Public Document Pack

Notice of Meeting

Scan here to access the public documents for this meeting

Extraordinary Health and Adult Social Care Scrutiny Committee

Monday 14 September 2026 at 3.30pm

in the Council Chamber Council Offices Market Street Newbury

You can view all streamed Council meetings here: https://www.westberks.gov.uk/councilmeetingslive

Date of despatch of Agenda: Friday 4 September 2026

For further information about this Agenda, or to inspect any background documents referred to in Part I reports, please contact Gordon Oliver (Principal Policy Officer – Democratic Services and Scrutiny) via e-mail: gordon.oliver1@westberks.gov.uk

Further information and Minutes are also available on the Council's website at www.westberks.gov.uk

West Berkshire COUNCIL

To:	Councillors Martha Vickers (Chairman), David Marsh (Vice-Chairman), Dennis Benneyworth, Martin Colston, Alan Macro, Owen Jeffery, Paul Kander, Stephanie Steevenson and Joanne Stewart
Substitutes:	Councillors Adrian Abbs, Dominic Boeck, Nick Carter, Billy Drummond, Janine Lewis, Ross Mackinnon, Biyi Oloko, Clive Taylor and Carolyne Culver

Agenda

Part I

Page No.

1 **Apologies** 1 - 2

Purpose: To receive apologies for inability to attend the meeting (if any).

2 **Declarations of Interest** 3 - 4

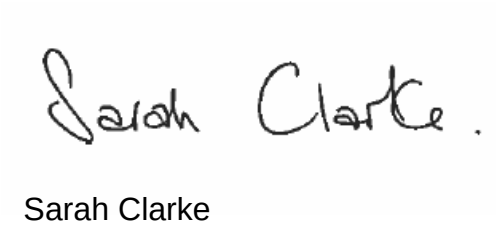
Purpose: To remind Members of the need to record the existence and nature of any personal, disclosable pecuniary or other registrable interests in items on the agenda, in accordance with the Members' Code of Conduct.

The following are considered to be standing declarations applicable to all Health and Adult Social Care Scrutiny Committees:

- Councillor Patrick Clark – Governor of Royal Berkshire Hospital NHS Foundation Trust, Governor of Berkshire Healthcare NHS Foundation Trust, and West Berkshire Council representative on the Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Partnership; and
- Councillor Jo Stewart – Employed by the Royal Berks Charity as a Fundraising Manager. Although the charity is a separate entity from the Royal Berkshire NHS Foundation Trust, there may be occasions where it would be inappropriate to take part in discussions for certain topics. In addition, her spouse is Head of Contract Management at the Royal Berkshire NHS Foundation Trust.

3 **Adult Social Care Strategy and Delivery Plan** 5 - 40

Purpose: To present the updated Adult Social Care Strategy, including the findings from the public consultation and the proposed Delivery Plan, to enable the Health and Adult Social Care Scrutiny Committee to consider and comment on the Strategy prior to its submission to the Executive for approval.



Sarah Clarke
Executive Director - Resources

If you require this information in a different format or translation, please contact Gordon Oliver on telephone (01635) 519486.

This page is intentionally left blank

Extraordinary Health and Adult Social Care Scrutiny Committee

14 September 2026

Item 1 – Apologies

Verbal Item

This page is intentionally left blank

Extraordinary Health and Adult Social Care Scrutiny Committee

14 September 2026

Item 2 – Declarations of Interest

Verbal Item

This page is intentionally left blank

Adult Social Care (ASC) Strategy post consultation outcome and Delivery Plan

Committee considering report:	Health and Adult Social Care (HASC) Scrutiny Committee
Date of Committee:	14 September 2026
Portfolio Member:	Portfolio Holder: Adult Social Care
Date Portfolio Member agreed report:	28 August 2026
Report Author:	Melanie O'Rourke

1 Purpose of the Report

1.1 To provide HASC with a summary of the ASC Strategy public consultation, the impact of the feedback and accompanying Delivery Plan.

