

## Health and Adult Social Care Scrutiny Panel

<b>DATE</b>	28 <sup>th</sup> January 2026
<b>REPORT OF</b>	Katie Brown – Director of Adult Social Care
<b>SUBJECT</b>	Adult Social Care CQC Assessment Report
<b>STATUS</b>	Open

### CONTRIBUTION TO OUR AIMS

The council has two strategic priorities – Stronger Economy and Stronger Communities. The delivery of adult social care is a key to delivering the strategic objective of strong communities

### EXECUTIVE SUMMARY

This report updates scrutiny on the outcome of the Care Quality Commission (CQC) assessment outcome for North East Lincolnshire Councils delivery of adult social care under the Care Act 2014. This includes an overview of the key areas that were identified as strengths and areas of development and the next steps that are being taken

### MATTERS FOR CONSIDERATION

For members to receive an overview of the CQC assessment report and determine scrutiny oversight moving forward.

#### 1. BACKGROUND AND ISSUES

- a. CQC has a new duty under the Care Act (2014) to assess how local authorities work with their communities and partners to meet their responsibilities. This includes promoting the wellbeing and independence of working age disabled adults, older people, and their unpaid carers to reduce their need for formal support where appropriate. Where support is needed it should provide people with choice and control of how their care needs are met.
- b. CQC's assessment of North East Lincolnshire's Adult Social Care delivery took place between February 2025 and August 2025.
- c. CQC looked at nine areas spread across four themes to assess how well the authority is meeting their responsibilities in order to create a rating. CQC has given each of these nine areas a score out of four with one being the evidence shows significant shortfalls, and four showing an exceptional standard.
- d. The Care Quality Commission (CQC), has rated North-East Lincolnshire Council as **Requires Improvement** with a score of **59**, in how well they are meeting their

responsibilities to ensure people have access to adult social care and support under the [Care Act \(2014\)](#).

- e. The full report can be found here: -

[North East Lincolnshire Council: local authority assessment - Care Quality Commission](#)

- f. The breakdown of scores across the four themes and nine domains are stated in the table below.

Theme	Area	Score
<b>How the local authority works with people</b>	Assessing people's needs	2
	Supporting people to lead healthier lives	2
	Equity in experience and outcomes	2
<b>Providing support</b>	Care provision, integration and continuity of care	2
	Partnership and communities	3
<b>How the local authority ensures safety in the system</b>	Safe pathways, systems and transitions	3
	Safeguarding	2
<b>Leadership</b>	Governance, management and sustainability	2
	Learning, improvement and innovation	3

- g. The CQC assessment reported the following areas of strength.

SPA (single point of access)  
 Integration with the NHS  
 Approach to prevention  
 Carer's centre  
 Co-production  
 Transitions (preparing for adulthood)  
 Innovation  
 Quality assurance  
 Shared IT/record system  
 Out of hours support  
 Financial system and ICAAP (Independent Commissioning Assessment and Advisory Panel)  
 Role and effectiveness of VCSE  
 Training offer to the system  
 Workforce support  
 Hospital discharge  
 Principal Social Worker (system)

#### h. The areas identified for development

- **Unpaid carers** - Some unpaid carers reported mixed and often negative experiences. Some carers had to request assessments, which were poorly completed and resulted in no support, alongside gaps in respite provision. Many carers found the system difficult to navigate and felt excluded by complex language and terminology. Formal assessments did not always lead to meaningful support.
- Unpaid carers frequently described delays in assessments and reviews, limited respite options, and confusion around eligibility and financial processes.
- **Assessments and reviews** Delay in assessments and reviews, affected people's experiences, with review completion rates and waiting lists remaining high.
- **Advocacy** - Partners raised concerns about staff awareness of advocacy referrals and their understanding of the different types of advocacy available, creating risks of missed opportunities for appropriate advocacy support.
- National data from the Safeguarding Adults Collection for 2023/24 showed that only 11.76% of people lacking capacity were supported by an advocate, family, or friend, compared to the England average of 83.38%.
- **Disabled Facilities Grant** - Partners reported long waiting times for home adaptations. Although assessments were completed in a timely manner, major adaptations were often delayed, increasing anxiety and dependency for both people and unpaid carers.
- **Direct payments** - Further development of direct payments (DP) is needed, following mixed feedback from some people and staff regarding uptake.
- People and unpaid carers told us they found the system confusing and time-consuming, with delays in processing their Direct Payment.
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- **Equality, Diversity & Inclusion** – Further clarity is required on the council and system approach to EDI. CQC found inconsistencies in involvement with the EDI and Carers Strategy. Some had oversight of adult social care and partnership working, while others had not been engaged. Some told us protected characteristics were not part of contract monitoring.
- **Contract monitoring** - Some providers reported that contract monitoring meetings had not consistently taken place or been planned following newly commissioned services. When meetings did occur, they were not always attended by a representative from frontline services and were based on provider data and agreed Key Performance Indicators (KPIs). This meant the local authority could not be assured of a robust approach to all commissioned contracts and missed opportunities to triangulate provider data with frontline experience.

