

Adult Social Care CQC Assessments / Inspection Self Assessment

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Notes

- Our self assessment is based upon the CQC Themes:
 - Working with people
 - Providing Support
 - Safety within the system
 - Leadership
- Links to evidence have been provided where documents are published externally
- All sources of evidence are contained within relevant parts of the CQC requested Information Return items

Theme 1 - How the local authority works with people

	QUALITY STATEMENTS	SOURCES OF EVIDENCE
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. 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. This is because: • their care and support needs are assessed in a timely and consistent way • assessments and 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 choice, builds on their strengths and assets, and reflects what they want to achieve and how they wish to live their lives.	➤ ASC Policies, Protocols and Guidelines ➤ ASC Governance Data Insights Pack (IR31) ➤ Portsmouth Plan for Carers ➤ Home - Portsmouth Carers Service ➤ Adult Social Care Outcomes Framework ➤ Health and Wellbeing Strategy ➤ SystmOne in Social Care ➤ Transition Protocol ➤ Healthwatch Portsmouth (Advocacy)
	What is working well? ✓ We have a proactive, person centred approach to customers; people can talk directly with a member of the relevant adults' social care team. ✓ Waiting lists numbers and length of wait are managed and reasonable. An assessment of risk and priority of needs are considered, with a significant reduction in waiting list over the last 12 months. ✓ Review process improved with increased oversight by senior and operational managers, resulting in an improvement on timely planned reviews. ✓ Person centred approach to meeting needs ✓ Strengths based approach now includes our approach to Direct Payments ✓ Case management system with an integrated health spine enables a holistic view of the person wherever they are in their health and care journey. ✓ Integrated joint funded teams including Continuing Healthcare (CHC), Mental Health, Learning Disability and Integrated Care team with processes to inform the right decision on lead agency to support the individuals based on needs. ✓ Published Strategy for Carers, supported by a carers centre and a web site; with social workers and carers centre working together to support carers assessment with a managed waiting list ✓ Transition pathway clarified in updated protocol, single referral route into ASC with Transition lead, who promotes and facilitates with Children and Education; dedicated team for autistic and neurodivergent young people (based on need as opposed to diagnosis).	Areas for Development ✓ Embedding our transition offer across children's and adults. ✓ Improving approach, confidence and tools to support strength-based practice and assessment ✓ Strengthen our approach to Direct Payments to ensure those who want a Direct Payment are offered and supported appropriately ✓ Developing a strong framework around eligibility linked to strength based ✓ Further develop our 'Waiting well' approach ✓ Care Act Compliant case management system ✓ Developing our initial response (front door project)

Theme 1 - How the local authority works with people

	QUALITY STATEMENTS	SOURCES OF EVIDENCE
Supporting people to live healthier lives	We support people to manage their health and wellbeing so they can maximise their independence, choice and control. We support them to 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. I am supported to plan ahead for important changes in my life that I can anticipate. • The local authority works with people, partners and the local community to promote independence and support people to prevent, reduce or delay the need for care and support. It does this by providing or arranging provision of services, facilities, resources and other measures. • The local authority takes steps to identify people with needs for care and support that are not being met. • People in the area have access to the information and advice they need to make informed decisions about how to meet their care and or support needs.	➤ ASC Policies, Protocols and Guidelines ➤ ASC Governance Data Insights Pack and Response Team Stats ➤ The HIVE Portsmouth ➤ Health and Care Portsmouth ➤ ASC PCC Website Pages ➤ Portsmouth Carers Website ➤ Health and Wellbeing Strategy ➤ ASC / Carers Survey ➤ Accommodation strategy ➤ Prevention Strategy
What is working well?	✓ Range of grant funded services and well-established Independence and wellbeing team, reducing isolation via community connectors, focus on mental wellbeing and opportunities within the communities of Portsmouth; proactive approach to 'reaching' and including Seldom Heard. ✓ Shared vision and working arrangements with the ICB partnership across Public Health, NHS and ASC. ✓ Health and Care Portsmouth Plan, provides an integrated approach to supporting people in Portsmouth. ✓ The HIVE Portsmouth, a strategic partnership at place consisting of the voluntary and community sector, ICB and Portsmouth CC; works with local people, groups and organisations recognising strengths of individuals, families and communities to build independence and self-reliance as an alternative to a reliance on traditional services. ✓ Good Information, Advice and Guidance (IAG) demonstrated by carers response to Survey of Adult Carers in England (SACE) and responses from people being supported to the Adult Social Care Survey (ASCS), robust offer via Council's internet and HIVE Directory ✓ Well established help desk fielding approx. 1400 calls per month ✓ Positive and productive relationship with our Housing directorate, supporting join up and influence over decisions related to people with care and support needs, including setting out future opportunities for commissioning services. ✓ We have a policy engagement resource which has improved internal comms and supported better working with communities (directory, toolkit DP policy, transport policy etc) ✓ We now have an Accommodation Strategy and a Prevention Strategy	Areas for Development ✓ Strengthening operational links on prevention with Public Health ✓ Adopting 'diverse by design' ✓ Partnership working with VCS and NHS to support community helpdesks ✓ Two new housing developments to provide care and support in our community ✓ Recommissioning of Extra Care ✓ Improve analysis of ASCS to develop service improvements

