

OPEN

## **Audit and Governance Committee**

**28 July 2025**

### **CQC Local Authority Assurance Outcome**

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**Report of: Helen Charlesworth-May, Executive Director, Adults, Health and Integration**

**Report Reference No: AG/22/25-26**

**Ward(s) Affected: All**

#### **Purpose of Report**

1. This report is intended to update the Audit and Governance Committee on the outcome of the Local Authority assurance visit by the Care Quality Commission (CQC) during week beginning 20 January 2025.
2. To advise members that Cheshire East received a 'Good' rating with a score of 75% with a link to the full Cheshire East CQC report. [Cheshire East Council: local authority assessment - Care Quality Commission](#)
3. At the time of writing this score was one of the highest scores for Council's deemed as 'Good'.
4. Consideration of this report is in line with the remit of the committee which has within its terms of reference to receive 'assurances from across the organisation. In doing so, the Committee will consider the effectiveness of the arrangements described, identifying further information needed and/or making recommendations for improvements and additional action required, which can include further reporting on matters to those charged with governance.'

#### **Executive Summary**

5. The Health and Care Act 2022 introduced a new duty for the CQC to assess local authorities' delivery of their adult social care functions under part 1 of the Care Act 2014. The process known as 'local authority assurance' commenced in April 2023. When introduced it was anticipated that all local authorities would go through this process by April 2025.
6. The local authority assurance process begins when a local authority receives a notification letter from the CQC. Following receipt of this letter, each local authority is expected to submit a predetermined Information Return (IR) through a secure CQC portal within a 3-week timeframe. What follows is a period of desktop analysis by CQC, this includes, but is not limited to, publicly available information and data returns produced over the past 12 months by the local

authority, and some discussion with providers and people who use and access services, prior to the local authority receiving 6-8 weeks' notice of an onsite visit.

7. The onsite visit in Cheshire East took place during week beginning 20 January 2025. During the onsite visit, the CQC met with a variety of individuals, including the Chief Executive, Executive Director of Adults, Health and Integration the acting Director of Public Health, the Principal Social Worker for Adults. elected members, groups of staff, partners, and providers. Following the onsite visit CQC published a draft report and a rating for each of the 4 themes in what is known as the Single Assessment Framework (SAF). The draft report was shared with the Executive Director of Adults, Health and Integration who was given 10 days to comment on factual accuracy and was then subject to an internal CQC moderation process before being published as a final report on 14 May 2025.

## RECOMMENDATIONS

The Audit and Governance Committee is recommended to:

1. Support and comment upon the rating and feedback of the Cheshire East Council CQC LA Assurance Assessment of Adults Social Care and the initial response from the directorate.

## Background

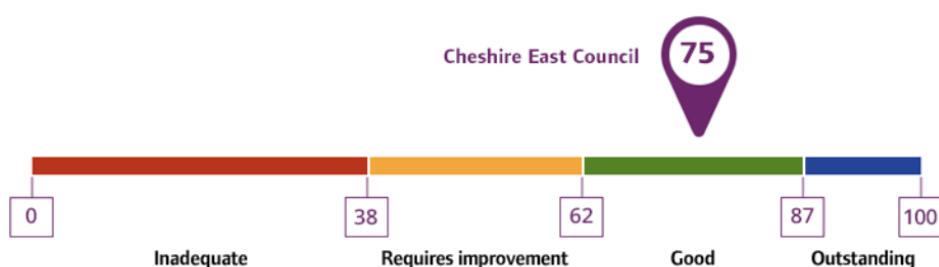
8. The statutory duties of adult social care services are set out in Part 1 of the Care Act 2014. The legislation places a duty on councils to support and promote the wellbeing and independence of working age disabled adults and older people, and their unpaid carers and gives them more control of their care and support.
9. CQC introduced a new 'Single Assessment Framework' (SAF) in July 2022. The SAF unifies assessment approaches for all health and care organisations in England to make assessment simpler, more dynamic, and more evidence led. This includes care providers, whether run by local authorities or private and third sector providers, who have been continually assessed by the CQC since 2010.
10. The SAF has nine 'quality statements' in four themes. Referred to as 'we statements' written from the perspective of the organisation and 'I' statements written from the perspective of people who use and access adult social care services. For consistency of assessment evidence inspectors focus on people's experiences, feedback from staff and leaders, observations of care, feedback from partners, processes, and outcomes of care.
11. Reports are published on the CQC website for each local authority. Reports include findings for each of the themes and each quality statement and will outline strengths and areas for development.

