



**ADULTS AND CULTURAL SERVICES OVERVIEW AND SCRUTINY
COMMITTEE 1 JUNE 2026**

**CARE QUALITY COMMISSION ASSESSMENT 2025
IMPROVEMENT PLAN DELIVERY UPDATE**

REPORT OF THE DIRECTOR OF ADULTS AND CULTURAL SERVICES

Purpose of report

- 1 The purpose of this report is to provide the Committee with an update of the progress made to deliver the Care Quality Commission (CQC) Improvement Plan, prior to submission of the progress update to the Department for Health and Social Care (DHSC) due 17 June 2026.

Policy framework and previous decisions

- 2 In March 2026, the Committee received a report providing an update on progress made with delivering the CQC Improvement Plan.
- 3 In January 2026, the Committee received a report providing a brief update on progress made with delivering the CQC Improvement Plan.
- 4 In November 2025, the Committee received a report summarising the CQC assessment findings, highlighting key strengths and areas for development. A summary improvement plan was presented which outlined the actions that will deliver improvements identified in the CQC Assessment report. The Committee requested quarterly progress updates to align with the DHSC reporting cycle.
- 5 In January 2025, the Committee received an update on the position relating to preparations and readiness for the CQC Assessment site visit during week of 24 February 2025.
- 6 In November 2024, the Committee received a report summarising the position and process for the CQC assessment following the initial notification of assessment received on 9 September 2024. The report included the updated self-assessment and improvement plan alongside plans to prepare for the CQC Assessment site visit.

Background

- 7 The CQC published its assessment report of Leicestershire in September 2025, giving an overall rating of Requires Improvement.

- 8 Authorities achieving a Requires Improvement rating are required to develop an Improvement Plan and provide quarterly reporting to the DHSC demonstrating progress with improvement actions.
- 9 DHSC contract with Partners in Care and Health (PiCH) to work with councils assessed as requires improvement. The PiCH Improvement Advisor is working with Leicestershire to co-ordinate the response, ongoing review and support activities, outlined below:
 - a) Stage 1 - response to the CQC Assessment report, submitted 27 September included a response to the CQC findings, emerging improvement priorities and action planning.
 - b) Stage 2 – report includes the improvement plan and oversight arrangements and the support required to deliver the improvement plan. Submitted 17 December 2025.
 - c) Stage 3 – quarterly updates to DHSC commenced 17 March 2026. The CQC Improvement Plan, attached as an Appendix to this report, will be submitted to the DHSC along with a summary report provided by the PiCH Care and Health Improvement Advisor.
- 10 Programme management and governance is in place to deliver the CQC Improvement Plan; internal oversight of progress is through the monthly Departmental Transformation Delivery Board.
- 11 Short-term temporary resource has focussed on addressing assessment backlogs. Recruitment has commenced to roles in frontline operational teams where long-term resource is required to achieve and sustain improvement in services for people.
- 12 Communication and engagement with staff and people who draw on services is taking place to inform and deliver the improvement plan actions.

Care Quality Commission updated assessment approach

- 13 The CQC published details of their updated approach and guidance for local authority assessment in April 2026.
- 14 The local authority assessment framework remains unchanged with 9 quality statements across the 4 themes of Working with people, Providing support, Ensuring safety and Leadership & governance.
- 15 The quality statements are now underpinned by rating characteristics which describe what care and support, and governance and leadership might look like for each quality statement across each judgement level in the assessment framework.
- 16 Future assessment will place greater emphasis on people’s outcomes and experience of services, including unpaid carers. The CQC define people’s experiences as “a person’s needs, expectations, lived experience and satisfaction with their care, support and treatment including equity of experience, and access to and transfers between services”.

