



Report to Policy Committee

Author/ Lead Officer of Report:
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Report of: Strategic Director of Adult Care and Wellbeing

Report to: Adult Health and Social Care Committee

Date of Decision: 14th June 2023

Subject: Adult Care and Wellbeing Governance, Assurance, and Performance Framework

Has an Equality Impact Assessment (EIA) been undertaken?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
If YES, what EIA reference number has it been given? 1183				
Has appropriate consultation taken place?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Has a Climate Impact Assessment (CIA) been undertaken?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Does the report contain confidential or exempt information?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
If YES, give details as to whether the exemption applies to the full report / part of the report and/or appendices and complete below: -				

Purpose of Report:

To provide an updated Care Governance Strategy, Performance Management Framework and Cycle of Assurance to Committee for approval.

To provide an update on the regulation of Local Authorities and Integrated Care Systems by the Care Quality Commission (CQC) and on the Council's preparations for this.

Recommendations:

It is recommended that the Adult Health and Social Care Committee:

1. Approve the updated Care Governance Strategy 2023 - 2025
2. Approve the updated Performance Management Framework
3. Approve the updated Cycle of Assurance
4. Note the Council's preparations for CQC regulation and key risks.

Background Papers:

[Interim Guidance on CQC Approach to Local Authority Assessments](#)

[Interim Guidance on CQC Approach to Integrated Care System Assessments](#)

Appendices:

1. Care Governance Strategy
2. Performance Management Framework
3. Cycle of Assurance

Lead Officer to complete:-		
1	I have consulted the relevant departments in respect of any relevant implications indicated on the Statutory and Council Policy Checklist, and comments have been incorporated / additional forms completed / EIA completed, where required.	Finance: <i>Laura Foster</i>
		Legal: <i>Patrick Chisholm</i>
		Equalities & Consultation: <i>Ed Sexton</i>
		Climate: <i>N/A</i>
	<i>Legal, financial/commercial and equalities implications must be included within the report and the name of the officer consulted must be included above.</i>	
2	SLB member who approved submission:	<i>Alexis Chappell</i>
3	Committee Chair consulted:	<i>Cllr Angela Argenzio</i>
4	I confirm that all necessary approval has been obtained in respect of the implications indicated on the Statutory and Council Policy Checklist and that the report has been approved for submission to the Committee by the SLB member indicated at 2. In addition, any additional forms have been completed and signed off as required at 1.	
	Lead Officer Name: <i>Liam Duggan</i>	Job Title: <i>Assistant Director, Care Governance and Financial Inclusion</i>
	Date: 05/06/23	

1.0 PROPOSAL

- 1.1 Our vision is that everyone in Sheffield lives in a place they can call home, in communities that care, doing things that matter to them, celebrated for who they are and when they need it, they receive care and support that prioritises independence, choice, and recovery.
- 1.2 The development of the Care Governance Strategy supports the delivery of our Adult Social Care Strategy and Sheffield City Council Delivery Plan commitments to build the foundations of a good council, deliver on our plans and embed open and transparent decision making alongside our plans and priorities for adult social care, created with the people of Sheffield. The function of the Performance Management Framework is to ensure delivery of our vision/ strategy outcomes.
- 1.3 The Care Governance Strategy has been updated for 2023 and, following review, further detail has been added to the Performance Management Framework and Cycle of Assurance to reflect recommendations from internal audit and the growing maturity of the frameworks following a year of delivery.
- 1.4 The Care Quality Commission (CQC) has begun to discharge its duty to provide assurance of care at local authority level. The Council's preparations for the new regulatory regime are closely aligned to the implementation of the updated Governance Strategy and Performance Management Framework.

