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Care Quality Commission Improvement Plan
Updated: October 2025

Improvement Area	Actions	Outcome(s)	Delivery Date	Progress
Timeliness of Assessments and Reviews	**Care and Support Assessment**	1. Care Act Assessments to be allocated within 28 days 2. Median wait times to not exceed 14 days 3. Maximum wait times to not exceed 56 days	May-26	Waiting lists have reduced since the CQC Assessment visit. As of 12/10/25: Count of individuals awaiting allocation: 341 as at 20/10/25 (down from peak of 716 on 29/12/24) Median wait duration: 21 days (down from 45 days on 29/12/24) Duration over 28 days: 42% (down from 62% on 29/12/24) Median and Maximum wait time (over past 12 months as per CQC measure) is 9 days and 427 days respectively. Performance reporting is being strengthened to enhance oversight of waiting lists for assessment.
	Carer Assessment and Reviews	1. Carers assessments to be allocated within 28 days 2. Median wait time to not exceed 14 days 3. Maximum wait time to not exceed 56 days	May-26	Count of carer assessments awaiting allocation: 49 Median wait duration: 15 days Maximum wait duration: 103 days
	Financial Assessment	1. Median wait times to not exceed 28 working days 2. Maximum wait times to not exceed 56 working days 3. Number of people awaiting financial assessment to not exceed 220	May-26	Median wait time for non residential assessment is 14 days and for residential assessment 45 days (down from 19 days and 75 days in June 2025 respectively). Maximum wait time for non residential assessment is 45 days and for residential assessment 90 days (down from 203 days and 175 days in June 2025 respectively). Total number of people awaiting assessment is 297 reduced from 353 in April 25.
	Occupational Therapy (OT): 1. Increase capacity to meet demand for OT assessments 2. Reduce waiting time for OT Assessments 3. Reduce waiting time for delivery/installation of equipment and adaptations, including joint working with district and borough councils	1. Median wait times for allocation to not exceed 28 days 2. Maximum wait times for allocation to not exceed 56 days 3. Delivery of equipment to be within 5 working days 4. Installation of minor adaptations to be within 60 days 5. Installation of major adaptations to be completed within 120 days	Nov-26	Further work taking place to review current waiting times and establish target operating model indicators.
	Annual Review: 1. Reduce delays to people receiving annual reviews 2. Increase proportion of people who have a review in a 12 month period	1. Increase reviews completed within 12 months to 85% 2. Reduce Median overdue waiting time to 30 days of due date 3. Reduce Maximum overdue duration to 90 days of due date	Jun-26	Current performance indicates 76% of people have a review completed within 12 months (latest national average 57%).
	Waiting Well: 1. Complete the Waiting Well Audit, and recommend actions to ensure the policy is followed consistently across all teams 2. Implement ongoing monitoring of the Waiting Well policy	1. Waiting Well policy performance monitoring in place	Mar-26	Waiting Well Audit completed, initial findings informing waiting list improvement activity.

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Carer Services	**Carers Service** 1. Ensure support available to carers is well defined and interfaces with other organisations are clear 2. Information is clear and accessible 3. Develop new strategy and service offer 4. Ensure carers are engaged in co-production of service developments and future strategy	1. Information is clear and accessible in a range of formats and places 2. Carers reported satisfaction with services and access to information is improved. 3. Revised Carers Strategy 2026-2029 and delivery plan in place	Nov-26	County Council website search function has been updated. Plans in place to increase access to information in Libraries and primary care settings. Work commenced to develop the Carers Strategy 2026-2029 including engagement with carers, commissioners and providers. Carers services options in development as part of the new strategy. Current contracts are to be reprocured in 2026.
Reablement and Hospital Discharge	**Hospital Discharge:** 1. Work with partners to ensure people have the right discharge support which maximises the most independent outcomes 2. Ensure people have clear information about their support on discharge 3. Ensure 7-day working to facilitate hospital discharge	1. People are discharged on the most appropriate pathway 2. Information provided to people during discharge is clear 3. Brokerage/commissioning of support does not delay discharge	Mar-26	Work underway to ensure people receive appropriate support when discharged from hospital. Discharge plans discussed and information packs (including financial information) shared with people on wards. The Brokerage service prioritises care for hospital discharge.
	Reablement Service: 1. Expand reablement capacity to provide more people with opportunity to maximise independence	1.Access to reablement is available for everyone who would benefit on discharge from hospital or first presentation to Adult Social Care services	Aug-26	Recruitment and retention opportunities being developed to increase capacity in reablement services.
Access, Information Advice and Guidance (IAG)	**Provision of Information, Advice and Guidance:** 1. Ensure online information and referral forms/self-assessments are easy to understand and accessible (including Carers Information) 2. Ensure information is readily available to people with no or limited access to digital formats 3. Improve people's experience when contacting the Council 4. Consider how the effectiveness of the signposting and IAG offer can be measured and reported	1.Improve call handling times 2. Improved customer satisfaction 3. More people state they can access the information and advice they need 4. Mechanism to be developed to seek feedback about provision of information and signposting	Oct-26	Local Government Association Information Maturity Assessment underway. Hard copy Information packs are being rolled out across all areas following successful pilot. Plans to increase access to information in Libraries and primary care settings. Current call queueing times at 21 minutes in September 25. Utilisation of call back facility being evaluated.
Sufficiency and quality of provider services	**Commissioning Services:** 1. Home Care commissioning 2. Continue to develop support options as set out in the market position statement (Extra Care and Supported Living) 3. Re-procurement of Community Life choices (CLC) 2026-2030 to ensure sufficient capacity in day services to meet identified needs 4. Develop Commissioning dashboard to show demand and capacity across all support types 5. Ensure commissioned services are available to communities particularly rural areas		Aug-26	Home Care Invitation to tender launched 6/10/25. CLC Day services invitation to tender approval to be sought December 2025. new provision in place for November for Young Adults with Disabilities. Market stimulation for supported living planned for early 2026. New Extra Care developments being discussed with developers. Work on Commissioning dashboard being scoped.