CQC will score each quality statement from one to four:

- 1 = Evidence shows significant shortfalls in the standard of care.
- 2 = Evidence shows some shortfalls in the standard of care.
- 3 = Evidence shows a good standard of care.
- 4 = Evidence shows an exceptional standard of care.

An overall score is calculated against five key questions, whether health and care organisations are safe, effective, caring, responsive to people’s needs, and well-led. Scores are in four categories - inadequate, requires improvement, good or outstanding.

Cheshire East scored 3 against each quality statement. At the time of publication only two local authorities scored higher than Cheshire East scoring 78% and 89%. Only one council has been rated as outstanding to-date, achieving a score of four against each domain.



### Briefing information

12. CQC undertook analysis of publicly available data for Cheshire East and contacted several providers and partner agencies. CQC also requested an anonymised list of 50 people who have used or have accessed services within the past 12 months. From this list, CQC selected 10 individuals to contact to discuss their experience (having obtained consent). See, appendix one for timeline.
13. The Reform, Assurance and Development team collated data for the information return and were the single point of contact for the CQC local assessment process. They coordinated the CQC onsite visit in conjunction with the senior management. The onsite visit included: meetings with staff, partners, providers, elected members, and experts by experience. The CQC set up meeting with the senior management team before the onsite visit highlighted strengths and areas of improvement identified from the self-assessment. An LA Assurance Improvement Plan linked to the wider Council’s Transformation Plan was already in place and being monitored. This was updated with CQC findings from their report.
14. The key areas for improvement are set out in the table below, notable findings from CQC were that the Service knew itself; its areas for improvement and its strengths, and that staff felt supported by leaders, safe to practice with a culture of learning. These are regarded as critical measures for ensuring long-term improvement and ongoing success.
15. The main areas for improvement against the four CQC themes are:

<b>Working with people</b>	<b>Providing Support</b>	<b>Ensuring Safety</b>	<b>Leadership</b>
Increase the number of people receiving a direct payment.	Increase the number of people supported outside care homes.	Further develop transition process (preparing for adulthood) with Children's Social Care.	Maintain recruitment across the Service.
Improve service and offer to Carers.	Further develop co-production with people and partners.	Increase links between Safeguarding Boards and wider Council, sharing risks, reviewing systems for safety and promoting the Board's work.	Reduce levels of sickness and absence.
Further develop EDI resources.	Review the cost of supporting people with a learning disability and autism.	Improve awareness raising of learning from safeguarding adult reviews and domestic abuse related deaths.	Complete workforce strategy to include both internal and external workforce.
Improve waiting lists and waiting times.	Develop community-based model of support for people living with dementia to ensure timely discharge from hospital.	Further work to embed Making Safeguarding Personal outcomes.	Progress Service transformation themes linking with corporate priorities.

16. CQC have advised that following completion of all baseline assessments they will be reviewing how the Assurance Framework continues, this will be done with a variety of stakeholders including hearing from LAs about their experience. Options could include changing the themes/topics and quality statements, the frequency of assessments, and scoring methodology.

### **Consultation and Engagement**

17. As part of the LA Assurance process CQC contact a range of people including those who access support services, their carers, and families, also staff, providers, and partners such as Health to gain feedback of their experience of CEC either through social care processes or as an employee. This was completed by CQC as part of the CQC LA Assurance framework timescales as detailed in the report.

