

People Overview and Scrutiny Committee
17 September 2026

**Response to the Care Quality Commission Assessment and
Improvement Programme**

Report by Director of Adult Social Services

RECOMMENDATION

The Committee is RECOMMENDED to:

- I. **NOTE** progress made since the publication of the Council's CQC assessment in September 2025
- II. **NOTE** the Council's approach to improving the four areas rated *Requires Improvement* by CQC
- III. **NOTE** the role of the Adult Social Care Improvement Programme in coordinating improvement delivery, assurance, organisational learning and continuous CQC readiness.

Executive Summary

1. In September 2025 the Care Quality Commission (CQC) published its assessment of Adult Social Care as delivered by the Council. CQC assessed Oxfordshire County Council as Good but identified 4 areas *Requires Improvement*
 - (a) Assessing Needs,
 - (b) Supporting People to Lead Healthier Lives,
 - (c) Equity in Experience and Outcomes,
 - (d) Care Provision, Integration and Continuity.
2. This report builds on the update presented to the People Overview and Scrutiny Committee in November 2025, which outlined the findings of the Council's CQC assessment and the initial improvement actions put in place in response.
3. Since the CQC assessment, the Council has moved away from preparing for periodic inspections and towards a more continuous approach to understanding and improving Adult Social Care services.
4. To support this, the Council has established the Adult Social Care Improvement Programme (ASCIP). ASCIP provides the framework through which the Council identifies areas for improvement, agrees priorities, delivers change and monitors whether those changes are improving outcomes for residents.

5. The programme brings together improvement projects, quality assurance activity, performance information, feedback from people who use services and governance arrangements into a single approach to learning and improvement
6. Through ASCIP, the Council has strengthened its approach to quality assurance, improvement planning and performance monitoring. These arrangements are at different stages of development and embedding, and the next phase will focus on demonstrating that they lead to measurable and sustained improvements in people's experiences, outcomes and equity
7. The CQC is also changing its approach to assessment and assurance. Future assessments will place greater emphasis on evidence that improvements are delivering better outcomes for people who draw on care and support, rather than simply demonstrating that improvement activity has taken place. ASCIP has been designed to support this approach by ensuring that performance, feedback, quality checks and improvement activity are routinely reviewed and used to drive better outcomes for Oxfordshire residents.

Background

8. The Health and Care Act 2022 introduced a new role for the CQC to assess how local authorities discharge their adult social care duties under the Care Act 2014. Oxfordshire received its assessment during 2024/25 and published in September 2025.
9. The CQC assessment recognised several strengths across Adult Social Care and rated Oxfordshire County Council as Good overall. It also identified four quality statements requiring improvement:

Area	Quality statement	Score
Overall assessment	Local authority rating	Good
Theme 1: How Oxfordshire County Council works with people	Assessing needs	Requires improvement
	Supporting people to lead healthier lives	Requires improvement
	Equity in experience and outcomes	Requires improvement
Theme 2: Providing support	Care provision, integration and continuity	Requires improvement
	Partnerships and communities	Good
Theme 3: How Oxfordshire County Council ensures safety within the system	Safe pathways, systems and transitions	Good
	Safeguarding	Good
Theme 4: Leadership	Governance, management and sustainability	Good