- 17 The CQC explicitly state that they will take a stronger approach to assessing support for unpaid carers, their experiences and outcomes.
- 18 The Secretary of State's 3 objectives and priorities, set in 2025, are embedded into the assessment framework, these are:
 - a) Commissioning of high-quality outcomes.
Assessment of commissioning that supports joined up and flexible local services to meet the diverse needs of the population that is evident in outcomes and the experiences of people including unpaid carers.
 - b) Preventing people's care needs from escalating.
The CQC will consider how prevention is embedded in assessment of people's needs, and that reablement, care technology, equipment or adaptations are promoted to support people to live independently for as long as possible without the need for formal support.
 - c) Delivery of joined up support within communities.
The assessment will consider how Leicestershire County Council works collaboratively with partners in health, voluntary, and community groups, to deliver services and encourage shared learning and co-production of services.
- 19 The CQC are introducing relationship management and monitoring to enhance their understanding of the local authority context and risks.
- 20 Scheduled assurance meetings will be held with the Director of Adults and Cultural Services, Principal social worker and key people. The Director of Adults and Cultural Services has received a letter introducing the CQC Deputy Director and relationship holder for the East Midlands, who will lead the assurance meetings.
- 21 Assurance meetings will follow an agenda set by the CQC and consider the self-assessment, key data, areas of strength and innovation, progress with improvements since the previous CQC assessment report and may also consider emerging themes from feedback.
- 22 The findings of assurance meetings will not result in a published report or change to the assessment rating. Further guidance in relation to the process and structure of assurance meetings is expected during May 2026.
- 23 The CQC will consider the risks associated with local government reorganisation and the impact of reorganisation on delivery of adult social care services during transition when planning and conducting assessments.
- 24 Future CQC assessments will be one of two types: a comprehensive assessment or a focussed assessment. The type of assessment undertaken will be determined by the most recent assessment rating and other intelligence the CQC holds about an authority.
- 25 Comprehensive assessments will review all themes and quality statements in the assessment framework to determine how well the authority is delivering its care act duties. These assessments can change the overall rating of the local authority and will result in a published report.
- 26 The usual maximum timeframes between comprehensive assessments are:
 - a. Outstanding: 4 years from publication of last report

- b. Good: 4 years from publication of last report
 - c. Requires improvement: 3 years from publication of last report
 - d. Inadequate: 3 years from publication of last report (so the impact can be demonstrated)
- 27 Factors which may influence the timing of comprehensive assessment include information received about the authority, the annual process of self-evaluation, assurance meeting and Local Government Reorganisation.
- 28 Focussed assessments will be carried out between comprehensive assessments and will review specific aspects of how care is delivered. A focussed assessment may be conducted in response to a specific risk or to identify areas of improvement. Focussed assessments will not result in a change of overall rating but an assessment report will be published. Findings from a focussed assessment will inform the next comprehensive assessment.
- 29 The assessment process remains largely unchanged, starting with notification and the information request. In addition to Case Tracking, whereby the local authority provides 50 cases that the CQC will select for review, Case sampling is being introduced to review a selection of current cases alongside a member of staff. These case reviews aim to understand people's journey and experience of social care. A site visit will be conducted with evidenced gathered through meetings with a range of staff and people with experience of services. All the evidence gathered during the assessment period will be analysed to produce an assessment report and determine an overall rating for the service.

Improvement Plan Delivery Update

- 30 Timeliness of Assessments and Reviews
- a) Temporary resource has reduced the number of people waiting for their assessment, the number of people waiting longer periods for their assessment to start is reducing with 99% of assessments starting within 8 weeks, compared 93% in May 2025, and no one has waited over 6 months since December 2025. Recruitment of additional social work roles into frontline teams is underway.
 - b) New Tableau dashboards reporting assessment waits are in place ensuring greater oversight of waiting times. Development of tools and supporting guidance to enhance the prioritisation and management of incoming referrals and allocation of cases is progressing.
 - c) An external Occupational Therapy assessment service, which commenced April 2026, has started to undertake assessments for equipment and the impact on the people waiting for assessment is starting to be seen with 551 people waiting at the end of April, compared to 605 at the end of March. Occupational Therapy service staff are involved in shaping changes to the service to ensure a timely and effective response to people referred to the service for an assessment.
 - d) The Carers Assessment Team has transferred to Operational Commissioning service and recruitment to increase team capacity is underway. Introduction of The Operating Model tools and processes will support person centred assessment and support planning and enhance oversight. Plans are in place to address

current waits for assessment and reviews which, combined with the development of the Carers service offer, will ensure the needs of unpaid carers are met to enable them to continue to provide support.