2 Recommendations

2.1 For HASC to provide feedback on the Delivery Plan.

2.2 For HASC to determine how to monitor the progress of the Delivery Plan.

3 Implications and Impact Assessment

Implication	Commentary
Financial:	Implications can broadly be managed within the existing budget. Progress associated with “Priority 2: Helping Young People Move into Adult Life Smoothly” will be subject to investment.
Human Resource:	Implications can be managed within existing staffing establishment.
Legal:	The Strategy will support ongoing delivery of statutory functions.

Risk Management:	The Strategy will help to manage organisational risk.			
Property:	N/A			
Policy:	Related policies and national guidance include: NHS 10-year plan CQC Assurance Care Act 2014			
	Positive	**Neutral**	**Negative**	**Commentary**
Equalities Impact:				
A Are there any aspects of the proposed decision, including how it is delivered or accessed, that could impact on inequality?	x			The strategy relates to all adults over 18 years who may have support needs irrespective of their background. ASC ensures equality of access to advice, signposting, guidance and support. The priorities within the strategy intend to support all communities and individuals in line with statutory duties.
B Will the proposed decision have an impact upon the lives of people with protected characteristics, including employees and service users?	x			Social Care practice is underpinned by a strengths-based, person-centred approach that is unique to everyone. Protected characteristics will continue to be explored with everyone to ensure no detrimental impact is experienced.
Environmental Impact:		x		None

Health Impact:	x			Priority 4. 'Work Better with our Partners' will ensure that ASC work with NHS colleagues across different disciplines to support people holistically. It will also strengthen prevention and early intervention through integrated neighbourhood teams.
ICT Impact:		x		No Impact.
Digital Services Impact:		x		Digital innovation will be delivered collaboratively with relevant colleagues.
Council Strategy Priorities:		x		
Core Business:	x			There will be a shift of priorities to reflect the updated strategic position.
Data Impact:		x		No Impact.
Consultation and Engagement:	A 60-day consultation period has been undertaken to capture the views and suggestions from a wide range of people.			

4 Executive Summary

4.1 This report provides a summary of the findings from the 60-day public consultation on the Adult Social Care (ASC) Strategy 2026–2030 and outlines the proposed next steps prior to finalisation.

4.2 The ASC Strategy sets out six key priorities to guide service delivery over the next three years, aligned to national policy, Care Quality Commission (CQC) assurance requirements, and local needs. The consultation was undertaken to ensure that the strategy reflects the views of West Berkshire residents, people who use services, carers, partners, and staff.

4.3 A total of 88 responses were received, including a significant proportion from ASC staff (34%), alongside carers and members of the public. Respondents were predominantly West Berkshire residents (89%), with the largest age group aged 65–79.

4.4 Overall, feedback on the proposed priorities was positive. Most respondents felt that the priorities were clear (57–70%) and important (71–83%). However, there were areas where respondents expressed uncertainty, particularly in relation to transition support for young people and the role of technology in care.

4.5 Qualitative feedback identified several consistent themes across the priorities:

- A strong emphasis on reducing waiting times and improving timely access to support.
- The need for earlier intervention and a greater focus on prevention and independence.
- A clear expectation for stronger multi-agency and multidisciplinary working.
- The importance of supporting people to remain living independently at home.
- Calls for clearer delivery plans, transparency, and understanding of available services.
- Mixed views on the use of technology, including concerns about accessibility, privacy, and impact on human contact.
- The need to strengthen transition arrangements for younger adults moving into adult services.

4.6 Respondents were supportive of co-production, with several expressing interest in ongoing involvement; eight individuals have volunteered to support the development of the Delivery Plan.

4.7 In conclusion, the consultation confirms broad support for the strategic direction, alongside clear expectations for how the priorities should be delivered. The final ASC Strategy reflects this feedback and will be supported by a comprehensive delivery plan and governance framework to ensure measurable delivery, continued engagement, and improved outcomes for residents.