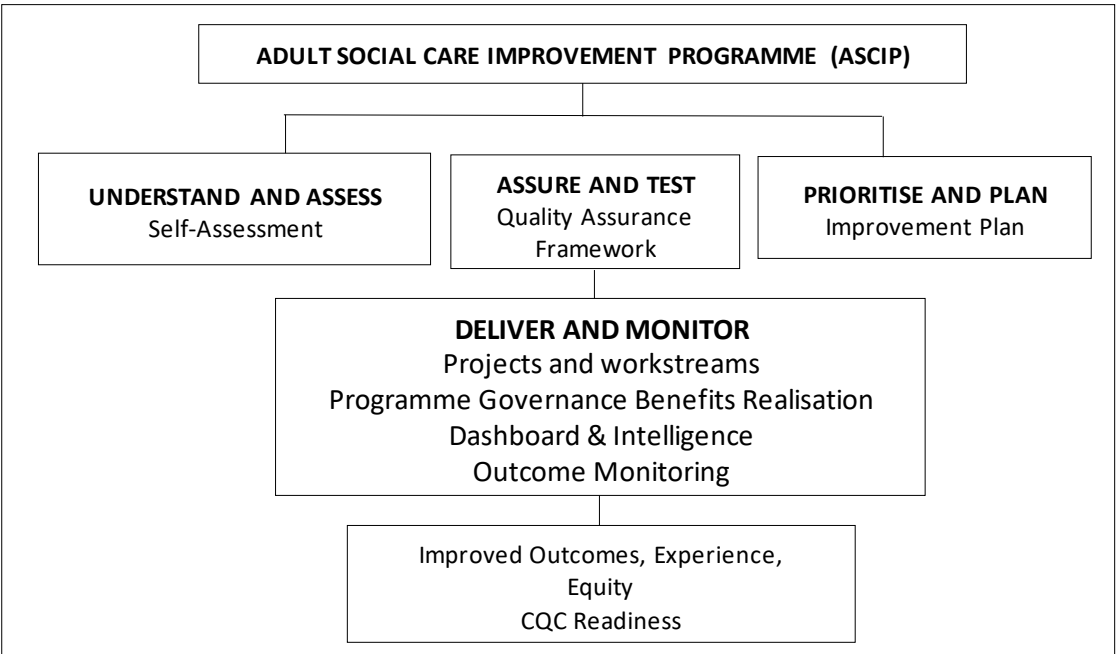
	Learning, improvement and innovation	Good
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10. The Council accepted the findings and incorporated them into the Adult Social Care Improvement Programme (ASCIP), which provides the framework for coordinating improvement activity, monitoring progress and demonstrating sustained improvement. The programme is supported by an Integrated Improvement Plan that sets out the key priorities, actions and measures for success.
11. In July 2026, CQC published its first nationwide analysis of local authority assessments. The report found that most authorities were rated Good overall, a third rated Requires Improvement and a small number rated Outstanding.
12. Oxfordshire’s overall CQC score of 64 places at the national midpoint. This provides assurance that Oxfordshire is not an outlier nationally.

Responding to CQC assessment: the Adult Social Care Improvement Programme [ASCIP]

13. Since the assessment, the Council has moved away from preparing for periodic inspections and towards a more continuous approach to understanding and improving Adult Social Care services.
14. To support this, the Council has established the Adult Social Care Improvement Programme (ASCIP). The programme provides a structured approach for identifying areas requiring improvement, agreeing priorities, delivering change and monitoring whether those changes are improving outcomes for residents.
15. The programme is supported by an Integrated Improvement Plan, included at Appendix 1, which sets out the actions, timescales and measures used to deliver and monitor the Council's response to the CQC findings. Figure 1 provides a summary of how the programme operates.

Figure 1. How ASCIP supports continuous improvement



16. Through ASCIP, the Council has strengthened its approach to quality assurance, improvement planning and performance monitoring. These arrangements are at different stages of development and embedding, and the next phase will focus on demonstrating that they lead to measurable and sustained improvements in people's experiences, outcomes and equity.
17. The CQC is also changing its approach to assessment and assurance. Future assessments will place greater emphasis on evidence that improvements are delivering better outcomes for people who draw on care and support, rather than simply demonstrating that improvement activity has taken place. ASCIP has been designed to support this approach by ensuring that performance, feedback, quality checks and improvement activity are routinely reviewed and used to drive better outcomes for Oxfordshire residents

Response to the CQC: Areas Rated Requires Improvement

18. Assessing Needs

CQC Positives	• Clear access to assessment, care planning and review • support to "front door" to enable people to find community support through strengths-based approaches • person-centred assessment and planning • clear financial assessments • support for carers and for people with non-eligible needs
Areas Requiring Improvement	• inconsistent experiences and sharing of information • support for young carers • access to advocacy • evidence that outcomes reflected what matters to people
Changes Made In Response To CQC Finding	• Redesigned self-assessment form which will launch October 26. The new process empowers people to tell their story in their own words, improving the quality of information gathered and reducing the frustration of having to repeat themselves • Adult Services redesign in Feb 26 acted on feedback from users and their families to create a dedicated team for people living with Learning Disability to improve co-ordination, response and practice and improve person-centred outcomes

