

Classification:	Decision Type:
Open	Non-Key

Report to:	Cabinet	Date: 03 December 2025
Subject:	Adult Social Care Performance Quarter To	wo Report 2025/26
Report of	Cabinet Member for Adult Care, Health, a	nd Public Service Reform

Summary

1. This is the Adult Social Care Department Quarter 2 Report for 2025-26. The report outlines delivery of the Adult Social Care Strategic Plan, preparation for the new CQC Assessment regime for local authorities and provides an illustration and report on the department's performance framework.

Recommendation(s)

2. To note the report.

Reasons for recommendation(s)

3. N/A.

Alternative options considered and rejected.

4. N/A.

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Background

5. This is the Adult Social Care Department Performance Report covering Quarter 2 of 2025-26.

Links with the Corporate Priorities:

6. The Adult Social Care is Department is committed to delivering the Bury 'LETS' (Local, Enterprising, Together, Strengths) strategy for our citizens and our workforce.

Our mission is to work in the heart of our communities providing high-quality, personcentred advice and information to prevent, reduce and delay the need for reliance on local council support by connecting people with universal services in their local communities.

For those eligible to access social care services, we provide assessment and support planning and where required provide services close to home delivered by local care providers. We aim to have effective and innovative services and are enterprising in the commissioning and delivery of care and support services.

We work together with our partners but most importantly together with our residents where our intervention emphasises building on individual's strengths and promoting independence.

We ensure that local people have choice and control over the care and support they receive, and that they are encouraged to consider creative and innovative ways to meet their needs. We also undertake our statutory duties to safeguard the most vulnerable members of our communities and minimise the risks of abuse and exploitation.

Equality Impact and Considerations:

7. In delivering their Care Act functions, local authorities should take action to achieve equity of experience and outcomes for all individuals, groups and communities in their areas; they are required to have regard to the Public Sector Equality Duty (Equalities Act 2010) in the way they do carry out their work. The Directorate intends to drive forward its approach to equality, diversity and inclusion, ensuring that equality monitoring information is routinely gathered, and consider how a realistic set of S/M/L-term objectives may help to focus effort and capacity.

Environmental Impact and Considerations:

8. N/A

Assessment and Mitigation of Risk:

Risk / opportunity	Mitigation
N/A.	N/A.

Legal Implications:

9. This report demonstrates the Council's preparation for the new CQC inspection regime, its Care Act 2014 statutory duties and the strategic plan for Adult Social Care. This report demonstrates adherence to the law.

Financial Implications:

10. There are no financial implications arising directly from this report.

Appendices:

Data sources and what good looks like.

Bury MBC ASC Preparation for Assurance Peer Challenge Report

Background papers:

Adult Social Care Strategic Plan 2023-2026

Please include a glossary of terms, abbreviations and acronyms used in this report.

Term	Meaning	
CQC	Care Quality Commission	

Adult Social Care Performance Report for Quarter Two, 2025/26

1.0 Executive Summary

Welcome to our second report of 2025/26. This year we know that we will have our inspection by the Care Quality Commission and our site visit will be the week commencing 6th October and will be covered in the Q3 report

In this quarter we have prepared our case file audit and presentation for the CQC. 50 cases have been prepared and submitted to the CQC for them to choose 10 to audit.

Despite continued preparation for impending inspection, the department has made considerable progress in delivering its business plan with major milestones completed throughout all of its objectives. Some of the highlights of this quarter are that we have commissioned our co-production network for people living with autism and been rolling out Oliver McGowan autism training.

Our independent workforce support programme has been launched and being delivered as part of our Bury Care Academy. We've also launched the carers emergency card and the numbers signing up is starting to grow.

The overall performance of assessments carried out has dropped this quarter, which is disappointing and resulted in increases in waiting lists for social work assessments and the number of overdue reviews. Whilst this is expected in summer due to summer holidays, it is greater than normal. This is likely due to resources focusing on CQC inspection preparation for our forthcoming site visit and case file audit. Whilst this drop in performance is disappointing it is not of a scale that causes concern and is till considerably better than 18 months ago. These performance issues will be the subject of improvement plans in Q3 when CQC has left us at the beginning of October.

Affected less by the preparation work for CQC are our intermediate care services which have bounced back following a quieter quarter 1 with great performance in our bed-based services and IMC at home especially busy. Overall, the number of people accessing care and support continues to grow but at a rate slightly lower than population growth.

2.0 Delivery of the Adult Social Care Strategic Plan

- 2.1 Adult Social Care are committed to delivering the Bury 'LETS' (Local, Enterprising, Together, Strengths) strategy for our citizens and our workforce. Our mission is to work in the heart of our communities providing high-quality, person-centred advice and information to prevent, reduce and delay the need for reliance on local council support.
- 2.2 The Adult Social Care Strategic Plan 2023-26 sets out the Department's roles and responsibilities on behalf of Bury Council. It explains who we are, what we do, how we work as an equal partner in our integrated health and social care system and identifies our priorities:



2.3 The 2023-26 Strategic Plan was refreshed in April 2025 supported by an updated annual improvement delivery plan which is monitored on a quarterly basis. Quarter 2 2025/26 delivery highlights include:

Priority 1 – Transforming Learning Disabilities

- We have commissioned a charity, "Respect for All" to work with us to develop an autism coproduction network for Bury autistic adults and people who know them well.
- A neurodiverse staff network has been established.
- 41 Social Care Operations staff have been trained in Autism awareness (Oliver McGowan).

