Appendix 2 CQC Assurance
Herefordshire Improvement Plan 2026/27

1. Background

The Health and Social Care Act 2022 provided the Care Quality Commission (CQC) with regulatory powers to assess local authorities' performance of their duties under Part 1 of the Care Act 2014. Formal assessments began in early 2024, with a target of completing assessments of all local authorities within two years.

Herefordshire Council received its notification on 7 April 2025, and the final report was published on 29 May 2026.

Herefordshire Council welcomes the findings of the Care Quality Commission assessment. The process has been a positive, learning experience for the authority, providing a focus in which to celebrate and promote strengths and to crystalise areas for improvement. We are pleased that CQC has endorsed our strengths with Good ratings and has affirmed the areas for improvement. This baseline assessment gives us a solid foundation on which to move forward to maximise our strengths and expedite progress on our areas for improvement. We were also pleased that CQC did not identify any adults at risk and/or in need of safeguarding during the process.

2. Assessment Framework

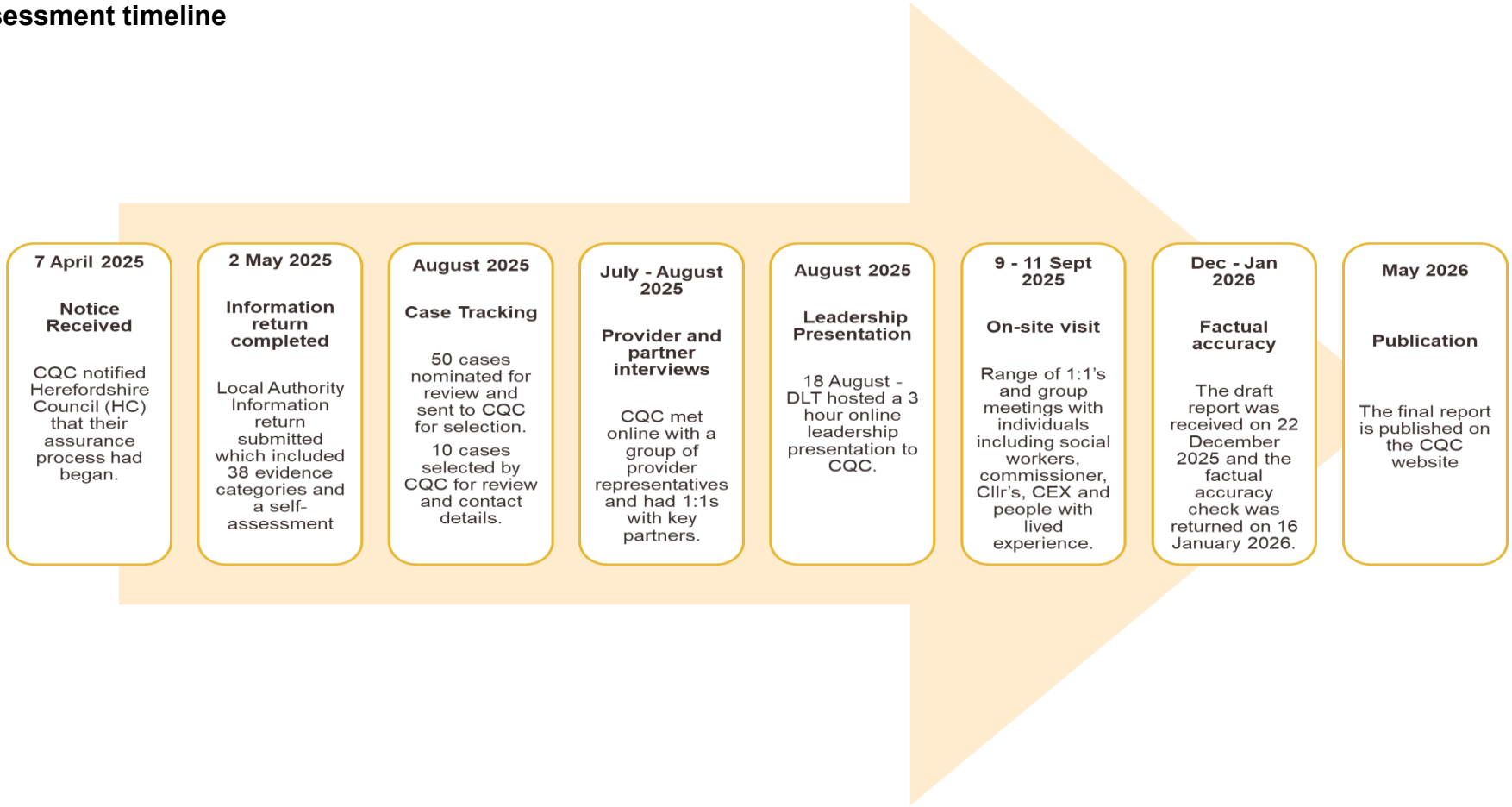
The CQC's assessment framework centres around four themes, with each containing 'quality statements' setting out what is expected of the local authority, and 'outcomes' for people. The detailed quality statements and outcomes are contained in the overall results table in section 3.

