

# Local authority information return

As the first part of your assessment we will need you to provide some information.

We will send you an information return request. It will include an explanation of what we need and the dates we need it by. You do not need to send us any information until we request it.

We're presenting the contents of the information request so you know what to expect and can prepare.

## Information return guidance

We will send this guidance as part of our information return request.

## Purpose of the local authority information return

This information return is a key part of our assessment of how a local authority is carrying out its adult social care functions in England. Part 1 of the Care Act 2014 describes those functions.

It enables us to review some key documents, information and data before our on-site activity. These will help us plan the assessment, or form part of the evidence we assess. Where relevant, we show which quality statements items relate to. Our [assessment framework](#) for local authority assurance describes the quality statements.

During the assessment, we may need to request more information if we need it to assess a quality statement.

All the information we gather helps us to assess each local authority. It also helps us understand national trends, issues, performance and innovation across England.

Some of the information will inform our national reporting, such as our annual State of Care report. This will be anonymised unless a local authority gives consent.

The General Data Protection Regulation (GDPR) allows local authorities to lawfully provide personal data. This applies where we need the data to carry out our statutory duties. It includes special categories of personal data.

## Documentation required

Each local authority's arrangements for delivering Care Act duties will be different. You will have various policies, processes, strategies and other documentation to support this. We do not expect you to have a specific document for every item listed in the information return. Documents may have different titles or information may be within other documents. For example, corporate strategies or partnership documents. We encourage you to use your existing documents and direct us to the relevant sections as needed.

If any of the required information is already available publicly, please provide a link to that information – there is no need to reproduce it. You can add a link to external information against the relevant item on the form below and return the form to us.

- Do not create new documents for this information return. Use existing information that best meets the information request.
- Only include information that most closely relates to the requested items. Don't provide extra information. This will avoid us looking at unnecessary information that may not inform the assessment.
- Data requested (for example, IR3 on compliments and complaints) should cover the last 12 months. You should only include data from outside of this period if an exceptional example falls just outside the 12-month period.
- To keep information succinct please do not provide:
  - Terms of Reference from meetings or forums
  - blank template documents and forms
  - duplicate documents (just refer to the IR number where you attached a particular document)
  - contracts or service specifications
  - agendas for meetings
  - multiple action plans and minutes relating to the same topic (only the most recent one)
  - embedded documents
- References to 'people' include both those who use care services and unpaid carers.
- Redact any personal information.

## Self-assessment

Self-assessment is an opportunity for your local authority to:

- assess and judge your own performance in relation to the quality statements
- use evidence to support your judgements
- highlight key successes, risks and challenges
- identify actions needed to address the most pressing risks.

The Local Government Association (LGA) and ADASS have produced [guidance to help develop an adult social care self-assessment](#). This has an accompanying workbook. Their guidance states that:

“The completion of an objective, honest and authentic self-assessment of a council’s strengths and areas for improvement is a valuable opportunity to focus improvement planning and delivery in a way that ensures local ownership.”

In our assessment framework, ‘self-assessment’ is an evidence item in the ‘Feedback from staff and leaders’ evidence category. It forms part of the overall evidence we will gather and use to assess each of the 9 quality statements.

We will not provide a self-assessment template. You may share your self-assessment in any format you choose, or you can use the comprehensive [self-assessment workbook](#) developed by the LGA and ADASS to support local authorities to prepare for CQC assessments.

There is no mandatory requirement for local authorities to produce a self-assessment for CQC to review. **However, if you choose not to complete a self-assessment, we will need to spend more time in the on-site part of our assessment. This is because we will need to gather and analyse required evidence from various sources.**

## Information requested

We will ask for this information.

## Section 1: Key contact information

### Voluntary organisation information

Contact name, phone number and email addresses for the chair of the voluntary sector forum.

Contact name, phone number and email addresses for local umbrella bodies.

This is so we can seek feedback from them ahead of our site visit.

### Carer organisation information

Organisation and contact name, phone number and email address for all carer organisations the local authority works with.

