformation Project Group.
	Long-term support needs of adults (65+) met by admission to residential and nursing care homes per 100,000 2022/23 Ratio per 100,000 (Lower is better) Cheshire East – 754.6 England – 560.8	In CE, the high population of people over 85 is increasing the demand for residential and nursing care. To address this, we provide support, guidance, and assessments for self-funders and are piloting an appointment system to reduce waiting times. Our transformation efforts aim to enhance the “prevent, reduce, and enable” strategy to maximise residents’ independence, ensuring residential and nursing care are considered only when other options are exhausted.
	= Performance below England or Region	

2. Providing Support

2.1 Care provision, integration and continuity

We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.

I have care and support that is co-ordinated, and everyone works well together and with me.

Our strengths

We have a good understanding of the needs of our communities and the challenges faced by our providers. To address these challenges, we realise that we must work in partnership, doing things differently to manage demand and deliver better outcomes for our residents within the resources that we have available.

Areas for Improvement

We have too many older people receiving long term support in care homes and our average costs for supporting people with a learning disability and autism are high (although paradoxically our hourly rates are low compared to our neighbours).

To address these significant priorities:

- **We have implemented an ambitious Adult Social Care Transformation Programme.**
- **Our Prevent, Reduce, Delay Programme will address the main contributory factors of why people are admitted to care homes. We will align strength-based practice to a range of interventions that support people to stay in their own homes for longer.**
- **Our Learning Disability and Autism Programme will develop accommodation with efficient staffing ratios, increase shared lives, and develop trusted strategic partner arrangements that can deliver independent living with choice and control whilst balancing cost and efficiency.**

Assessing Need

The Cheshire East Joint Strategic Needs Strategy (JSNA) [here](#) informs commissioning and includes chapters on various health topics. Recently published chapters covered smoking, substance misuse, and falls. Upcoming chapters will address loneliness, social isolation, and care of older people, SEND JSNA due this autumn. Previous chapters on learning disabilities [Learning Disabilities JSNA](#) and autism were published in 2019, and a new style chapter on poverty [Poverty](#) published recently.

The JSNA now integrates Equality Impact Assessments (EIA) to ensure all chapters consider protected characteristics. Additionally, place-based JSNA reviews are being conducted for each Care Community area, with the Crewe chapter published and the Macclesfield chapter in development. These reviews follow a life course and place-based approach to reduce health inequalities, as outlined in the All Together Fairer report.

Shaping the Market

The Council prioritises enabling people to live independently for as long as possible by investing in care at home services and offering premium payments to encourage growth. This approach, along with international recruitment, has reduced the need for short-term residential and nursing placements and decreased the waiting list for home care. The Council is also developing extra care housing schemes with care providers and private developers to lessen reliance on traditional bed-based care. Operational and commissioning staff collaborate to identify and address service gaps, supported by a comprehensive commissioning and contracts handbook.

Prevent, Reduce, Enable, Transformation Programme

The Council faces challenges with a high number of older people in long-term care homes and high costs for supporting individuals with learning disabilities and autism. To address these, the Adult Social Care Transformation Programme, 'Prevent, Reduce and Enable,' has been implemented. This program aims to support people at home and avoid permanent care home placements by increasing service capacity, filling gaps, and ensuring consistent decision-making. The Prevent, Reduce and Enable program's scope includes evaluating decision points across ASC pathways, access and quality assurance, performance metrics, geographical coverage, and identifying service gaps.

The Brokerage Team arranges 48% of commissioned care for hospital-discharged individuals, providing short-term interventions like community connectors and reablement. Proper management of these interventions is crucial to allow recovery and reduce care home admissions, while also considering ongoing care costs and negotiating best prices.

Learning Disabilities Accommodation Programme

There are 660 people with learning disabilities (LD) and autism in supported housing and residential care, costing £51.4 million. A new model of accommodation with care and support is needed, this will involve detailed analysis and data collection to ensure accuracy. The data will be analysed to inform the design phase, evaluating short and long-term opportunities and financial benefits. Plans include reducing voids, reviewing night cover and shift patterns, and developing efficient staffing ratios. The goal is to increase shared lives and develop strategic partnerships to provide independent living with choice and control, balancing cost and efficiency.

Winter Planning

System plans ensure that local systems manage increase in demand effectively ensuring people remain safe and well during Winter. Planning process considers impact and learning from last Winter, as well as learning from the system response to Flu and Covid 19 to date. Plans developed based on demand and capacity modelling and system mitigations to address system risk.

TEC Enabled Care

The Council's TEC (Technology Enabled Care) service provides various at-home technologies to ensure safety and independence, including pendant alarms, falls detectors, activity monitors, and automated medication dispensers. It features a contact centre and falls pick-up service, and supports early hospital discharge with four weeks of free TEC. The service aims to expand its support options and pilot new devices. Recognising the importance of technology in current and future support, the Council is exploring strategic opportunities to enhance TEC. A Service Improvement Plan was implemented to address identified areas for improvement, with most actions resolved and remaining actions expected to be completed by November 2024. Progress is closely monitored through regular meetings with the service provider.

Care at Home

The Council has seen an 18% increase in care at home capacity, thanks to incentives such as rural rate covering eight geographical areas, extended hospital retainer, and rate uplifts for prime and framework providers in 2023 also workforce and international recruitment, reducing the waiting list significantly. We are developing an outcomes-based approach to give more flexibility in care delivery and are exploring models for better integration with Health services providing holistic and joined up approach for people with support needs. We will pilot different approaches over the next 12 months and engage with providers, people and other stakeholders to assess the effectiveness. Over the next year, the focus will be on consistent provider

payments and addressing challenges related to safeguarding around the alleged treatment of migrant workers resolved through redeployment and safe reallocation of staffing resources and care packages across the provider market. Formal relationships with various authorities have been established to manage these concerns.

Integration

The Council has strong strategic relationships with health partners, enabling integrated commissioning and delivery. External reviews by DHSC, LGA, and NHS England have praised the maturity of these relationships, which help develop joint approaches to resolve system-wide issues, such as joint investment strategies for care at home. Regular reports on integration are produced for the Health and Wellbeing Board, covering the development of Integrated Care Boards (ICB) and 'Place' working. The Health and Care Partnership Board and Place Leadership Group provide forums for senior leaders and stakeholders to discuss key issues and opportunities, including feedback on joint strategies like the Joint Market Position Statement, Live Well for Longer Plan, and Dementia strategy.

Joint /Integrated Commissioning example.

Engagement with Health over joint commissioning for Care at Home and complex care services currently in progress to be re-commissioned in 2025/26. A Communication Strategy has been developed to support the recommissioning of Care at Home services. This will include a survey of people based on their experiences of the service relating to I Statements, engagement with various groups representing people who use social care and with Healthwatch.

The Council and ICB use joint dashboards to monitor care market performance, with oversight from various governance meetings Cheshire East Operational Delivery Group and ICB Place meetings. Data on system pressures, such as high criteria to reside figures and waiting lists for people in short term care awaiting a care package and number safeguarding and care concerns, helps identify risks and plan joint interventions. This supports resource deployment and quality improvement.

Collaborative efforts across the Integrated Care System include the Community Reablement, Home First Programme, Stroke Rehabilitation Pathway, and Transfer of Care Hubs. The System Blueprint outlines the vision for services by 2030, emphasising care closer to home through eight Care Communities. Enhancing Community Reablement capacity, virtual wards and hospice service and assistive technology is a priority.