	• Adult Services redesign in Feb 26 moved response to safeguarding enquires to locality teams enabling a single, coordinated approach to assessment, intervention and risk management and improving person-centred outcomes • In Oct and Nov 26, the Council is delivering a programme of training around “gloriously ordinary lives” through adult social care to improve person-centred, strengths-based practice, enhance professional confidence and consistency, and support people to tell their story and what matters to them • Working on feedback from users and carers and with Healthwatch additional information has been developed to support patients and families through the Home First discharge process from hospital, especially in relation to chargeable and non-chargeable services. • Adult Social Care is working with Communications and Engagement colleagues to map how people’s voices and experiences are captured across the Council, including whose voices may be missing. The work will help establish a more consistent approach to using feedback to shape decisions, service improvement and future planning. • Case audit reviews are evidencing increased confidence and more localised safeguarding support to people. • Complaints and compliments re Home First discharge processes are reviewed in the wider health and care system escalation meetings and are informing practice • Complaints from people and informal carers of those with a Learning Disability have decreased.
Areas In Development	• The Council is developing the Adult Social Care Dashboard to evidence this impact, analyse lived experience feedback and monitor outcomes. • Continued focus on waiting lists and demand management is a key activity through 26/27

19. Supporting People to Lead Healthier Lives

CQC positives	• Strong prevention and early intervention offer supported by The Oxfordshire Way, • Effective partnership working with health and voluntary and community sector partners, and a broad range of community-based services, designed to promote independence.
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	• Positive evidence included locality-based practice, reablement services, community equipment, assistive technology, reduced delayed discharges, use of community assets, and generally positive feedback regarding information, advice and support
Areas requiring improvement	• Opportunities to strengthen support for people with complex mental health needs • Improve communication and consistency across hospital discharge and community rehabilitation pathways • Make information and advice more accessible through both digital and non-digital routes, • Improve understanding and uptake of direct payments, • Strengthen evidence demonstrating the impact and outcomes of preventative services
Changes made in response	• Since March 26 Commissioners have been working with City and District council housing teams to improve the pathways for some of the most complex people who fall between mental health and homelessness services. This is improving understanding of these needs and is leading to changes in service design. As part of this work, Adult Social Care teams have been working with housing officers to increase understanding of the options available to support complex homeless people under the Care and Mental Health and Mental Capacity Acts • After review in June 26 of performance and needs the planned replacement to the Council's homecare framework will include specialist support for people with mental health presentations • Since April 26 Hospital discharge pathways from both acute, mental health and community pathways continue to be the focus of Better Care Fund [BCF] investment and operational delivery led by BCF funded system Transfer of Care and Home First leadership roles. Oxfordshire has a complex discharge pathway for homeless people that is supported by teams drawn from housing, mental health and adult social care. • In response to previous findings, the Council has strengthened the Direct Payments offer through improved workforce training, greater integration of the Direct Payments Advice Team within frontline services, enhanced information and guidance, and the continued provision of a countywide advice service. Direct Payment numbers have remained stable despite market pressures, while current improvement activity

	is focused on quality assurance, CQC readiness, simplifying access and increasing uptake • Commissioned research through Local Policy Lab '26 to help us better understand the impact of community capacity grants. The findings confirmed the well-known challenges of measuring population-level impact, while showing meaningful improvements on people's outcomes through local support delivered by the voluntary and community sector. We will continue to build on this learning, as well as other programmes such as Well Together to find meaningful measures to demonstrate impact. • We are working with providers, such as the Age UK Oxfordshire, to explore how we can go beyond contract performance indicators and towards a more outcomes focused approach. An example of this was embedding community connectors within the Customer Service Centre to ensure strengths based preventative approaches at this point. • All of this work will continue with our voluntary and community partners and learning will continue to be embedded in our practice.
Impact of changes	• At this stage the work between housing, mental health and social care is improving strategic approaches but will inform commissioning of new pathways to support people with complex mental health issues. No homeless people are discharged to the street in Oxfordshire. • The length of stay for people in hospital beds has reduced significantly and Oxfordshire is rated 3rd on performance amongst south-east Local authorities by DHSC. This data is reported into the Health & Wellbeing Board as part of BCF reporting. • The number of people discharged home from hospital who achieve full independence after reablement has increased from 76% in 2025/26 to 79.4% in 2026/27. • Targeted reviews and training in the West and Vale team have reduced the risk of falls in the first 2 weeks post discharge, a period when people are most at risk of readmission to hospital. This metric is monitored at a system level in partnership with the NHS.
Areas in development	• Work is ongoing to strengthen the measurement of prevention impact by mapping existing grants, projects and services across county, district and neighbourhood levels, and by

	working with Public Health, district councils, health partners and academic partners to evaluate outcomes, identify overlaps and gaps, and improve understanding of what is making the greatest difference for residents.
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20. Equity in Experience and Outcomes

