

Commission
for Social Care
Inspection

CSCI

*Making Social Care
Better for People*



Making Social Care Better for People

CSCI 2004-2009

About CSCI

The Commission for Social Care Inspection (CSCI) was set up in April 2004. Its main purpose is to provide a clear, independent assessment of the state of social care services in England. CSCI combines inspection, review, performance and regulatory functions across the range of adult social care services in the public and independent sectors.

CSCI exists to promote improvement in the quality of social care and to ensure public money is being well spent. It works alongside councils and service providers, supporting and informing efforts to deliver better outcomes for people who need and rely on services to enhance their lives. CSCI aims to acknowledge good practice but will also use its intervention powers where it finds unacceptable standards.

Reader Information

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Foreword



'Making social care better for people' is the strap-line we chose to encapsulate the work of the Commission for Social Care Inspection (CSCI) when the organisation was created in 2004. It has been the guiding principle of everything we have done since.

This short report highlights key milestones in the brief history of the organisation, and tells the story of CSCI in terms of our twin tasks of improving the quality of social care

and influencing policy and practice to improve the experiences of people who use services. It covers CSCI's work with both adults and children, before responsibility for regulating and inspecting children's social care transferred to Ofsted in 2007.

The report describes some of the methods we have developed for regulating social care – from involving people who use services in all aspects of our work to making regulatory information publicly available – and illustrates why these are effective. It describes processes as well as outcomes, because our experience has shown that well-designed processes, which involve the people affected by them, result in better regulatory outcomes. Each section focuses on a particular element of our work, which together comprise the levers for making social care better for people.

People who use services, and their carers, are at the heart of this report. Their photographs are a reminder of their involvement and influence on all aspects of CSCI's work, and the reason why effective regulation matters.

The work reported here is of course only the start of the agenda of reshaping social care around the experiences of the people who use it. We have made good progress but much remains to be done. It falls now to our successor body, the Care Quality Commission, to take this work forward.

A handwritten signature in black ink, which appears to read 'Denise Platt'.

Dame Denise Platt DBE
Chair, Commission for Social Care Inspection

Chair and Commissioners

Dame Denise Platt DBE – Chair



Dame Denise Platt was Chief Inspector of the Social Services Inspectorate 1998–2004, and Director for Children, Older People and Social Care Services at the Department of Health 2001–2003. Prior to this Dame Denise was Head of Social Services at the Local Government Association and Director of Social Services at the London Borough of Hammersmith and Fulham. She is currently Chair of NAT (the National AIDS Trust), a trustee of the NSPCC, the fpa (Family Planning Association) and the Adventure Capital Fund, a Governor of the University of Bedfordshire and a member of the Independent Review Board of the Cheshire Fire and Rescue Service. She is also a Commissioner of the Audit Commission, and a member of the Committee on Standards in Public Life.

John Knight



John Knight is Assistant Director of Policy and Campaigns at Leonard Cheshire Disability. He is a magistrate, a council member of the General Social Care Council, a trustee of the National Council for Voluntary Organisations and a member of the Cabinet Office's Third Sector Advisory Board. In addition to his role as a Commissioner for CSCI, John has been a member of the Remuneration and HR Committee. John Knight has personal experience of using social care services.

Professor Jim Mansell



Jim Mansell is Professor of Learning Disability in the Tizard Centre at the University of Kent. A pioneer of de-institutionalisation and community living, he is a trustee of United Response, a disability and mental health charity. He was a member of the Government's Learning Disability Taskforce and the Independent Inquiry into Access to Healthcare for People with Learning Disabilities.

Olu Olasode



Olu Olasode is a public service productivity and finance consultant, and Chief Executive of TL First. He is also a Board member of the Cabinet Office's Capacitybuilders and Chairman of its audit committee, and Non-Executive Director of the Community Action Network (CAN). Olu has been appointed a Commissioner of the new Care Quality Commission (CQC) and Chairman of CQC's Audit and Risk Committee. He has previously served as a Non-Executive Director and Audit Chair of Bromley NHS Primary Care Trust, and Chairman of the General Performance Panel of the Department for Communities and Local Government's (DCLG) Beacon Award Panel. Olu trained as a Chartered Accountant with Ernst & Young and has a range of executive director and chief executive experience across the private, public and third sectors. In addition to his role as a Commissioner with CSCI, Olu was appointed Chairman of the Audit and Risk Committee.