5 Supporting Information

Introduction

5.1 An Adult Social Care Strategy is not a statutory requirement; however, it is vital for ASC to articulate its Strategic position to be clear on our priorities and ensure that staff ASC work cohesively with a common goal. The Strategy is linked to the Care Quality Commission Assurance guidance and will complement the Market Position Statement and the Workforce Plan as well as anticipated drivers over the next 3 years.

Background

5.2 The draft ASC Strategy was presented to Executive on 31 03 26 with a view that a public consultation period should be undertaken to capture the views of the residents of West Berkshire.

5.3 The consultation was made publicly available on our website, through consultation finder, through the citizen portal, and more directly to stakeholder groups as well as internal staff. Information was also shared in public buildings including libraries, leisure centres, health and voluntary sector buildings and with Town and Parish Councils.

5.4 The final strategy is accompanied by a detailed Delivery Plan which provides details of how the priorities will be achieved.

5.5 Findings from the consultation:

5.5.1 Respondent's Profile

88 people responded to the consultation. 34% of which were members of staff within Adult Social Care. The second highest cohort of respondents were 'other' which included people that currently do not have services and people who know someone with services. The third highest group was Carers.

5.5.2 Consultation demographic profile of respondents.



57% of respondents were female



89% of respondents live in West Berkshire



Largest group of respondents were between 65 - 79



55% reported NO disability or long-term condition



89% White (English, Welsh, Scottish or Northern Irish)

5.5.3 Question 1: Do you think the priorities are clear?

Most respondents felt that the priorities were clear. Each priority was rated for clarity, and the range was between 57% and 70%. The lowest rating related to "Helping young people move into adult life smoothly", where 35% of people didn't know if the priority was clear.

5.5.4 Question 2: Do you think the priorities are important to adults with care and support needs?

Most respondents agreed with this statement ranging between 71% and 83%. The lowest score relating to "Using technology to help people live independently".

5.5.5 Qualitive feedback

This has been weighted with the first being the strongest theme from responses.

Priority 1: Making Sure People Get High-Quality Support

- Waiting lists are too long.
- Need to support people earlier.

- There needs to be a detailed delivery plan.
- Need to see multi professionals working together.
- Need to help people to remain in their own home.
- Would be helpful to know what ASC do and don't do.
- More reablement and independence.
- Help people maintain and improve physical wellbeing.
- Where is the money for this?

Priority 2: Helping Young People Move into Adult Life Smoothly

- More support is needed.
- Needs to vastly improve [transitions] for people to live productive lives.
- Need to support people at any earlier stage. 17.5 is too late. It can feel like a cliff edge both at 18 and 25.
- Need to help people become independent / use reablement approach.
- ASC need more understanding of ADHD.
- There needs to be a detailed delivery plan.

Priority 3: Using Technology to Help People Live Independently

- This makes sense a good idea.
- Could take away from human contact.
- It helps me to be independent.
- Should be provided free of charge.
- Will not work for everyone e.g. People with dementia, people with poor connectivity.
- Staff training needed.
- Intrusion on privacy.

Priority 4: Working Better with Our Partners

- Good idea.
- Multi-Disciplinary Team working need to be more focused.
- Would stop repeating myself.
- More detail needed.

Priority 5: Providing the Right Support, in the Right Place, at the Right Time

- Waiting lists.
- Good idea.
- Need Home from Hospital approach.
- ADHD needs to be catered for.
- Local support is best.
- A clear strategy.
- Younger adults shouldn't have to live in an older person's nursing home.

Priority 6: Designing Services Together with Local People

- Love the co-production element.

- Who do you choose?
- People who self-fund get the least help.
- Need to make it impactful.

5.5.6 Survey responses enabled the voice of people to identify the areas of greatest importance to inform the Delivery Plan. The key areas of importance included; waiting lists; helping people to remain in their own home, provision of supported living to people of working age, and support at an earlier stage for people transitioning to adulthood.