Theme 1 - How the local authority works with people

	QUALITY STATEMENTS	SOURCES OF EVIDENCE
Equity in experience 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 the 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 This quality statement covers: • Understanding and addressing barriers to care and support • Understanding and addressing inequalities in experience and outcomes • Ensuring care and support meets the diverse needs of communities • Ensuring people are encouraged to give feedback, which is acted on and used to drive improvements • Meeting legal requirements relating to equality and human rights. This includes: • avoiding discrimination • having regard to the needs of people with different protected equality characteristics • making reasonable adjustments to support equity in experience and outcomes.	➤ The HIVE Portsmouth ➤ Health and Care Portsmouth ➤ IWT Team SharePoint ➤ Portsmouth LD Partnership Board (Facebook) ➤ ASC PCC Website Pages ➤ Autism Ambassadors ➤ Autism CF ➤ ASC Strategy ➤ JSNA ➤ Prevention Strategy ➤ Prevent Board ➤ Corporate EDI ➤ WRES Report
What is working well? ✓ Independence and Wellbeing Team working across all communities and faith groups; targeted outreach work in marginalised communities ✓ Developing good relationships with faith groups across the city ✓ Providing strategic leadership to the PREVENT Board and Chair Channel Panel ✓ Partner with HIOW ICSs on 'No wrong door' model for transforming adult community mental health services ✓ Room One, information and support service for autistic people managed by autistic people ✓ Making Every Contact Count training deployed across Council to support inclusion in a person-centred way ✓ Information available in different languages. ✓ Learning Disability Partnership Board, an established model of coproduction to support good outcomes by supporting residents voice to be heard alongside providers, commissioners etc ✓ Good links between Community Autism forum and service development ✓ Council Autism Ambassadors appointed to raise awareness and help staff and residents living with autism. ✓ Carers Groups ✓ Strategic values, of the Council, create culture to deliver equity in experience: Respect, Integrity, Person-Centred, Inclusive and Collaborative ✓ ASC are now working in accordance with the Workforce Racial Equality Standards (WRES) ✓ Promotion of 'Moving up' programme (transition) ✓ PSW support for Global Majority initiatives		Areas for Development ➤ Continue to develop our understanding of 'seldom heard' hard to reach across ASC (inc Room One) ➤ WRES links with corporate EDI ➤ Review and updated focus on staff EDI group ➤ Adopting LGA Diverse by Design ➤ Improve use of the JSNA to support single understanding of demography and population. ➤ Strengthen coproduction across activities and customer groups ➤ Collaborate with corporate colleagues to reduce the impact of digital exclusion