CQC positives	• Oxfordshire had a range of equality, engagement and community-focused activities in place to support diverse communities. This included partnership working, community engagement and a commitment to promoting equality, diversity and inclusion across Adult Social Care. • The assessment found evidence of activity intended to understand and respond to the needs of different communities and population groups
Areas requiring improvement	• The assessment identified opportunities to strengthen the Council's understanding of inequalities and demonstrate more clearly how differences in people's access, experiences and outcomes are identified, understood and addressed. • In particular, the assessment highlighted the need to move beyond describing diverse communities towards demonstrating how insight and evidence are used to influence decision-making, service improvement and outcomes.
Changes made in response	• Since July 2026 Equity has been embedded as within ASCIP across assessment, prevention, safeguarding, commissioning, customer experience, performance reporting and improvement activity. • July 2026. The Council has also commissioned and completed Local Policy Lab research into equity in Adult Social Care. The research explored people's journeys through access, assessment, services, outcomes and safeguarding, identifying areas where further analysis and improvement activity may be required. The project found evidence that some communities may be less likely to access Adult Social Care services, particularly at the point of first contact, but identified fewer differences once people were within the system. It also highlighted significant gaps in demographic data that limit understanding of inequalities. The findings are now informing future work on community engagement, equity monitoring, data quality and service improvement.

	• June 2026, Demographic questions have been incorporated into the <i>Let's Talk</i> survey to improve understanding of who is engaging with Adult Social Care, whether feedback is representative of local communities and whether experiences differ across groups. • Following engagement with OXFSN and families in Feb 2026, the Council redesigned financial assessment outcome letters to improve clarity and accessibility. Changes included clearer wording, a more user-friendly format, and the development of a separate FAQ booklet based on feedback from people with lived experience. This co-design approach helped ensure communications better meet the needs of those receiving care and support. • The Council is in its third year of delivering the Social Care Workforce Race Equality Standard (SC-WRES). This programme supports the Council's wider commitment to improving equality, diversity and inclusion by strengthening understanding of workforce inequality, promoting inclusive leadership and ensuring that equity considerations are embedded within Adult Social Care. This has resulted in the creation of a quarterly dashboard looking at ethnicity through the recruitment and employment process, from application onwards, including the introduction of stay interviews for Global Majority staff to better understand what factors encourage staff to stay with Oxfordshire County Council. • The Council leads on the Oxfordshire Carers Strategy which is focussed in 2025/26 on targeted engagement with underrepresented communities and actions to strengthen workforce inclusion, cultural competence and understanding of the barriers that affect access to support.
Impact of changes	• This work is still being embedded, and it is therefore too early to demonstrate measurable changes in access, experience or outcomes for different communities. Progress to date has strengthened the Council's understanding of inequalities, identified gaps in demographic data, and established the foundations for routine equity monitoring.
Areas in development	• The next phase of ASCIP will demonstrate how the insights gathered to date should be translated into action and impact. • Future activity will focus on embedding routine equity analysis into assurance and governance arrangements, implementing the findings of the Local Policy Lab research, strengthening

	demographic and outcome measures, and using the Adult Social Care Dashboard to provide greater visibility of variation in access, experience and outcomes.
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21. Care provision, integration and continuity