This is so we can seek feedback from them ahead of our site visit.

### Advocacy organisation information

Organisation and contact name, phone number and email address for all organisations commissioned to provide advocacy services.

This is so we can seek feedback from them ahead of our site visit.

### Site visit planning template

Complete this to tell us the names of individuals or teams that carry out each function on the template.

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# Section 2: Local authority information

## [All themes and quality statements](#)

### IR 1

Submit a self assessment.

See information about [local authority self-assessment](#).

### IR 2

Feedback obtained from people about their experience of assessment and care provision.

Include themes, trends, and action taken to address any issues.

[\(For last 12 months\)](#)

### IR 3

Compliments/complaints received by the local authority in relation to Care Act duties.

Include a summary of issues, trends, outcomes and actions taken.

[\(For last 12 months\)](#)

### IR 4

Feedback obtained from staff, that the local authority has requested.

Include themes, trends, and action taken to address these.

[\(For last 12 months\)](#)

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# 1. Working with people

## Assessing needs

### IR 5

Assessment, care planning and review. Processes and pathways (flowcharts) from first contact with local authority

For each of these activities:

1. Care assessments (state if measures vary between different groups or needs)
2. Care reviews (if different)
3. Financial assessments
4. Carer assessments, including young carers and parent-carers

provide:

- waiting list size (on date of this submission)
- median and maximum waiting time ([for last 12 months](#))
- your target timescale. Themes, if any, on the reasons why any people wait longer

### IR 6

Care Act assessment, support and care funding:

- arrangements for determining eligibility
- number of appeals: themes, trends, and outcomes

[\(For last 12 months\)](#)

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## Supporting people to lead healthier lives

### IR 7

Direct payments:

- arrangements for offering direct payments.
- arrangements for supporting people to use direct payments, and level of oversight. Include support for people to employ their own personal assistants.
- the number of people who have stopped using direct payments to meet their ongoing care needs. Include themes, trends and actions taken.

(For last 12 months)

### IR 8

Provide your strategy to prevent, reduce or delay the need for care and support.

Provide details of your existing services, facilities or other measures to prevent, reduce and delay the need for care and support.

### IR 9

Arrangements for access to aids and equipment to promote independence.

Include:

- what role or team carries out assessments
- if there is an external equipment provider, provide contact details.

For each of these activities:

- assessment for equipment



- provision of equipment

provide:

- waiting list size (on date of this submission)
- median and maximum waiting time ([For last 12 months](#))
- your target timescale. Themes, if any, on the reasons why any people wait longer

## IR 10

Provision of information and advice to enable people to make informed choices about care and support. How is information and advice provided in a way that is:

- available
  - accessible
  - tailored to the needs of local people?
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## **Equity in experience and outcomes**

### IR 11

Arrangements to support inclusion and accessibility. For example, access to interpreting services.

### IR 12

Provide your strategy and actions for:

- identifying, and
- reducing

any inequalities of experience and outcomes relating to Care Act duties.

## IR 13

Provide details of any groups of people in your area identified as being at risk of having unmet needs or poor outcomes because of their protected characteristics.

For example, members of groups who may be seldom heard due to their race (including Gypsy, Roma and Travellers), ethnicity, religion, LGBTQ+ identity

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## 2. Providing support

### Care provision, integration and continuity

## IR 14

Joint Strategic Needs Assessment: provide a link to your JSNA.

## IR 15

Shaping and sustaining the market. Provide your:

- market position statement
- market shaping plans
- market sustainability plan

## IR 16

Commissioning strategies (including joint and specialist commissioning). Include arrangements for monitoring and evaluating their impact.

## IR 17

Provide details of out-of-area placements, including:

- the total number of people placed out-of-area at the time of this assessment
- a summary of the reasons for these placements, including any key themes (for example, because of specialist needs)
- how many of these placements were made within the last 12 months

## IR 18

Arrangements for quality monitoring of commissioned services. Include services commissioned from outside of the local authority area.