Theme 2: Providing support

	QUALITY STATEMENTS	SOURCES OF EVIDENCE
Care provision, integration and Continuity (Pt1)	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. • The local authority understands the care and support needs of people and communities. There is a good variety of care providers, provision is resilient and there is sufficient capacity to meet demand now and in future. • Local people have access to a diverse range of safe, effective, high-quality support options to meet their care and support needs. This includes unpaid carers and those who fund or arrange their own care. Services are sustainable, affordable and provide continuity for people.	➤ Market Position Statement (SharePoint) (IR15) ➤ Market Sustainability (PCC Website) (IR15) ➤ ASC Governance Data Insights Pack (IR31) ➤ Service Demand Figures ➤ Business Continuity Plans (IR20) ➤ Social Care Sector Ops Group ➤ Health and Wellbeing Strategy ➤ S75 Agreements and Data ➤ Housing / HEDNA report on demand ➤ ILDS Service Specification (pdf doc) ➤ ILDS DSR Standard Operating Procedure ➤ Provider Forums (PCC Website)
What is working well?	✓ Sufficient supply of domiciliary care provision, meaning fewer/shorter waiting times supported by established and quality informed domiciliary care brokerage ✓ Good relationships with SE ADASS councils developing a joint Memorandum of Understanding on provider failure. ✓ Care Home closure plan, developed and tested with place-based partners in 2022/3 followed by learning ✓ Market Position Statement published in 2024 with an updated version to be published August 2025 ✓ JSNA and HEDNA report on Older Peoples accommodation in the city provides common understanding of demand and capacity across Housing and Social Care to support informed commissioning ✓ Regular operational review of capacity in city using local intelligence and NECS tracker ✓ S75 for joint commissioning including Continuing Healthcare (CHC), Learning Disability, Mental Health, reablement and quality; and funding schemes through Better Care Fund ✓ Established provider forums for domiciliary care, care homes and registered managers networks ✓ Monthly quality led governance sessions for providers, to support education; and fortnightly newsletter ✓ ILDS Dynamic Support Register (DSR) ✓ Continued support for the ‘Room One’ service (now used as an exemplar by LGA) ✓ Issued new framework for Learning Disabilities Day Services ✓ Introduction of brokerage to include care homes to promote consistency, best use of capacity at the right price. ✓ Practice guidance on placements in to care homes supported by guidance on Choice of Accommodation and top-ups	Areas for Development ✓ Commissioning intentions for day services (SensePlus) ✓ To deliver extra care and S2.5 accommodation with housing colleagues to ensure optimal outcomes for people receiving support. ✓ Review specification for care homes with a focus on outcomes. ✓ Complete the review processes and increase opportunities for Direct Payments (linked to Strength Based)
Continued in part 2		

Theme 2: Providing support

	QUALITY STATEMENTS	SOURCES OF EVIDENCE
Care provision, integration and Continuity (Pt2)	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. • The local authority understands the care and support needs of people and communities. There is a good variety of care providers, provision is resilient and there is sufficient capacity to meet demand now and in future. • Local people have access to a diverse range of safe, effective, high-quality support options to meet their care and support needs. This includes unpaid carers and those who fund or arrange their own care. Services are sustainable, affordable and provide continuity for people.	➤ Market Position Statement (SharePoint) (IR15) ➤ Market Sustainability (PCC Website) (IR15) ➤ ASC Governance Data Insights Pack (IR31) ➤ Service Demand Figures ➤ Business Continuity Plans (IR20) ➤ Social Care Sector Ops Group ➤ Health and Wellbeing Strategy ➤ S75 Agreements and Data ➤ Housing / HEDNA report on demand ➤ ILDS Service Specification (pdf doc) ➤ ILDS DSR Standard Operating Procedure ➤ Provider Forums (PCC Website)
What is working well?	✓ Social Care Sector Operational Group provides a framework to triangulate intelligence on quality, prioritises support and agrees lead agency ✓ Shared approach to working with care providers to enhance quality related CQC rating (integrated approach with ICB partners) ✓ All registered care provision reviewed at least annually through contract and/or quality teams ✓ Monthly Strategic Commissioning meeting to promote responsible commissioning with a focus on quality, capacity, sustainability and accountability to public purse. ✓ Introduction of Transition Team with a particular expertise around neurodiversity, developing links across Adults Social Care & Children Services to support seamless transition, including understanding of costs. ✓ Health and care education, training and development offer for the sector ✓ Strong community links and work with local voluntary services ✓ Reviewed webpages for accessibility ✓ A proactive approach to understand level of risk linked to international recruitment at a provider level, use of ADASS/UKVI dashboard and support/signposting for care providers and recruits under international sponsor licences to minimise risks to continuity of care. ✓ Strengthened our approach to engagement to seek views from people with lived experience, supported by an engagement strategy	Areas for Development ✓ Develop work we have started on micro commissioning ✓ Working with Housing colleagues to deliver accommodation strategy ✓ Planning for introduction of Training Partnership Board to bring together stakeholders to review provider education offer aligned to quality, safeguarding and skills gaps ✓ Further review of webpages for content and structure ✓ Embedding our toolkit to support consistent engagement with residents, community and partners ✓ Develop directorate framework for co-production ✓ Improving use of data and market intelligence. ✓ Develop Workforce Strategy Phase 1-PCC; Phase 2 of Strategy –external Portsmouth care workforce