The Discharge to Assess (D2A) model is jointly managed by commissioners of the ICB and LA and was recently evaluated for performance and value for money. The review highlighted the need to understand high re-admission rates and improve capacity management.

Dementia Strategy

Cheshire East Place Dementia Strategy sets out the strategic framework for reducing the risk of dementia (or delaying its onset) and enabling people living with dementia, their families, and carers to live the best lives they can. Cheshire East Council and Cheshire and Merseyside Integrated Care Board have a joint responsibility to help shape and deliver a better model of health and social care by building a collective response.

Some of the key achievements

- Dementia Friends training provided to organisations including the Council and ICB. This is due to be extended to Primary Care Networks.
- Ongoing work to raise awareness of dementia and domestic abuse (including workshops, and safeguarding guidance)

Area For Improvement:

- Develop our community-based model of support for people living with Dementia.
- Reduce the Length of stay for people living with dementia and ensure a timely discharge given this is above the average set target.

2.2 Partnerships and Communities

We understand our duty to collaborate and work in partnership, so our services work seamlessly for people. We share information and learning with partners and collaborate for improvement.

Connected Communities

Cheshire East has partnered with a range of churches, community centres and other settings to enable them to become Connected Communities Centres/Venues. [Connected Communities Social Franchise opportunities \(cheshireeast.gov.uk\)](https://cheshireeast.gov.uk) These buildings host a range of activities and support services closer to where people live. There are 34 Connected Communities Centres and Venues across Cheshire East.

Home First Programme

Over the past year, Cheshire East system partners, including operational teams, have developed and implemented the Home First model. This model involves the entire Health and Social Care system, voluntary organisations, and the faith sector working together to provide person-centred support at the point of crisis. The goal is to offer more care at home, prevent hospital admissions, and support timely discharges, ensuring people spend more time at home. Strong partnerships and a collaborative culture among Health and Social Care staff have been key to delivering positive outcomes.

The principles of Home First are.

**Support me when things go wrong.
Support me to find out what's going on.
Support me to stay independent.
Support me with the end of life.**

A Home First video has been made to introduce the approach
<https://youtu.be/158am3FNpq0?feature=shared>

Discharge from hospital.

The establishment of Transfer of Care Hubs (ToCH) in hospitals has improved timely and appropriate discharges, helping maintain patient independence. Brokerage staff and Social Workers work with Hospital Integrated Discharge Teams, holding monthly multi-agency meetings. The integrated team will implement national guidance on discharge requirements. This integrated approach has reduced No Criteria to Reside (NCtR) figures significantly at both Mid Cheshire Hospital Foundation Trust and East Cheshire Trust. Mid Cheshire Hospital Foundation Trust rates have reduced from 124 to 66 as of August 2024 and have been consistently below their NCtR target of 75 throughout August. East Cheshire Trust have reduced from 78 to 46 consistently since May 2024.

A Standard Operating Procedure outlines the roles and responsibilities within the ToCH, aiming to ensure safe and timely discharges. The ToCH links relevant services to coordinate care and support, preventing acute hospital admissions.



Super-MADE event

A multi-agency discharges event (MADE) brought together the local ICB/health system to support improved patient flow across the system area. Super MADE looked at flow across Cheshire and Merseyside to coordinate and drive a system response to reduce patient delay, creating opportunities to work with partners to address challenges.



Aims:

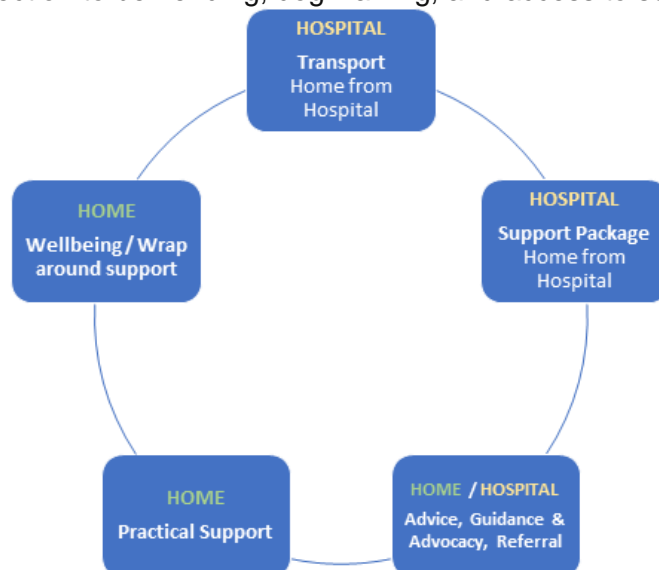
Unblock delays and simplify process across the whole system	Free up beds and increase flow as part of an escalation process	Reduce length of stay	Increase morning discharges	Help support all partners to achieve performance standards.
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Key learning points from Friday 22 March

1. Fresh eyes on the issues can lead to different ways of working
2. Senior intervention from those with authority to make changes has increased discharges today
3. In person interaction leads to better outcomes

Community Support

The Community Support cycle for hospital patients ensures timely and safe discharges, supporting 1,400 people in 2023/24. This initiative, aided by the VCFSE sector and community groups, helps prevent, reduce, and delay escalating needs. Support includes transport home, care packages, advice, advocacy referrals, practical home support, and wellbeing services. Specific assistance ranges from emergency food parcels and medication collection to befriending, dog walking, and access to social activities.



Community Support Connectors working for the Council and supported by St Pauls – Extra Miles third sector Service, are based in hospitals and receive referrals from internal teams. They support patients in hospital who are medically fit for discharge, through use of VCSFE providers where appropriate, delivering support such as transport from hospital, safe and well checks, emergency food parcels, short term shopping calls and equipment.

What Hospital staff say about LA Community Connectors

Your service is excellent and has made a big difference to the patients you have helped us with. Both in terms of length of stay for our patients and their experience.

Discharge would have been delayed if you hadn't helped us with transport home, shopping for patients and taking equipment home. The service has also assisted patients to access services such as home cleaners. It is very useful for patients who are particularly anxious.

Better Care Fund (BCF)

The Cheshire East Health and Wellbeing Board (HWB) has responsibility for governance and oversight of the Better Care Fund. Over the last twelve months Cheshire East system partners, including operational teams worked together to design, deliver, and adopt the Home First model of support. The whole Health and Social Care system, voluntary organisations and the faith sector developed trusted working relationships, supporting people and building person centred support packages of care in partnership with the person and their support circles.

Better Care Fund Priorities and Impact:

Better Care Plan 2023/25 focus	Weekly impact since April 2024
Improving discharge from hospital	296 discharges from hospital
Reducing pressure on UEC	Care at Home investment increase resulting in 7280 hours of home care delivered.

Supporting intermediate care	41 discharges into spot purchase/D2A cluster model beds to support facilitated discharge reablement and rehabilitation.
Supporting mental health	64 people supported into mental health reablement and rapid response service.
Supporting admission avoidance	Bespoke investment into Care Communities to support high intensity needs and frailty.

Healthwatch Cheshire

Healthwatch reports are used in strategy development, improvement planning, and service delivery, with findings published on the Healthwatch Cheshire website. Healthwatch participates in Care Community Steering Groups and the Health and Wellbeing Board, and conducts 'Enter and View' visits to assess service quality, sharing reports with the LA, CQC, and ICB. A Healthwatch citizens focus panel provides regular feedback, and unresolved issues can be referred to the Council's scrutiny process, though this hasn't been needed yet.

