

# Scrutiny Report

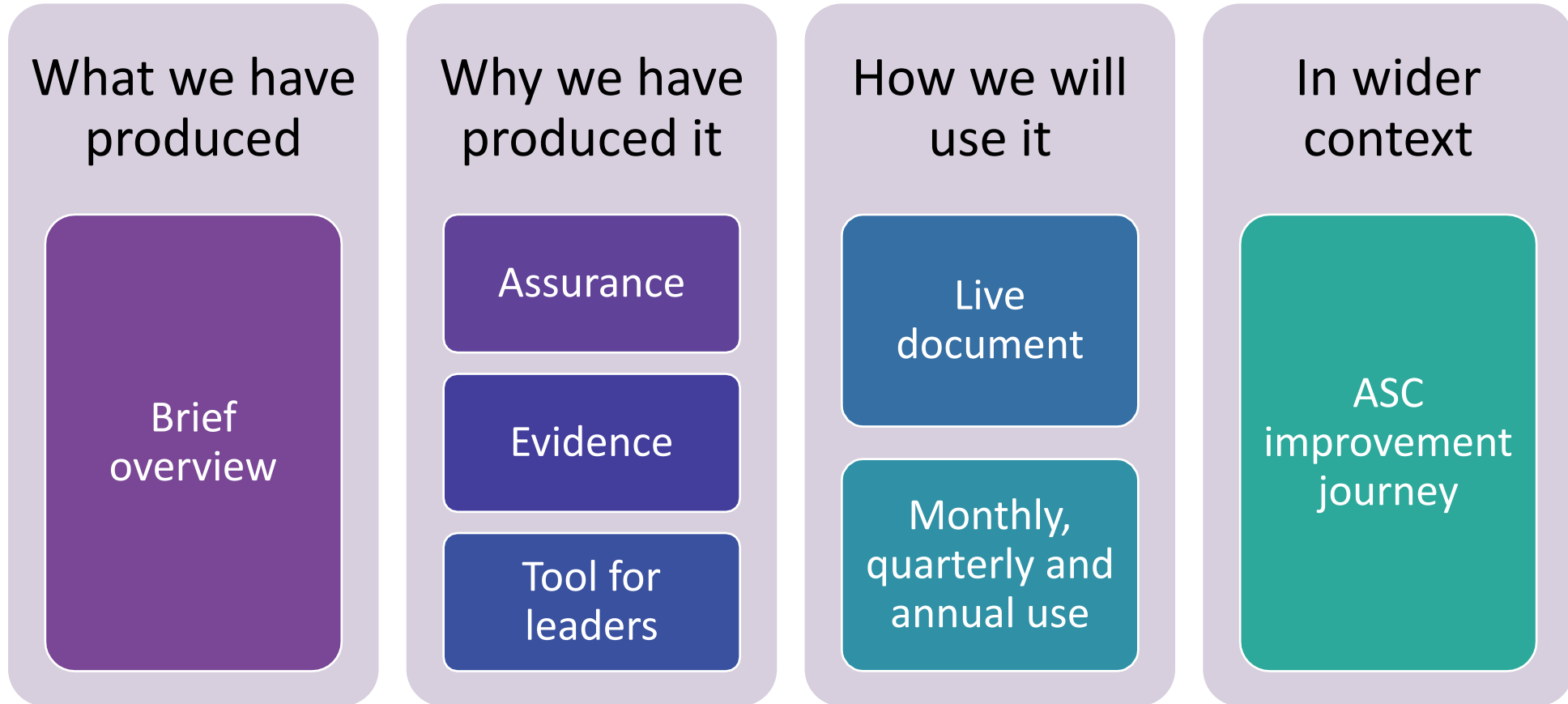
13 June 2024

Items	Lead
1 ASC Operational Pressures, Risks and Escalation Protocols	Sarah Dillon