1.5 CARE GOVERNANCE STRATEGY

- 1.5.1 The original Adult Care 'Care Governance Strategy' was approved by Committee in June 2022 and provided an overarching framework for the governance of all aspects of Adult Care and Wellbeing Services and Support.
- 1.5.2 The purpose of the Care Governance Strategy is to provide transparent assurance and accountability about Adult Care and with that set a standard that:
- People who use our services and family members and carers have a voice, are central to the planning and development of adult social care services.
 - Improving wellbeing and population outcomes, quality of life and experiences for individuals, their carer's, and families remains central to our priorities and focus.
 - Our support and services are high performing, resilient, compliant with legislation, of excellent quality and are positively received by individuals and families.
 - Our workforces are valued, engaged, and feel empowered to continuously develop practice and delivery of social care services.
 - Our resources are used effectively and efficiently across Adult Care.
- 1.5.3 The function and purpose of the Governance strategy have been reviewed and updated to improve clarity. With that, the following changes to the governance framework have been made for 2023/24 to reflect the changing operating environment for Adult Care and Wellbeing:

- Rename of 'Ensuring Safety' domain to 'Safety and Resilience' to include not just those elements around safety and safeguarding but also service resilience frameworks including Business Continuity Planning, Health and Safety, Information Management and Risk Management.
- Replacing 'Managing Risk and Change' with 'Legal Compliance' to reflect a focus on embedding legal compliance across the service to ensure a clear focus on delivery of our Care Act duties and duties set out by Mental Capacity Act, Mental Health Acts. This domain will also allow a stronger focus on the decision making in Adult Care and Wellbeing, quality assurance and arrangements for internal and external escalation through the service to corporate and committee structures.
- Good Governance Practice - Embedding the principles set out in the Governance Risk and Resilience Framework and Good Governance Handbook set out by CQC under the theme Leadership and Governance as part of our Care Governance Strategy.
- Internal and External Assurance - Embedding a focus on internal and external assurance to enable ongoing approach to learning from audit and external scrutiny. It's aimed that this further supports our approach to continuous improvement, benchmarking, and external support.

1.5.4 The updated Care Governance Strategy is set out at Appendix 1. The framework is now structured as follows:



1.6 PERFORMANCE MANAGEMENT FRAMEWORK

1.6.1 The Performance Improvement Framework sits within the Quality and Outcomes Domain and is set out in Appendix 2.

1.6.2 The Framework aligns with the Adult Social Care Strategy and our local and national outcome measures to establish a system of continuous improvement and ensure progress towards our vision.

1.6.3 Since approval by Committee the new performance management framework has been subject to review by Internal Audit and the framework has now been updated to take account of the recommendations from that review. This includes the following key additions:

- Improvement Planning – A new section describing how the improvement cycle is being embedded at each level of the Adult Care so that we have collective ownership of performance and improvement planning from Team Manager to Director. Responsibilities and reporting flows are described as are reporting frequencies and a specific requirement to consider measures materially above or below target.
- CQC and Adult Care Strategy Relationship – An appendix has been added to show how the vision/ strategy outcomes map to the CQC themes and Quality Statements.
- Guidance on Performance Monitoring - The framework also now includes guidance on key data to be included in performance monitoring such as targets, trends, benchmarking, explanations, and actions etc. The principle of monitoring unit costs and average productivity is also included on Internal Audit advice.
- Outcome Indicators - The performance framework has been updated to ensure performance measures continue to be assigned to outcomes aligned to best practice recommendations from Internal Audit.

1.6.4 Whilst the Performance Management Framework is designed to ensure delivery of the Adult Care vision/ strategy outcomes, the Council's wider performance framework is based around the 2022/23 Delivery Plan and its Urgent Performance Challenges. These are designed to drive basic improvements to Adult Care services over a 12-month period appropriate for the '*stabilise*' phase of improvement.

1.6.5 When the Council's new Corporate Plan is developed in 2023/24 a closer alignment with the Adult Care vision/ strategy will support a more outcomes focused approach, consistent with the '*embed*' phase of improvement, and a more seamless integration of performance reporting between the service and the wider council.

1.6.6 The updated Performance Management Framework is set out at Appendix 2.

1.7 CYCLE OF ASSURANCE

1.7.1 The Adult Care and Wellbeing Cycle of Assurance framework sets out how reports and updates are escalated through the service on a routine basis to give scrutiny to, and provide assurance about, the activity, risks, and compliance of the service.