Theme 1 – Working with People	Theme 2 – Providing Support	Theme 3 – Ensuring Safety	Theme 4 - Leadership
• Assessing needs • Supporting people to live healthier lives • Equity in experience and outcomes	• Care provision, integration and continuity • Partnerships and communities	• Safe systems, pathways and transitions • Safeguarding	• Governance, management and sustainability • Learning, improvement and innovation

The CQC used information from the following four key evidence categories to form its conclusions. For every quality statement, each evidence category was scored giving a total score and rating for each statement; the statement scores were then combined to form the overall score and rating.

- **People's experiences** – gathered from interviews with people with care and support needs and carers, plus national and local survey results.
- **Feedback from staff and leaders** – gathered from interviews with leaders and focus groups with managers, commissioners and frontline practitioners.
- **Feedback from partners** - gathered from 1:1 and group interviews with senior leaders external to Herefordshire Council, plus representatives of care provider organisations.
- **Processes** – including the council's performance in national returns, internal data, and a comprehensive Information Return comprising 38 categories of evidence, summarised in an overall self-assessment of strengths, areas for further development and performance.

3. Assessment timeline



4. Results

The overall outcome of the assessment was a rating of **Requires Improvement**, with a score of 56.

Theme	Quality Statement	Outcome for people	Herefordshire Result
Theme 1: Working with people	**Assessing needs**		**2 - Evidence shows some shortfalls**
	• We maximise the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them	• I have care and support that is co-ordinated, and everyone works well together and with me. • I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and goals.	
	Supporting people to live healthier lives		**2 - Evidence shows some shortfalls**
	• We support people to manage their health and wellbeing so they can maximise their independence, choice and control. We support them to live healthier lives and where possible, reduce future needs for care and support.	• I can get information and advice about my health, care and support and how I can be as well as possible – physically, mentally and emotionally. • I am supported to plan ahead for important changes in my life that I can anticipate.	
	Equity in experiences and outcomes		**2 - Evidence shows some shortfalls**
	• We actively seek out and listen to information about people who are most likely to experience inequality in experience or outcomes. We tailor their care, support and treatment in response to this.	• I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and goals.	

Theme 2: Providing Support	**Care provision, integration and continuity**		**2 - Evidence shows some shortfalls**
	• We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.	• I have care and support that is co-ordinated, and everyone works well together and with me.	
	Partnerships and communities		**3 - Evidence shows a good standard**
	• We understand our duty to collaborate and work in partnership, so our services work seamlessly for people. We share information and learning with partners and collaborate for improvement.	• The local authority works actively towards integrating care and support services with services provided by partner agencies. This achieves better outcomes for people who need care and support and unpaid carers and helps to reduce inequalities. • Partnership working helps to ensure that care and support meets the diverse needs of individual people and communities. People experience a seamless care and support journey, and their support is co-ordinated across different agencies and services.	

