

North Yorkshire Council

Care and Independence Overview and Scrutiny Committee

27th January 2026

Outcome of CQC Assessment

Report of the Corporate Director Health and Adult Services

1.0 PURPOSE OF REPORT

- 1.1 This report informs Members of the outcome of the Care Quality Commission (CQC) Assurance process carried out in 2025 and the actions being taken to address the feedback.

2.0 SUMMARY

- 2.1 This report sets out the result of the CQC Assessment of how North Yorkshire Council delivers its duties around Adult Social Care under the Care Act. The Council received its final report in October 2025 and got a score of 81 out of a possible 100.
- 2.2 Under the CQC ratings system this gives an outcome of “Good” and, at the time of writing this report, 93 reports have been published and the North Yorkshire Council score is the fourth equal highest in the country, the highest score for a large authority, and for the North of England. Only Camden, Kensington and Chelsea, and Barking and Dagenham authorities scored more highly, each of which got 89.
- 2.3 The report, which is published on the CQC website [North Yorkshire Council: local authority assessment - Care Quality Commission](#), identifies a number of areas of strength as well as areas for development. The areas for development had previously been identified by the Council and are being addressed through ongoing transformational projects and improvements through business as usual, including through the Improvement Priorities previously reported to this Committee.

3.0 BACKGROUND

- 3.1 The CQC Assurance Framework for Local Authorities in England, is a structured approach to evaluating the performance of local authorities in delivering Adult Social Care services under The Care Act. It aligns with the goals of the Health and Care Act 2022, which aims to ensure high-quality, equitable, and sustainable care for individuals in need.
- 3.2 The CQC assesses and rates councils’ performance across four themes:
- **Working with people:** Involves engagement with service users, families, and carers.
 - **Providing support:** Focuses on commissioning and direct service provision.
 - **Ensuring safety:** Covers safeguarding and risk management.
 - **Leadership:** Examines strategic direction, governance, and staff wellbeing.

Within each theme are 2 or 3 Quality Statements, each of which are scored individually with a score of 1-4, leading to an overall single word rating of: Inadequate; Requires Improvement; Good; or Outstanding. Evaluation is based on the following:

- Data and Evidence: Review of qualitative and quantitative data from local authorities and service providers.
- Inspection Visits: On-site evaluations to observe practices and gather insights from stakeholders.
- Stakeholder Feedback: Input from people using services, their carers, and partner organisations.

3.3 The CQC began its assessment of North Yorkshire Council’s Adult Social Care services in December 2024, requesting information on performance, partnerships, and processes over the previous 12 months. In January 2025 we submitted our evidence and self-assessment, and in May 2025 we presented an overview of local services to the CQC inspection team. This was followed by a 3-day on-site inspection in June 2025, during which the CQC team engaged with over 170 people including council staff, senior leaders, care providers, and people with lived experience and carers.

3.4 The areas covered included:

- Challenges of delivering social care in a large rural county, particularly around people’s equity of access.
- Partnership working with Health, Providers and the VCSE
- The £60m investment into the new Care and Support hubs
- Continuing investment by the Council in preventative support to help prevent, reduce and delay people needing social care.

3.5 The Inspection team described conversations as “incredibly inspirational” and that they could see “passion in abundance”.

4.0 CQC FINDINGS IN NORTH YORKSHIRE

4.1 The outcome of the CQC assessment by quality statement is set out below. All areas had at least “good”, with two statements – Equity in Experiences and outcomes, and Learning, Improvement and Innovation, achieving the maximum score of 4 – “Outstanding”.

Quality Statement	Score (1-4)
Assessing Needs	3
Supporting Healthier Lives	3
Equity in Experience and Outcomes	4
Care Provision, Integration and Continuity	3
Partnerships and Communities	3
Safe Pathways, Systems and Transitions	3
Safeguarding	3
Governance, Management and Sustainability	3
Learning, Improvement and Innovation	4

4.2 Within each quality statement CQC identified areas of strength and for development:

Strengths

- Person-centred, strength-based approach
- Extra-care housing and intermediate care models well embedded
- Effective governance and risk management
- Safeguarding systems are robust and responsive
- Strong learning culture and staff development
- Strong partnership working with VCSE and Health Services
- Visible and supportive leadership

Areas for development

- Timeliness of assessments and reviews
- Advocacy delays, especially in hospital settings
- Mental health bed access and rural home care gaps
- Direct payment uptake below national average
- Digital exclusion and rural transport challenges
- Workforce shortages, especially in rural and specialist areas.