CQC positives	• Oxfordshire had strong foundations in its relationships with providers and partners, with established arrangements for working across health, social care and the provider market. • The assessment recognised the commitment of partners to supporting people with care and support needs and identified positive foundations
Areas requiring improvement	• The assessment identified opportunities to strengthen strategic commissioning, market shaping, provider engagement and the use of intelligence to better understand current and future demand. • It also highlighted challenges relating to specialist provision for people with mental health needs, learning disabilities, autism, physical disabilities and sensory impairments, alongside wider pressures affecting housing, supported living and elements of the care market
Changes made in response	• March 2026: the Council commissioned an independent commissioning-focused peer review through Partners in Care and Health (PCH). The review highlighted strong foundations in workforce capacity, provider relationships and links with procurement and finance, whilst identifying opportunities to strengthen commissioning intelligence, data, provider engagement and the consistent application of commissioning practice. • The Council has co-produced both a Learning Disability Plan (March 26) and an Oxfordshire Autism Strategy (July 26) with service users, carers and families and partners including the voluntary and community sector. These strategies have identified priority areas that are now being implemented • The Learning Disability Plan includes the development of a <i>Safe Space</i> as an alternative to secure hospital for people living with learning disability and/or autism (due July 27), additional complex needs supported living (Phase 1 due Jan 27 and Phase 2 due Nov 2027). These developments are supported by £5.9m of Council capital investment. • As noted above the Council is working with mental health and District and City councils to analyse needs for the most complex individuals and work with clinicians and providers to create pathways to improve outcomes. This is due March 2027. • The redesign of the homecare framework (due 2027) has highlighted the needs for specialist mental health support. It

	has also identified opportunities to increase efficiency for the market by working in a more consistent way with a smaller number of high-quality providers who can support the delivery of the Oxfordshire Way and help people stay at home in their own communities. • The Council has developed in partnership with South and Vale Council a new Extra Care Housing facility in Faringdon that has incorporated features and approaches developed with the local community, including the connectivity to allow the site to be used by the local GP practice. The facility was fully open in April 26. • The continued high performance from April 26 of local hospital discharge pathways is driven by system wide partnership approaches, joint-funded roles and the performance of local reablement and home care providers
Impact of changes	• The number of people needing out of area or spot-purchased placements outside of frameworks has reduced to 109. As Council frameworks have been developed in partnership with the Integrated Care Board, this is also benefiting Oxfordshire residents funded by the NHS. • Increase in local options for people with the most complex needs including the 50 people at any one time supported on the Dynamic Support Register to remain safe and well in the community • Understanding of the needs of complex homeless people across mental health and other needs and improved provider capability to meet those needs • Reduced length of stay in hospital discharge pathways • Ongoing and significant interest from independent commercial providers to join the Council's Care Homes, Supported Living and Home Care frameworks • Greater resilience in our provider markets to respond to needs and low levels of provider failure and hand backs
Areas in development	• The Council needs to demonstrate the long-term impact of its market development, commissioning improvement, housing investment, co-production and workforce programmes on continuity of care and outcomes for Oxfordshire residents.

Risks, Dependencies and Delivery Challenges

22. The Council recognises that several of the improvements associated with achieving and sustaining stronger CQC performance rely upon activities beyond Adult Social Care. The improvement programme therefore depends on effective working across council departments, partners, providers and wider system stakeholders.

23. This reflects the increasing emphasis within the CQC framework on partnership working, whole-system approaches and the ability of local authorities to demonstrate how they understand and respond to risks, inequalities, demand and outcomes across the system.
24. Oxfordshire is well placed to maintain this improvement. There are strong cross organisation and cross sector partnerships from both practice (Adult Safeguarding, Home First, Dynamic Support Register) and strategic/commissioning perspectives (Prevention of Homelessness Directors Group, Place-Based Partnership and Better Care Fund) as well as with service users and carers (Learning Disability and Autism Delivery Boards, Carers Reference Group, Oxfordshire Mental Health Partnership) and with the provider sector (Oxfordshire Association of Care Providers).
25. A key risk for both ASCIP and these delivery partnerships is the impact of Local Government Reorganisation. The focus in Adult Social Care on ASCIP delivery and assuring an improved and effective service to the future Unitary Authorities is a priority for the Service. Commissioners and operational staff will be working closely with our residents and partners to assure that high-quality services will continue to be developed and delivered from April 2028.
26. These risks will be managed through ASCIP and quarterly review of the Integrated Improvement Plan by Adults Directorate Leadership Team.