Theme 3: Ensuring safety	**Safe systems, pathways and transitions**		**2 - Evidence shows some shortfalls**
	• We work with people and our partners to establish and maintain safe systems of care, in which safety is managed, monitored and assured. We ensure continuity of care, including when people move between different services.	• When I move between services, settings or areas, there is a plan for what happens next and who will do what, and all the practical arrangements are in place. • I feel safe and am supported to understand and manage any risks.	
	Safeguarding		**3 - Evidence shows a good standard**
	• We work with people to understand what being safe means to them as well as with our partners on the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect. We make sure we share concerns quickly and appropriately.	• I feel safe and am supported to understand and manage any risks.	

Theme 4: Leadership	**Governance, management and sustainability**	
	• We have clear responsibilities, roles, systems of accountability and good governance. We use these to manage and deliver good quality, sustainable care, treatment and support. We act on the best information about risk, performance and outcomes, and we share this securely with others when appropriate.	**2 - Evidence shows some shortfalls**
	Learning, improvement and innovation	
	• We focus on continuous learning, innovation and improvement across our organisation and the local system. We encourage creative ways of delivering equality of experience, outcome and quality of life for people. We actively contribute to safe, effective practice and research.	**2 - Evidence shows some shortfalls**

5. CQC findings

The CQC findings in relation to our **strengths** mirrored our own self-assessment. The report paints a picture of a **council with strong values, committed staff, effective partnerships and a clear preventative vision**, particularly through Talk Community, safeguarding and quality assurance. Our whole council commitment to excellence in adult social care and emphasis on collaboration with partners, providers and communities to meet our Care Act requirements is clear:

- **Strong prevention model** supported by Talk Community and a new Prevention in Adult Social Care Strategy.
- **Developing coproduction**, with lived experience boards influencing strategies, commissioning, and continuous service improvement.
- **High-performing care market**, with the majority of home care and care homes rated good or outstanding and strong provider relationships.
- **Effective hospital discharge arrangements**, driven by positive, whole system multi-disciplinary team working.
- **Strong safeguarding outcomes**, with high proportion of enquiries meeting desired outcomes and robust multiagency governance.
- **Inclusive, engaged workforce**, supported by the THRIVE values, leadership development, and strong staff engagement.
- **Commitment to equality, diversity and inclusion**, backed by the ADASS Equality, Diversity and Inclusion tool and targeted cultural competency training.
- **Innovation through technology**, including Technology Enabled Care (TEC) pilots, predictive technologies and digital tools that support independence and prevention.

- **Robust governance and leadership**, aligned with good governance principles and active system partnership working.
- **Significant transformation achievements**, including new commissioning frameworks, high direct payments uptake, and strong community-based support.

Our self-assessment equally identified key **areas for improvement**, and we were pleased that the CQC assessment affirmed these areas and noted that we had improvement plans in place. We accept that our existing plans were not fully implemented and improvements embedded at the time of the site visit, but progress has been made in the intervening six months with full implementation due by 31 March 2027:

1. Strengthening the **front door,** specifically embedding Community Connectors, TEC and therapy in the front door offer through our Prevention and Reablement transformation project.
2. Improving the **reablement** offer, through clarifying and streamlining the reablement pathways from hospital discharge and the community, set out in our Reablement Project Plan.
3. Improving the offer for **unpaid carers** in the county, through implementation of the co-produced All Ages Carers Strategy and led by the Carers Partnership Board.
4. Improving the **OT service** within the local authority, through implementation of the OT Practice review and service improvement plan.
5. Improving our capacity to manage **demand and waiting lists**, through implementation of a new structure for adult social care from June 2026.
6. Driving **innovation in market development** for working age adults, through the Learning Disabilities transformation programme.
7. Strengthening the use of **data and associated analysis** to support practice improvement and future service modelling, through our Data Development Plan.

We have a clear transformation programme in place within the directorate which is led by the Corporate Director Community Wellbeing (DASS), supported by the three Service Directors. This programme, which incorporates the above plans, is robustly monitored on a weekly and monthly basis and that is incorporated within our wider governance arrangements for this improvement plan.

6. Improvement Plan

This plan sets out our improvement priorities, together with high level actions and expected outcomes for people. A comprehensive delivery plan, including timelines, responsible officers, and progress updates, underpins it.