1.7.2 The Cycle of Assurance was first approved by Committee in November 2022 and has since been developed to incorporate assurance reporting and updates across all domains of the Care Governance Strategy.

1.7.3 The Cycle of Assurance is now structured around the domains of the Governance Strategy and aligned to CQC Themes, it describes the frequency and flow of reporting for each of the different aspects of the framework and is regularly updated to reflect the reporting requirements of the service's strategies/ action plans following Committee approval.

1.7.4 The updated Cycle of Assurance framework is set out at Appendix 3.

2.0 CARE QUALITY COMMISSION (CQC) ASSESSMENT AND RISKS

2.1 Care Quality Commission (CQC) Guidance

2.1.1 The CQC issued interim guidance on its approach to assessing Local Authorities and Integrated Care Systems in February and March respectively. This guidance provides more detail on the frameworks, the timeline, and the approach the CQC will take to their assessments.

2.1.2 Local Authority CQC assessments will focus on how local authorities discharge their duties under Part 1 of The Care Act (2014). This will focus on 4 themes: Supporting People, Working with People, Ensuring safety and leadership. The Quality Statements in the CQC single assessment framework are based on people's experiences and the standards of care they expect. The CQC will be using a subset of the quality statements in assessments of local authorities. These Quality Statements (QS) are set out in the table below.

CQC Assessment Framework for Local Authorities

<p style="text-align: center;">THEME 1: SUPPORTING PEOPLE</p> <p style="text-align: center;"><i>Care Management: Assessing Need , Practice, Prevention & Outcomes</i></p> <p>QS1: 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.</p> <p>QS2: Supporting people to lead healthier lives: We support people to manage their health and wellbeing so they can maximise their independence, choice and control, live healthier lives and where possible, reduce future needs for care and support.</p> <p>QS3: 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.</p>	<p style="text-align: center;">THEME 2: WORKING WITH PEOPLE</p> <p style="text-align: center;"><i>Commissioning & Partnership Working</i></p> <p>QS4: 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.</p> <p>QS5: 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.</p>
<p style="text-align: center;">THEME 3: ENSURING SAFETY</p> <p style="text-align: center;"><i>Safeguarding & Safe Systems of Working</i></p> <p>QS6: 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.</p> <p>QS7: 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.</p>	<p style="text-align: center;">THEME 4: LEADERSHIP</p> <p style="text-align: center;"><i>Workforce, Governance, Planning, Improvement & Learning</i></p> <p>QS8: Governance, management and sustainability: We have clear responsibilities, roles, systems of accountability and good governance 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.</p> <p>QS9: Learning, improvement and innovation: 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.</p>

2.1.3 The assessment of Integrated Care Systems will focus on 3 themes and 17 quality statements from the Single Assessment Framework.

CQC Assessment Framework for Integrated care Systems

Theme 1: Quality and safety	Theme 2: Integration	Theme 3: Leadership
<p>Quality statements:</p> <ul style="list-style-type: none"> Supporting people to live healthier lives, Learning culture, Safe and effective staffing, Equity in access, Equity in experience and outcomes, Safeguarding 	<p>Quality statements:</p> <ul style="list-style-type: none"> Safe systems, pathways, and transitions. Care provision, integration and continuity. How staff, teams and services work together 	<p>Quality statements:</p> <ul style="list-style-type: none"> Shared direction and culture. Capable, compassionate, and inclusive leaders. Freedom to speak up; Governance, management, and sustainability. Partnerships and communities. Learning, improvement, and innovation. Environmental sustainability – sustainable development. Workforce equality, diversity, and inclusion