**Ambitious Stockport,  
creating opportunities  
*for everyone***




# ASC Operational Pressures, Risks & Escalation Protocols








# What we have produced

- Modelled the approach taken by the NHS OPEL Framework
- A document which brings together, in one place, a summary of the **pressures and risks** facing adult social care and all **relevant mitigations and escalation protocols**
- Provides a **systematic and structured approach**, using **escalation levels** to monitor, detect and report pressure, risk and actions which must be taken
- **Proactive** rather than reactive
- **One Team approach** - supported by and contributions from colleagues across internal audit, contingency, accountancy, comms, HR, OD, legal



**STOCKPORT**  
METROPOLITAN BOROUGH COUNCIL



**Adult Social Care Operational Pressures, Risk and Escalation Protocols**

<b>Publication date</b>	May 2024
<b>Related legislation</b>	Care Act 2014, Care Act Statutory Guidance, Mental Capacity Act 2005, Health and Care Act 2022, Mental Health Act 1985, Deprivation of Liberty Safeguards
<b>Related Policies, Strategies, Guidelines, Documents</b>	Multiple as named in the document
<b>Replaces</b>	This is a new document
<b>Joint Policy</b>	No
<b>Name of Partner(s) if joint</b>	N/A
<b>Document Owner</b>	Adult Social Care Senior Management Team
<b>Document author</b>	Sam Powell, Strategic Service Manager
<b>Separate procedure document</b>	No
<b>Applicable procedure document</b>	N/A

**Policy Review**

<b>First publication date</b>	May, 2024
<b>Version control</b>	1.0
<b>Next review date</b>	May, 2025

**Document Approvals**

Name	Representing	Date of issue	Version number
Sarah Dillon	SMT	16 May 2024	1

# What we have produced

- Identified the **key pressure and risk areas** impacting the operating environment
- Could happen **independently** or **simultaneously**
- Many are **mutually interdependent**
- For each area we cover:



## Pressures and risks impacting the ASC operating environment

Demand, capacity and quality in operational services impacting risk of serious injury, death or unauthorised deprivation of a vulnerable adult

Availability and quality of care in the provider market

Market sustainability and provider failure

Pressures arising from interdependencies with the NHS

Managing and maintaining a sustainable, skilled workforce

Statutory change, compliance and risk of legal challenge

Financial sustainability

Media publicity and FOIs impacting reputation

Business Continuity

Response to major incidents and unforeseen circumstances

# Why we have produced it

*No surprises, ASC is proactive not reactive*

## Transparency

- For greater **shared understanding** by providing a transparent temperature check

## Visibility

- To provide **visibility of effective governance, management and accountability** in the delivery of all statutory functions
- Not all new but our self-assessment highlighted the need for tighter oversight in some areas - ***some of this was already in place but not overt***

## Evidence

- To **evidence resilience and sustainability** in the face of a surge in demand or risk in any area of operations
- To provide key evidence for CQC

## Assurance

- To **provide assurance and give confidence** to CLT, to Cabinet and to partners

## Support

- To **complement existing risk register procedures, corporate and directorate risk management** and business continuity plans – ***not designed to replace them***
- A tool for leaders to model good oversight and accountability

# What does good look like?

- Governance, management and sustainability is one of the 9 CQC quality statements under the theme **Leadership**
- Document supports us to deliver but also acts as evidence of all areas the regulator is assessing against

## Governance, management and sustainability



### Quality statement

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.