Improvement priority 1: Strengthen the front door of adult social care			**Lead: Front Door Transformation Lead**	
People will experience…	**Because we have….**	**Actions**	**Lead officer**	**Delivered by**
Timely assessments, with fewer delays and less repetition, so they get the right support when they need it. Feeling **listened to and involved** in their assessment, with their health, wellbeing, communication needs and personal circumstances properly understood.	Delivered faster, streamlined assessments. Delivered proportionate interventions and support. Reduced waiting lists	• Review existing staff competencies and develop and deliver training sessions, to ensure consistent practice, and embed values of independence and strengths based approaches. • Implement renewed advice and referral documentation to support consistency, deliver proportionate interventions and improve flow of information. • Develop and implement practical checklists for staff to complete, to promote and enable use of Occupational Therapy, TEC and community based solutions to support and evidence consistent decision making. • Work closely with external agencies, including Wye Valley Trust, West Mercia Ambulance Service and out of hours agencies, to review and refine referral processes into ASC.	Front Door Transformation Lead Head of Adult Social Care Operations Front Door Transformation Lead Front Door Transformation Lead	July 2026 October 2026 July 2026 July 2026
Early signposting to community-based support that helps them stay well, independent and connected.	Clearer and more consistent engagement with the voluntary and community sector (VCS), with shared expectations about roles,	• Deliver Community Connector and TEC training to ART team, to support staff to be confident in prevention offers and community options.	Front Door Transformation Lead	July 2026

Improvement priority 1: Strengthen the front door of adult social care			Lead: Front Door Transformation Lead	
People will experience…	**Because we have….**	**Actions**	**Lead officer**	**Delivered by**
Support to **build on their strengths and networks**, reducing reliance on formal care. Increased confidence to **help themselves and plan ahead** for changes in their lives.	contribution and impact within the adult social care system. A more inclusive and diverse local provider landscape, enabling smaller community organisations to contribute to prevention, early support and resilience. More proportionate commissioning processes, making it easier for organisations of different sizes to engage.	• Develop and implement robust referral processes to Community Connectors through each phase of the customer journey, through the data management system. • Strengthen prevention and resilience through the Talk Community approach, including stronger use of Community Action Networks (CANs) and voluntary and community sector partnerships to provide coordinated, community-based support around residents' needs. • Improve Front Door processes to make best use of VCS and other community based organisational support, supporting residents to be independent for longer in their choice of environment	Front Door Transformation Lead and Head of Communities Head of Communities Front Door Transformation Lead	August 2026 December 2026 August 2026
Easy to find clear, accurate and trusted information when they need it, without unnecessary delays or confusion. Information that is presented in **plain language**, helping them understand their options quickly and confidently.	Easy to access, clear, accurate and trusted information available Increased awareness of support options, especially for carers and self-funders.	• Develop and implement online referral options, for individuals and professionals. • Improve accessibility and usability of online information, including clear navigation and plain-language content, including waiting well processes and information. • Expand use of accessible formats (easy read, video, alternative languages). • Produce a front door service briefing note, and share across range of stakeholders, to	Head of Adult Social Care Operations Head of Delivery and Improvement Head of Delivery and Improvement Front Door Transformation Lead	December 2026 September 2026 September 2026 September 2026

Improvement priority 1: Strengthen the front door of adult social care			Lead: Front Door Transformation Lead	
People will experience…	**Because we have….**	**Actions**	**Lead officer**	**Delivered by**
		support understanding of role and process at the front door of ASC.		

Improvement priority 2: Improve the reablement offer			Lead: Service Director All Ages Commissioning	
People will experience…	**Because we have…**	**Actions**	**Lead officer**	**Delivered by**
Effective reablement that enables to regain their independence as soon as possible	A clear, shared reablement model, co-owned with partners, with an agreed purpose, scope and expectations across the system. Supported more people to regain independence and avoid unnecessary long-term care. Stronger multi-agency working and informed decision-making, supported by robust outcome measurement and clear data on reablement outcomes and demand.	• Complete the planned review of the reablement model with partners. • Clarify the purpose and pathways of reablement, including community access. • Strengthen outcome measurement to track reablement success and inform improvement. • Develop and implement a communication plan for partners and the community to ensure consistent understanding of the reablement model, pathways and expectations	Service Manager D2A and BCF Service Manager D2A and BCF Service Manager D2A and BCF Service Manager D2A and BCF / OT Lead	May 2026 July 2026 Sept 2026 Sept 2026