The D2A (Discharge to Assess) engagement project by Healthwatch will support the Council's preparation for a CQC Assurance Assessment, focusing on safe hospital transitions and bed-based provision. This project aims to improve continuity of care, ensuring collaborative, joined-up service delivery and effective communication with service users. The project will go live in September 2024.

Working with Providers

Commissioners gather provider feedback through various channels, including contract management, forums, calls, webinars, and surveys. Monthly focus groups address operational and strategic issues, with common themes discussed in a monthly briefing. Provider engagement was crucial for the cost of care exercise and Market Sustainability Plan, highlighting recruitment and retention challenges due to competition and care fees. Pressure in the wider system can inhibit effective communication, care providers have fed back where improvements can be made e.g. hospital discharge process, information on support plans and redesigning commissioning models.

In the Care at Home recommissioning process, providers' views on commissioning locations were sought, leading to a coproduced mapping exercise. The aim is to enhance the provider forum for better communication and consistency in delivering high-quality services.

Providers feedback:

We all as a team wanted to pass on what a fantastic, supportive and empathetic experience the QA inspection was. We are so lucky to have the LA staff involved who have been an amazing support to us throughout what has been incredibly hard years recently with Covid. It was so lovely to have an inspection that was done so thoroughly but also by people who are not only approachable but also so knowledgeable. I know people are always so vocal about complaining so I think it's important that we don't only tell each other here how great it was as an experience but also share this information with yourself.

Contract monitoring arrangements.

Care providers are expected to coordinate with health professionals and the voluntary sector to deliver person-centred services, adhering to key performance indicators for continuity of care. Performance and quality are managed through regular contract meetings, with providers monitored against set standards. Feedback from the Care Quality Commission and quality assurance visits, including input from individuals and families, informs these discussions.

Currently, one care home in the Borough is rated inadequate by the CQC, while 77% are rated Good or Outstanding. The Care Concerns process allows providers to report low-level quality incidents, which, combined with other information, helps identify areas for improvement and better outcomes for adults at risk.

Voluntary, Community, Faith and Social Enterprise (VCFSE) sector

The Cheshire East Social Action Partnership (CESAP) has formed a VCFSE Leaders Group to address local issues and co-produce a Social Action Charter, connecting VCFSE, Local Government, Health, and Business sectors. A volunteer website has been developed to help residents find volunteering opportunities. The Healthy Neighbourhoods and Care Community priorities are jointly administered, with input from various teams and leads to ensure alignment with local priorities. The Cheshire East Strategic Planning and Transformation Group set the approach for VCFSE Grants in September 2022, and applications for 2024/2025 projects were accepted to support these objectives.

Communities providing opportunities for all people to connect and feel part of their local area.	Reducing Isolation and loneliness.	Reduce the need for people to access urgent and emergency care by enhancing the “healthy neighbourhood offer” and supporting people to “step down” or out of health and care services into community provision.
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In June 2023 a new Cheshire East Local Infrastructure Alliance (CELIA) group was formed, bringing together partners from the ICB, CWP, CVSCE, Cheshire Community Action, ChALC (Cheshire Association of Local Councils), Cheshire Connect and Caritas to discuss opportunities for collaborative working. This alliance has a coproduced terms of reference which is also in the form of visual minutes taken from a coproduction partner away day.



The Growing Our Communities Commission and CELIA worked together to inform a service being commissioned which started in April 2024 for two years. The aim being to grow and shape the VCFSE sector, the communication channels between the VCFSE, public and private sector and influence public sector decision making. Health, LA and VCFSE established a grants programme in October 2023 [Community Grants \(cheshireeast.gov.uk\)](https://www.cheshireeast.gov.uk/community-grants) worth £1.3M, the programme is administered by the Council. The purpose of the programme is to support the sector to address local issues and system pressures across health and care. [CEC Report Template \(cheshireeast.gov.uk\)](#)

In April 2023 the Council commissioned a VCFSE provider for two years for an ‘Extra Miles’ contract, supporting discharge support and at home wellbeing to prevent re-admission. Over 1400 people during 2023/24 return home, mostly with VCFSE intervention to allow safe and timely discharges. Effective use of Social Value in public sector contracts and contributions through Corporate Social Responsibility, in February 2024 we launched an online platform where the VCFSE sector can request a range of support and the public/private sector can offer support. [Connected communities notice board \(cheshireeast.gov.uk\)](https://cheshireeast.gov.uk)

Social Value

Cheshire East Council working alongside health and care partners through the [NHS Cheshire and Merseyside Integrated Care Board on social value](#). Cheshire and Merseyside are one of a group of Social Value Accelerator Sites across the UK, exploring and learning how social value can be embedded across Cheshire and Merseyside, within the NHS, Local Authorities and Voluntary, Community, Faith and Social Enterprise sector (VCFSE) organisations.

The three key areas defining this work are:

- [social-value-charter.pdf \(cheshireandmerseyside.nhs.uk\)](#) sets out a consistent approach to building capabilities, strengths and assets to enable people to live a valued, dignified life.
- [Social Value Award - NHS Cheshire and Merseyside](#) aims to help organisations to achieve staff and volunteer recruitment and retention strategy, deliver Corporate Social Responsibility (CSR), Social Value and recognises organisations as an ‘Anchor Institution’.
- System Themes Outcomes & Measures (TOMS) [toms-infographic-jan-24.pdf \(cheshireandmerseyside.nhs.uk\)](#) is a consistent approach on measuring impact and embedding into commissioning activity.

We have been successful in our application and been awarded the Social Value Award, we can apply for the quality mark free via the [Social Value Business](#). Developing a local [Social Value Policy](#) and [Social Value Framework](#) which underpins the Policy:

Co-production

Cheshire East aims to develop services collaboratively with residents and communities to ensure they meet local needs and achieve positive outcomes. Focus on co-production and have consulted on various strategies, including those for learning disabilities, mental health, live well for longer, sensory impairment, day opportunities, end of life, connected communities, and dementia. People with lived experience and carers are actively involved in service development and interview processes. The preparing for adulthood booklet was developed with young people and their carers, this is an area we recognise as requiring further development.

The Learning Disability Partnership Board, refreshed in 2019, includes professionals, self-advocates, carers, and the voluntary sector, providing feedback and monitoring progress on the All-Age Learning Disability Strategy. Similarly, the All-Age Mental Health Partnership Board, established in 2019, involves diverse partners and people with lived experience to improve service provision and ensure equitable access.

Taking a co-production and engagement approach as commissioners or service providers is key to service improvement and development and ensuring quality service provision. Our promise is that we will work TOGETHER as equal partners towards a common goal people living in Cheshire East. [TOGETHER in Cheshire East](#) Working Together pledge with partners:



We Will	We Won't
Listen to your views	Use jargon
Communicate honestly	Give too much information
Trust each other	Rush meetings
Be person centred	Take too long to complete our actions
Adapt to people's needs	Be judgemental

Respect and value all opinions	
Do what we say we will	

2.3 Current Performance - plans to improve.

Also see note at 1.4 current performance. Based on the LG Inform CQC theme-based report – For Providing Support compared to England or Regional average out of 19 indicators, 17 were neutral polarity 2 were the same.

3. Ensuring Safety

3.1 Safe systems, pathways, and transitions

We work with people and our partners to establish and maintain safe systems of care, in which safety is managed, monitored and assured. We ensure continuity of care, including when people move between different services.

When I move between services, settings or areas, there is a plan for what happens next and who will do what, and all the practical arrangements are in place.