2.2 CQC Assessment Process

- 2.2.1 Before the CQC moves to its new assessment model of ongoing assessment in September, it is first establishing a 'baseline' of completed initial assessments for all local authorities.
- 2.2.2 Formal assessments including the gathering of required evidence for each local authority, reporting on our findings and awarding ratings will begin from September 2023. 20 Local Authorities to be assessed by the end of the Calendar year. All Local Authorities and Integrated care Systems will be assessed within 2 years.
- 2.2.3 Assessments will build on what CQC already know from regulating health and care providers and other existing sources of evidence. CQC will use the information it receives from a range of sources to make assessments flexibly, without being tied to set dates. This is designed to provide an up-to-date view of quality.
- 2.2.4 Evidence to inform assessments will come from six categories- people's experience, feedback from staff and leaders, feedback from partners, observation, processes, and outcomes.
- 2.2.5 For each quality statement in the assessment framework, CQC will assess the 'required evidence' in the evidence categories and assign a score (1-4) to the quality statement. The scores for the individual quality statements aggregate to produce the LA rating (using the CQC four-point rating scale), and an overall score indicating whether the LA is in the upper or lower threshold of the rating category. All evidence categories and quality statements are weighted equally.
- 2.2.6 The CQC will start by assessing evidence that it has, followed by evidence it needs to request and finally evidence it needs to actively collect. It will only actively collect information it can't get through other means. It will use the best options to collect evidence, which may be either on site or off site. This will depend on the type of required evidence for a quality statement.

2.3 Risks and Risks Mitigations

- 2.3.1 The main risks for Sheffield ahead of the new assessment regime are those relating to the Adult Care local offer which includes safety and compliance with our statutory duties and our historical performance against national outcomes set against our historical financial pressures.
- 2.3.2 Mitigations for these risks (target operating model, recommissioned services, practice quality framework, governance arrangements, workforce strategy, recovery reviews etc.) are in place and progressing well.
- 2.3.3 However, these risks are significant, and longstanding and the mitigations are medium to long term endeavours. It is therefore vital that whilst the CQC takes a snapshot of performance the Local Authority can demonstrate an improving trajectory and effective risk mitigation in the short term.

2.4 Preparing For CQC Regulation

2.4.1 The Adult Care and Wellbeing service has an action plan to ensure it is adequately prepared for assessment by September. Dedicated capacity is in place and is being reviewed to ensure long-term sufficiency given assurance will be an ongoing process. In addition, advice is being taken from colleagues with experience of OFSTED in developing plans for 'inspection' visits and independent support implemented. The key elements of the plan are as follows:

2.4.2 Self-assessment

The immediate challenge is in ensuring that the self-assessment report is **current** (at the time of assessment), relates to the **framework**, is **evidenced, accurate**, reflects the **feedback** of staff and people who access our services, and is **owned** by the service leads, the **Adult Health and Social Care Policy Committee** and **Health and Wellbeing Board**.

Initially this is being done using a series of CQC framework checklists and collaborative conversations which are being completed by key stakeholders. However, the task is to ensure that the monthly performance clinics and conversations are driving the self-assessment narrative as well as the improvement actions and metrics on an ongoing basis. An improvement board is being implemented to manage this process/relationship.

2.4.3 Embedding a Continuous Improvement and Learning Culture

Performance Clinics and conversations were introduced at Directorate and Service Level in 2022 as a way of introducing and embedding a performance and continuous improvement culture across the service.

The performance clinics and conversations are now being embedded across all Assistant Directors Services as the next stage with the implementation of the new Adult Care operating model in April 2023, which enabled a move towards Adult Future Options, Living & Ageing Well, Mental Health, Care Governance and Adult Commissioning Services.

It's planned that these will continue to drive and embed a continuous improvement and learning culture through:

- Performance conversations in their teams and with front line workers so they are well informed and connected to our front-line practitioners.
- Learning from outcomes of individuals, carers and workforce feedback, quality metrics, case file audits, visits to answer the 'so what' question.
- The Quality Matters Assurance program agreed at Committee in November 2022.
- Risk management and risk mitigation so that where risks are identified, risk mitigations are embedded to minimize any impact on people.

2.4.4 Involvement of Individuals, Carers, Our Workforce and Stakeholders

The performance clinics and conversations are also being expanded to include people who experience our services, unpaid carers, front line workers, stakeholders, and Members to promote further collaboration in our approach to continuous improvement.

