

Adult Social Care Care Quality Commission (CQC) Assessment Improvement Plan

August 2025

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for Completion/ Key Dates	Progress	Monitoring Arrangements
1.1	Aim for people to only have to tell their story once Overall ambition is to have a named work approach to reduce the need for people to tell their story more than once.	HoS – Care Management & PSW	Review – January 2026	Use of the team transfer process outlined in the Social Care Practice guidance to support approach. Work being progressed in Complex Care Widnes team in respect to Supported Living settings – named workers will be identified. This to be replicated across Complex Care Runcorn Team. Approach with care homes to be explored with Quality Assurance Team. Ongoing work in respect to recruitment and retention of staff.	Quarterly update to SMT
1.2	Re-assessment or review – Reduction in waits • Continue with the work already in place and being progressed which is addressing waiting lists/times, including the project regarding the use of AI which will support the reduction in waiting times in respect to reassessment and reviews, but also initial assessments.	HoS – Care Management & PSW	March 2026	Care Reviews – Baseline position @ 28.2.25 :- • As at 28.2.25, there were 2,075 people in receipt of a long-term service. Of those individuals, during the last 12 months, 1,793 reviews had been completed and there were 282 reviews outstanding. Target as at end March 2026 = TBC NB. Need to ensure to take into account any reviews which have been identified as being needed within a 6 month period.	Quarterly performance updates to SMT

				Regular Performance meetings with Care Management need to be reestablished. Progress in respect to AI developments are being shared and discussed at the Care Management Principal/Practice Manager meeting w/c 18.8.25 - Salesforce CRM and AI will be used in conjunction to support Adult and Children's Social Care workers in undertaking client reviews and assessments. Interviews with clients (subject to consent) will be recorded and automatically summarized, transcribed and inputted into the client's Eclipse case record (subject to the professional oversight of the social worker). The goal is to significantly reduce the SWs administration overhead, thereby improving productivity and allowing the SW more time to deploy their professional expertise.	
1.3	OT Assessments - Reduction in waits (Link with 2.3) • Continue with the work already in place and being progressed which is addressing waiting lists/times, including the project regarding the use of Al which will support the reduction in waiting times in respect to reassessment and reviews, but also initial assessments.	Principal Occupational Therapist	March 2026	OT Assessments – Baseline position @ 28.2.25 :- • As at 28.2.25, there were 122 people waiting for an OT assessment. Target as at end March 2026 = TBC Regular Performance meetings with Care Management need to be re- established.	Quarterly performance updates to SMT

				Progress in respect to AI developments are being shared and discussed at the Care Management Principal/Practice Manager meeting w/c 18.8.25 - Salesforce CRM and AI will be used in conjunction to support Adult and Children's Social Care workers in undertaking client reviews and assessments. Interviews with clients (subject to consent) will be recorded and automatically summarized, transcribed and inputted into the client's Eclipse case record (subject to the professional oversight of the social worker). The goal is to significantly reduce the SWs administration overhead, thereby improving productivity and allowing the SW more time to deploy their professional expertise.	
1.4	Carers Assessments – Contingency Plans (Link with 6.3)	HoS – Care Management & PSW	March 2026	Contingency Plans – Baseline position @ 28.2.25 :- • As at 28.2.25, zero. Process now in place for completing contingency plans and is being implemented. Target as at end March 2026 = 25% of contingency plans to have been completed.	Quarterly performance updates to SMT
1.5	 Carers Assessments – Waits on phone Continue with the work already in place and being progressed 	HoS – Care Management & PSW	Review - March 2026	The Contact Centre has an Adult Social Care line, which is a priority line and between January and	Quarterly performance updates to SMT, to include update from

which is addressing waiting lists/times in respect to Carers Assessments.

December 2024, the average wait time was 12 mins and 22 seconds. In addition, we have direct email addresses for the Prevention & Wellbeing Service and Occupational Therapy which are monitored throughout the day as part of duty. We direct partners to these emails addresses as much as possible e.g. they can email the inbox directly, if they need a call back, rather than going via the contact centre. These email addresses are also given to people open to a worker for easier contact.

Contact Centre on average wait times in respect to the ASC phone line.