Priority 2 – Excellent Social Work

- The workforce plan is being implemented, including a review of 'All Routes into Social Work' and the Assessed and Supported Year in Employment (ASYE). Exit interviews process in place and vacancy tracker for managerial oversight. The Social work mandatory training dashboard is now available to all managers to support attendance and supervision of all staff.
- Case file tracking plans and reporting for CQC inspection requirements have been completed. Managers and Heads of Service continue to conduct audits and moderation, with reports provided to the Quality Board. Thematic areas identified for improvement include Mental Capacity, Support Planning, and Case Recording, with corresponding action plans developed collaboratively with managers.

- A legal gateway has been established to manage adult social care legal casework, with a review scheduled for January 2026.
- Safeguarding teams are streamlining pathways and aim to implement a new pathway by January 2026. They also participate in forums with VCFA colleagues to communicate safeguarding information.
- Mental health social work teams are collaborating with Impower on strength-based reviews and hold weekly meetings to share practice and monitor outcomes for oversight of progress.
- The user-led group for mental health continues to expand with support from GADAM, focusing on reviewing the referral pathway for social care mental health over the next three months.
- Older people's mental health teams have initiated collaborative work to enhance the intermediate care offer, involving IMCA, Pennine Care, and the Older People Mental Health Team.
- Within the neighbourhood, the East Team is participating in a hoarding project and conducting quality assurance work in Prestwich related to high intensity users, aiming to bring these individuals into Active Case Management to reduce demand on health and public services.
- Social work managers meet regularly to improve oversight and quality of support planning through peer verification.

Priority 3 – Superb Intermediate Care

- Training and implementation of the electronic care record system in Falcon and Griffin has been completed. We are now progressing with the work for the broader Intermediate Tier aiming to commence with Killelea House following upgrade of the WIFI system.
- Commencement of Reablement and IMC@Home MDTs to improve the customer journey.
 These meetings are designed to enhance the customer journey by providing more comprehensive and coordinated care.
- Service planning, team engagement and dashboard preliminary work for the Disability Service to reduce occupational therapy waiting times is underway. The team have made significant progress in reducing waiting list times to provide a better service to our customers.
- The Intermediate Tier workforce strategy has been refreshed for 2025-27. The strategy will play a crucial role in shaping the workforce ensuring the team are well-equipped to meet the increasing challenges and create opportunities.
- We continue to prepare for likely CQC inspection of our care services

Priority 4– Making Safeguarding Everybody's Business

- Review of current internal safeguarding processes and engagement with teams that
 undertake safeguarding responsibilities has been completed. Mental Health, Learning
 Disabilities and Independent Hospital safeguarding now sits under the Safeguarding Team
 with all other safeguarding planned to move across in January 2026. This will give Bury one
 safeguarding process for all safeguarding moving forward.
- Work has commenced on implementation of a new learning review electronic system. The
 process has been drafted and signed off by senior leadership team and the electronic
 system is being tested to ensure it's fit for purpose.

 We are launching our refreshed Mental Capacity Act and Best Interest documentation and procedure, alongside training and tools for applications to the court of protection in a MCA awareness week (10th – 14th November 2025)

Priority 5- A Local and Enterprising Care Market

- Our Independent Provider Workforce Support Programme has been launched and is now being delivered by the Bury Care Academy; supporting providers with their recruitment and retention challenges as well as learning, development, succession planning and career progression.
- Together Towards Outstanding Care Strategy has been launched. This encompasses all
 the Council approaches and programmes of support available to providers. These all work
 together to drive improvements and deliver outstanding care in the borough.
- Prevention and Wellbeing, Extra Care, Dementia and Ageing Well strategies were approved and published.
- The Young People Supported Accommodation tender has been approved.

Priority 6 – Connect Unpaid Carers to Quality Support Services

- The new Carers service went live in June 2025 following tender assessment and approval.
- A Carers Co-production Network service specification and budget is in development.
- Training programme established by Carers to develop skills, helping them in their role. This will be delivered by the Carers Hub over the next 12 months.
- Carers Emergency Card now introduced to reassure Carers that there is a plan in place to support them and their loved ones. There have been 19 Carers registered during this period.
- The Carers Hub delivered 38 in person coffee and chat sessions. Two sessions were held for Carers from ethnic minority communities in the borough.

3.0 Update on Care Quality Commission (CQC) Assessment of Local Authorities

- 3.1 Bury Council was notified on 4th August of the next stage of its CQC assessment. This was that we were to have our site visit w/c 6th October but prior to this get 50 case files ready for audit. These were prepared and submitted on 18th August. We were also notified of the requirement to present to the assessment team an introduction and overview of adult social care in Bury in the form of a presentation over Teams up to 3 hours in length on the morning of 11th September.
- 3.2 The senior leadership team, cabinet member, chief exec and executive director all took part and presented the diverse range of support we provide our residents and also the impact these services deliver. The presentation lasted 2 hours and was made to 3 of our inspection team and they thanked us for the comprehensive overview.
- 3.3 In advance of the site visit the department took up an offer from Partners in health and care from the LGA and ran a further number of briefing sessions for our workforce, leaving us as ready as we will ever be for the site visit in October.