We will co-produce arrangements for individuals and carers long-term involvement in service wide performance improvement during this summer's 'involvement festival and through ongoing conversations to ensure individuals and carers feedback informs ongoing improvements and developments.

In addition, a listening and engagement exercise will be undertaken throughout June 2023 to work with front line workers, team managers and stakeholders to understand what's working well, what needs to improve and to agree arrangements which enable and support their ongoing engagement and involvement.

2.4.5 Delivery Plans and Partnerships

Through the Cycle of Assurance and our focus on continuous improvement, delivery plans are in place for each CQC theme with a cycle of reporting and assurance to the Committee and Councils Performance and Delivery Boards.

The Delivery plans are: Working with People, Safeguarding and Ensuring Safety, Providing Support, Strategic Delivery and Financial Governance and focus on our performance improvement.

2.4.6 Communications

Short regular communications (one-minute reads) are now in place via the staff bulletin. These are currently covering CQC regulation but will also include feedback from performance clinics and quality frameworks to help to build a single collective understanding of our performance and trajectory across the service. In addition, dedicated engagement sessions will take place throughout June and July with colleagues across the service and stakeholders to talk about assurance means in practice.

A dedicated workshop with the Policy Committee took place in February and it was agreed that a forward plan would be developed to highlight the opportunities for members to influence CQC readiness and provide Scrutiny as to progress being made.

2.4.7 System wide readiness

A System Wide CQC Assurance Working Group has been leading the preparations of Sheffield Place system partners for assessment of the Integrated Care System. This will now be led by the Sheffield Joint Quality Assurance Committee to establish a joint health and care governance framework and approach to improvement planning.

3.0. HOW DOES THIS DECISION CONTRIBUTE?

3.1 Good governance, the Care Governance Strategy, and the Quality Improvement Framework are key to the delivery of the Council's statutory responsibilities for Adult Social Care including the following outcomes for the people of Sheffield:

- promotion of wellbeing
- protection of (safeguarding) adults at risk of abuse or neglect
- preventing the need for care and support
- promoting integration of care and support with health services
- providing information and advice
- promoting diversity and quality in providing services

3.2 These governance arrangements support a culture of accountability, learning and continuous improvement which will enable the Council to deliver upon its vision for Adult Social Care, deliver better outcomes and an improved experience for people and a more sustainable adults social care service for the future

4.0 HAS THERE BEEN ANY CONSULTATION?

4.1 The Listening and Engagement domain in the Care Governance strategy describes the Council's commitment for the voice of people and/ or their carers being at the heart of the governance of adult health and social care. The performance management framework includes a section (section 10) describing the importance of involvement and voice and the role that people will have specifically around driving the quality and performance of adult social care services.

4.2 In 2023 the Adult Care and Wellbeing *Citizen's Involvement Project* is exploring ways to involve people in shaping and improving adult social care in Sheffield. It is delivering a *Festival of Involvement* during June and July which will explore what involvement looks like including themed events and activities. The thematic sessions are Safeguarding; Care homes; Local Account; Adult Future Options framework; Technology enabled care (TEC); Adult Future Options accommodation plan; Neighbourhood support for older people in need of social care; and Community Performance Clinic Pilots.

4.3 Following the festival a co-production working group will meet fortnightly during September and October to develop an involvement model for Adult Social Care in Sheffield. It will identify opportunities to inform, influence, work together and hold the Adult Care and Wellbeing directorate to account. It will increase the range and diversity of participants and it will undertake some practical tasks such as refreshing our co-production charter, creating a toolkit for staff and identifying Key Performance Indicators for the Performance Management Framework.