It is anticipated that work on the Customer Care Journey project will improve wait times. In the process of automating a number of high volume low skill services such as missed bins, tip permits, fly tipping, pest control etc which will free up advisors to deal with the social care calls in a more timely manner. Are also introducing a Customer portal so customers can access services 24/7 and will be working over the next year to move more services to this portal.

As part of Website Improvements (*Link to 2.4*), need to focus on content of ASC pages to ensure all information is on there and up to date. This will support the customer portal work.

				Carer Assessments – Baseline position @ 28.2.25 • Waiting List Size = 6 waiting for an assessment to be allocated to a worker. Target as at end March 2026 = TBC	
1.6	Financial Assessments – Reduction in waits • Continue with the work already in place and being progressed which is addressing waiting lists/times	Income, Assessment & Income Recovery Manager	March 2026	New process now in place; since the CQC Assessment, the I&A Team has continued to refine the referral and financial assessment processes to improve processing times. A standardised financial assessment referral form has been implemented within Eclipse for social work teams to use when identifying clients who require a financial assessment. This applies to clients with an existing service package as well as those considering a package of care. Stringent new procedural targets have been introduced for each stage of the financial assessment process, starting from the point a referral is received. For example initial contact to client by phone to arrange a telephone assessment appointment should be made within 2 working days of receipt of the financial assessment referral. Where targets are not met, reasons are documented to help identify areas for future improvement.	Quarterly performance updates to SMT – Performance updates will be based on the new procedural targets for the Service

Financial Assessments - Baseline position @ 28.2.25:-

- Waiting List Size = 55 waiting for a financial assessment to be fully completed.
- Median waiting time (from the commencement of service to financial assessment being completed for new cases) -Over 12-month period 1.3.24 – 28.2.25.
 - Combined Median =30 days
 - Domiciliary Median =15 days
 - Residential Median =28 days
- Maximum waiting time (from the commencement of service to financial assessment being completed for new cases) - Over 12month period 1.3.24 – 28.2.25
 - o Domiciliary Maximum
 - = 298 days
 - Residential Maximum305 days

Target as at end March 2026 - The service has put into place a KPI to monitor the percentage of new assessments that are completed within 30 days. The aim is to complete 75% of all new

assessments within 30 days by the end of the year. (Q1/25: 74.25% were completed within 30 days) NB. The information requested by CQC as part of the Assessment process is not kept as standard by the service and has had to be produced manually, however from April 2026, the service should be in a position to generate this data in the required format.

Quality Statement 2: Supporting People to Lead Healthier Lives

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for Completion/ Key Dates	Progress	Monitoring Arrangements
2.1	Promoting preventative, strengths-based culture in Halton	Director of Adult Social Services	Review – March 2026	Strengths Based practice is now embedded and as part of our operational processes we routinely monitor this via case file audits, supervision, team meetings etc. We have developed a 'Train the Trainer' model for staff and people with lived experience to provide on-going training to new staff and refresher training for existing staff. We continue to engage across the Cheshire & Merseyside region Training Partnership, Research in Practice and Skills for Care to access strengths-based practice training opportunities, which are	Updates to SMT, when appropriate.

				cascaded through the teams via learning sets. This is also demonstrated from a strategic perspective in Halton's Health & Wellbeing Strategy, our Adult Social Care Commissioning and Prevention strategies. A new commissioning strategy/plan is due for completion by end of March 2026, whilst the Prevention strategy runs until March 2027.	
2.2	Carers - Access to preventative services • Range and access to preventative services to be reviewed and monitored as part of the implementation of the Carers Strategy via the Carers Strategy Group	Director – Commissionin g & Prevention	Review – March 2027	One Halton Carers Strategy 2024-2027 in place. Continuing and improving access to preventative services forms part of the implementation of the Strategy's Delivery Plan. The Carers Strategy Group to capture ongoing actions against delivery plan to support reporting through to SMT. A range of activities are undertaken to support carers, for example: • Carers Centre receive and distribute Carers Break Funding on behalf of the Council. • A number of small local community & voluntary organisations receive grant funding to facilitate activity to support carers.	Carers Strategy Group to provide quarterly updates to SMT