Chief Inspectors

Beryl Seaman CBE



Beryl Seaman is a former Chair of the South Yorkshire Probation Board and the Probation Boards Association. Her background is as a social worker in children's and adults' services, and she has been a magistrate since 1986. She serves as a Commissioner with the Legal Services Commission, and is a trustee of the Camelot Foundation, a governor of Sheffield Hallam University, chair of Voluntary Action Sheffield and an independent member of South Yorkshire Police Authority. In addition to her role as a Commissioner with CSCI, Beryl chaired the Remuneration and HR Committee.

Peter Westland CBE FRSA



Peter Westland has been a Commissioner since the inception of CSCI and a member of the Audit and Risk Committee. He was a member of CSCI's predecessor, the National Care Standards Commission. A former Director of Social Services for Hammersmith and Fulham and Head of Social Services at the Association of Metropolitan Authorities, he has also held a variety of non-executive appointments in the NHS and was Chair of the Primary Care Committee of the King's Fund. Other chairmanships have included Broadcasting Support Services and Action on Elder Abuse, of which he is still a Trustee. He is a Trustee of Grenfell Housing Association.

David Behan CBE (2004–2006)



David Behan was the Commission's first Chief Inspector from November 2003. Before that, David was the Director of Social Services, London Borough of Greenwich, and a member of the Greenwich Primary Care Trust Board and the Professional Executive Committee. David has been the Department of Health's Director General for Social Care, Local Government and Care Partnerships since September 2006.

Paul Snell (2006–2009)



Paul Snell was appointed Chief Inspector in August 2006, before which he was the Commission's Business Director for Inspection, Regulation and Review. Paul was previously Director of Social Services for Nottingham City Council, where he was also Director of Housing and Acting Chief Executive.

Some key milestones

October 2003

The Chair and Commissioners met for the first time and established the vision and values for CSCI that have underpinned its work from the beginning

November 2004

Consultation on proposals to modernise the system of regulating care services, *Inspecting for Better Lives*

March 2005

The children's view of inspection published with key messages from children about how inspections are – and should be

2005-06

Experts by Experience programme set up, involving people who use services in inspections

2006-07

SOFI (Short Observational Framework for Inspection) developed with Bradford University to better understand the experience of people with communication difficulties

2005-06

Service improvement boards established to engage people who use services and other stakeholders in CSCI's work

December 2005

CSCI's first major overview report on the *State of Social Care in England*

August 2006

Publication of *Race Equality Scheme* and draft *Equalities and Diversity Strategy*

April 2004

The Commission for Social Care Inspection was launched through an event involving people who use services

November 2004

CSCI published its first performance ratings of all councils with social services responsibilities

July 2005

CSCI and seven other inspectorates published a multi-inspectorate report on safeguarding children

April 2006

Inspecting for Better Lives implemented across the country

October 2006

Time to care? published – the first comprehensive study of domiciliary care since regulation introduced into that sector

2003

2004

2005

2006

Secretaries of State for Health

Alan Milburn 1993–2003

John Reid 2003–2005

Patricia Hewitt 2005–2007

Care Services Ministers

Stephen Ladyman 2003–2005

Liam Byrne 2005–2006

Ivan Lewis 2006–2008

2007-08

CSCI established seven regional enforcement teams to tackle poorly performing care services

January 2007

Second state of social care report published focusing on the state of commissioning and services to carers

December 2007

CSCI signed up to *Putting People First*, a cross-government initiative to transform adult social care

May 2008

CSCI published on its website the first quality ratings of care services for the public

November 2008

Final set of CSCI star ratings of councils' adult social care services published, showing continued improvement and better services for those eligible for support

April 2009

Responsibility for regulating and inspecting adult social care and health care passes to the Care Quality Commission

November 2007

First joint inspectorate consultation document published on Comprehensive Area Assessment involving CSCI

January 2008

Third state of social care report highlighted impact on lives of people deemed ineligible for council-arranged care. As a result Minister for Care Services asked CSCI to review eligibility criteria for social care.