### **Reasons for Recommendations**

18. To provide the committee with appropriate assurance in line with its remit as set out in paragraph 4 of this report.

### **Other Options Considered**

19. There are no relevant other options.

### **Implications and Comments**

*Monitoring Officer/Legal/Governance*

20. The legal position regarding the CQC report is as stated.
21. The CQC local authority assurance process links directly to an assessment of how well the local authority is meeting its statutory responsibilities under Part 1 of the Care Act 2014. Whilst the Health and Care Act 2022 provides the Secretary of State with powers of intervention in local authorities who are deemed to be 'inadequate', this is not relevant in this instance.

#### *Section 151 Officer/Finance*

22. There are no financial implications or changes required to the MTFs as a result of the recommendations in this report.

#### *Human Resources*

23. There are no human resources implications associated with this process other than allowing staff time to attend focus group discussions with the CQC.

#### *Risk Management*

24. The CQC assurance process includes a review of the management of risk.

#### *Impact on other Committees*

25. The substance of this report has already been the subject of a report to the Adults and Health Committee.

#### *Policy*

26. CQC local authority assurance relates to "A Council which empowers and cares about people" and "Improving Health and Well Being" and relates to both Cheshire East residents and staff.
27. For Adults, Health & Integration there could be changes to policies as part of the improvement plan and improved work practice.
28. CQC local authority assurance relates to "A Council which empowers and cares about people" and "Improving Health and Well Being" and relates to both Cheshire East residents and staff. And links to the priorities within the [Corporate Plan](#). For Adults, Health & Integration there could be changes to policies as part of the improvement plan and improved work practice.

#### *Equality, Diversity, and Inclusion*

29. Equality, Diversity, and inclusion are central themes that run through the CQC local authority assurance process. An Equality Impact Assessment is not appropriate.

#### *Other Implications*

30. Rural Communities - CQC assurance process includes a review of equity and experience in outcomes. Access to information, advice, and services by those who live in rural communities will be considered as part of this process.
31. Children and Young People including Cared for Children, care leavers and Children with special educational needs and disabilities (SEND) - The CQC assurance process includes a review of the transition of young people between Children's and Adult Social Care Services, particularly in respect of Preparing for Adulthood.
32. Public Health - Individual wellbeing is central to the Care Act 2014. Additionally, one of the CQC Quality Statements relates to equity and experience in outcomes. The Public Health team were actively involved in the preparation for the CQC assurance process. It is anticipated that there will be a positive impact on the health and wellbeing of Cheshire East residents.

### *Consultation*

<b>Name of Consultee</b>	<b>Post held</b>	<b>Date sent</b>	<b>Date returned</b>
<i>Statutory Officer (or deputy) :</i>			
Ashley Hughes	S151 Officer	16/07/25	16/07/25
Janet Witkowski	Acting Monitoring Officer	16/07/25	16/07/25
<i>Legal and Finance</i>			
Nikki Wood Hill	Finance Manager	16/07/25	16/07/25
Roisin Beressi	Principal Lawyer	16/07/25	17/07/25
<i>Executive Directors/Directors</i>			
Helen Charlesworth-May	Executive Director Adults, Health, and Integration	16/07/25	16/07/25

<b>Access to Information</b>	
Contact Officer:	Sheila Wood. Head of Improvement and Assurance Adult Social Care Operations <a href="mailto:sheila.wood@cheshireeast.gov.uk">sheila.wood@cheshireeast.gov.uk</a>

Appendices:	Appendix 1: Timeline
Background Papers:	<a href="https://www.cqc.org.uk/care-services/local-authority-assessment-reports/cheshireeast-0525">Local authority assessments - Care Quality Commission (cqc.org.uk)</a>  Link to Cheshire East Report: <a href="https://www.cqc.org.uk/care-services/local-authority-assessment-reports/cheshireeast-0525">https://www.cqc.org.uk/care-services/local-authority-assessment-reports/cheshireeast-0525</a>

## Appendix 1: Timeline

# Timeline