Improvement priority 3: Improve the offer for unpaid carers			Lead: Commissioning Lead for Carers	
People will experience….	**Because we have…**	**Actions**	**Lead officer**	**Delivered by**
Recognition, acknowledgement and support for their caring role from first contact with services. **Proactive, consistent carers' assessments**, so they are recognised and supported earlier **Support plans that reflect what matters to the them** **Support to plan ahead**, including contingency planning for changes or emergencies, reducing anxiety and uncertainty	Effective partnerships in place to identify and support carers early before they reach crisis point Strengthened personalised care and choice, through carers assessments and support plans	• Embed consistent practice across all ASC teams so carers are offered a carers' assessment and support plan, with clearer pathways, communication and follow-up	Principal Social Worker	September 2026
		• Deliver further carers training to staff across Community Wellbeing, to support early identification, information and advice.	Principal Social Worker	December 2026
		• Implement Mosaic system changes to ensure carers are recorded appropriately.	Commissioning lead for Carers	September 2026
		• Monitor quality, though audit, performance data, and through supervision, that ASC staff are proactively identifying carers and are offering assessments.	Principal Social Worker	January 2027
		• Monitor quality and performance data from commissioned services, to ensure carers are identified, referred and supported appropriately.	Commissioning Manager	September 2026
		• Develop and implement a corporate carers approach, including a national carers card, refreshed Carers Partnership Board arrangements and a carers network to inform service development.	Commissioning lead for Carers	December 2026
		• Fully utilise learning and support offer from Regional carers network	Commissioning lead for Carers	September 2026
		• Refresh and update the All Age Carers Strategy and delivery plan.	Commissioning lead for Carers	September 2026

Improvement priority 3: Improve the offer for unpaid carers			**Lead: Commissioning Lead for Carers**	
People will experience….	**Because we have…**	**Actions**	**Lead officer**	**Delivered by**
Access to a **wider range of flexible break and support options**, reflecting different needs, preferences and circumstances. Reassurance that **emergency respite is available when needed**, reducing anxiety and stress. **Timely, reliable support** during crisis or unforeseen situations.	Diversified the break and support options available for people	• Develop and implement break and support offer for Carers across Herefordshire, including clear definitions. • Expand and embed Shared Days opportunities. • Proactively promote available support and services through strengthening the role of Community Connectors and community-based support.	Commissioning lead for Carers Commissioning Manager Commissioning Manager and Head of Communities	December 2026 December 2026 September 2026 December 2026

Improvement priority 4: Strengthen the OT service			**Lead: OT Lead**	
People will experience….	**Because we have….**	**Actions**	**Lead officer**	**Delivered by**
Timely support to remain safe and independent at home. **Quicker, more proportionate OT interventions** **OT support that focuses on independence and prevention**, helping people avoid escalation into more intensive services where possible.	Reduced waiting times for OT assessments and equipment Redesigned processes and trusted assessor models that make best use of professional skills. Clear end-to-end oversight of equipment pathways, with improved visibility of stock availability, delivery/installation times and outcomes.	• Design and implement a single standardised referral pathway for OT • Agree and publish consistent eligibility criteria and thresholds for OT service • Reduce OT and equipment waiting lists through trusted assessor models and process redesign. • Improve end-to-end visibility of equipment requests, stock and delivery. • Create an Equipment Specialist OT role with clinical governance responsibility	OT Lead OT Lead OT Lead Commissioning Manager OT Lead	July 2026 July 2026 July 2026 TBC July 2026
Better communication and support while waiting, **A more responsive and consistent OT service**	OT staff capacity focused on direct practice, with reduced administrative burden through streamlined paperwork and digital solutions. Stronger ‘waiting well’ arrangements, ensuring people are supported, informed and reassured while awaiting assessments, equipment or adaptations.	• Reduce administrative burden on OT staff through streamlined paperwork and digital solutions. • Establish structured communication and information-sharing protocols • Strengthen “waiting well” processes for people awaiting equipment or adaptations.	OT Lead OT Lead OT Lead	July 2026 July 2026 July 2026