4.0 Highlight Report for Quarter 2, 2025/26

Ac	dult Social Care - Quarterly Highlight Report - C	(uai	ter	2				
Obsessions	Performance Measures	Frequency	Polarity	Sparkline	Lastest Data Direction of Travel	(hig Peers (16) 24/2	Rank her is be NW (22) Q1 25/26	etter) GM (10) M2 25/26
Reduce the number of people waiting for a	Number of people on waiting list for ASC needs assessment	Q	L	Sparkille	77 🔕	-	-	5
social work needs assessment	Median number of days waiting for an ASC needs assessment	Q	L	_	44 🔕	-	-	7
Increase the number of people who have their	Proportion of people that were asked about their outcomes	Q	н	~~~	76% 🔕	-	13	-
safeguarding outcomes partially or fully met	Of those who expressed outcomes the proportion of people who have their safeguarding outcomes fully or partially met	Q	н	\bigvee	96% 🕗	-	10	-
Increase the number of people leaving	The proportion of people who received short-term services during the year where no further request was made for ongoing support	Q	Н	~~~	92% ()	3	5	-
intermediate care services independently	The proportion of older people (65+) who were still at home 91 days after discharge from hospital	А	Н	~~	92% 🕗	7	-	-
Increase the number of people with a learning disability who are provided with the opportunity	Number of people trained in the progression model	Α	Н		58	-	-	-
to live more independently	Number of customers who have had an assessment or review using the progression model	Α	Н		275	-	-	-
Increase the number of people accessing care	The proportion of people and carers who use services who have found it easy to find information about services and/or support	А	н	_	65% 🔕	10	-	-
and support information and advice that promotes people's wellbeing and independence.	The proportion of people who use services, who reported that they had as much social contact as they would like	Α	Н	$\overline{\ \ }$	47% 🕝	-	-	-
Increase the number of people with lived experience who provide feedback	Number of feedback provided	Q	н	\sim	266 🕝	-	-	-
Increase the number of unpaid carers identified	Total number of new carers registered with Bury Carers' Hub	Q	Н		99 🕝	-	-	-

Annual Measures: ASCOF 24/25

Quarterly Measures: updated Q2 25/26

The Department has adopted an outcome-based accountability framework to monitor performance and drive improvement. Several outcomes have been chosen that will change if the objectives of our strategic plan are met, we call these our obsessions. An obsession is a key part of an outcome-based accountability framework where focus on these areas have positive knock-on effects right across our areas of work

In Quarter 2 we saw a small increase in days waiting for assessment and a small increase in people waiting which now averages only 7 per team. This will be subject to monitoring and improvement in our performance board in Q3

Safeguarding outcomes continue to be strong but the number of people who were asked about the outcomes they wanted to achieve did drop this quarter. This will be subject to monitoring and improvement in our performance board in Q3

Quarter 2 showed an increase in the numbers of people leaving our short-term services independent at 92% and this continues to be above the England average of 83%. This performance is outstanding and not likely to be sustained so we must not be concerned if it was to drop by a point or 2.

One of our priorities is transforming learning disability services by implementing a strengths-based progression model throughout our services that support people with learning disabilities. This focuses on maximizing independence for individuals with learning disabilities by providing tailored support to gradually develop life skills, allowing them to progress towards greater autonomy in their daily lives, often through small, achievable steps and personalised goals based on their

individual strengths and needs; it emphasizes a focus on increasing independence rather than relying on long-term care services.

This has held steady this quarter as the team have concentrated on waiting list reduction.

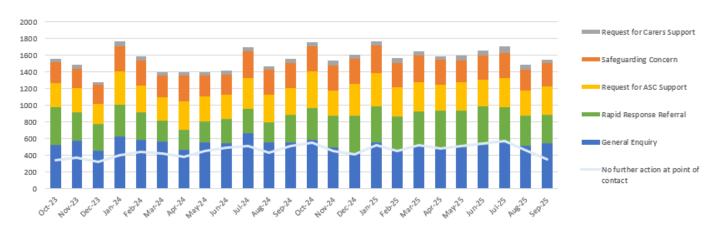
Improving the number of people accessing information is only collected annually as part of a national survey so this number will not change regularly. However to overcome this was are no collecting our own feedback to improve our services and the number of people providing feedback rose to 266 this quarter compared to 50 last quarter

One of our newer priorities to identify new carers and connect them with support meant 99 new carers were identified in this quarter.