Theme 2: Providing support

	QUALITY STATEMENTS	SOURCES OF EVIDENCE
Partnerships and Communities (Pt1)	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. I have care and support that is coordinated, and everyone works well together and with me. • The local authority works actively towards integrating care and support services with services provided by partner agencies. This achieves better outcomes for people who need care and support and unpaid carers and helps to reduce inequalities. • Partnership working helps to ensure that care and support meets the diverse needs of individual people and communities. People experience a seamless care and support journey, and their support is co-ordinated across different agencies and services.	➤ ASC Strategy (SharePoint) ➤ Market Position Statement ➤ Market Sustainability (PCC Website) ➤ ASC Governance Data Insights Pack ➤ Service Demand Figures (IR31) ➤ Business Continuity Plans (IR20) ➤ Health and Wellbeing Strategy ➤ Shared Lives (PCC Website) ➤ YouTrust (Website) ➤ Minstead Trust (Website) ➤ Portsmouth Autism Forum / Room One
What is working well?	✓ City Vision informs Health and Care Portsmouth Plan and ASC Strategy and creates a shared vision and working arrangements with the ICB at place level ✓ Strong links with providers – communications through ASC Contracts, Provider Meetings (Governance, Registered Managers, Domiciliary Care Forum, Care Home Meeting) ✓ Better Care Fund (BCF) supporting pooled arrangements and joint prescribing for Community Equipment Service ✓ Integrated joint funded teams via a Section 75 agreement for Learning Disability, Mental Health, Continuing Healthcare, Community Rehabilitation Service (CRS) and Section 113 (Occupational Therapy) which includes operational and commissioning functions, and funds to commission services ✓ Joint funded SMT post - Assistant Director, Health and Care Services Portsmouth City Council / Hampshire and Isle of Wight Healthcare NHS Foundation Trust ✓ Transfer of Care Hub Portsmouth has supported discharge to assess and timely discharge of medically optimised patients alongside the Adult Intermediate Care Team (AICT) and integrated arrangements ✓ Strong links with (and membership of) the Portsmouth Provider Partnership (P3) ✓ Membership of the Health & Care Portsmouth partnership board ✓ Joint working to promote 'home first' in community settings to avoid admissions and reduce hospital stays. ✓ DASS is a partner member of ICB Board ✓ DASS and Cabinet member are members of Integrated Care Partnership (ICP) Joint Committee ✓ Membership of the Local Delivery Unit for Portsmouth and South East Hampshire	Areas for Development ✓ To further embed and establish relationships and working practices with health partners across the transformed Hampshire and Isle of Wight Healthcare NHS Foundation Trust ✓ To better develop our relationships with the voluntary sector, VCSE to improve outcomes
Continued in Part 2		