October 2008

Review of eligibility criteria *Cutting the cake fairly*, published. Government commits to revised guidance on eligibility for social care services

January 2009

CSCI's final state of social care report shows that services have markedly improved since 2004 but policy ambitions of *Putting People First* are not yet realised

2007

2008

2009

Alan Johnson 2007–present

Phil Hope 2008–present

Improving regulation by putting people at the centre

Our aims

CSCI's aim from the start was not simply to make services 'work better', but to ensure better outcomes for people, and to amplify the voices of adults and children in the development and delivery of services.

Our touchstone from the beginning has been what children, young people, their families, adults and their carers say about what they want, how they want to be treated and what their experiences are.

The action taken

This has meant that the views of people using services and their families, friends and advocates were taken fully into account when reaching our judgements on the quality and performance of services. CSCI hosted the Children's Rights Director, who listened to and represented children's views, until April 2007 when his responsibilities transferred to Ofsted.

The 'Experts by Experience' initiative brought people directly into the process of regulation and inspection, through a series of innovative partnerships with voluntary organisations. Experts by Experience brought a different and independent view to the inspection process through observing people who use services and gathering their views. Inspectors used this evidence to help inform their judgements on the overall quality of services.

We introduced an observational tool to better understand the experiences of people with severe communication difficulties, such as people with dementia.

What we have achieved

CSCI has made a reality of 'user involvement', embedding it throughout our work and making a real difference for people who use services. We have established that good social care means involving people from the outset in all decisions about their lives and have refocused regulation onto outcomes for people. As a result, we have seen councils and services rethink their approach to involving people who use services.

“Getting positive feedback from an expert by experience is better than receiving a three-star rating!”

Service provider



Improving support to carers

Our aims

Carers – unpaid family, partners and friends – play a pivotal role in assisting people to live independently. There are currently at least three unpaid carers for every paid care worker. CSCI has highlighted this role, and the need for better support for carers by councils and their partner agencies.

Our aim was to focus attention on the particular problems carers face in gaining access locally to appropriate services and support, and to help ensure that carers' voices were heard in the development of policy.

The action taken

CSCI focused on support to carers in its report *The state of social care in England 2005-06* and found some progress in councils' provision of breaks, assessments and direct payments to carers. However, the emphasis tended to be on supporting carers in their caring role rather than promoting equal opportunities for carers. Carers continued to be seen as a 'resource' only and excluded from the opportunities other people would expect.

We continued to highlight these issues in the following year's report which showed growing numbers of people having to find and fund their own care and rely on family members or friends for care and support.

What we have achieved

CSCI has provided evidence, together with other organisations, of the need for more support for carers. Our Carers' Improvement Board has influenced the development of an assessment framework that has been accepted by ministers.

In its response to the findings of the CSCI review of eligibility criteria, the Government has committed to renewing its emphasis on the role of carers and their entitlement to an assessment of their own needs.

Monitoring support to carers must remain a priority, particularly as pressures increase on resources for social care.

“It is so pleasing to see that the views of carers have been listened to and reflected so constructively in a report coming from national 'officialdom'”

Feedback from council senior manager on *Cutting the cake fairly*



Improving regulation by promoting equality, diversity and human rights

Our aims

Promoting equality, embracing diversity and ensuring full inclusion for people who use social care has been central to our vision and values. Our aim was to demonstrate a commitment to human rights in everything we did.

These aims are fundamental to building strong communities and quality services. Social care services should be delivered in an inclusive and anti-discriminatory manner, which embodies these values.

The action taken

CSCI's equalities and diversity strategy has been directed at its own organisation as well as at care services. The work has been led by the Chief Inspector, who has chaired an Equalities, Diversity and Human Rights Programme Board. Three staff diversity groups – the Disability at Work Group, the Lesbian, Gay, Bisexual and Transgender Workers' Group and the Black Workers' Group – and an Equality and Diversity Group of people using services have contributed to our work on equality and diversity. In 2009 CSCI moved up 50 places within a year on the Stonewall Workplace Equality Index top 100.