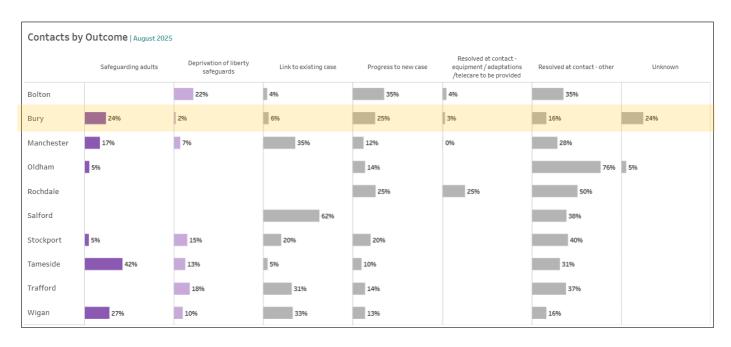
4.1 Contacts

The primary means of public contact to request support, information and advice is through our care, connect and direct office (CAD). A higher proportion of contacts resolved by CAD means that people's enquiries are being dealt with straightaway and not passed on to other teams.

Number of Adult Social Care (ASC) Contact Forms recorded each month.



Contacts by outcome - how does Bury Compare?



Contacts – Q2 commentary

This shows the number of contacts the department receive each month and what they were about. It also illustrates the number resolved by our contact centre.

Contact volumes in Q2 remained consistent with seasonal expectations. The number of contacts handled during July, August and September closely mirrored figures from the same period last year, with a predictable dip in August, the main summer holiday period.

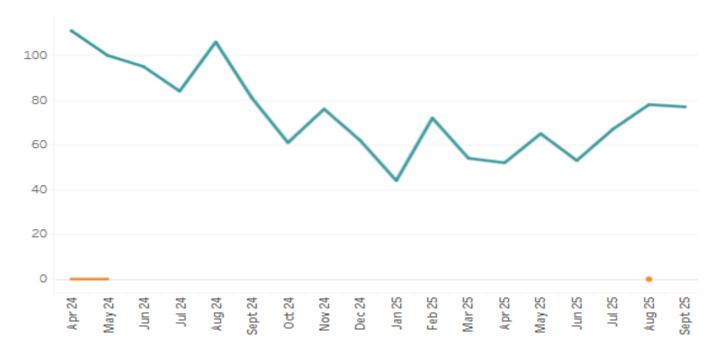
Q3 will see the design and delivery of an improvement program for our contact services to ensure we are giving an even better and more responsive service to our residents and this will follow with the development of digital routes now our new internet is launched and working well.

There was an issue with the data not being counted correctly resulting in a high number of unknown contact outcomes in August, this data issue will be investigated and resolved.

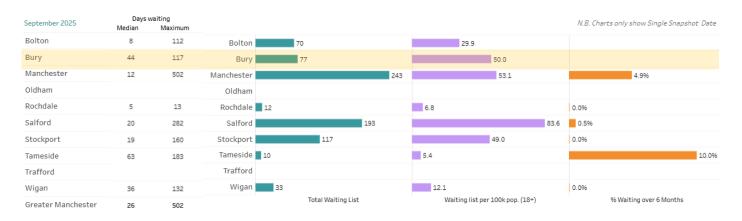
4.2 Assessments - Waiting

People awaiting an assessment (needs and carers assessments) by social workers, occupational therapists, or deprivation of liberty safeguards assessors. Reduced waiting times lead to improved outcomes for people because they are receiving a timelier intervention.

Number of people awaiting an Adult Social Care assessment each month.



How does Bury Compare - Needs Assessments?



Assessments waiting - Q2 commentary

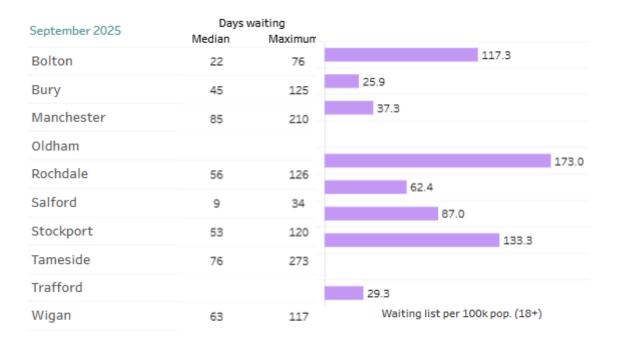
During Quarter 2 Adult Social Care in Bury has seen the number of people awaiting assessments, including both needs and carers assessments conducted by social workers rise from an average of 55 to 77 or 2 per team. This is part will be due to the summer effect as the workforce reduces temporarily due to summer holiday.

This quarter the reduction in performance was slightly more than normal as I fear preparing for CQC inspection is using time that would otherwise be directed at improving waiting lists further. This will be a focus of improvement in our performance board as soon as the CQC site visit is over in October.

Efforts continue to focus on reducing the number of people waiting for an Occupational Therapy assessment, ensuring residents receive timely support to maintain independence and wellbeing. As of the end of September 2025, the number of people waiting has decreased to 25.9 per 100,000 of our population, reflecting sustained improvement and the impact of targeted action plans introduced earlier in the year.

The OT service continues to strengthen its triage and prioritisation processes, ensuring those with most urgent needs are seen first while others are supported through waiting well approaches. Alongside this, we are developing our performance dashboards and key performance indicators to provide real-time oversight, enable smarter resource allocation, and drive continuous improvement across the service.