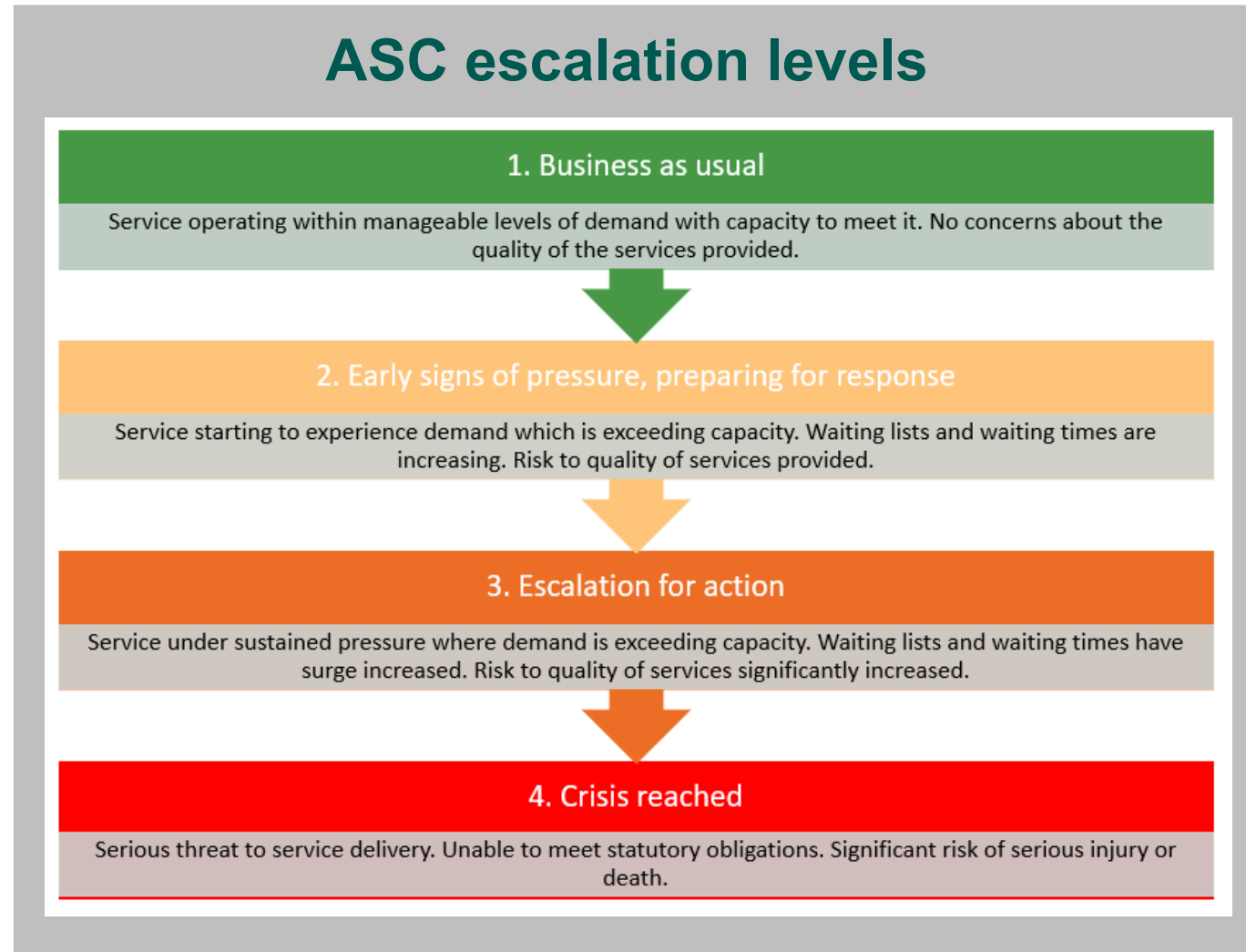
### Summary

- 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.

# How we will use it

- **Live working document**
- Each service area in both operations and commissioning will identify **early warning signs**
- **Heads of Service** will monitor performance and report **4 weekly** to **Assurance SMT**
  - Level 1 – managed at HOS level
  - Level 2 – escalated to Statutory DASS, SMT, if appropriate SAB
  - Level 3 and 4 – DASS escalates to CLT, Cabinet and if appropriate Safeguarding Accountabilities Group
- **Annual summary** report to CLT
- Document **reviewed annually** as pressures and risks change

## ASC escalation levels



# In summary

- We are on an **improvement journey in Adult Social Care** and this will support us to have greater rigour in relation to oversight and accountability
- We want to provide **greater transparency, assurance of accountability and confidence**
- This **supports our evidence for CQC** - we will test this approach out with the LGA Peer Review