I feel safe and am supported to understand and manage any risks.

Our strengths

**An agreed process for safe system transfers and the management of handovers.
The quality assurance monitoring of Providers team being part of the Safeguarding provider team.
Managing provider failure.
Multi agency Complex Safeguarding Forum with a risk enablement approach.
Legal Gateway process to ensure Senior Management oversight of greatest risks.**

Areas for Improvement

**Preparing for Adulthood.
Work with Children's Service colleagues to respond to Ofsted inspections.
Reinforce pathways and transitions between teams to ensure continuity of care and consistent decision making.
Further work is required to ensure each Safeguarding Partnership Board owns and updates its own risk register and shares relevant risks with other Boards.
Keep systems under regular review to ensure safety.**

Our commitment is to ensure residents live free from harm by working in partnership. To avoid delays and bring clarity during case transfers between teams, Practice Managers are expected to discuss cases. The Contact team quickly transfer cases with long-term support needs to minimise repeated storytelling by individuals. Mid Cheshire and East Cheshire Hospital Trusts are addressing differences in their processes, with both using the Safeguarding Portal for referrals.

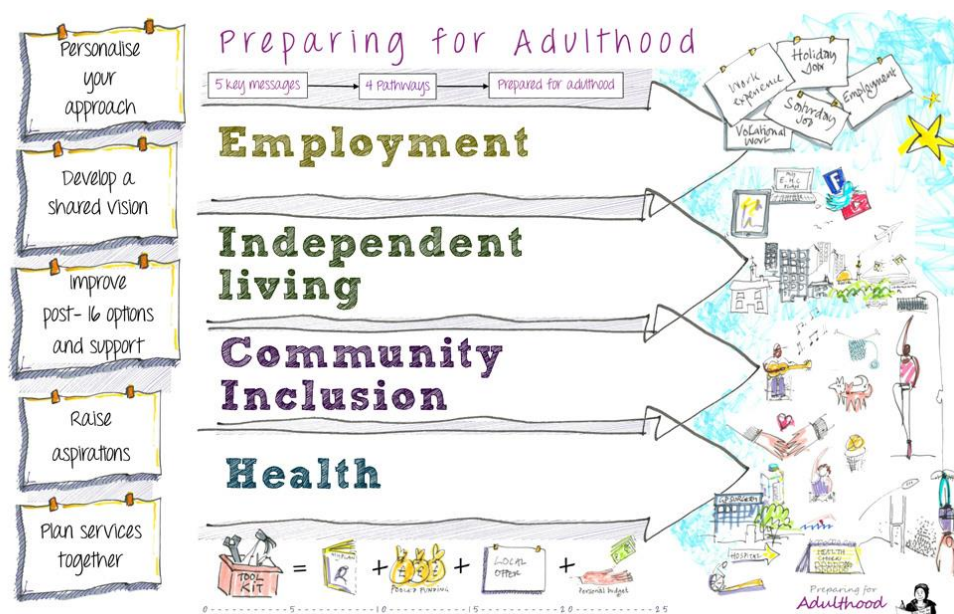
Transition from Children's Service to Adults – Preparing for Adulthood

The Preparing for Adulthood (PfA) team supports young people from age 17 through Care Act assessments, aiming to help them achieve goals in education, employment, accommodation, and community inclusion. The team collaborates with various services, including Children's Social Care and the SEND team, to identify and support at-risk young people with an Educational Health Care Plan (EHCP). We are working with Cheshire and Wirral Partnership (CWP), establishing working relationships with CAMHS, identifying young people most at risk and contributing to the Council's statutory function as a Corporate Parent. PfA team liaise with Cheshire and Wirral Partnership Community Health team ensuring eligible

people and carers have a holistic service. Young people at risk are flagged up at Legal Gateway Meetings and discussed in the Cheshire East Quality, Performance and Authorisation Board. Efforts are underway to start involvement from age 14. Training was provided in April 2024 to improve early planning and understanding of care processes and Care Act eligibility.

In Cheshire East, the number of children with EHCPs and autism has significantly increased from 641 in January 2021 to 801 in May 2024 (+25%). In the same period, the number with autism has grown from 611 to 717 (+17%). In May 2024, the total number of EHCPs was 4,738 we are working with the DfE to address these needs and improve transitions into adulthood, including new initiatives for Care Leavers.

The Quality Assurance (QA) Team ensures care providers meet standards and contractual obligations. They monitor and evaluate services, promote best practices, and work with key partners to ensure holistic care, further education, employment and accommodation options. The QA team focuses on effective systems, good governance, and person-centred services, aiming to minimise disruptions and improve care quality.



The Quality Assurance Team

The Quality Assurance (QA) Team ensures that contracted Care Providers adhere to Care Standards and contractual obligations. They monitor and evaluate services to maintain quality, working with the Safeguarding Service, ICB, and other partners for a holistic approach. The QA team focuses on:

- Effective systems and processes.
- Good governance.
- Involving people and their families.
- Developing workforce skills.
- Measuring and auditing performance.
- Using multiple methods to maintain quality.
- Building staff confidence to report concerns.
- Reviewing processes.
- Ensuring person-centred services.
- Adhering to statutory commitments.

Their interventions have minimised disruptions, especially following provider failures during the COVID-19 pandemic.

Falls Prevention

The Adults and Health committee agreed a new Cheshire East Falls Prevention Strategy for 2023-2026. The strategy was produced by a multi-agency partnership steering group and finalised following consultation. The Cheshire East Falls Prevention group meets every 6-8 weeks to implement an action plan. Work has included recruiting to the post of two Falls Leads at local acute Trusts to develop practice and to pilot multifactorial risk assessment work.

Out of Area Placements

Cheshire East has established a procedure for placements outside the Borough, ensuring information is shared with the host authority and an emergency contact is identified. Officers conduct in-person reviews and participate in safeguarding meetings as needed. In cases of market failure, there is close communication between the Local Authority arranging care/funding and the failed provider to secure alternative care promptly. The responsibility remains with the authority that arranged or funded the care.

Safeguarding risk

Risk assessments and protection plans are integral to S42 Enquiries, supported by a specific Risk Assessment Policy and recording system. These assessments guide decisions in organisational and large-scale enquiries, such as suspending placements. Multi Agency Risk Panels facilitate information sharing and risk management. Clear referral pathways exist to MARAC, MAPPA, Legal Gateway, and Complex Safeguarding Forums, with involvement from individuals or families when appropriate.

Further work is needed for Partnership Boards to maintain their Risk Registers. The ICB NHS Delivery Group oversees systems and risks in hospitals and communities, reporting to the Safeguarding Adults Board in Cheshire East and Cheshire West and Chester Councils. The Health Protection Committee oversees Public Health issues and risks.

3.2 Safeguarding

We work with people to understand what being safe means to them and work with our partners to develop the best way to achieve this.

We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm, and neglect, we make sure we share concerns quickly and appropriately.

I feel safe and am supported to understand and manage any risks.

Our strengths

Adult Social Care staff have effectively managed increased safeguarding demand and complexity in the past year.

We have an experienced LSAB Independent Chair a stable LSAB and a robust Quality and Performance Subgroup.

Strong links to Safer Cheshire East Partnership with robust oversight of Domestic Abuse Related Deaths.

Cheshire East is recognised as performing well in the Home Office Prevent benchmarking matrix.

Areas for Improvement

Further promote the work of the LSAB with the wider Council and partners.