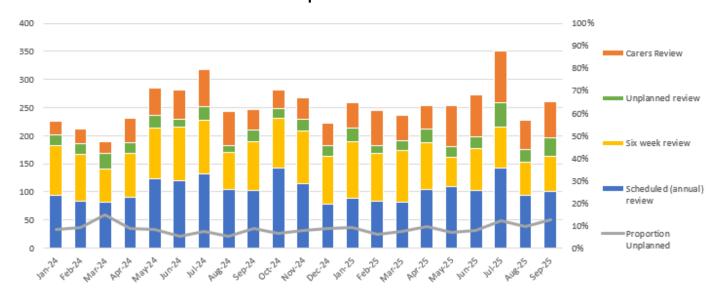
OT assessment - how does Bury Compare?



4.3 Reviews

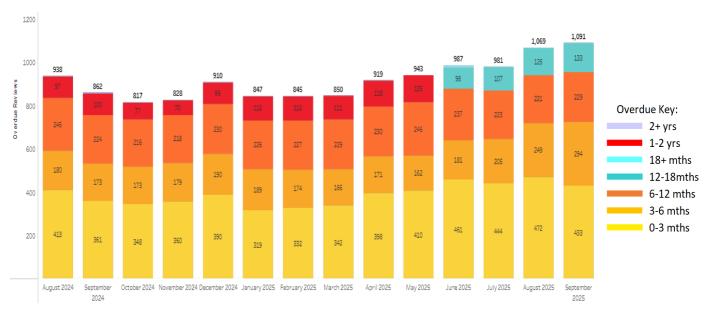
Adult Social Care reviews are a re-assessment of a person's support needs to make sure that they are getting the right support to meet their needs. Needs may change over time, and new services and technology may give someone more independence and improve their wellbeing. A lower proportion of unplanned reviews means that people are support through scheduled reviews of their support needs rather than when a significant event has occurred requiring a change in support. Support packages should be reviewed every 12 months. It is important to note that it not just the adult social care reviewing team who undertake reviews, however, most of the planned review activity is completed by this team.

Number of Adult Social Care Reviews Completed each month.



Note - the % axis references the grey line which is the proportion of unplanned reviews.

Number of Overdue Adult Social Care Reviews on the last day of each month



Reviews - Q2 commentary

At the end of September 2025, 1091 people were overdue their Adult Social Care review across the department and this figure comprises both annual reviews as well as initial reviews. This figure has increased since Q1 which is disappointing and again reflects the summer effect but also resources being used for preparation for CQC inspection.

This will be subject to heightened improvement and monitoring in our performance board once the CQC stie visit has taken place and planned measures are ongoing to seek to reduce this departmental figure, which include:

- Continued monthly reminder to all staff on the importance of data quality, as some of the 1091 reviews will have had their review, however, this has not been recorded on the system, therefore incorrectly showing as an overdue review.
- Continued push across the department on reminding practitioners to progress the administrative side of the role and reassigning cases quicker, once the intervention has been concluded.
- Increased use of data, and onus on management to identify cases which have been held on individual workers caseloads for some time and having targeted discussions on these cases, thus freeing up capacity within social work teams.

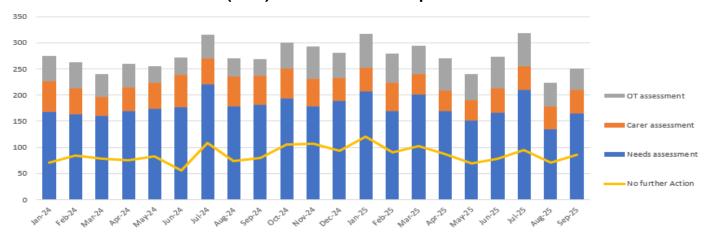
At time of writing, there are no reviews more than 2 years overdue and no reviews which are 18+ months overdue. This is an improvement when compared to Q1.

Reviews across the department continue to be strengths based and outcome focussed which require an investment of additional time from practitioners, however, these reviews yield much better outcomes for the customer and the department.

4.4 Assessments - Completion

Local Authorities have a duty to assess anyone who appears to have needs for care and support, regardless of whether those needs are likely to be eligible. The focus of the assessment is on the person's needs, how they impact on their wellbeing, and the outcomes they want to achieve. Assessments where there was no further action are where there were no eligible needs identified or a person with eligible needs declined services. A lower number means that operation teams can focus their time on those people with identified needs.

Number of Adult Social Care (ASC) Assessments Completed each month.



Assessments - Q2 commentary

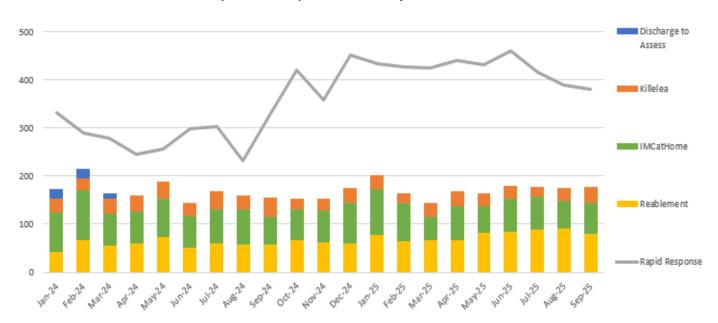
In Quarter 2 the number of assessments completed has dropped. This will be in part due to the summer holiday effect but is greater than last years drop at the same time. We believe this is because of the time being dedicated to preparation for our forthcoming CQC inspection. This drop in assessments is the cause of the corresponding increase in the waiting list and overdue reviews.