Theme 2: Providing support

	QUALITY STATEMENTS	SOURCES OF EVIDENCE
Partnerships and Communities (Part 2)	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. I have care and support that is coordinated, and everyone works well together and with me. • The local authority works actively towards integrating care and support services with services provided by partner agencies. This achieves better outcomes for people who need care and support and unpaid carers and helps to reduce inequalities. • Partnership working helps to ensure that care and support meets the diverse needs of individual people and communities. People experience a seamless care and support journey, and their support is co-ordinated across different agencies and services.	➤ ASC Strategy (SharePoint) ➤ Market Position Statement ➤ Market Sustainability (PCC Website) ➤ ASC Governance Data Insights Pack ➤ Service Demand Figures (IR31) ➤ Business Continuity Plans (IR20) ➤ Health and Wellbeing Strategy ➤ Shared Lives (PCC Website) ➤ YouTrust (Website) ➤ Minstead Trust (Website) ➤ Portsmouth Autism Forum / Room One
What is working well? ✓ Partnership working with providers ✓ Portsmouth Autism Community Forum with focus on co-production- Room One - IAG and support for 18+ and their families, led by neurodivergent people. ✓ Established arrangements to support people with learning disability, autistic people and people who are neuro divergent into work; example of supported employment opportunities via Minstead Trust providing catering at Civic Offices and Central Library public cafe ✓ Case management system with an integrated health spine, enabling direct communication with GPs and access to key information related to a new of current customer. ✓ Work collaboratively across SE ADASS councils, including commissioning and performance networks and chairing safeguarding network ✓ Shared Lives and established service offer drawing on carers living in the local community. ✓ Shared understanding of quality across the city of providers (PVI Care and primary, Secondary) at operational and strategic level (Social Care Operational Group and HCP Quality Group).	Areas for Development ✓ To sign off and launch autism strategy ✓ Expanding Shared Lives capacity, short breaks and day opportunities using Accelerated Reform Fund (ARF)	

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

	QUALITY STATEMENTS	SOURCES OF EVIDENCE
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. I feel safe and am supported to understand and manage any risks. • Safety is a priority for everyone. There is a strong awareness of the risks to people across their care journeys. The approach to identifying and managing these risks is proactive and effective. The effectiveness of these processes is monitored and managed to keep people safe. • Care and support is planned and organised with people, together with partners, and communities in ways that improve their safety across their care journeys and ensures continuity in care. This includes referrals, admissions and discharge, and where people are moving between services. • The views of people who use services, partners and staff are listened to and taken into account. • Policies and processes about safety are aligned with other key partners who are involved in people's care journey to enable shared learning and drive improvement.	➤ Portsmouth Safeguarding Adults Board (Website) ➤ Transitions Pathway (IR5) ➤ ASC Strategy ➤ ECR ➤ CHC
What is working well? ✓ Safe systems pathways and transitions. ✓ Contract reviews of registered care providers across the city, approach jointly with Quality Team and others e.g. Community Nursing teams to support expertise and proactive support with focus on improvement ✓ Process for improvement and remediation ✓ CQC ratings reviewed and discussed at monthly multi agency quality group, with a risk manged approach to support. ✓ Risks affecting the market or likely to affect the system escalated to Health and Care Portsmouth Quality Board. ✓ Transition team, developing joint working with Children's to support early identification and tracking of Children who will transition to Adults Services. ✓ Integrated and single management via Portsmouth ASC of mental health social work and clinical teams supporting a collaborative approach. ✓ Extra Contractual Referral (ECR) process to support discussion/agreement of funding on complex & joint funded cases. ✓ Joint funded posts supporting reablement, hospital discharge and workflows ✓ CHC funding policy and framework. ✓ Enhanced Health in Care Homes (EHCH) framework reviewed and offer clarified ✓ Transitional Safeguarding Panel ✓ Improved resilience for hospital discharge and rehabilitation through the Adults Intermediate Care Team (AICT)		Areas for Development ✓ Develop reablement offer including our Community Reablement offer