Our *Quality improvement in social care* bulletins have offered practical assistance to care providers on equality and diversity issues. Each bulletin was directly informed by the experiences of people who use services.

What we have achieved

We have trained and equipped our inspectors to get beyond the surface of care delivery and to understand the real experiences of people using services, enabling them to challenge providers to promote and protect people's rights to live fulfilling lives in dignity and safety.

We have devoted considerable attention to making information accessible for everyone, for example through 'Easy Read' versions of all inspection reports for services for people with learning disabilities, 'Easy Read' summaries of publications and an accredited accessible website.

“When we're inspecting – our default position isn't to ask 'have you got a document with the human rights principles on it?' Instead we actually go and look to see if it's working in practice. We want to see what people's experience of the service is like”

Paul Snell, Chief Inspector, CSCI



Improving the regulation of social care

Our aims

CSCI set out to modernise the regulation of social care and in November 2004 consulted on *Inspecting for Better Lives*. This was in response to calls for changes in the registration and inspection of services to pay more attention to what people wanted from services. In addition, CSCI was obliged by law to visit care homes and other services twice a year regardless of how well they were performing.

Our aim was to improve services by focusing resources and effort on poor-performing services, replacing the 'one-size-fits-all' approach with one based on proportionality, and introducing a robust system for assessing risk.

The action taken

Action was taken to help care providers understand more clearly their responsibility for the quality of the care they offer to people. We also wanted to recognise providers whose services are well above the minimum requirements set out in the National Minimum Standards. We developed new descriptions of quality, based on extensive consultation, that are more meaningful to service providers and more comprehensible to the public.

We introduced quality ratings, to enable the public to understand how good a particular service is and to make comparisons, and as a lever for encouraging further improvement by service providers. The introduction of quality ratings was accompanied by a sharper focus on enforcement action against poor providers.

What we have achieved

CSCI has developed an approach to regulation that is based on outcomes and puts the rights of people who use services first. It is also proportionate and interventions are speedy when there are problems.

Quality ratings are now published so the public has good information to help them make choices. We know from our website that an increasing number of people are seeking information on how we rate service providers. Commissioners can now distinguish more easily between services, and some have changed their commissioning practice as a result. Providers have a real incentive to improve. Since the introduction of quality ratings there has been a significant reduction in the overall numbers of poor services.

“These findings clearly show that the majority of care home providers are backing the CSCI reforms and, most importantly, believe they will have a positive impact on residents' quality of life”

A member of The Consortium Care commenting on a survey of care providers showing 80% of respondents were positive about reforms that introduced a self-assessment component



Improving arrangements to safeguard people

Our aims

Ensuring people use care services that are safe is one of the regulator's core functions. Abuse is a violation of a person's human and civil rights. Safeguarding is at the heart of our inspection activity. CSCI has given priority to improving standards in arrangements to safeguard people, both in councils and in regulated care services.

The action taken

CSCI worked with seven other inspectorates on safeguarding children and published its findings in 2005.

We also worked with the Association of Directors of Adult Social Services and the Association of Chief Police Officers to update the Safeguarding Adults Protocol in 2006. This was to clarify roles and responsibilities and ensure more effective partnership working to improve arrangements to safeguard people from abuse.

We established safeguarding champions in each of our seven regions to act as a contact point for local advice and guidance.

We also contributed to the investigation into services for adults with learning disabilities in Cornwall, and triggered or took part in a number of other major investigations. In addition, we made greater use of our enforcement powers to ensure that people are kept safe.

What we have achieved

CSCI has raised awareness of safeguarding adults as being as important as safeguarding children. CSCI made it impossible for councils to receive a high star rating unless they can demonstrate their effectiveness in safeguarding people from abuse.

We have contributed to the Department of Health's review of the framework for safeguarding adults, No secrets, drawing upon our study in 2008 of safeguarding arrangements that showed a clear correlation between the performance of councils and regulated services.

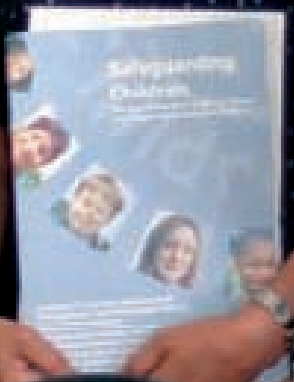
Improving safeguarding arrangements continues to be a priority, particularly to ensure people who direct their own support are able to benefit from individually tailored safeguards.