Further work to raise awareness of learning from Safeguarding Adult Reviews and Domestic Abuse Related Deaths.

Further work to embed MSP outcomes.

Work to achieve synergy and collaboration across the various Boards.

In April 2024, the Quality Assurance team joined the Adult Safeguarding Service to enhance information sharing and response to low-level incidents. Safeguarding Concerns increased from 5029 in 2022/2023 to 6088 in 2023/2024. Monthly performance reports track safeguarding alerts and outcomes, identifying gaps and risks.

Safeguarding referrals are triaged by qualified workers and managed by Community teams. Managers oversee assessments and referrals. Focus groups and knowledge exchange sessions were held in 2024 to improve practice. Quarterly case file audits by professional leads identify good practice and areas for improvement. Regular safeguarding reports are reviewed in Adult Social Care Budget and Performance meetings.

Safeguarding and Providers

Monthly CQC provider ratings are tracked in NW ADASS dashboard reports, showing an increase in care homes rated good or outstanding from 68% in 2019 to 77% in July 2024. This improvement is due to robust safeguarding and quality assurance policies, and strong collaboration between teams and partner agencies.

Underperforming care providers are identified for action within a multi-agency governance framework. Themes and trends are analysed from various sources to prioritise interventions. The approach with providers is collaborative and supportive, aiming to improve outcomes for people. The quality assurance, DoLs, and adult safeguarding provider teams operate under a single management structure.

Mental Capacity and Deprivation of Liberty and Safeguarding Team

The Mental Capacity Act and Deprivation of Liberty Safeguarding team provide a person-centred service for vulnerable individuals lacking mental capacity. They ensure people's views and feelings are considered in decision-making. The team collaborates with Voiceability and the Legal team to handle Court of Protection cases and keeps Best Interest Assessors (BIAs) updated through meetings and training.

In 2023/24, six additional Social Workers qualified as BIAs, and staff from Children's Services and the in-house provider team received training. The team works with the Quality Assurance Subgroup on Mental Capacity compliance and is creating YouTube films to help practitioners with best practices in Mental Capacity Assessments.

Safe Communities

Cheshire East and its partners gather community feedback through various means, including days of action, surveys, and police data, to understand how families feel about their environment. They respond proactively to new issues, demonstrating collaboration with partner agencies to help vulnerable people feel safer. Examples include the Violence and Intimidation against Women Strategy and work with asylum seekers and SERCO. Joint efforts with the Anti-social Behaviour Team, Trading Standards, Age UK, and taxi drivers raise awareness about safeguarding. In May 2023, Cheshire East hosted the Knife Angel sculpture to highlight the impact of violent behaviour and knife crime, leading to many knives being handed in to police stations.

The Safer Cheshire East Partnership completes a Strategic Intelligence Assessment and produces a three-year plan to address these issues. [Strategic Intelligence Assessment \(SIA\) 2022-2025 FINAL CENSORED v2 \(cheshireeast.gov.uk\)](#)

Homelessness and Hard to Reach Communities

Cheshire East holds quarterly safeguarding meetings with housing providers to promote peer learning and consistent reporting, chaired by the Head of Housing. A recent SAR highlighted the Housing Team's positive engagement with a self-neglecting adult at risk who couldn't speak English.

To address complex safeguarding and homelessness, the Housing Team secured funding for a multi-disciplinary team using a person-centred, trauma-informed model. The impact will be measured over time. A Multi-Agency Operational Group works with the Roma community to improve outcomes for Gypsy, Roma, and Traveller communities. Partners from Adult and Children's Social Care and Housing Teams are using the Housing Support Fund to help those in financial hardship, preventing eviction, homelessness, and self-neglect.

Safeguarding Prevention and Awareness Raising

People with lived experience created a spoken word piece available on the SAB website.

<http://www.stopadultabuse.org.uk/home.aspx>. The SAB regularly publishes newsletters and bulletins and maintains an active social media presence, addressing issues like Anti-Slavery Day and Suicide Awareness. <http://www.stopadultabuse.org.uk/professionals/information-for-professionals.aspx>. They host conferences to share learning and improve service delivery. <http://www.stopadultabuse.org.uk/pdf/annual-reports/final-annual-report-cesab-22-23.pdf>

In November 2023, National Safeguarding Week focused on economic abuse, trauma-informed practice, and safety awareness. This year, the focus will be on self-neglect and related issues such as homelessness/substance misuse/hoarding behaviour and non-engagement. The Safeguarding Service, along with commissioners and Domestic Abuse Services, has facilitated preventative work around domestic abuse, dementia, carers and young carers. Over 100 staff attended workshops by Odd Arts, receiving excellent feedback.

Safeguarding Learning

Since 2020, the Safeguarding Adults Board has conducted three Statutory SARs and five discretionary reviews, with recommendations combined into an overarching action plan by the Quality Assurance and Performance subgroup. The Safer Cheshire East Partnership completed seven **Domestic Homicide Reviews (DHRs???)**, identifying key actions for partner agencies, such as early multi-agency meetings and awareness of suicide and domestic abuse risks.

A June 2023 report highlighted overlapping themes from SARs and **DARDs**, including risk assessments, mental capacity, domestic abuse, carer stress, and professional curiosity. Good practice noted include timely referrals to other agencies, knowledgeable staff, and consistent professional relationships. Analysis from these reviews was shared at development days and themed meetings in 2023.

Families are invited to contribute to SARs and DHRs, with their input included in final reports, ensuring their voices are heard. Reports and recommendations are shared with families upon completion. A SAR was held on a young man in 2023, the family were invited to provide comments which were included in the final report, families feel that their voices had been heard. Reports and recommendations are shared with families upon completion.

Channel and Prevent

Cheshire East is performing well in the Home Office benchmarking matrix, self-assessments provide assurance around partnership working, and ongoing learning, development and governance. Feedback from the 2022/2023 PREVENT benchmarking was graded by the Home Office as good to outstanding. The annual benchmarking exercise provides assurance that the work in preventing individuals being drawn into terrorism is working well.

My CWA

My CWA is the commissioned provider working with survivors of domestic abuse, planned programmes are co-produced ensuring they are effective and based on people's experience. A good example is current work to hear from Trans and Non-Binary people who have experienced domestic abuse.

<https://www.mycwa.org.uk/transgender-and-non-binary-resources>

Making Safeguarding Personal (MSP) and SAB Audits

Making Safeguarding Personal (MSP) audits assess responses to safeguarding alerts and decision-making quality. Feedback from people, practitioners, and managers aims to improve outcomes. Areas for improvement include completing Risk Protection Plans and Mental Capacity Assessments. The SAB conducts multi-agency audits to identify good practices and areas for development. A recent mental capacity audit revealed staff challenges, including confidence in applying the MCA. Staff seek more training and opportunities to shadow experienced BIAs and benefitted from focus groups to discuss practice issues.

MSP outcomes are captured in the SAC return, with audits indicating the need for better individual consultation. The SAB Manager and Adult Safeguarding provider team manager are working on embedding MSP practices. A report in October 2023 showed improved MSP outcomes, with 88% of people achieving their desired outcomes in 2022/2023, up from 83% in 2021/2022 at the conclusion of a S42 Enquiry.

However, some families expressed dissatisfaction when enquiries did not lead to prosecutions or home closures.