				 One off carer's breaks funding via a Direct Payment. Home-Based Respite Care Service, which allows carers to have time away from their caring role, whilst maintaining a safe and consistent level of support to the person being cared for. Accelerated Reform Funding received by Halton was passported over to Halton Carers Centre to develop a series of projects/interventions to explore ways to better support unpaid carers. Halton Borough Council's Prevention and Wellbeing Service hold fortnightly dropin sessions at the Halton Carers Centre, Runcorn on a Tuesday from 10am to 2pm. 	
2.3	OT Assessments - Reduction in waits (Link with 1.3) • Continue with the work already in place and being progressed which is addressing waiting lists/times, including the project regarding the use of Al which will support the reduction in waiting times in respect to reassessment and reviews, but also initial assessments.	Principal Occupational Therapist	March 2026	OT Assessments – Baseline position @ 28.2.25 :- • As at 28.2.25, there were 122 people waiting for an OT assessment. Target as at end March 2026 = TBC Regular Performance meetings with Care Management need to be reestablished.	Quarterly performance updates to SMT

				Progress in respect to AI developments are being shared and discussed at the Care Management Principal/Practice Manager meeting w/c 18.8.25.	
2.4	Website Improvements	Director – Commissionin g & Provision	Review – March 2026	Customer Care journey project being taken forward. To support work, need to review ASC pages to ensure that all necessary information is contained on there and that it is up to date. Initial work to commence at the next Care Management Principal Managers meeting on 16 th September. Discussion to be held at the next ASC Improvement Group 17.9.25 with Corporate colleagues regarding developments, requirements, etc.	Quarterly updates to SMT
2.5	 Direct Payments - Local Authority rates & Top Ups (Link to 4.2) Review of the Direct Payments policy in respect to Top Ups will be required to ensure that the information contained reflects the position. 	HoS – Care Management & PSW	September 2025	Review of the Direct Payments Policy and ASC Charging Policy to take place to ensure that it is clear in the policies as to how Top Ups are dealt with. Policy Team to support with the review.	Updated policies to be presented to SMT, when ready

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for Completion/ Key Dates	Progress	Monitoring Arrangements
3.1	Increase staff participation on staff network groups • As part of implementation of the SCWRES, undertake promotional activity to increase participation in the staff network groups.	Director – Care Management, Safeguarding & Quality	September 2025	Promotional activity being undertaken via the ASC EDI Group with the aim to increase participation from an ASC perspective into the Council's staff network groups, with work being fed into the overarching Corporate EDI group.	ASC EDI Group to update SMT with progress

Quality Statement 4: Care Provision, Integration and Continuity

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for completion/ key dates	Progress	Monitoring Arrangements
4.1	Limited Choice of Home Care providers	Director – Commissionin g & Provision	Complete	New multi-provider framework is now in place (operational since 28.4.25) and there are now 4 main contracted home care providers, with a further 8 providers on a framework.	Monitoring will take place as part of normal contracting arrangements.
4.2	Direct Payments - Local Authority rates & Top Ups (Link to 2.4) • Review of the Direct Payments policy in respect to Top Ups will be required to ensure that the information contained reflects the position.	HoS – Care Management & PSW	September 2025	Review of the Direct Payments Policy and ASC Charging Policy to take place to ensure that it is clear in the policies as to how Top Ups are dealt with. Policy Team to support with the review.	Updated policies to be presented to SMT, when ready

4.3	 Specialist Care – Out of Borough Establish Enhanced Dementia Working Group 	Director of Adult Social Services	Review - September 2025	Enhanced Dementia Working Group now established. Work being progressed by HoS – ILS & Mental Health. Proposal for development of an enhanced dementia model has been drafted and is due to be considered by SMT and the Enhanced Dementia Working Group at it's next meeting planned for September 2025.	Update to SMT
4.4	Capacity within home care and care homes – Limited planning • Planning has taken place as evidenced in the MTFS, however further planning will take place as part of updating the Market Position Statement (MPS).	Director – Commissionin g & Provision	March 2026	Work to commence on the new MPS in Q3/Q4 2025/26.	MPS to be presented to SMT, when ready
4.5	Investment in VSCFE (Link to 5.1) Work creatively with the sector. Reduction in funding Ongoing opportunities to be explored to work with the VSCFE sector with regards to future opportunities and service redesign	Director – Commissionin g & Provision	Review – March 2026	In 2024/25 11 voluntary and community sector organisations had contracting arrangements directly in place with Adult Social Care, in addition to another 6 local small community & voluntary organisations who received grant funding to facilitate activity to support carers.	Update to SMT
4.6	Carers – Access to breaks/respite (planned & unplanned): Pre-Bookable	HoS – Care Management & PSW	October 2025	We have in place the Bredon short stay residential respite service (LD specific), along with the Home-Based Respite Care Service, which is pre-bookable.	Update to SMT