“If a council is performing well on safeguarding, a greater number of care services in the area are also performing well”

Safeguarding Children



The joint Chief Executives' Report on Commitments to



Improving council performance

Our aims

In order to improve services for local people, CSCI reported on the performance of councils' adult social care services and awarded councils a star rating based on judgements of their current performance and their capacity to improve.

The aim was to improve services by reporting publicly on councils' performance and providing information to enable people to compare councils and the services they commission and provide. This is the contribution we have made to future Comprehensive Area Assessments which, using a range of evidence, will assess the prospects for local areas and the quality of life for the people who live there.

The action taken

CSCI's staff developed a sound understanding of what good social care looks like, for both adults and children. We developed a new performance assessment system that focused on outcomes for people, such as health, wellbeing and quality of life.

CSCI's ratings of councils were based on a continuous, rigorous and structured assessment process using evidence drawn from a range of sources, including directly from people who use services. We supported councils' efforts to improve services, and sought to ensure consistency in our judgements through a transparent process of internal moderation and external review.

The judgement about the delivery of outcomes contributed to the Audit Commission's overall Comprehensive Performance Assessment of each council.

What we have achieved

The performance of councils has improved year on year in addressing current policy requirements for adult social care.

In 2008, 87% councils were judged to be delivering 'excellent' or 'good' outcomes for people who use social care.

However, there is still some way to go before councils have transformed social care in line with the ambitions of *Putting People First*.

“...the performance assessment regime developed by the CSCI has been a very powerful force for driving up performance. The Commission has developed a well respected methodology of arriving at its judgement, based on much more than simply counting percentages and looking at performance indicators. It's based on a process of dialogue and discussion and weighing up the qualitative and quantitative evidence”

Director of Adult Social Services



Improving and influencing in partnership

Our aims

From the start, CSCI has worked in partnership with people using services and a wide range of stakeholders, in order to be as well informed as possible and to speak from people's real experiences. This has been important to ensure CSCI maintains an 'expert voice' on social care to influence policy and improve services. People with experience of using, commissioning and providing services have shaped the work of CSCI, and they have recognised their own experiences in our reports.

The action taken

CSCI set up service improvement boards on issues relating to children and young people, older people, sensory and physical disabilities, learning disabilities, mental health and carers. Quarterly meetings of each board, which include people using services, carers and many other stakeholders, have explored significant social care issues and informed CSCI's work across a broad front.

A similarly wide range of individuals and stakeholders have worked with CSCI on special studies. People have also taken part in online surveys, consultative events, advisory groups and other discussions.

What we have achieved

CSCI's reports have given a voice to a wide range of people with knowledge and understanding of social care. Our reports are not simply a regulator's view; rather they represent a variety of perspectives underpinned by evidence, which have had a powerful role in influencing policy.

CSCI has worked with other regulators, such as conducting joint area reviews of children's services. In 2006 a collaborative in-depth review on the state of services for older people was undertaken by CSCI, the Healthcare Commission and the Audit Commission. In 2008 CSCI, the Healthcare Commission and the Mental Health Act Commission jointly reviewed the commissioning of services for people with learning disabilities.

“I felt very positive about the contribution of the stakeholders' involvement and see this forum as an invaluable forum for information sharing, improvement and the building of good relationships”

Member of a service improvement board



People working in CSCI

Jon Fry – Inspector

Jon became an inspector in 2002. He thinks one of CSCI's greatest achievements has been the change of emphasis to outcomes – to person-centred care. As he explains:

“It’s not about the inputs any more, it’s about the outputs. When I go to inspect a care home now I am looking to see if people are happy – if they are enjoying their lives in care – less at policies and procedures. It’s about listening to people who use the service. As a result I have seen a marked improvement in care standards over the last five years, certainly for older people. I think CSCI has played an important part in that. For me it’s about tuning in to the quality of life and I think CSCI has got much better at that.”