Community Safety Strategic Needs Assessment

The Community Safety Partnership's Strategic Needs Assessment, produced every three years, identifies crime hotspots and types of criminal activity impacting adult safeguarding, such as domestic abuse and cyber-crime. The Safer Cheshire East Partnership (SCEP) funds an analyst from Cheshire Police to produce quarterly crime reports, which are reviewed by SCEP partners to raise community safety awareness.

The SCEP Annual Report [scep-annual-report-2022-2023-final.pdf \(cheshireeast.gov.uk\)](https://cheshireeast.gov.uk/scep-annual-report-2022-2023-final.pdf) highlights joint efforts to prevent and reduce crime, including the Violence and Intimidation Against Women and Girls Programme, the Safer Streets Initiative, and safeguarding training for taxi drivers. Feedback from care providers and stakeholders is gathered to improve safeguarding practices, with officers now also consulting selected individuals, social workers, and Practice Managers for their insights.

3.3 Current Performance - plans to improve.

Also see note at 1.4 current performance.

Based on the LG Inform CQC theme-based report – For Ensuring Safety, Cheshire East is above the England or Regional average for 3 indicators, the same for 4 and neutral polarity for 8, and below average for 1 total 16.

	Current Performance	Plans to improve
	<p>% of section 42 safeguarding enquiries where desired outcomes were asked for and expressed, where outcomes were fully achieved 2022/23 % (Higher is better)</p> <p>Cheshire East – 55.8%</p> <p>England – 67.1%</p>	<p>Since 2022/23, a group of people with care needs created an MSP wallet card, launched at the June 2023 development day and distributed to ASC staff and partner agencies. The Chief Exec of Disability Positive, people supported by ASC, and the LSAB subgroup monitor MSP outcomes, which are reported monthly in the Safeguarding performance report. We are aware that for Organisational Safeguarding when Providers are asked for MSP outcomes these are not as forthcoming, plans are in place to address this.</p>

4. Leadership

We have clear responsibilities, roles, systems of accountability and good governance. We use these to manage and deliver good quality, sustainable care, treatment, and support. We act on the best information about risk, performance, and outcomes, and we share this securely with others when appropriate.

We focus on continuous learning, innovation and improvement across our organisation and the local system. We encourage creative ways of delivering equality of experience, outcome and quality of life for people. We actively contribute to safe, effective practice and research.

Together Values

**Together we are the future of Adult Social Care in Cheshire East.
Together we will feel empowered to ask questions, challenge decisions and contribute to our development.
Together we take this authority to meet the challenges of the future.
Together we will develop a culture and style that is valued and respected both internally and externally.
Together we will review and restructure our services to meet the challenges.**

Our strengths

**Consistent, stable, and inclusive Leadership Team with our PSW integral to the team.
Robust grip and oversight on Governance and Performance
Leadership oversight and guidance relating to key operational challenges and risks.
Robust and consistent financial monitoring and support
Transformation Plan to address 'Prevent, Reduce Delay'.**

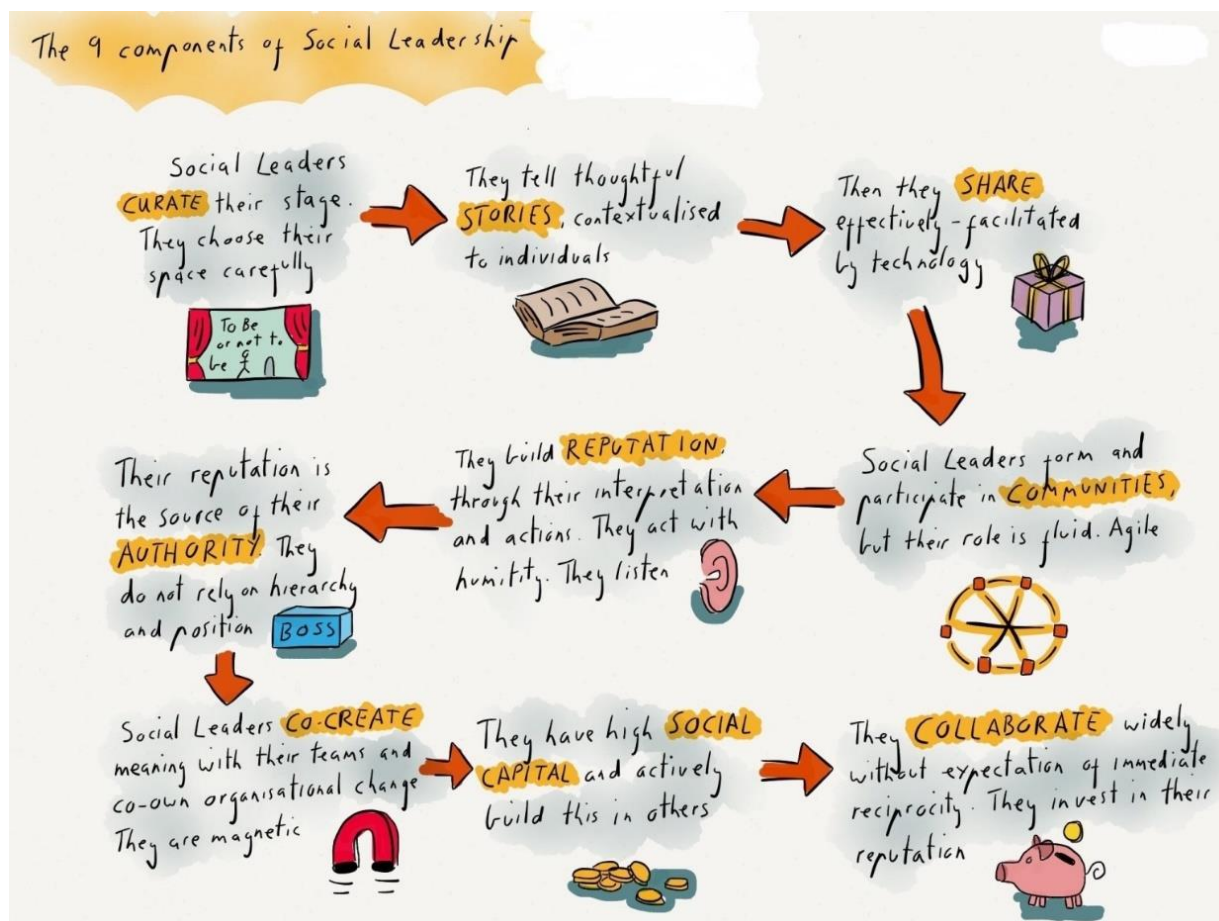
Areas for Improvement

**Increase and enhance equality, diversity and inclusion across under-represented groups.
Move at pace towards transformation.
Maintain recruitment across the service.
Reduce levels of sickness and absence.
Complete workforce strategy to include both internal and external workforce.
Stabilise the financial position of the service and Council.**

Leadership in Adults Social Care

Cheshire East is proud of its experienced and stable senior management team in Adult Social Care Operations and Public Health. An interim Director of Commissioning is currently bringing new perspectives. The executive director, directors, and heads of service actively participate in various NW ADASS Networks, including those focused on improvement, safeguarding, and mental health.

All senior leaders are part of the Cheshire East Council Wider Leadership Team, attending monthly events to address corporate challenges and share learning also receive the weekly Corporate Core Brief to cascade to their teams. A new Council Leader took office in July 2024. The organisation values strong, effective, and inclusive leadership, which has fostered mutual respect and stability and will help to meet many challenges faced by the organisation. This leadership style is appreciated by staff, many of whom return to Cheshire East after pursuing higher pay elsewhere.