				We also provide respite for people with physical disabilities and mental health needs. In 2024/25, 4,345 hours were delivered via the Home-Based Respite Care Service, which allows carers to have time away from their caring role, whilst maintaining a safe and consistent level of support to the person being cared for. Respite Policy in place. Short Term Task & Finish Group to be established to review the practical issues associated with implementation of the policy in order to support access to respite.	
4.7	QA Process for In-house care homes separate to QA Process for external care homes	HoS – ILS & Mental Health	Complete	QA Process for internal and external care homes, now fall under the QA Team	N/A
4.8	Work with care providers – cost of care being transparent & fair Ongoing process via the annual fee setting process Ongoing update of the Market Sustainability Plan	HoS – ILS & Mental Health	Annual Process	HoS – ILS & Mental Health to produce report for Executive Board in October 2025 to seek approval for ongoing consultation arrangements with providers as part of the annual fee setting process. This would support the ability to bring forward the fee setting process, so providers receive confirmation of fees earlier than they have done previously – aim would be to agree fees by February.	Update to SMT

Market Sustainability Plan to be updated as required in line with national guidance.

Quality Statement 5: Partnerships and Communities (Score 2)

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for Completion/ Key Dates	Progress	Monitoring Arrangements
5.1	Investment in VSCFE (Link to 4.5) – Work creatively with the sector. Reduction in funding • Ongoing opportunities to be explored to work with the VSCFE sector with regards to future opportunities and service redesign	Director – Commissionin g & Provision	Review – March 2026	In 2024/25 11 voluntary and community sector organisations had contracting arrangements directly in place with Adult Social Care, in addition to another 6 local small community & voluntary organisations who received grant funding to facilitate activity to support carers.	Update to SMT

Quality Statement 6: Safe Pathways, Systems and Transitions (Score 3)

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for Completion/ Key Dates	Progress	Monitoring Arrangements
6.1	Transitioning to adult service when individuals open to mental health services – Criteria Review and update policy	HoS – Care Management & PSW	September 2025	Principal Manager, Complex Care Widnes/Transition Team leading review work with support from the Policy Team. Work being undertaken with partners that is feeding into policy review.	Revised Policy to be presented to SMT when ready

6.2	Transition Service – Promotion of Service	HoS – Care Management & PSW	November 2025	Although information is available via the Local Offer, the Transition information needs to be promoted as part of ASC web pages and will need to link with the website development (Link to 2.4). As part of the review and update of the Transition policy (Link to 6.1), associated promotional activity will take place across ASC and the community.	Update to SMT	
6.3	Carers Assessments – Contingency Plans (Link to 1.4) • Process now in place for completing contingency plans	HoS – Care Management & PSW	March 2026	Contingency Plans – Baseline position @ 28.2.25 :- • As at 28.2.25, zero. Process now in place for completing contingency plans and is being implemented. Target as at end March 2026 = 25% of contingency plans to have been completed.	Quarterly performance updates to SMT	
Quality Statement 7: Safeguarding(Score 3)						
No.	Improvement Priority and Actions	Accountable	Timeframe	Progress	Monitoring	

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for Completion/ Key Dates	Progress	Monitoring Arrangements
7.1	DoLS – Backlog of applications	HoS – ILS & Mental Health	March 2026	DoLS – Baseline position @ 28.2.25:-	Quarterly performance updates to SMT