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

	QUALITY STATEMENTS	SOURCES OF EVIDENCE
Safeguarding	We work with people to understand what being safe means to them as well as with our partners on 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. • There are effective systems, processes and practices to make sure people are protected from abuse and neglect. • Section 42 safeguarding enquiries are carried out sensitively and without delay, keeping the wishes and best interests of the person concerned at the centre. People can participate in the safeguarding process as much as they want to. • There is a clear understanding of the key safeguarding risks and issues in the area and a clear, resourced strategic plan to address them. • Lessons are learned when people have experienced serious abuse or neglect, and action is taken to remove future risks and drive best practice • People are supported to understand safeguarding, what being safe means to them, and how to raise concerns when they don't feel safe, or they have concerns about the safety of other people. • People are supported to make choices that balance risks with positive choice and control in their lives. • People are supported to understand their rights, including their human rights, rights under the Mental Capacity Act 2005 and their rights under the Equality Act 2010.	➤ Portsmouth Safeguarding Adults Board (Website) ➤ Process ➤ Learning and Development ➤ SARs ➤ One Minute Guides ➤ Business Plans and P tys. ➤ ASC Strategy ➤ ASC Audits Outcome Tracker (IR31) ➤ ASC Governance Insights Pack (IR31)
What is working well?	✓ What's working well is captured in the annual safeguarding report, published on Portsmouth Safeguarding Adults Board (PSAB) website ✓ Learning from SARs and reviews is fed back into the system and PCC capture within its Governance arrangements. Learning also shared with providers. ✓ PSAB has business plan and agreed priorities in development ✓ Monthly insights to governance on safeguarding , triage and risk assessment ✓ PSAB website hosts learning, focus and annual report; website including closure reports accessible to the public ✓ PSAB one-minute guides to support learning ✓ Regular involvement of families in SARs ✓ Safeguarding dashboard to support understanding of risk and safeguarding ✓ PSAB annual safeguarding conference that explores managing risk for adults who have care and support needs. ✓ Regular reporting to corporate governance group around safeguarding inc issues, risks mitigation ✓ Corporate agreement to expand Safeguarding team	Areas for Development ✓ Planning for the development of quality safeguarding pathway ✓ To develop sufficient capacity to address safeguarding demand in a timely way in Portsmouth ✓ Actions for Safeguarding Adult Reviews to be formally overseen by monthly ASC Governance Board ✓ Managing the impact of improvements in Safeguarding and impact on Response and community Teams

Theme 4: Leadership

	QUALITY STATEMENTS	SOURCES OF EVIDENCE
Governance, management and sustainability (Pt 1)	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. There are clear and effective governance, management and accountability arrangements at all levels within the local authority. These provide visibility and assurance on: • delivery of Care Act duties • quality and sustainability and risks to delivery • people’s care and support experiences and outcomes The local authority uses information about risks, performance, inequalities and outcomes to: • inform its adult social strategy and plans • allocate resources • deliver the actions needed to improve care and support outcomes for people and local communities. There are robust arrangements for the availability, integrity and confidentiality of data, records and data management systems.	Governance framework for ASC: ➤ Quality Assurance Framework (IR31) ➤ ASC Strategy, plan and values ➤ ASC Risk Register (IR32) ➤ Insights Pack (IR31) ➤ OFFLOG ASC metrics ➤ Corporate Performance Metrics (GAS) ➤ HCPP Quality Board (IR22) ➤ Social Care Sector Operational Group ➤ ASC Stakeholder Feedback 2023 (IR2) ➤ ASC SA feedback report (IR2) ➤ ASCC/ACS (IR2) ➤ Staff Survey (IR4) ➤ Processes – IAG, data sharing, retention, mandatory training
What is working well? ✓ Vision and Strategy, clear links from City Vision through Health & Care Portsmouth Plan to Adult Social Care vision clearly linked, with partners agreement that we are ‘speaking the same language’ ✓ Business plan derived from strategy, linked through to team plans and PDRs ✓ Leadership – Director of Adult Social Care reports to Chief Executive. Regular meetings with Chief Executive, monthly Directors' Meeting, Cabinet Member Briefing to brief on successes, priorities and risk. ✓ Corporate Leadership and Management Framework ✓ Regular papers to Health and Overview Scrutiny Panel, including two papers per annum on whole Directorate. ✓ Governance and accountability – robust structures with weekly SMT meetings reviewing risk, performance and improvement aligned to delivery of corporate, strategic and operational objectives. ✓ New internal and corporate Improvement Boards (now including external scrutiny from partners and corporate colleagues for our improvement plan) ✓ Partnerships – Health and Care Portsmouth est. 2015, Portsmouth City Council is one of six partners acting as the placed based delivery for HIOW Integrated Care System (ICS). Under a S75 there are integrated, managed and funded teams and services with a focus on Portsmouth residents through collaboration. ✓ Resources – weekly core SMT meeting with finance, underpinned by monthly SMT budget leads meeting to assess and review budget position, aligned to performance and Medium-Term Financial Strategy (MTFS)	Areas for Development ✓ To develop a framework for partners to contribute to setting strategy ✓ Publish organisational structure with partners ✓ Embed case audit process and quality assurance ✓ Improve analytic capacity / capability ✓ Build performance management and data across Adults	