This will be subject to a performance improvement plan delivered in our performance board throughout Q3 following the departure of CQC in the middle of October.

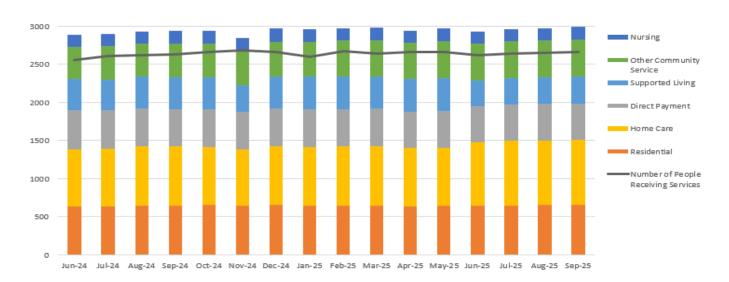
4.5 Services

Adult Social Care services may be short-term or long-term. Short-term care refers to support that is time-limited with the intention of regaining or maximising the independence of the individual so there is no need for ongoing support. Long-term care is provided for people with complex and ongoing needs either in the community or accommodation such as a nursing home. It is preferable to support people in their own homes for as long as it is safe to do so.

Number of Intermediate Care (short-term) services completed each month.

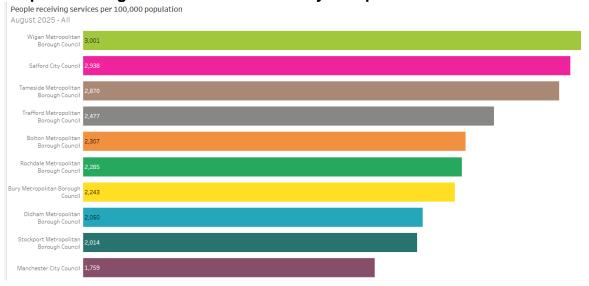


Number of Long-term Adult Social Care services open on the 1st of each month.



	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25
Residential	640	640	645	644	658	650	656	649	648	648	640	645	647	651	654	656
Nursing	156	158	158	169	172	174	173	166	161	163	161	160	163	159	158	165
Home Care	748	757	782	779	760	737	769	766	776	775	762	761	831	844	850	855
Direct Payment	510	497	496	488	488	495	491	490	489	492	475	485	471	479	476	474
Supported Living	409	407	413	419	424	341	429	432	431	428	433	432	343	345	355	359
Other Community Service	424	440	434	438	440	444	451	453	468	471	470	485	476	482	478	479
Residential Placement	640	640	645	644	658	650	656	649	648	648	640	645	647	651	654	656
Supported at Home	1762	1806	1821	1815	1829	1861	1829	1780	1868	1834	1861	1856	1807	1835	1844	1842
Number of People Receiving Services	2558	2604	2624	2628	2659	2685	2658	2595	2677	2645	2662	2661	2617	2645	2656	2663

People receiving services - how does Bury Compare?



Services – Q2 commentary

This shows the number of people we support in our various service types.

The first chart shows the number of people supported in our intermediate care services. These services aim to prevent, reduce, and delay the need for long term care and support so the busier they are the better.

For intermediate Care after Q1 performance not being as strong as expected Q2 has returned to normal and there has been an increase in the number of people coming through the bed-based and home based services.

It continues to be a focus of our attention and work is underway to optimise length of stay, including a Geriatrician joining the boardroom 2-3 times per week. There is ongoing work on risk management, for people to return home earlier and continue therapy within their own environment. Exercise practitioners remain on the Fairfield Hospital ward's helping our older adults keep active whilst in hospital which is delivering less dependency when ready for discharge and improved outcomes for patients. Our Rapid Response and Hospital at Home service continues to perform beyond all our expectations.

For general service use we continue to see a small growth as our population grows and ages. The biggest growth is in those receiving home care which is a positive sign that we are supporting people to live well at home rather than in care homes. Overall the numbers accessing long term care has rise by 35 which is 1.3% compared to a population growth of 2%

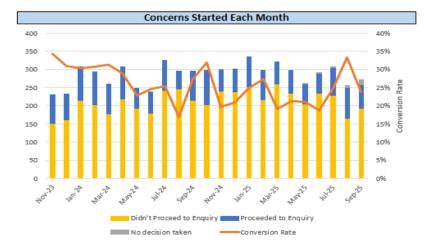
4.6 Adult Safeguarding

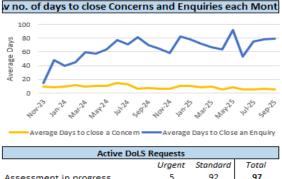
Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working **together** to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action.

Safeguarding and DoLS Activity Summary



Open Safeguardi	ng Enqu	iries	
	Number	Av. Days	Max Days
ACS Safeguarding Team	146	85	655
Hospital Social Work Team			
Learning Disability Team	9	105	370
ОРМНТ	6	53	138
Community Mental Health Team			
Strategic Adults Safeguarding Te			
Total	161	86	655





Assessment in progress 5 92 97
Processing 3 6 9

Total 8 98 106

Standard Authorisations in Place

Adult Safeguarding - how does Bury Compare?