I also think the whole ethos and the way we work has changed in the last few years. As inspectors we are much more effective now in terms of making a difference to people in homes or receiving a service. At the start of every inspection I let managers and providers know the aim of the inspection is to work with them to identify areas that could be improved. Hopefully I think a lot of homes and services view inspections more positively now as a result.”



Vanessa Gent – Regulation Inspector

Vanessa became an inspector for the NCSC in Nottingham in 2003, in search of a new challenge after a spinal injury made her job as a health visitor impossible.

As well as looking after a full portfolio of care services Vanessa plays a very active role in the Commission in other ways. She is a founding member of the Disability at Work Group (DAWG) that supports disabled people and is one of ten dignity at work advisors. Vanessa says:

“CSCI has raised standards of care across the board. The evidence is there to show that overall the services we regulate are actually improving. The achievement of the Commission is turning around or when necessary closing poor services, and also recognising services that are doing a good job. I think that’s the biggest achievement of the Commission.”

The quality rating system that CSCI brought in has also achieved a lot. Service commissioners now look at placing people in excellent or good services, not in adequate or poor services. This means that individual providers and managers now want to achieve the best. Their ‘star’ rating has made a lot of difference to their attitudes.”



Sue O’Leary – National Enforcement Lead

Sue has worked in social care for over 30 years and has lost none of her passion for the job. *“When the chips are down we need somebody to advocate for us,”* she said. *“Good quality care can only be achieved if there is regulation that effectively measures*

that care, and this is something CSCI has been very successful at doing.”

Last year Sue became the national lead for enforcement. The regional enforcement teams are dedicated to ensuring services comply with regulations and are rapidly building a high level of expertise in this area.

Sue believes the organisation as a whole has achieved a number of things.

“I think CSCI has been successful in publicising who it is and what it does; it’s made inspection reports more accessible on the web and easier to understand with star ratings; and it’s now able to provide more information to councils regarding social care services in their areas. Also, I believe it has made regulation more consistent across regions.

What has inspired me most during my time at CSCI, though, is the motivation, commitment and passion of the staff and the relationships they have formed – you can have all the systems and structures in the world but ultimately it is the people and the relationships we have with them that delivers better services.”



Aileen Hamdan – Communications Coordinator

Aileen believes accessible communications are key to people using services having a voice. All requests for CSCI documents and reports in alternative formats and for translation and interpreting services go to Aileen, who is constantly looking at ways to improve the service.

“If only certain people are catered for,” she says, *“others are effectively left out.”* It is now standard CSCI policy that alternative formats are launched alongside key publication summaries aimed at people who use services.

Since starting the job Aileen has dealt with around 900 requests for accessible communications each year, and 168 surveys have been returned in minority languages. When the state of social care report was launched in 2007 there were over 4,200 downloads of alternative formats from the website in the first two weeks.

Aileen’s job also involves meeting the accessibility needs of people attending CSCI consultation events. Aileen says: *“One of the biggest things I have learnt at CSCI is the importance of talking to people, finding out what they want and providing it – and this helps with our work.”* She thinks CSCI’s main achievement has been putting people who use services at the heart of what it does.

In addition to this Aileen is also involved in the CSCI Black Workers’ Group. *“We advise the commission on equality and diversity issues from the perspective of both the workforce and people who use services who are black and minority ethnic, so it is very important, and something I am very proud to be involved in.”*



Influencing policy: The state of social care reports

Our aims

As part of our role as an 'expert voice' on social care, CSCI aimed to present a realistic picture of social care across the public, private and voluntary sectors. Our four reports on the state of social care have brought together all our information in one place and offered an authoritative, up-to-date reference point of what social care services in England look like.

The action taken

Each year the reports on the state of social care have not only provided information about trends and the quality of care services, expenditure by councils and their performance, but have also taken an in-depth look at specific issues and policy areas on which we want to shed light.

We have focused attention on the situation for carers, people who fund their own care, people who are 'invisible' or 'lost' to the social care system, and people with multiple and complex needs.

We have also highlighted the need for a new settlement between the state, individuals and families over who should pay for social care.