	QUALITY STATEMENTS	SOURCES OF EVIDENCE
Governance, management and sustainability (Pt 2)	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. There are clear and effective governance, management and accountability arrangements at all levels within the local authority. These provide visibility and assurance on: • delivery of Care Act duties • quality and sustainability and risks to delivery • people’s care and support experiences and outcomes The local authority uses information about risks, performance, inequalities and outcomes to: • inform its adult social strategy and plans • allocate resources • deliver the actions needed to improve care and support outcomes for people and local communities. There are robust arrangements for the availability, integrity and confidentiality of data, records and data management systems.	Governance framework for ASC: ➢ Quality Assurance Framework (IR31) ➢ ASC Strategy, plan and values ➢ ASC Risk Register (IR32) ➢ Insights Pack (IR31) ➢ OFFLOG ASC metrics ➢ Corporate Performance Metrics (GAS) ➢ HCPP Quality Board (IR22) ➢ Social Care Sector Operational Group ➢ ASC Stakeholder Feedback 2023 (IR2) ➢ ASC SA feedback report (IR2) ➢ ASCC/ACS (IR2) ➢ Staff Survey (IR4) ➢ Action tracker sector operational group ➢ 4LSAB Safeguarding
What is working well?	✓ Performance – targets are linked to strategy and drive operational performance to promote good outcomes for individuals while promoting good use of public money. ✓ Oversight of internal audit recommendations, improvement plan, Safeguarding Adult Review (SAR) outcomes and complaints by SMT as part of monthly governance. ✓ ASC risk register reviewed at least monthly with SMT risk owners and clarity on action to treat, mitigate or remove; and escalation to corporate governance as necessary ✓ Provider Quality – monthly multi-agency operational group to triage intelligence, prioritise support at service/sector level based on intelligence and risk, escalated to Health and Care Portsmouth Quality Group where system risk. ✓ Partnership working to address and support turnaround of quality issues working with providers, e.g. extra care ✓ Safeguarding - Safeguarding Adults Policies and Procedures developed across 4 LAs in HLOW (leadership provided by Portsmouth ASC) supporting clarity and cross border partnership working; guidance on safeguarding for commissioners sets clear framework for purchasing decisions to minimise risk and create capacity for service improvement. ✓ Routine and regular Occupational Therapy sample survey / feedback direct from residents regarding quality of service ✓ Themed practice audits (MCA) ✓ Good levels of completion of the LGA Healthcheck followed by action plans	Areas for Development ✓ Develop a clear quality (& safeguarding) pathway ✓ Strengthen framework to support market oversight, provider quality and education. ✓ Strengthening governance processes across the directorate, through Annual Service Reports to Governance Board ✓ To develop a process for monitoring and management of our strategies (and defined outcomes)

Theme 4: Leadership

	QUALITY STATEMENTS	SOURCES OF EVIDENCE (IR34; IR36; IR30)
Learning, improvement and innovation (Part 1)	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. •Learning from people’s feedback about their experiences of care and support, and feedback from staff and partners is embedded throughout the local authority’s work and it informs strategy, improvement activity and decision making at all levels. Coproduction is embedded throughout the local authority’s work. •There is an inclusive and positive culture of continuous learning and improvement. The local authority has strong external relationships that support improvement and innovation. Staff and leaders engage with external work, including research, and embed evidence-based practice in the organisation. •There are processes to ensure that learning happens when things go wrong, and from examples of good practice. Leaders encourage reflection and collective problem-solving.	➤ Workforce – ASC WDS submission by PCC ASC, eligible for workforce development fund ➤ Monthly PSW/POT Practice Newsletter ➤ MDT and partner learning from events e.g. Care Homes Event ➤ Learning from Complaints, Critical Incidents and SARs – SMT reviewed action trackers ➤ Annual complaints report ➤ ‘Sense Something, Say Something’ ➤ Staff Survey ➤ LGA Leadership review ➤ 2023 Assurance –Stakeholder Feedback ➤ 2023 ASC Customer Feedback on ASC ➤ Digital Roadmap
What is working well? ✓ Directorate commitment to engagement, investment in resource to embed and support consistent engagement with a range of stakeholders ✓ SMT commitment to strengthening understanding of, and opportunity for coproduction across the Directorate ✓ Learning from people who use services – Learning Disability Partnership Board, informing work plans and commissioning, ASC Customer feedback survey 2023, Learning Disability Champion in post and Community Autism Forum ✓ Safeguarding Team online feedback system launched ✓ External 2023 review by Partners in Care (LGA & ADASS) of ASC Leadership to understand areas for change or learning ✓ Monthly live webinars to support understanding and learning on key topics e.g. Client level data, co-production ✓ Monthly communications via ASC All staff newsletter, monthly Practice Bulletin including CPD guidance. ✓ Weekly Managers Update, visits to teams (by Directors, Deputy Directors and Heads of Service) ✓ Governance – 6-month report to Health & Oversight Scrutiny Panel and corporate Governance and Scrutiny; monthly review of performance at ASC SMT governance to drive improvement and learning. ✓ Monthly Cabinet Member Decision meeting (held in public) ✓ Digital roadmap for Directorate to support improvement in internal and customer facing processes ✓ Summary infographics of key information of the directorate shared with staff to better understand Portsmouth as a community	Areas for Development ✓ Review and build on pockets of good practice to introduce a clear framework for co-production and engagement. ✓ Improve customer experience intelligence outside of stat. surveys (ASCS & ACS) ✓ Consistently compare regional and statistical neighbour performance on key measures. ✓ Performance Management training for 25/6 to support understanding of importance of data comparison and measuring outcomes	