Metric	Bury	Rank in Northwest (out of 22)
Conversion Rate	18%	3 rd
Making Safeguarding Personal – Asked	89%	13 th
Making Safeguarding Personal - Outcomes	96%	10 th

Last Updated: Q1 2025/26

Safeguarding – Q2 commentary

Regionally Bury are still performing strongly in asking people their outcomes and either partially or fully meeting those outcomes, although we have seen a dip in asking people their outcomes to below 80% in September. After review with operations management this appears to have been due to some practice issues with have been addressed individually and the message around asking outcomes has been reinforced at team meetings. We have now seen a return to more normal levels as per previous months. The conversation rate has risen from 16% to 24%. However, we continue to review this at the Safeguarding Operational Group and check against the appropriateness of referrals coming through our front door. We have now started working with our commissioning

647

colleagues to visit providers that have not raise safeguarding in the last 12 months to assure ourselves that safeguarding is being raised appropriately which may seen an increase in safeguarding concerns being raised by our providers in the next months, which in turn could affect the conversion rate further.

We continue to see good practice in most safeguarding concerns, enquiries within the safeguarding service and variation in practice across the rest of the adult care system. We continue to work with the frontline on the importance of education and giving referrers feedback when they raise safeguarding and whilst this has been improved it continues to be picked up in supervision on an individual level. We will continue to monitor this in SOG to inform future practice.

We are also excited to continue our work towards a single point of access for safeguarding concerns with independent hospital safeguarding now coming into the safeguarding team and Learning Disabilities safeguarding coming across in November 2025. We are still on track to have all adult safeguarding being managed within the safeguarding team by January 2026 and having the safeguarding team working with all colleagues across ASC in a standardised manner.

Key Achievements:

Through the safeguarding transformation programme secondary mental health safeguarding has now moved back from Pennine NHS Foundation Trust to Bury Council and appears to have embedded well with both the safeguarding team and the mental health team reporting positively.

We are also excited to continue our work towards a single point of access for safeguarding concerns with independent hospital safeguarding now coming into the safeguarding team and Learning Disabilities safeguarding coming across in November 2025. We are still on track to have all adult safeguarding being managed within the safeguarding team by January 2026 and having the safeguarding team working with all colleagues across ASC in a standardised manner.

We are continuing to develop and hold continuing professional development sessions and peer supervision sessions that are open to the whole adult care system. We are promoting these through our share point site.

4.7 Complaints and Compliments

Complaints

Period 2025/26	Number of complaints		Decision		king day scale	
	received	Upheld	Partially Upheld	Not Upheld	Within	Outside
Q1	16	2	6	5	7	6

^{*3} complaints ongoing*

Compliments

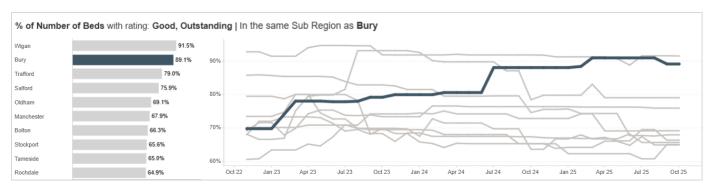
Period	Number of		Source	
2024/25	compliment s received	Person receiving or had received services	Relative of person receiving or had received services	Other (incl. various survey responses/thank you cards)
Q1	176	14	24	138

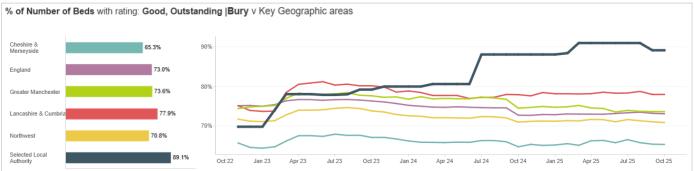
Complaints and Compliments – Q2 Commentary

Complaints data is not available for Q2, normal service will resume in Q3

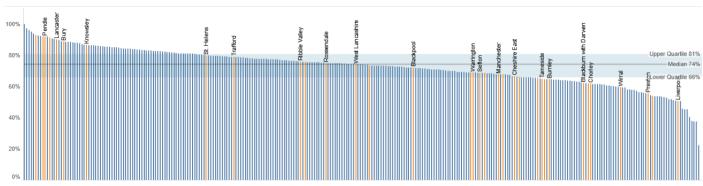
4.8 State of the Care Market

Number of care home beds rated good or outstanding.