- e) The timeliness of financial assessments continues to improve with the figures at the end of April indicating 19 people were waiting their assessment. Adult Social Care Finance case worker recruitment is complete with appointees commencing in roles.
- f) Review Teams continue their focus on completing the most overdue reviews in their team allocation. To improve recording of reviews have been identified and are being implemented.

31 Access, Information, Advice and Guidance

- a) An ongoing approach to recruitment of customer advisors in the Customer Service Centre (CSC) is being implemented to ensure the CSC operates with a full complement of advisors ensuring calls are answered in a timely way. Workshops have been held to identify potential changes to the telephone menu system to help people reach the appropriate team.
- b) An updated ASC website landing page is proposed, based on analytics data to support access to the most frequently used pages. The recommendation from Loughborough University School of Design will be available early June 2026 which will further inform change to the navigation and accessibility of the adult social care website information. I&T Services are embarking on testing a chatbot to enhance searching for information on the council's website,
- c) The provision of printed information is progressing with a cut-out-and-keep section in Leicestershire Matters and a leaflet introducing adult social care printed for distribution through a range of community locations, including libraries, family hubs, GP surgeries, and district councils. Other actions to support access to information and service for people who face barriers is underway with the introduction of the offer of a referral to Adult Learning Services for support to use digital technology and testing the potential for drop-in surgeries in established bases.

32 Reablement and Hospital Discharge

- a) Reablement team capacity analysis is complete to inform profiling of capacity increase, recruitment to role is underway, current increase in capacity is 9.27FTE, aiming to increase to 30FTE autumn 2026. Other actions to increase capacity within the team, such as balanced rotas, introduction of a new roster system and salary and benefits are all progressing.
- b) Reinforcement of escalation routes in the event of risks during discharge have been communicated to the service. A new co-produced hospital discharge information leaflet is now available to people and health partners.

33 Carers Strategy (2026-2030) and Support Service

- a) The Draft Carers Strategy (2026-2030) consultation is open from 20 April to 14 June 2026. Feedback from the consultation and further engagement with

stakeholders will shape the final strategy expected to be published September 2026.

- b) The business case for the Carers service offer in Leicestershire has commenced bringing together feedback from engagement and carer support data to inform the case to develop services that provide effective support to unpaid carers across Leicestershire.

34 Sufficiency of provider services

- a) Re-commissioning of the Community Life Choices Day services is underway. 66 providers bid for the contract, and evaluations will be completed June 2026.
- b) The business case for Extra Care developments in Hinckley and Coalville is finalised for approval, discussions continue with developers for new Extra Care accommodation. Detailed scoping of a commissioning dashboard is underway which will support identification of any gaps in commissioned services.

35 Equity of access and experience

- a) A proposal to introduce a grant for local community projects is in development, managed jointly with Public Health.
- b) The need to ensure access to services for unpaid carers living in rural communities is included in the draft Carers Strategy 2026-2030 and will be a component of future strategy and commissioning.

36 Safeguarding

- a) Developments of the safeguarding referral form is underway to reduce barriers to the referral process for professionals. A mechanism to ensure referrers are informed of the outcome of safeguarding enquiries has been defined, system change and supporting guidance is in development.
- b) Improvement in reporting safeguarding pathway activity continues, considering improvements that will strengthen the monitoring of agreed target timescales and address issues with data quality.

37 Pathway for Adulthood

- a) This area of work is being delivered as part of the Corporate Preparation for Adulthood (PfA) Review.
- b) Workstreams are progressing their identified actions, and the new cohort allocation tool is progressing. Project updates have been communicated to staff.

38 Workforce

- a) The draft Adult Social Care Workforce plan is being finalised.
- b) A review of case complexity has commenced with the aim of establishing that cases are allocated to appropriately skilled workers, understanding if teams have

the right balance of social workers and community support workers which will inform practice improvement.

- c) A new employee engagement group is established which will provide direct communication between front line staff and assistant directors.
- d) An Audit assurance group has been established which is embedding learning and assessing the impact of practice audits, to drive improvements in practice.