Official

Theme 4: Leadership

	QUALITY STATEMENTS	SOURCES OF EVIDENCE (IR34; IR36; IR30)
Learning, improvement and innovation (Part 2)	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. • Learning from people's feedback about their experiences of care and support, and feedback from staff and partners is embedded throughout the local authority's work and it informs strategy, improvement activity and decision making at all levels. Coproduction is embedded throughout the local authority's work. • There is an inclusive and positive culture of continuous learning and improvement. The local authority has strong external relationships that support improvement and innovation. Staff and leaders engage with external work, including research, and embed evidence-based practice in the organisation. • There are processes to ensure that learning happens when things go wrong, and from examples of good practice. Leaders encourage reflection and collective problem-solving.	➤ Workforce – ASC WDS submission by PCC ASC, eligible for workforce development fund ➤ Monthly PSW/POT Practice Newsletter ➤ MDT and partner learning from events e.g. Care Homes Event ➤ Learning from Complaints, Critical Incidents and SARs – SMT reviewed action trackers ➤ Annual complaints report ➤ 'Sense Something, Say Something' ➤ Staff Survey ➤ LGA Leadership review ➤ 2023 Assurance –Stakeholder Feedback ➤ 2023 ASC Customer Feedback on ASC
What is working well?	➤ Tailored training delivered with Institute of Public Care, Oxford Brookes University for Contracts, Commissioning and Operational staff on commissioning, to understand joint and singular contributions. ➤ Regular engagement with CQC, and place-based partners to shape support offer for care services and the market, including working with ICB to review effectiveness of local delivery against Enhanced Care in Care Homes framework ➤ Staff contribute to SE ADASS networks to support sector led improvement and learning including Chairing 2 networks and have reps on all networks. ➤ Close relationship with ADASS 'Buddy' LA's (Medway and Reading). ➤ 1 of 3 councils (out of 153) who contributed to research undertaken by Nottingham Rights Lab on Modern Slavery in the ASC Supply Chain, leading to LGA published guidance and an action plan for Portsmouth. ➤ Monthly Team Managers and All Managers meeting used to share learning and innovation and opportunity to network and learn, chaired by SMT to share messages vertically and horizontally in the Directorate. ➤ SMT lead assigned to each statutory data returns, shared at SMT Governance for scrutiny ahead of submission to understand anomalies and change and opportunity for improvement. ➤ Public Housing Health Development research ➤ Improvement of our Complaints and Compliments approach including the implementation of a new database to support analysis ➤ Oversight of training through the new Learning Management System (LMS)	Areas for Development ✓ Planning for Review of Education offer for the care sector through new Training Partnership Board. ✓ Review of approach to training across the directorate including framework for apprentices ✓ Further develop of Personal Development Review (PDR) planning in teams ✓ Better alignment of PDRs with team/service planning ✓ Development of training pathways for directorate and specific roles including mandatory training

Adult Social Care CQC Assessments / Inspection Self Assessment