4.3 People's Experiences

A key element of evidence used by CQC to help inform their conclusions is feedback from people on their experience of adult social care in North Yorkshire:

- High satisfaction with care and support
- 73.69% of people who use services and 85.06% of carers felt safe
- Strong involvement in care planning and decision-making
- Support helped maintain independence and safety.

5.0 NATIONAL POSITION ON ASSESSMENT REPORTS PUBLISHED SO FAR

5.1 At the time of writing this report, CQC have published reports for 93 of the 153 authorities, with the remainder due to be published before the end of the financial year. The table below shows the split of ratings across Councils and for the different quality statements. This demonstrates how well North Yorkshire has performed in comparison to other authorities, particularly in the statements around Assessing Need, (none achieved outstanding and 24% achieved good), Equity in Experience and outcomes (4% achieved outstanding) and Learning, improvement and innovation (4% achieved outstanding).

Rating	LAs	LAs %	Overall Score		
			Min.	Max.	Ave.
Outstanding	3	3%	89	89	89
Good	57	61%	64	81	69
Requires improvement	31	33%	39	62	56
Inadequate	2	2%	28	34	31
Total	93	100%	28	89	64

Domain	Quality Statement	Exceptional standard	Good standard	Some shortfalls	Significant shortfalls	% "Good" or better
Working with People	Assessing needs	-	24%	71%	5%	24%
Working with People	Supporting people to lead healthier lives	2%	56%	39%	3%	58%
Working with People	Equity in experience and outcomes	4%	39%	55%	2%	43%
Providing Support	Care provision, integration and continuity	-	44%	54%	2%	44%
Providing Support	Partnerships and communities	6%	73%	20%	-	80%
Ensuring Safety	Safe pathways, systems and transitions	2%	47%	48%	2%	49%
Ensuring Safety	Safeguarding	1%	58%	35%	5%	59%
Leadership	Governance, management and sustainability	3%	60%	33%	3%	63%
Leadership	Learning, improvement and innovation	4%	76%	17%	2%	81%

5.2 Common strengths across Reports

There is no obvious correlation with the scale of the council's operation, with a third of county councils so far requiring improvement and most London and metropolitan boroughs and unitary councils, of all sizes, rated highly.

5.3 There are effective partnerships and community engagement and a commitment to co-production. Despite the evident national resource pressures, these councils have kept a focus on early intervention and prevention, keeping services accessible and timely, and are committed to addressing inequalities.

5.4 Assessors found evidence of well-supported frontline staff whose practice was person-centred, and strengths based. They also found robust and trusted safeguarding arrangements.

5.5 **Common Areas for Improvement across Reports**

Common areas for councils requiring improvement are inconsistent and delayed assessments or reviews, difficulties in recruiting and retaining staff, and variation in practice standards, processes and decision making. Access to early help and prevention may be limited and occasional weaknesses in safeguarding arrangements found.

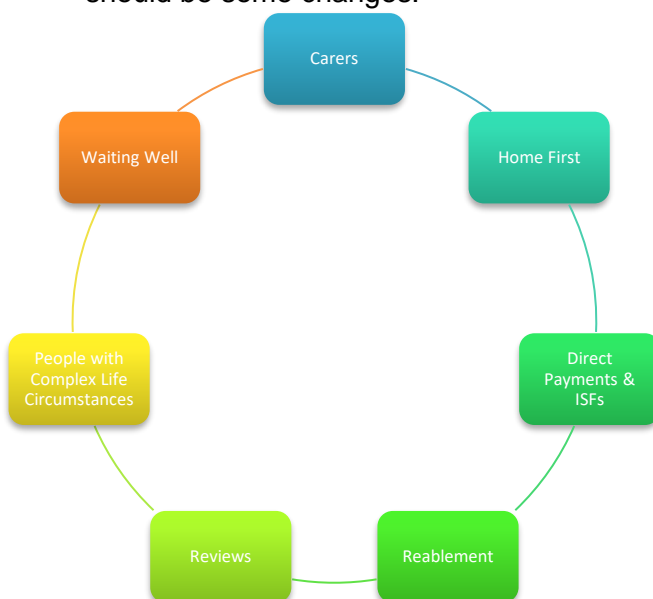
5.6 Reports describe inconsistent joint working with the NHS, housing, voluntary and community sector partners, market management concerns, and weaknesses in how users and carers are involved.