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Safeguarding	**Application of Safeguarding Pathway and Process:** 1. Enhance the functionality and accessibility of the Safeguarding Referral Portal 2. Establish a standard operating procedure to inform referrers and key partners of the outcomes of Section 42 enquiries		Mar-26	Questionnaire/survey is in design stage which will establish provider feedback on issues they are experiencing with the Portal. Meeting with providers to begin improvements to the Portal taking place Dec 2025.
	Safeguarding data and oversight: 1. Strengthen data collection and performance monitoring of the effectiveness and timeliness of safeguarding processes. 2. Establish regular audit cycles to evaluate the application of safeguarding processes, and quality of practice.	1. Recommissioned Home Care Service 2. Recommissioned Day services (CLC) 3. Increase in Extra Care and Supported Living places 4. Commissioning dashboard in place to show any gaps in services	Mar-26	Safeguarding Practice Development Cycle (PDC) audit completed June 2025. Recommendations shared with operational teams in October.
Pathway for Adulthood	**Preparing for Adulthood:** 1. Enhance partnership with Children's services (Specialist Educational Needs and Disabilities [SEND]) to support early engagement of young people requiring adult social care 2. Improve information provided to young people and families 3. Review staffing establishment to ensure capacity to deliver improved outcomes for young people	1. Providers and referring agencies can easily refer safeguarding concerns and concerns for welfare appropriately. 2. Referring agencies receive feedback on safeguarding concerns raised.	Mar-26	Corporate Pathway for Adulthood programme in place. Recommendations on improvements to process and pathway to be reported in November 25.
Equalities, Diversity and Inclusion	**Equity of access and experience:** 1. Ensure social care support is accessible for people experiencing homelessness 2. Enhance engagement with and support to rural communities 3. Address digital exclusion (included in IAG Actions)	1. Management information informs operational and strategic decision making in line with safeguarding policy and procedures. Regular audits in place to evidence outcomes	Aug-26	Escalation and access process established between Adult Social Care and District Council Homeless services. Service model for zonal home care promotes rural and isolated provision. New CLC model will promote development of additional capacity across the County for Mental Health and Older People's provision.
Workforce	**Demand Management**: Review case loads and allocations across Operational Commissioning	1. Young people likely to be eligible for adult social care identified for assessment appropriately 2. Commence assessment of all young people transitioning from children's services to adult services on or before their 17th Birthday. 3. Young Adult Disability Team has the required capacity and skills	Dec-25	Demand Management audit report completed. Recommendations to be discussed with managers and staff in November.
	Practice Assurance: Develop mechanisms to demonstrate the impact of practice assurance action plans on teams and practice	1. Homeless people with eligible social care needs are able to access social care support 2. Access to social care is equitable across the County	Mar-26	Outcomes of individual PDC meetings are shared with respective teams. Overall outcomes are planned to be shared at Continued Professional Development events across all teams in Feb 26.
	Workforce Plan: 1. Complete updated Workforce Plan 2025-2026 2. Monitor delivery of the plan to address recruitment and retention challenges	1. Case loads across locality teams are manageable and in line with the operating model	Jan-26	Workforce plan is in development in conjunction with People Services Business Partner.
	Adult Mental Health Professional (AMHP) Establishment: Review AMHP establishment and operating model	1. Evidence of the impact of PDC audit is available through staff feedback	Jun-26	AMHP demand and capacity review undertaken. Agreement to increase staffing and management in Core AMHP service.

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Performance and oversight	**Data and insights:** 1. Ensure performance reporting is relevant and accurate and informs operational and strategic commissioning 2. Ensure robust performance monitoring and oversight 3. Ensure robustness of quality assurance/audit process, reporting and feedback 4. Communicate how data is used in frontline teams to improve outcomes	1. Improvement in recruitment and retention in key roles 2. Increase uptake of professional training opportunities	Oct-26	Initial work to update Waiting list tableau dashboards underway.
Partnerships	**Communication with partners:** 1. Improve understanding of joint funding processes 2. Increase number of people determined as eligible for Funded Nursing Care (FNC)	1. Revised operating model in place 2. AMHP Team capacity sufficient to meet demand	Jun-26	Work continues with Integrated Care Board partners to increase the number of people with FNC determinations. 2025 Quarter 1 snapshot shows 32 people per 50K population.