5.0 RISK ANALYSIS AND IMPLICATIONS OF THE DECISION

5.1 Equality Implications

- 5.1.1 A key function of the Care Governance Strategy is to ensure equality of opportunity for all because it is designed to give assurance about the delivery of the Council's statutory responsibilities for adult health and social care.
- 5.1.2 These duties include Care Act duties such as the duty to provide diversity and quality of services and to ensure that adults receive support that's personal to them, chosen by them and has their consent. It includes Mental Capacity Act duties to ensure that vulnerable individual retain their right to dignity and equality and Human Rights Act duties which compel public organisations to treat everyone equally, with fairness, dignity, and respect.
- 5.1.3 A key function of the Performance Management Framework is to ensure equality of opportunity for all because it is designed to ensure delivery of the Council's Vision and Strategy for Adult and Health and Social care. This vision includes the outcome Efficient and Effective which includes the provision of a good choice of services that meet individual needs irrespective of background, ethnicity, disability, sex, sexual orientation, religion, or belief. The performance management framework will therefore be tasked with measuring the achievement of the service in the delivery of this ambition and identifying actions as and when performance falls short.

5.2 Financial and Commercial Implications

- 5.2.1 A key function of the Care Governance Strategy is to support the delivery of a financially sustainable Adult Health and Social Care Service. because it is designed to give assurance about the delivery of the Council's statutory responsibilities for adult health and social care.
- 5.2.2 These duties include ensuring a sustainable care market and the ability to meet eligible care needs. The ongoing resourcing of Adult Health and Social Care is a key challenge for Sheffield City Council and Local Authorities nationally.
- 5.2.3 The Care Governance Strategy supports the financial sustainability of Adult Health and Social Care including in the following ways:
- Quality, Performance and Outcomes – this domain focuses on quality of practice and of service and how we are delivering upon our vision and strategy. The vision includes the outcome Efficient and Effective which includes the provision of best value, and the performance management framework will therefore be tasked with measuring the achievement of best value.
 - Financial and Resource Management – this domain focuses on the use of public money in adult health and social care from operational processes such as support approvals, through to strategic processes such as business planning.
- 5.2.4 There are no direct financial implications arising from this report. Any future activity will be assessed for its financial implications and contribution to the finance strategy.

5.3 Legal Implications

5.3.1 The main responsibilities of Adult Health and Social Care are set out in the following main pieces of legislation: the Care Act 2014, the Mental Capacity Act 2005, the Human Rights Act 1998, the Health and Care Act 2022, and Domestic Violence Act 2021.

5.3.2 This legislation directs Adult Health and Social Care to:

- promote wellbeing
- protect (safeguarding) adults at risk of abuse or neglect
- prevent the need for care and support
- promote integration of care and support with health services
- provide information and advice
- promote diversity and quality in providing services

5.3.3 As previously described the key function of the Governance strategy and supporting framework are to set out how the Council will ensure that Adult Social Care is statutorily compliant.

5.4 Climate Implications

5.4.1 The performance management framework will ensure that climate impacts are considered in decision making as this is a part of the Effective and Efficient Outcome in the Adult Health and Social care vision and strategy.

5.4.2 The performance management framework will therefore be tasked with measuring the achievement of the service in the delivery of this ambition and identifying actions as and when performance falls short.

6.0 ALTERNATIVE OPTIONS CONSIDERED

6.1 Alternative options have been considered and the options are:

6.2 Option 1 - Option 'to do nothing' and not update the care governance or performance management framework. However, this would mean that the frameworks do not evolve to meet the changing needs of the service or the people who use it.

6.3 Option 2 – Delay approval to enable further learning, benchmarking, and engagement. Benchmarking, learning, engagement, and review will take place on an ongoing basis to ensure it delivers what matters to people of Sheffield and is responsive to changing circumstances. Further changes will be captured in the next iteration of these frameworks.

7.0 REASONS FOR RECOMMENDATIONS

7.1 The updated Care Governance Strategy, Performance Management Framework and Cycle of Assurance, will ensure significant further improvements are made in the following areas:

- People who use our services and family members and carers have a voice, are central to the planning and development of adult social care services.

- Improving wellbeing and population outcomes, quality of life and experiences for individuals, their carers, and families remains central to our priorities and focus.
- Our supports and services are high performing, compliant with legislation, of excellent quality and are positively received by individuals and families.
- Our workforce is valued, engaged, and feels empowered to continuously develop practice and delivery of social care services.
- Our resources are used effectively and efficiently across Adult Social Care.
- We are prepared for pending CQC assessment which is being introduced in 2023

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