- **Safeguarding** - CQC could not be assured all concerns had been recorded in a timely and consistent way. All recorded concerns were brought together at weekly triage meetings, but staff uncertainty may have delayed appropriate action in some situations.
  - Some staff were unclear about recent Safeguarding Adults Review (SAR) learning or how it had been shared. This indicated that while mechanisms for sharing learning were in place, further work was needed to embed learning consistently across teams and ensure accessibility.
  - Practice development was tailored to individual staff needs, supported by core training modules. However, national data from the Adult Social Care Workforce Estimates for 2023/24 showed 22.80% of independent or local authority staff completed Mental Capacity Act (MCA) or Deprivation of Liberty Safeguards (DoLS) training. This was significantly lower than the England average of 37.58%. Additionally, 44.00% completed safeguarding training, also lower than the national average of 48.70%. This demonstrated a need for strengthened workforce training to ensure consistent safeguarding practice across all settings.
  - However, it was found that the information and advice people and practitioners received on safeguarding issues was inconsistent, which caused confusion about the appropriate course of action. People reported that they did not receive the outcome of concerns they had reported. These issues may have led to delays or missed safeguarding opportunities, affecting the safety and confidence of professionals and the people they support.
- i. As a result of the requires improvement rating North East Lincolnshire Council has developed an improvement plan which will be overseen by an improvement board which will include elected members (Portfolio Holder and Chair of Scrutiny)
  - ii. The majority of issues highlighted in the report were known and there were action plans and programmes in place to address these which have continued.
  - iii. The Care & Health Improvement Advisor for Yorkshire & Humber has oversight of the delivery of the improvement plan and will need to report back to DHSC over the next year. The first progress report to DHSC is due in March 2026.

## 2. RISKS, OPPORTUNITIES AND EQUALITY ISSUES

- a. The devolved model of adult social care delivery means that governance oversight needs to be robust to ensure that actions and improvements are made.
- b. There are significant system changes as a result of NHS reforms and there needs to be a continued focus on adult social care improvement during the expected period of change.
- c. There is an opportunity to review the adult social care arrangements in the context of the transformation and development of Neighbourhood Health and Marmot. This should significantly support the outcomes for people directly contributing to the improvements in outcomes for people.

## 3. REPUTATION AND COMMUNICATIONS CONSIDERATIONS

The CQC assessment outcome involved a full communication and engagement plan. Due to the outcome being embargoed by CQC this was restricted until the

19<sup>th</sup> December 2025. A full staff briefing took place on the 19<sup>th</sup> December 2025 with all stakeholders sent a copy of the report.

Briefing sessions for people who draw on care and support, providers and other stakeholders will take place during January 2026. Given the requires improvement judgement then there is a risk of reputational impact although we believe that the comprehensive approach to communication and engagement is helping with mitigating this.

#### **4. FINANCIAL CONSIDERATIONS**

There are no specific financial implications as a result of the CQC assessment process. Investment into specific transformation activities has already been included in the current MTFP

#### **5. CHILDREN AND YOUNG PEOPLE IMPLICATIONS**

Preparing for adulthood was reviewed as part of the CQC assessment process and was assessed to be good.

#### **6. CLIMATE CHANGE, NATURE RECOVERY AND ENVIRONMENTAL IMPLICATIONS**

There are no specific environmental implications as a result of the CQC assessment.

#### **7. PUBLIC HEALTH, HEALTH INEQUALITIES AND MARMOT IMPLICATIONS**

The CQC report references the work that adult social care has done with public health in terms of health inequalities and the ongoing impact that health inequalities have on adult social care. The actions that will be undertaken as part of the development and improvement of adult social care are underpinned by a strengths based and preventative approach to supporting people.

#### **8. FINANCIAL IMPLICATIONS**

There are no specific financial implications as a result of the CQC assessment process. Investment into specific transformation activities is minimal and already included in the current MTFP.

#### **9. LEGAL IMPLICATIONS**

CQC is a regulatory body and has specific powers to intervene in local authorities through a section 50 notice.

North East Lincolnshire did not receive a section 50 notice but does need to ensure that it addresses through the improvement plan the areas that require improvement.

#### **10. HUMAN RESOURCES IMPLICATIONS**

In the opinion of the author, this report does not contain recommended changes to policy or resources (people, finance or physical assets). As a result no monitoring

comments have been sought from the Council's Monitoring Officer (Chief Legal Officer), Section 151 Officer (Director of Finance) or Strategic Workforce Lead.

#### **11. WARD IMPLICATIONS**

Adult social care and its delivery impact all council ward in North East Lincolnshire)

#### **12. BACKGROUND PAPERS**

North East Lincolnshire's CQC assessment report

#### **13. CONTACT OFFICER(S)**

Katie Brown – 01472 325528

**KATIE BROWN**  
**DIRECTOR OF ADULT SOCIAL CARE**