	Continue with the work already in place and being progressed which is addressing waiting lists/times			Between 1st March 2024 and 28th February 2025, 917 people were referred for a DoLS assessment. As at 28.2.25:- 707 DoLS assessments have been completed. 210 DoLS assessments waiting to be completed:- 92 awaiting completion for people in Care Homes; and 118 are from hospital applications which are unlikely to be completed as they are generally discharged from hospital. Target as at end March 2026 = Waiting List: 150 DoLS assessments waiting to be completed. Work taking place with the acute trusts in respect to hospital applications.	
7.2	Safeguarding Enquiries – Outcome notification	HoS – ILS & Mental Health	Complete	Review taken place around feedback loop as part of processes and S.42	N/A

 Process to be reviewed to ensure that agencies are informed of outcomes of safeguarding enquiries. 	form has been updated to ensure feedback is given. As part of normal management audit processes, regular checks are undertaken to ensure this process is followed.
	followed.

Quality Statement 8: Governance, Management & Sustainability (Score 2)

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for Completion/ Key Dates	Progress	Monitoring Arrangements
8.1	Transformation Programme • Strategy and engagement needed to ensure impact controlled and outcomes positive	Chief Executive	October 2025	Corporate review of Transformation programme is taking place, which will include the ASC transformation programme.	Updates to the Transformation Programme Board

8.2	Scrutiny Function – Not sufficient focus on ASC	Chair – Health and Social Care Policy & Performance Board	Council wide review - TBC	Agenda planning meetings are held with the Chair and Vice Chair in advance of agreeing the agenda for each of the Board meetings. These meetings are used to identify the priority items, both from a health and adult social care perspective, to go forward to the Board meetings for scrutiny.	PPB Annual report reviewed by Scrutiny Co-ordinators meeting Council wide review – update reports to Management Team
				The Board receives an Information Briefing Bulletin in advance of each of the Board meetings. The Information Briefing is a way of helping to manage the size of the agendas of the Board meetings better and contains topics which would just be presented to the Board for information. This allows the focus of the meetings to be on those areas which require specific discussion, scrutiny and challenge.	
				During 2024/25, the Board meetings over that period demonstrated a focus on Adult Social Care. 50% of the Policy Issues received by the Board during this period had a focus on Adult Social Care.	
				In addition to the formal board meetings, each year the Board choose one scrutiny work topic, the outcome of which goes forward to Executive Board. This allows for a more in depth approach to scrutiny to be taken to a health or adult social care area where required.	

In February 2025, work was undertaken to review the roles of the PPB in light of the new Corporate Plan and as such, it was recommended that the titles of the PPBs change to better reflect the work of the Boards. This included Health PPB. It was recommended that the title change to Health & Social Care. It was recognised that incorporating the words Social Care better reflects the scope of this Board's work. These changes were approved by Executive Board on 17th April as part of the annual review of the Council's Constitution and went to full Council on 16th May for agreement.

The Council has recognised that the approach to Scrutiny needs to be evolved to meet the prevailing environment. The Corporate Policy function are picking up a project. Commencing in September 2025, working with the LGA and the Centre for Governance & Scrutiny to baseline current activity and bring forward a Council-wide review.

Quality Statement 9: Learning, Improvement and Innovation (Score 3)

No.	Improvement Priority and Actions	Accountable Officer	Timeframe for Completion/ Key Dates	Progress	Monitoring Arrangements
8.1	Co-production: Fully embed in service design and strategy development • Establish Co-production steering group	HoS – Commissionin g	Review – March 2026	Advisory Group established and first meeting took place on 23.7.25. Work programme for the group to be developed.	Quarterly update reports to SMT
8.2	Improve uptake of people's feedback via surveys etc • Encourage use of the Communications & Engagement framework and associated operational process to promote activities and encourage people to participate in things like focus groups, provide comments on draft service development, policy or strategy work, gain feedback, questionnaires/surveys etc. • Collate and report on information gathered through engagement activities so that SMT may retain oversight of emerging trends and themes as part of our continuous improvement approach.	HoS – Commissionin g	Review – March 2026	Work has been carried out to operationalise the Framework to support staff with promoting communication or engagement activity etc. Report went to SMT in April 2025 outlining the activity that had taken place during Quarter 4 2024/25, as a result of the Framework.	Quarterly update reports to SMT