39 Partnerships in joint funding

This area of work is being delivered in collaboration with the Integrated Care Board (ICB). An ICB review of dual coding of Funded Nursing Care (FNC) placements is complete. This review considered existing placements with Section 117 funding recorded on health systems, where FNC funding is also in place but not recorded. The FNC funding has been added to records and will result in more accurate reporting of FNC funded places. FNC determinations reporting for Quarter 4 expected June 2026 is expected to demonstrate the impact of this work. A revised policy and action plan is being developed with partners.

40 Performance and Oversight

- a) This workstream provides over-arching assurance across all improvement workstreams, that reporting developments meet the needs of the Department and the CQC.
- b) A new tableau dashboard is in place, providing improved assessment waits reporting and enhancement of the Reviews dashboards is complete.
- c) Further development of tableau dashboards is underway to provide enhanced reporting for Carers Assessments and reviews, Occupational Therapy assessments, and Safeguarding activity.
- d) The group is considering the impact of the updated CQC data request and identifying further development that may be required to meet this. The group is also overseeing data quality work to verify the accuracy of data provided to the CQC during the assessment.
- e) External support from Healthcare Innovation Consortium (HIC) has commenced, with the objective to develop recommendations to embed the use of data and insight across the service to underpin effective delivery of social care duties.

Looking ahead and preparation for the next CQC assessment

- 41 Progress with the improvement Plan actions is due for submission to the DHSC on 17 June 2026.
- 42 In addition to delivering the Improvement plan, preparation for the next CQC assessment is commencing. Preparations will include an updated self-assessment which will reflect the improvements made and their impact on outcomes for people, alongside ensuring data requested is available and accurate and that evidence documents are up to date.

- 43 Preparations will also consider learning from the key characteristics of local authorities that achieved outstanding and good overall ratings to further enhance the quality and impact of services and people's experiences.

Characteristics of local authorities with outstanding and good assessment ratings

- 44 Partners in Care and Health analysed a number of CQC assessment reports to identify the key characteristics of services that achieved an overall assessment rating of outstanding and the upper end of good.
- 45 The characteristics of local authorities with overall ratings of outstanding and good are:
- a) Flow and access: People experience seamless pathways from first contact through to review of their support and needs. Waiting times are minimal, assessments are completed quickly and performance is monitored daily so delays are identified and resolved early.
 - b) Prevention: Reablement and enablement is the default approach. More people regain their independence to live without the need for formal care and support.
 - c) Occupational therapy as a strategic enabler: Occupational therapy is a key function, underpinning wellbeing and independence through early intervention and prevention. OT leadership is embedded in governance and commissioning, leading reablement pathways and drives positive outcomes.
 - d) Equity, inclusion and coproduction: Peoples lived experience is embedded in the co-production of strategy, commissioning services and practice. Services are designed with and for people facing disadvantage or exclusion.
 - e) Partnerships and place: Services work as one local system, with shared governance, data and delivery across social care, health and the voluntary sector. Neighbourhood teams are joined up, discharge is well-coordinated, and occupational therapy is fully embedded
 - f) Market shaping and sustainability: Care markets are stable, ethical and high quality. Commissioning supports neighbourhood-based care, with fair provider terms, workforce sustainability, early identification of market risk, and continuity of support for people who rely on services.
 - g) Safeguarding and liberty: Safeguarding is timely, person-centred and preventative. Concerns and enquiries are handled promptly, advocacy is offered, Making Safeguarding Personal is embedded, and learning from multi-agency reviews is shared and acted upon.
 - h) Carers and families: Carers are recognised as partners. They receive timely assessments and practical support during hospital discharge. Flexible breaks, wellbeing and employment advice are in place, and their outcomes are tracked and improved.
 - i) Personalisation and direct payments: People have choice and control over their support. Direct payments are easy to access and well supported, uptake and

outcomes are monitored across all groups and localities and through feedback.

- j) Learning, data and digital capability: There is a strong culture of learning and improvement. Data is used to improve practice, real-time dashboards, regular deep dives and predictive analytics support decision-making, while investment in data skills helps leaders and practitioners act on insight.
- k) Strengths and asset-based practice: Practice focuses on what matters to people and what they can do, supported by families, communities and local assets. Positive risk taking is enabled, conversations are solution-focused, and outcomes and stories clearly show strengths-based impact.