Conclusion

27. The CQC assessment provided an important external independent view of Adult Social Care in Oxfordshire, recognising many areas of strong practice whilst identifying four quality statements where Further Improvement was required. Since the assessment, the Council has responded through both targeted improvement activity and the wider ASCIP programme of assurance, quality improvement and organisational development designed to support sustained improvement over time
28. Progress is evident across the areas rated Requires Improvement as set out above. ASCIP has delivered quality assurance arrangements, improved evidence review, refreshed improvement planning, increased programme capacity and development of the Adult Social Care Dashboard.
29. Whilst these foundations are important, the key measure of success will be whether they lead to demonstrable and sustained improvements in people's experiences and outcomes. The Council now needs to show that improvements are consistently delivering benefits across assessment and review pathways, prevention, equity, care provision, communication, and whole-system partnership working
30. The next phase of ASCIP will focus on evidencing impact as well as delivery. Emphasis will be placed on strengthening outcome measures, improving the use of lived experience, complaints, compliments and performance intelligence, and demonstrating how improvement activity is translating into better experiences and

outcomes for people who draw on care and support, unpaid carers and communities across Oxfordshire.

31. The Service will retain a focus on delivery of ASCIP as it moves into Local Government Reorganisation. See 43 below.

Financial Implications

32. There are no direct financial implications arising from this report.

Comments checked by: Stephen Rowles, Strategic Finance Business Partner

Legal Implications

33. This report provides an update on the work done in response to the assessment by CQC to address areas for improvement and ensure continuous improvement across the service. As such there are no specific legal implications arising from this report.

Comments checked by: Janice White, Principal Solicitor – ASC, SEND and Education

Staff Implications

34. The Deputy Director of Adult Social Care serves as the Senior Responsible Officer for assurance preparation. The Adult Social Care Assurance lead oversees ongoing monitoring, improvement plan delivery, and inspection readiness, all within current budget constraints. There are no direct Staff Implications.

Equality & Inclusion Implications

35. The Adult Social Care Improvement Plan takes a broad approach to integrating equality, diversity, and inclusion (EDI) into service delivery, focusing on EDI initiatives that involve people with lived experience and underserved communities.
36. The plan aims to use better demographic data, address barriers for rural and underserved groups, and partner with community organisations to reduce access gaps. It also emphasises co-producing strategies with diverse communities, promoting digital inclusion, and making information and advice accessible to everyone.
37. Workforce diversity and inclusive leadership are addressed through the Diverse by Design principles and the Workforce Race Equality Standard (WRES). These frameworks are accompanied by specific actions aimed at improving accessibility, communication, and engagement, with the intention of integrating EDI considerations into the routine operations and culture of Adult Social Care.

Local Government Reorganisation Implications

38. The Government has confirmed that the current local government arrangements across Oxfordshire and West Berkshire will be replaced by three new unitary councils from 1 April 2028, at which point Oxfordshire County Council will cease to exist and its functions will transfer to the successor authorities. Existing councils will continue to operate through current governance arrangements until vesting day, after which services, functions and staff will transfer to the new organisations.
39. The Adult Social Care Improvement Programme provides an important foundation for this transition. The development of stronger assurance arrangements, improved performance reporting, refreshed quality assurance processes, assurance packs and the Adult Social Care Dashboard will help ensure that learning, evidence, performance information and improvement activity can be transferred to successor organisations and support continuity of oversight during the transition period.
40. The transition introduces several risks which will require careful management. These include maintaining focus on improvement while planning for structural change, preserving organisational knowledge and improvement momentum, maintaining workforce stability, and ensuring continuity of service delivery, commissioning arrangements, partnerships and governance processes.
41. The CQC has confirmed that local authority assessment arrangements will continue during local government reorganisation. Newly created authorities will be subject to future assessment under the Care Act framework and are expected to demonstrate continuity of governance, assurance, improvement and evidence of impact. The Council's improvement programme therefore supports not only current performance and regulatory assurance, but also preparedness for the transition to the new unitary councils and future assessment arrangements.
42. The Council's approach is therefore to continue delivering the Adult Social Care Improvement Programme and CQC improvement activity as planned, while ensuring that emerging learning, evidence, risks and improvement priorities are incorporated into local government reorganisation planning. This will help support service continuity during transition and provide a stronger foundation for the successor authorities from April 2028.

Sustainability Implications

43. There are no direct sustainability implications arising from this report.

Risk Management

44. The Adult Social Improvement Plan is overseen by the Adult Social Care Directorate Leadership team through monthly updates. There is an established process for the escalation of risk.

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Annex: Annex 1- Adult Social Care Improvement Plan

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September 2026