Governance, Accountability and Risk

Cheshire East takes performance monitoring seriously in Adult Social Care, Health, and Integration. The Corporate Risk Register is regularly updated and cross-referenced with the Strategic Plan. The Directorate Risk Register is also maintained and discussed in leadership meetings. Operational assurance is reported weekly by directors and informed by business intelligence, with actions agreed at monthly Budget and Performance meetings attended by senior Adult Social Care Operations and Commissioning Managers, Finance, Business Intelligence and HR representatives and is chaired by a Head of Service.

Additional assurance comes from weekly Quality, Performance, and Authorisation Board discussions, monthly Legal Gateway meetings, and a multi-agency complex safeguarding forum. The forum, chaired between the Head of Adult Safeguarding and a senior Cheshire Police officer, allows staff from any agency to seek advice and includes participation from people for whom concerns have been expressed, includes oversight of MAPPA decision making, and updates of progress with cases going through the Court of Protection. LSAB has a Quality Assurance subgroup and there is a newly created Adults, Health, and Integration Transformation Portfolio Governance structure. All managers have access to 'Power BI' system to monitor performance and to identify demand and pressure in the teams.

The Executive Director chairs a monthly technical meeting with Operational Director, PSW and Head of Adult Safeguarding to manage risks and discuss high-profile cases including QA reports relating to Provider embargos. The response to major incidents, such as a recent evacuation of over 300+ individuals and families ensuring that they had access to food and beds for two nights during a fire in Crewe, is highly valued.

Financial challenges for Cheshire East and ASC are addressed with a robust action plan and Transformation Plan, focusing on areas with the greatest service and financial challenges. Finances are monitored at all service levels, with weekly meetings and financial challenge sessions. Feedback from a CIPFA review indicates the right actions are being taken for future financial stability.

Equality, Diversity, and Inclusion

The Directorate EDI Group meets bimonthly following the Corporate EDI Board to discuss staff EDI issues and improve community interaction, focusing on underrepresented groups. Recent topics include Gypsy and Roma Travellers' welfare, digital applications, and LeDer Reviews. Also reviewed Equality Impact Assessments, staff survey outcomes, and network group involvement. Minutes of our Directorate EDI Group are shared with DMT and passed on to the Corporate EDI Board.

Corporately, staff network group membership has grown to nearly 200 officers, with new networks for younger employees and veterans. These groups help assess and review policies early ensuring that any policies are co-produced and consider equalities at the outset. The Council supports the Sunflower Lanyard Scheme for hidden disabilities, with training available via Learning Lounge. The Equality Champions network has been refreshed with a new training plan.

Learning Lounge offers mandatory eLearning modules on equality and dignity at work there is a policy for 'reasonable adjustments' for staff with training for all to use it. EDI Boards in each Directorate meet regularly and receive updates from the Corporate EDI Board. The Communities team engages with VCFSE providers interest areas for minority groups, including asylum seekers and refugees, and the Cohesion team supports migrant populations and veterans, expanding to other underrepresented groups.

Complaints

Complaints from users of Adult Social Care services in Cheshire East are reviewed and managed centrally, with quarterly reports circulated to relevant Directorates/Services. The central Complaints team ensures timely responses, achieving over 90% compliance within the timeframe. The Complaints and Compliments report is discussed at Budget and Performance meetings, and a weekly Complaints Tracker is reviewed by the Director of Adults Social Care.

The Social Care Reform, Practice Assurance, and Development team analyse complaints to identify themes for further development and training. Most complaints concern financial assessments, fees, and charges, leading to a more transparent policy update. This analysis informs ongoing staff training and practice improvements.

Strategic Planning

Strategic planning in Adult Social Care is guided by Joint Strategic Needs Assessments. The Cheshire East 'Blueprint 2030' outlines the desired health and care system for 2030, aiming to empower individuals, families, and communities to manage their own health and receive care in community settings. This Blueprint, developed to communicate future ambitions to stakeholders, residents, and the workforce, will be integrated into future Adult Social Care plans.

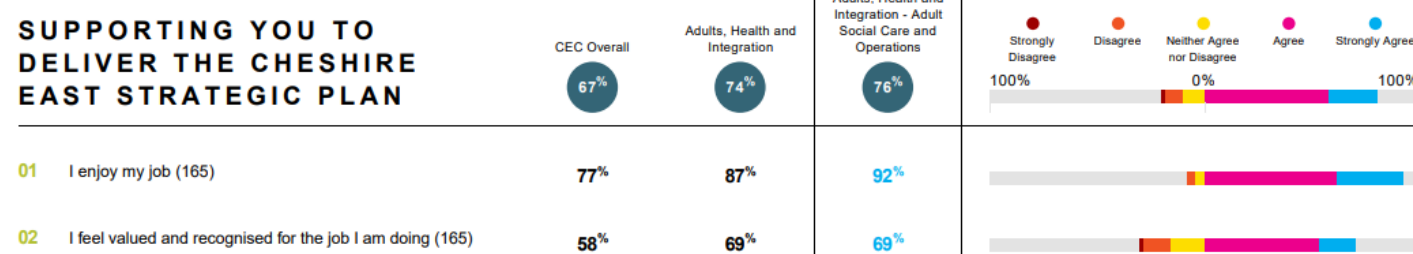
Information Security

The Adult Services Operations Director serves as the Caldicott Guardian and is part of the Corporate Information Governance Group (IGG). Monthly IGG meetings are attended by the Strategic Lead for Practice Assurance and Development and the Lead for Business Support and Finance Systems who work closely with the Adult Social Care Operations Director and the Head of Improvement, Assurance and Development/Principal Social Worker for Adults to address issues raised at IGG meetings. All staff must annually complete the mandatory Protecting and Managing Information (PAMI) eLearning module. Currently, there are no data breaches in Adult Social Care, but vigilance and continuous monitoring are maintained. Best practices and mandatory training are regularly shared and reported to senior managers.

Staff Pulse Survey

The annual staff survey, last conducted in November 2023, is analysed at both Corporate and Directorate responses. Managers work with staff groups to discuss results and develop action plans. Each Directorate holds focused discussions and team meetings to consider specific results and plan improvements.

Adult Social Care received higher scores than the corporate average, with 87% of staff indicating job satisfaction. This reflects confidence in leadership and stability within the Directorate. The results are celebrated, and efforts are made to increase future survey participation.



In response to the Pulse Survey, we produced this Storyboard to give a visual action plan:

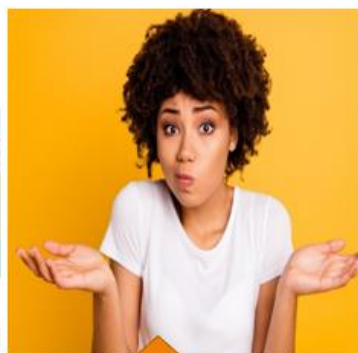
ADULTS, HEALTH AND INTEGRATION PULSE SURVEY RESULTS. 2022. The key themes from the pulse survey. This is our overarching plan.