Key risks

- 46 Failure to make adequate progress with the improvement actions identified will result in further intervention from DHSC.
- 47 A second consecutive Requires Improvement rating will lead to enhanced support and monitoring including direct engagement by DHSC.

Resource Implications

- 48 Significant resource is required to deliver the improvement actions identified in the CQC Assessment report. Financial resource was confirmed through the Medium Term Financial Strategy process by the Full Council on 18 February 2026.
- 49 Additional short-term resource is in place to ensure sufficient capacity to reduce the waiting time for assessments. Recruitment of longer-term roles to enhance capacity in key teams is underway.
- 50 Technology will be used wherever possible to improve access to information and streamline processes to which will support improvement activities. Business Intelligence Service resource will be required to deliver enhancements to performance reporting and oversight.
- 51 The Director of Corporate Resources and Assistant Director (Law and Governance) have been consulted on the contents of this report.

Timetable for Decisions

- 52 Progress with delivering the CQC Improvement Plan will be presented to this Committee on a quarterly basis.

Circulation under the Local Issues Alert Procedure

- 53 None.

Equality Implications

- 54 There are no equality implications arising from this report. Any proposed changes to the Council's policies, procedures, functions, and services which may arise from delivery of its Improvement Plan will be subject to an Equality Impact Assessment.

Human Rights Implications

- 55 There are no human rights implications arising from this report. Any proposed changes to the Council's policies, procedures, functions, and/or services which may arise from delivery of its Assurance improvement plan will be referred immediately to the Council's Legal Services for advice and support regarding human rights implications.

Appendix

CQC Improvement Plan – Appendix A

Background papers

- Report to the Adults and Communities Overview and Scrutiny Committee: 2 March 2026 Care Quality Commission Assessment 2025 – Improvement Plan Delivery Update
<https://democracy.leics.gov.uk/documents/s194927/CQC%20Improvement%20Plan%20Report.pdf>
- Report to the Adults and Communities Overview and Scrutiny Committee: 19 January 2026 Care Quality Commission Assessment 2025 – Improvement Plan Delivery Update
<https://democracy.leics.gov.uk/documents/s193999/CQC%20Improvement%20Plan%20Update%20January%202026.pdf>
- CQC Leicestershire County Council local authority assessment published 17 September 2025 <https://www.cqc.org.uk/care-services/local-authority-assessment-reports/leicestershire-0925>
- Report to the Adults and Communities Overview and Scrutiny Committee: 3 November 2025 Care Quality Commission Assessment of Leicestershire County Council's Delivery of Care Act 2014 Duties
<https://democracy.leics.gov.uk/documents/s192588/CQC%20ASSESSMENT%20OF%20LOCAL%20AUTHORITIES.pdf> - item 36
- Report to the Adults and Communities Overview and Scrutiny Committee: 20 January 2025 – Assurance of Adult Social Care
<https://democracy.leics.gov.uk/documents/s187689/Report%20CQC%20Assessment%20of%20Local%20Authorities.pdf> – Item 50
- Report to the Adults and Communities Overview and Scrutiny Committee: 4 November 2024 – Assurance of Adult Social Care
<https://democracy.leics.gov.uk/documents/s186111/CQC%20ASSESSMENT%20OF%20LAs.pdf> – item 35
- Report to the Adults and Communities Overview and Scrutiny Committee: 6 March 2024 – Assurance of Adult Social Care -
<https://democracy.leics.gov.uk/ieListDocuments.aspx?CId=1040&MId=7107&Ver=4> – item 65

Officers to Contact

Jon Wilson
 Director of Adults and Cultural Services
 Tel: 0116 305 7454
 Email: jon.wilson@leics.gov.uk

Tracy Ward

Deputy Director of Adults and Cultural Services and Assistant Director (Access, Integration and Prevention)

Tel: 0116 305 7379

Email: tracy.ward@leics.gov.uk

Debbie Moore

Improvement Manager

Tel: 0116 305 8091

Email: Debbie.moore@leics.gov.uk

This page is intentionally left blank