% of Number of Beds with rating: Good, Outstanding | North West LAs within All England LAs



Quality Ratings of Bury's Home Care Agencies



Last Updated: Q2 2025/26

State of the Care Market - Q2 commentary

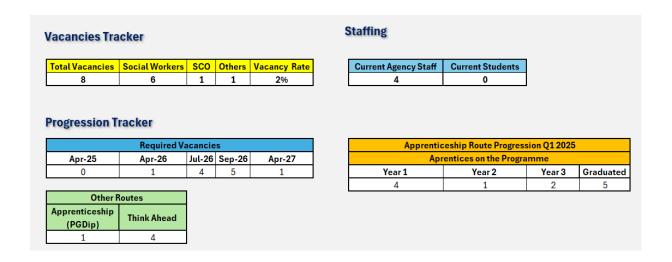
The top charts show the quality ratings of care homes in Bury compared to the rest of Greater Manchester showing the % of beds rated good or outstanding. The second chart shows Bury, and in turn Great Manchester compared to the other regions in England and the Northwest. The third chart shows the % of care home beds rated Good or better across the whole of the country.

The final chart shows the rating of home care agencies operating in Bury. For both charts the nearer to 100% the better.

Bury is ranked 1st in GM for supported living and in an improvement on Q1, Bury is also now 1st in GM for care at home, outperforming the Northwest and England averages.

The overall quality of our care homes has dipped slightly with Bury now 2nd amongst its GM Neighbours; however, it continues to perform well above the England average and the average of all Northwest regions. Bury is ranked in the top 20 in England for the quality of its care home beds. This slight reduction is due to one care home being rated Requires Improvement by CQC, however, an Inadequate rating was avoided thanks to the proactive identification of issues and intensive work by the Commissioning Team to support the provider. That work now continues with further improvements being driven by the Commissioning Team alongside partners.

4.9 Workforce Development Q2



The chart above illustrates the favourable workforce position. Currently, we have a low level of vacancies within the operational department, which enhances team performance, practice consistency, and overall service stability.

The internal social work apprenticeship programme has been revised to improve the learning journey. Positively, five apprentices qualified in March and are now contributing to teams across the department. Our external social work programme has also been reviewed, with a postgraduate route approved, alongside the Mental Health social work fast-track route designed to support the community mental health transformation programme over the next year.

We are dedicated to providing social work placements, and each team is committed to hosting a learner during this academic year. Placement planning is currently underway, and we anticipate a significant increase in student social workers, which will in turn support the recruitment of newly qualified social workers—an essential step in balancing our workforce demographics.

We have reviewed and relaunched our social work progression pathway, offering social workers a clear and transparent process to consolidate their learning, enhance legal literacy, and contribute to the growth and development of others as they work towards achieving the title of experienced social worker.

Supervision practices have also been revised, with a stronger focus on reflective practice. Both managers and staff have received training in reflective supervision, and the updated Supervision Policy will be implemented from quarter three, alongside the introduction of InterVision—peer group reflective sessions led by experienced social workers.

4.11 The Bury Carers' Hub Quarterly Update

Following the launch of our new carers strategy and adoption of identifying unpaid carers and connecting them to support our most recent monitoring report from our carers' hub is included here.



Appendix - Data sources and what good looks like

Number of Adult Social Care (ASC) Contact Forms recorded each month.	
Waiting List Summary Needs and Carers Assessments: No of Cases Waiting for Allocation GM Regional Comparison Professional Involvement in Liquid Logic: Awaiting allocation work trays Brokerage Work trays Overdue Review Tasks DoLS data from the database. Number of Adult Social Care (ASC) Assessments Completed each month Av. number of days from the contact start date to the assessment end date Lower is better Lower is better	
Needs and Carers Assessments: No of Cases Waiting for Allocation GM Regional Comparison Number of Adult Social Care (ASC) Assessments Completed each month GM Regional Comparison Assessment forms in Liquid Logic Completed each month Av. number of days from the contact start date to the assessment end date Assessment end date Frotesstorial involvement in Liquid Logic: Awaiting allocation work trays Brokerage Work trays Overdue Review Tasks DoLS data from the database. Lower is better Lower is better	
Number of Adult Social Care (ASC) Assessments Completed each month Av. number of days from the contact start date to the assessment end date Assessment forms in Liquid Logic Completed each month Av. number of days from the contact start date to the assessment end date	
(ASC) Assessments Completed each month Assessment forms in Liquid Logic Completed each month Av. number of days from the contact start date to the assessment end date Lower is better	
assessmentenduate	
Number of Intermediate Care (short-term) services completed each month All IMC Service data from four data sources	
Number of Long-term Adult Social Care services open on the 1st of each month.	
the 1st of each month. Proportion of Home Care vs Nursing and Residential Care Services compared against 2 years ago the 1st of each month. Service data from Controcc Grouped by Service Type Count of service types, not people better	Careis
Northwest Regional Comparison	
Number of Adult Social Care Reviews Completed each month Review forms completed in Liquid Logic Higher number of completed reviews. Lower proportion of Unplanner reviews.	ed .
Number of Overdue Adult Social Care Reviews on the last day of each month Review Tasks in Liquid Logic past the due date Lower is better	
Regional Comparison As above	
Percentage of people who have their safeguarding outcomes met Outcomes are their safeguarding enquiries: Making Safeguarding Personal questions Higher is better	
Outcomes were achieved	
Open Safeguarding Enquiries Liquid Logic and CMHT/EIT spreadsheets Target: Enquiries closed in 56 or less	days
g spiedusiieeis	
Concerns Started Each Month Contact Forms on Liquid Logic: form type safeguarding concerns	
Contact Forms on Liquid Logic:	