5.7 The process has highlighted the importance of a council's self-awareness in understanding and conveying their ambition for their adult social care responsibilities and how they are performing. CQC reports express confidence when these are aligned and areas for development match.

6.0 **ACTION PLANNING IN NORTH YORKSHIRE AROUND AREAS OF DEVELOPMENT**

6.1 Following receipt of the report, headline priorities and actions are being identified to address the areas of development identified by CQC in paragraph 4.2. A draft action plan sets these out in Appendix A. Monitoring of progress will be carried out through existing HAS governance arrangements, as the majority of the areas for development had been previously identified and so are already included as part of existing projects or business as usual. For example, CQC identified areas of development around Carers and Direct Payments, both of which are existing Improvement Priorities and reported on a monthly basis to HAS Leadership Team, and to this Committee. Further discussion around timescales for the actions will take place at the Improvement and Inspection Leadership Board at its meeting on 21st January and be reported verbally to this Committee at its meeting.

6.2 As part of the ongoing monitoring of performance against the 7 Adult Social Care Improvement Areas previously reported to this Committee, it has been agreed that there should be some changes:



Progress

- People with Complex Life Circumstances – now a transformation project
- Reablement – back to pre-pandemic delivery levels and moved to BAU
- Reviews – target reached and moved to BAU

6.3 Going forward, it has been agreed that the Adult Social Care service will focus on 6 improvement priorities from April 2026:



- **Waiting Well** remains a priority and will also monitor reviews and DoLS
- **Carers and Direct Payment** needs to see the next step change to continue in improvements
- **Community/Home First** will always be approach we take
- **Short Stays** linking with the above to ensure no one stays in a short stay bed longer than necessary
- **Mental Health** to ensure parity of service in terms of Waiting Well, Direct Payments and Carers

7.0 FINANCIAL IMPLICATIONS

7.1 No additional funding is required at this stage. Improvements will be delivered within existing budgets and transformation programmes.

8.0 LEGAL IMPLICATIONS

8.1 The CQC assessment is undertaken under the Health and Care Act framework. Actions will align with Care Act duties and corporate governance.

9.0 EQUALITIES IMPLICATIONS

9.1 Some of the actions identified include targeted work to improve equity of access and outcomes, especially for under-served communities and carers.

10.0 CLIMATE CHANGE IMPLICATIONS

10.1 No direct impacts identified. Opportunities will be explored to reduce travel and improve digital access while addressing digital exclusion risks.

11.0 PERFORMANCE IMPLICATIONS

11.1 Monitoring of actions to address the areas for development identified by CQC will take place through Directorate governance mechanisms and reported to this Committee.

12.0 CONCLUSIONS

12.1 The rating of “good” and a score of 81 identifies North Yorkshire Council as a strongly performing authority in its delivery of adult social care and reflects strong partnership working across the health and social care system. Actions to address the areas for development identified by CQC are underway and will be monitored and reported to this Committee at future meetings.

13.0 RECOMMENDATIONS

It is recommended that the Committee:

- i) Note the CQC assessment outcomes and the Directorate's action plan;
- ii) Support the proposed priorities in Appendix A and request progress updates at future meetings; and
- iii) Endorse continued engagement with people with lived experience and partners to co-produce improvements.

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13th January 2026

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BACKGROUND DOCUMENTS:

CQC assessment report for North Yorkshire: [North Yorkshire Council: local authority assessment - Care Quality Commission](#)

APPENDICES:

Appendix A: Headline priorities to address areas identified for development by CQC

Note: Members are invited to contact the author in advance of the meeting with any detailed queries