Improvement priority 5: Improve our capacity to manage demand and waiting lists			**Lead: Service Director Adult Social Care and Housing**	
People will experience….	**Because we have…**	**Actions**	**Lead officer**	**Delivered by**
Clear communication and support while waiting	Improved triage, prioritisation and workforce flexibility to reduce unnecessary delays. More consistent and fair decision-making, supported by better management information showing who is waiting, for what service and for how long. Improved flow through the system, reducing backlogs and pressure points and helping people avoid escalation while waiting.	• Further strengthen "waiting well" processes to ensure consistent, meaningful contact while people wait. • Improve management information to clearly show who is waiting, for what service, and for how long. • Increase flexibility in workforce deployment (e.g. trusted assessor models).	Head of ASC Operations Head of ASC Operations Head of ASC Operations	July 2026 September 2026 September 2026
Greater continuity and consistency of support, with fewer changes in the people involved in their care. **Improved quality of support**, delivered by a confident, well-trained workforce with clear roles and responsibilities.	A more resilient and sustainable adult social care workforce, with improved recruitment, retention and skill mix aligned to demand. More consistent, high-quality practice, supported by clear roles, career pathways and workforce development. Greater continuity and stability of support, with fewer changes in practitioners and stronger professional relationships.	• Deliver adult social care restructure • Deliver the Adult Social Care workforce strategy, addressing recruitment, retention and skill mix. • Expand "grow your own" approaches, apprenticeships and career pathways. • Use workforce data to proactively identify and address pressure points.	Service Director ASC & Housing Service Director ASC & Housing Principal Social Worker Service Director ASC & Housing	July 2026 March 2027 March 2027 July 2026
Safeguarding responses that are **proportionate, consistent and focused on outcomes**, rather than process.	Clearer, more consistent safeguarding decision-making, supported by improved recording and information sharing.	• Implement a standardised process to provide feedback to referrers on safeguarding outcomes and develop	Principal Social Worker	September 2026

Improvement priority 5: Improve our capacity to manage demand and waiting lists			Lead: Service Director Adult Social Care and Housing	
People will experience….	**Because we have…**	**Actions**	**Lead officer**	**Delivered by**
Everyone working together well to keep them safe.	Stronger feedback loops with referrers, improving shared learning and confidence in safeguarding processes.	communication guidelines, so referrers know what to expect. • Develop and implement a safeguarding audit template, to strengthen recording, information sharing and monitor decision-making.	Principal Social Worker	September 2026
Advocacy support, that supports and represents them from the outset of safeguarding processes.	Earlier and more appropriate advocacy referrals, particularly for people who lack capacity or face barriers to being involved. Clearer oversight of advocacy access and impact, through improved monitoring of referrals and outcomes.	• Strengthen staff understanding of advocacy duties within safeguarding, with a focus on early referral. • Work with the advocacy provider and partners to address barriers to access • Reinforce guidance and training on advocacy duties, focusing on early identification and referral. • Monitor advocacy referrals and usage to understand gaps and address barriers.	Principal Social Worker Commissioning Manager Commissioning Manager / Principal Social Worker Commissioning Manager	September 2026 July 2026 September 2026 September 2026

Improvement priority 6: Drive innovation in market development for working age adults		**Lead: Service Director All Ages Commissioning (AAC)**		
People will experience….	**Because we have….**	**Actions**	**Lead officer**	**Delivered by**
Support that better reflects their needs and aspirations **More choice, stability and continuity of care** **Support that enables them to live more independent, fulfilling lives** within their local communities.	Greater availability of local services, reducing reliance on out-of-county placements where needs can be met closer to home. Improved quality and consistency of provision, as commissioning and contracting approaches drive better outcomes and value for money. More joined-up planning with providers, supporting resilience, workforce stability and innovation in how support is delivered.	• Review commissioning and contracting approaches to improve stability and value for money. • Deliver Market Position Statement priorities to address gaps in local provision. • Continue to reduce reliance on out-of-county placements where needs can be met locally. • Strengthen strategic engagement with providers to support sustainability and workforce challenges.	Commissioning Manager Service Director AAC Commissioning Manager Commissioning Manager / Service Manager - Market Management	September 2026 April 2027 April 2027 April 2027