We will ensure our staff:

Cheshire East Council
Corporate Plan 2021-2025



Understand a clear vision for the future of the council from Senior Leaders. Understand the priorities of the Corporate Plan and how they contribute



Well-informed about what is going on across the council, and decisions are made at the right level



Able to speak up and challenge the way things are done



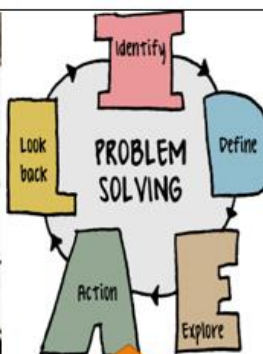
Supported by line managers. line manager's approach is fair and equitable



Listened to by Line Managers regarding their views and opinions and they are consulted on things that affect them at work



Receiving formal performance review with their line manager in the last 12 months. Receive regular constructive feedback



good at identifying issues and then quickly taking appropriate action



Good at working with other teams across the Council to ensure our work is streamlined

Learning Improvement and Innovation

Over the past 12 months, Cheshire East Council has undergone extensive external scrutiny and contributed to national initiatives, including the Government's Charging Reform Trailblazer work. In 2023, IMPOWER reviewed Adult Social Care Functions, and their recommendations were incorporated into the Transformation Plan.

The Chief Executive, appointed in January 2024, commissioned the Local Government Association for a Corporate Peer Review and DMA for a review of delegated decision-making. The draft Corporate Peer Challenge Action Plan, endorsed by the full Council, addresses significant challenges, including financial stability and long-term transformation. Partners have praised the dedication and commitment of Adult Social Care staff and the leadership of the Directorate.

Building the Right Support Peer Review

We had the opportunity during June 2024 to engage with a piece of work commissioned by NHSE with the LGA which focused on reviewing LD and Autism services and practice across the Cheshire East, Cheshire West and Wirral footprint in line with our Health provider CWP. Through this work colleagues from the three LA areas identified key priorities to join together to deliver improvement to ensure better outcomes for local people, these included: Supporting people with LD into employment, Direct payments, Autism Board and developing on the CWP Ambassador Model, Dynamic Support Register development, ASC engagement around CETR's. At the current time we are working through the report and will be in discussion with the LGA to produce our action and learning plan from the recommendations.

NW ADASS Peer Challenge

Senior Managers in Adult Social Care are actively involved in Sector Led Improvement within the Northwest ADASS region and contribute to the LGA Peer Review process. In March 2023, NW ADASS conducted a Peer Challenge in Cheshire East against the CQC Single Assessment Framework, highlighting strengths such as the First Point of Contact Teams, safeguarding user group, and staff dedication. Areas for improvement included reducing reliance on agency staff, which has since been addressed through active recruitment.

The Peer Challenge also helped identify resources needed for CQC Local Authority Assurance. Following this, the Social Care Reform, Practice Assurance, and Development team was established to help align business intelligence with operational practice. This team, led by the PSW, includes the Social Work and Occupational Therapy Apprenticeship scheme. June 2024 Peer Challenge recognised the emphasis on professional development and the PSW's role at the senior management level. A follow-up with the NW ADASS Peer Challenge team is planned for later in 2024.

Continuous Learning and Improvement and Professional Development

Cheshire East has established various apprenticeship and progression programmes for Social Work, Occupational Therapy, and Sensory Rehabilitation. We are part of the West Midlands Teaching Partnership and subscribe to Research in Practice, providing extensive resources and training. The Council is known for high-quality student placements and growing its own staff, with many current managers starting as newly qualified social workers.

Team and individual successes are celebrated through annual awards and the through the corporate 'Made my Day' scheme. Continuing professional development is supported by a comprehensive programme, including eLearning and personal development annual reviews. The Corporate system allows managers to review the ongoing learning of all staff and to ensure that staff are up to date with mandatory training. A Workforce Development Strategy is being implemented for internal and commissioned provider workforce, with interest in the development of a Care Academy, with efforts to promote careers in Adult Social Care through local partnerships and a promotional video. Provider managers work closely with local colleges, the local Enterprise Partnership, Skills for Care, Job Centres and with colleagues in Supported Employment to actively promote careers in Adult Social Care, a video has been produced to actively promote Social Care employment in Cheshire East.

Flexible working is a key strength, with performance maintained both pre- and post-COVID. The Principal Social Worker and other leaders actively participate in regional boards and initiatives, sharing best practices

and promoting flexible working benefits including a podcast. Our flexible working is a real strength for the Authority and demonstrates our trust in our staff.

National and Regional leadership roles

The Strategic Practice Assurance and Development Manager chairs the External ASYE Moderation Panel for Greater Manchester and Cheshire East, which meets quarterly and includes members from twelve Local Authorities, two Trusts, and Skills for Care. They ensure effective moderation within their organisations, with 10% of ASYE candidates' portfolios externally moderated annually.

The Principal Social Worker for Adults, also a Head of Service, has co-chaired the NW ADASS PSW Network and continues to attend regional and national PSW meetings, contributing to sector-led improvement. The Executive Director is a member of the NW ADASS Executive Board and chairs the Future Markets Board.

4.3 Current Performance - plans to improve.

Also see note at 1.4 current performance.

Based on the Skills for Care 2022/23 figures – Leadership, Cheshire East is above the England or Regional average for 7 indicators, the same for 1 and neutral polarity for 15, and below average for 4 total 27.

	Current Performance	Plans to and improve
	Turnover Rate Social Workers (Lower is better) Cheshire East – 20% England – 17.1% Region – 18.6%	Cheshire East has faced recruitment challenges in certain areas and teams, leading to high agency staffing, which has now been significantly reduced. Experienced and new Practice Managers are well-supported, improving team stability. With increasing demand and case complexity, support for social workers includes confidential counselling via the employee assist programme and forums for discussing complex cases. Progression opportunities are available for social care assessors to train as social workers through the apprenticeship scheme.
	Sickness Days Occupational Therapists (Lower is better) Cheshire East – 18.2 days England – 9.1 days Region – 12.7 days	Cheshire East has successfully filled all vacancies in the past six months despite previous recruitment challenges. The operating model has been revised, and Practice Manager OTs have been appointed, strengthening the service foundation. A progression system and apprenticeship training for social care assessors are in place. OT waiting lists have decreased, reducing workforce pressure. However, high demand persists, and proactive support for OTs in managing increased case complexity remains essential.
	Turnover Rate All ASC Staff (Lower is better) Cheshire East – 20.6% England – 15.4% Region – 14.8%	Cheshire East has a large internal workforce with in-house reablement and Care4ce staff. Recruitment has been challenging due to competitive nature of the employment market, but recent pay grade changes are improving recruitment. The physical demands of care work, especially for older employees, and the difficulty in attracting younger people to social care remain significant challenges.

	Current Performance	Plans to and improve
	Full-time equivalent annual pay for Social Workers (Higher is better) Cheshire East - £35,700 England - £39,100 Region - £37,200	<p>Cheshire East acknowledges that its pay rates are lower than the regional average, impacting recruitment due to competition with neighbouring authorities. However, good terms, conditions, and a flexible working policy help attract and retain employees. The successful apprenticeship program has trained and retained social workers and students, with many agency social workers transitioning to permanent roles, reflecting job satisfaction.</p> <p>Annual celebrations recognise the contributions of social care staff and teams. Some staff who left for higher-paying positions have reappplied to Cheshire East, valuing the support and guidance over higher pay.</p>

Cheshire East Council, CQC LA Assurance Self-assessment, Summary

This self-assessment reflects the way Cheshire East operates with a focus on our residents, and our staff wellbeing and development, it describes systems, processes, performance, practice and governance and areas for improvement including Service transformation. Our focus is to fulfil our ambition for people:

We all want to live in a place we call home with the people and things we love, in communities where we look out for one another, doing things that matter to us. Where individuals, communities and organisation work together to build on our strengths to reduce inequalities and improve health and wellbeing.