Peer Review:
Key messages and Action Plan

Amy-Jane White- Reforms Programme lead

National and Regional Picture for Adults

SECTOR LED IMPROVEMENT- 13 YEARS

HEALTH AND CARE ACT 2022- CQC ASSESSMENT PROGRAMME

LGA PEER REVIEW MODEL

FIRST IN REGION

PROACTIVE IN OUR APPROACH

Peer Review: What Did We Want to Achieve?

Establish a baseline. Where are we at, what needs developing..?

Validation for what we're good at

We want to plot our journey to 'outstanding'. Areas where we could accelerate faster or try out a new approach.

Some feedback on how or whether we are 'landing' some of the things we think we are good at – how are we coming across? How will we come across to CQC?

Is there evidence of a 'culture of improvement and learning'

How our partnerships internally and externally are supporting our delivery for our residents

Key Messages - Strengths

- A clear political direction and strong senior leadership team
- Ambitious and committed and passionate adult social care workforce
- Executive Director has clear vision for adult social care with good strategic and operational oversight and strong budget ownership
- OT Digital and Tech Team and Tech Lounge offer seen as best practice ("this work should be showcased")
- Numerous good news stories of supported living for people with learning disabilities ("this work should be showcased")
- Overall good performance to comparators
- People reported they feel safe and well supported and this was demonstrated through a number of sources.
- Strong commitment to transformation, improvement and some excellent examples of innovation.

Key Messages - Considerations

- Overall, our vision and transformation journey to fully embrace the demographic challenge/opportunities – i.e. What will Dorset look and feel like in 10 years' time. An opportunity to be national leaders in wellbeing approach to older people.

- Lots of learning has been undertaken. Now need to concentrate on embedding and cementing this learning to affect change.

- We need to further embed community development, making connections across our communities, the council and the wider system.

- Need to ensure a single version of the truth regarding data.

- Information and advice on public facing website described as "confusing and not accessible"

Priorities

Prevention and early help - an offer that gives people local support when they need it (including simple social contact) and maybe helps them not to need us at all, yet. Linked to Public Health.

Productivity - the core of improvement needs to focus on fixing the central processes of ASC so waits and handoffs are reduced to an acceptable minimum (assessments, reviews, setting up POC, waiting for a care episode or service to start...) Decision-making is a serious focus.

Practice - we have an opportunity to look at what is specialist and what is not. For example, Safeguarding is everyone's business. Also to ensure our recording reflects the quality of the practice.

Our model needs a reconsideration of what 'place' or 'locality' is for people. A stronger community approach is the key to a genuine strengths-based practice and sustainability where our demographics are very challenging.

We need to start trying a differentiated approach in different areas proportionate or particular to the need.

Process - we need to analyse the experience of people accessing services and simplify

Partnerships – we need to create a design that links, particularly at locality levels, with Primary Care Networks

We need to demonstrate a co-production approach in everything we do

Adults Annual Assurance Programme

Peer Review and Safeguarding Action plan delivered at pace

Governance through Quality Assurance Board

Inspection Readiness – learning opportunities CQC, Peer Review

LA test inspections completed

Formal inspection process commences January 2024

4-6 weeks' notice

Annual programme- similar to Oftsed