Improvement priority 7: Strengthen the use of data and insight			Lead: Corporate Director Community Wellbeing	
People will experience…	**Because we have….**	**Actions**	**Lead officer**	**Delivered by**
Support that improves over time **Safer, higher-quality care** **More consistent and informed decisions**	Used data effectively to understand need, demand and outcomes. Translated learning from audits, reviews, complaints and feedback Clearer accountability and oversight, helping ensure issues are identified and addressed earlier.	• Implement a data quality improvement programme focused on completeness, consistency, and timeliness of case recording	Head of Corporate Performance	March 2027
		• Deliver improvements to case management system to capture end to end client journeys	Head of Corporate Performance	March 2027
		• Commence the development of a holistic data insight that provides demand and activity data alongside other available data sets, for example, quality and safety incidents, outcomes and customer experience	Head of Corporate Performance	December 2026
		• Integrate analytical input into data reporting that includes national data sets and comparators	Head of Corporate Performance	December 2026
		• Deliver briefings and training sessions to support managers to use data confidently and consistently.	Head of Corporate Performance	March 2027
		• Review existing learning log approach and further embed into practice through clear action plans, monitoring impact and reporting into DLT.	Principal Social Worker	September 2026
		• Promote innovation and best practice through peer learning, external networks and partnerships.	Head of Delivery and Improvement	December 2026
		• Strengthen co-production and feedback loops to ensure people's feedback and experience directly improves practice	Head of Delivery and Improvement	December 2026

7. Monitoring and oversight

Governance of the improvement plan will be achieved through:

Board / Meeting	Description	Regularity of Updates
Cabinet	Chaired by the Leader of Council, progress against the improvement plan will be reported quarterly.	Quarterly
Health, Care and Wellbeing Scrutiny Committee	Prior to the quarterly report to Cabinet, the Scrutiny Committee will scrutinise progress, carry out deep dives in specific areas and recommend any additional areas for inclusion in the improvement plan to Cabinet	Quarterly
Corporate Improvement Board	This is a new board, chaired by the Chief Executive, to maintain corporate oversight of the improvement plan. Membership will comprise Corporate Leadership Team and the regional Care and Health Improvement Advisor. Key partners will also be invited to attend the board as required.	Bi-monthly
Cabinet Member and full Directorate Leadership Team	The Cabinet Member will meet monthly with the full Directorate Leadership Team to track progress on the improvement plan.	Monthly
Core Directorate Leadership Team (Core DLT)	Chaired by the Corporate Director and comprising the three Service Directors, this will address any emerging issues or barriers swiftly to ensure continued focus on delivery.	Weekly

8. Risk management

The table below summarises the main risks to delivering this improvement plan, together with their potential impact, mitigation and lead oversight.

Risk	Potential impact on delivery	Mitigation	Lead oversight
Lack of workforce stability	Reduced delivery pace, reduced capacity to deliver and less consistent implementation.	Workforce planning, recruitment, retention and leadership oversight.	Service Director Adult Social Care and Housing
Lack of delivery capacity	Improvement activity may be delayed by operational demand.	Phased delivery, protected capacity and regular performance oversight.	Corporate Director Community Wellbeing

Risk	Potential impact on delivery	Mitigation	Lead oversight
Inconsistent prioritisation of work	Effort may be spread too thinly across competing priorities.	Clear prioritisation, sequencing and routine review of progress.	Corporate Director Community Wellbeing with Directorate Leadership Team
Lack of partner engagement	Progress may be affected where delivery relies on partners.	Strong partnership governance, shared planning and escalation of issues.	Relevant Service Director / Lead Officer
Unrealistic timescales	Delivery milestones may slip.	Regular review of milestones, dependencies and delivery risks.	Corporate Improvement Board

Appendix: Useful further documents

- Assessment framework for local authority assurance - Care Quality Commission
- Herefordshire Council: local authority assessment - Care Quality Commission
- *Link to Cabinet paper re publication*
- Council committed to further Adult Social Care improvement following CQC assessment - Herefordshire Council