## IR 19

Social care workforce.

Provide your strategy for maintaining enough capacity and capability in the workforce to meet social care needs in your area. For example, a social care workforce strategy, if available.

## IR 20

Market sustainability. For these commissioned service types:

- homecare
- supported living
- residential care home
- nursing home

provide details of:

1. Contracts handed back early to local authority by providers and reasons why
2. Local authority commissioning embargoes and reasons why

[\(For last 12 months\)](#)

## IR 21

Demand for care services and capacity. For the following service types:

- home care
- supported living
- residential care home
- nursing home

provide details of:

- the number of times people have had to wait for their service to begin due to lack of capacity
- the average length of time (in days) people have had to wait

(Last **3** months - covering the preceding **3 months** from the date you complete the information return.)

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## **Partnerships and communities**

### IR 22

Provide any examples of work with key partner agencies to deliver shared local and national objectives.

[\(For last 12 months\)](#)

### IR 23

Use of Better Care Fund (BCF): how has BCF been used to deliver shared local priorities?

[\(For last 12 months\)](#)

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## 3. Ensuring safety within the system

### **Safe systems, pathways and transitions**

#### IR 24

Provide your end-to-end process/pathways when people move between services and agencies.

This should include:

- children into adulthood
- hospital discharge
- moving to another local authority
- transitioning between services
- people who can no longer fund their own care.

#### IR 25

Contingency and emergency preparedness plan. Provide your plan for provider failure and other disruptions in the provision of care and support.

Include any examples of when this was implemented, and whether it was effective.

[\(For last 12 months\)](#)

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### **Safeguarding**

#### IR 26

Safeguarding Adults Board. Provide the annual strategic plan and annual report.

## IR 27

Safeguarding Adult Reviews (SARs). Provide details of all SARs and a record of subsequent learning or actions taken.

Covering the preceding **24 months** from the date you complete the information return.)

## IR 28

Pathways for managing safeguarding concerns and section 42 enquiries.

Include your quality assurance arrangements.

## IR 29

Provide your plans and actions to address any identified safeguarding themes, trends and key safeguarding risks in your area.

For each of these activities:

- safeguarding referrals awaiting initial review
- Section 42 enquiries awaiting allocation
- DoLS applications awaiting allocation

provide:

- the number of referrals
- the median and maximum waiting time for review/allocation
- your target timescale. Themes, if any, on the reasons why people wait longer.

(Last 12 months) \*

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## 4. Leadership

### **Governance, management and sustainability**

IR 30

Adult social care strategic plan(s) and delivery plan.

IR 31

Governance arrangements for delivery of Care Act duties.

IR 32

Current Adult social care risk register.

IR 33

Strategy for supporting unpaid carers.

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### **Learning, improvement and innovation**

IR 34

Learning and improvement plans from:

- serious incidents
- serious case reviews
- Coroner Regulation 28 Reports
- whistleblowing
- Ofsted

- SEND
- Local Government Social Care Ombudsman.

[\(For last 12 months\)](#)

IR 35

Provide your general co-production policy or approach.

Include an example of work that was co-produced.

[\(For last 12 months\)](#)

IR 36

Workforce development plan. Arrangements for supporting the continuous professional development of local authority staff.

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## General

IR 37

Organisational chart showing all levels of roles involved in the delivery of the Care Act.

Include:

- from Chief Executive, senior leadership to frontline teams
- social work/ community teams, commissioning, quality monitoring etc.

Provide a description of the teams and their functions.

IR 38



Provide details of any key groups, partnerships or networks in the local area we could gather feedback from in relation to the assessment. For example: carers groups, provider forums, partnership boards, seldom heard groups and voluntary sector organisations.

Include all groups not just those who are commissioned.

Include:

- name of group, partnership or network
  - contact details (name, email, telephone number)
  - purpose of group, partnership or network
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## Time period

Last 12 months

This means covering the preceding 12 months from the date you complete the information return.