What we have achieved

The evidence from these reports have influenced the development of policy on social care. For example, in response to the 2006-07 report, the Government asked CSCI to review the implementation of the Fair Access to Care guidance used by councils to determine who qualifies for publicly funded social care.

Care providers, councils and others have also used the reports to track progress in their sector.

“I want to put on record our appreciation of these reports, which are vital indicators of the state of social care”

Martin Green, Chief Executive of the English Community Care Association, press release January 2009



Influencing policy: support for everyone

Our aims

Our aim in reviewing the Fair Access to Care Services guidance was to assess the impact of the guidance on people's lives, and to make recommendations for a fairer, more transparent system of determining eligibility for access to council-funded services.

Three thousand people responded to our survey on the impact of the current guidance; over 100 organisations contributed their views, and many more people took part in special meetings.

The action taken

In our report, *Cutting the cake fairly*, we recommended that some level of assistance and advice be given to everyone seeking care and support. There should be services that all citizens can access; information and advice for everyone looking for specific support; and a clearer basis for decisions about the allocation of public funds for people seeking care. Eligibility criteria should thus be set in a broader context more consistent with the multi-partner agreement *Putting People First*.

CSCI also recommended that people should get a better quality of response when first contacting their council and, where appropriate, should be offered a short period of 're-ablement' to maximise what they can do for themselves before any decisions are made about ongoing needs for support.

What we have achieved

In its response to the CSCI review, the Government has acknowledged the challenges in transforming social care at a local level. This includes the need for a renewed emphasis on universal services such as information and advocacy, more holistic assessments, early intervention that can assist people to live independent lives, a strong focus on choice and control and the role of carers.

“I am fully committed to taking this agenda forward in both the short term through issuing revised guidance and in the longer term through the Care and Support Green Paper”

Phil Hope MP, Minister for Care Services, October 2008



Influencing policy: state, individual and family responsibilities

Our aims

We aimed through the state of social care reports to highlight a major, and still unresolved, policy challenge – the balance between state and individual responsibility for funding social care. Dame Denise Platt commented *“People are increasingly looking to government to provide clarity on what social care the state will fund, and what individuals will be expected to pay for directly”*.

The action taken

CSCI has provided evidence of an increasingly sharp divide between those people who benefit from publicly funded social care and those who do not qualify for it. Total private expenditure in 2006 on personal social care for older people was estimated to be nearly £6 billion, demonstrating the significant financial contribution from families and individuals.

In a study of people’s experiences when finding a care home, we showed there is a lack of clarity about what people are paying for and who pays for what.

In our review of eligibility criteria we drew particular attention to the need to re-state policy towards carers as there was confusion and a lack of adherence to legislation and guidance on supporting carers and assessing their needs.

What we have achieved

The Government launched a debate about the future care and support system, which ended in November 2008. CSCI contributed a full response including a commentary on different funding systems and how these relate to eligibility for public funding.

“In the long term, there is no alternative to radical reform of the way the social care system is funded. ...the key issue is not simply the criteria used to assess people’s eligibility for publicly funded care and support, but the amount of resources currently allocated – the size of the cake itself”

Dame Denise Platt, foreword to *Cutting the cake fairly*, October 2008



CSCI Publications

Children's social care publications

<i>Children's services: CSCI findings 2004-07</i>	March 2007
<i>One-person children's homes – a positive choice or a last resort?</i>	March 2007
<i>Policy by children: a children's views report</i>	March 2007
<i>Looked after in England – how children living away from home rate England's care: a children's views report</i>	March 2007
<i>About education: a children's views report</i>	March 2007
<i>Care matters – children's view on the government green paper</i>	February 2007
<i>Children and safeguarding – children's views for the DfES priority review</i>	January 2007
<i>Children's consultation on the children's index: a children's views report</i>	January 2007
<i>Adoption: messages from inspections of adoption agencies</i>	November 2006
<i>Children on rights and responsibilities: a children's views report</i>	November 2006
<i>Placements, decisions and reviews: a children's views report</i>	September 2006
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We want people to be able to access this information. If you would like a summary in a different format or language please contact our helpline or go to our website.

From April 2009, a new Care Quality Commission will take over the work of CSCI, the Healthcare Commission and the Mental Health Act Commission.



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