5.5.7 Respondents were invited to be involved in the development of the Delivery Plan (Appendix C) to ensure that views of people with lived experience and interested parties could influence the approach needed to deliver the 6 priorities.

6 Other options considered

6.1 Do nothing. This is not recommended as it will leave ASC with a lack of direction to continue on a journey of improvement and development.

7 Conclusion

7.1 The ASC Strategy will provide clear guidance to ASC services, internal departments and stakeholders of the priorities as well as transparency to the people we support.

7.2 The Strategy is complemented by a detailed Delivery Plan and robust governance to ensure delivery of the priorities.

7.3 Governance will be managed through the ASC Directorate Management Team quarterly, and periodic updates to Partnership Boards to ensure visibility of progress and to gain feedback on progress.

8 Appendices

8.1 Appendix A – Equalities Impact Assessment

8.2 Appendix B – ASC Strategy

8.3 Appendix C – Delivery Plan

Subject to Call-In:

Yes: ☐ No: ☒

The item is due to be referred to Council for final approval ☐

Delays in implementation could have serious financial implications for the Council ☐

Delays in implementation could compromise the Council's position	☐
Considered or reviewed by Scrutiny Commission or associated Committees, Task Groups within preceding six months	☒
Item is Urgent Key Decision	☐
Report is to note only	☐

Wards affected: (All Wards)

Officer details:

Name: Melanie O'Rourke
Job Title: Service Director - Adult Social Care
Tel No: 01635 503499
E-mail: melanie.orourke1@westberks.gov.uk

Appendix A

West Berkshire Council
Equity Impact Assessment

August 2026

Contents

Section 1: Summary details....9
Section 2: Detail of proposal....10
Section 3: Impact Assessment - Protected Characteristics....12
Section 3: Impact Assessment - Additional Community Impacts....14
Section 4: Review....15

Section 1: Summary details

Directorate and Service Area	Adult Social Care
What is being assessed (e.g. name of policy, procedure, project, service or proposed service change).	Adult Social Care Strategy 2026 – 30

Is this a new or existing function or policy?	This is revised version of an Adult Social Care Strategy that was in place between 2022 – 2026.
Summary of assessment Briefly summarise the policy or proposed service change. Summarise possible impacts. Does the proposal bias, discriminate or unfairly disadvantage individuals or groups within the community? (following completion of the assessment).	The strategy reflects the approaches and priorities for ASC over the next 3 years. The priorities are in response to the local and national picture to allow ASC to respond, develop and improve both the approach we take and the services we offer to vulnerable adults. The strategy will not discriminate and continues to ensure we support all communities in West Berkshire
Completed By	Melanie O'Rourke
Authorised By	Paul Coe
Date	**26 08 26**

Section 2: Detail of proposal

Context / Background Briefly summarise the background to the policy or proposed service change, including reasons for any changes from previous versions.	The previous strategy runs out in 2026. This revised version reflects on achievements from the original strategy and describes the priorities for the new strategy drawing on national and local priorities.

Proposals Explain the detail of the proposals, including why this has been decided as the best course of action.	The proposed priorities draw on key drivers to ensure that ASC is fit for the future and able to respond to national and local priorities aligned also to our CQC requirements. This includes: Ensuring that the services we commission move away from traditional models, they are value for money and data driven approaches. Greater use of technology to enhance independence for individuals and efficiencies for our workforce. Ensure that we are empowering the residents of West Berkshire and people with lived experienced to coproduce future developments.
Evidence / Intelligence List and explain any data, consultation outcomes, research findings, feedback from service users and stakeholders etc, that supports your proposals and can help to inform the judgements you make about potential impact on different individuals, communities or groups and our ability to deliver our climate commitments.	ASCOF data, Care Director data, JSNA have all been interrogated to ensure that we are reaching all communities.
Alternatives considered / rejected Summarise any other approaches that have been considered in developing the policy or proposed service change, and the reasons why these were not adopted. This could include reasons why doing nothing is not an option.	None, it is important for ASC to have a strategy, under which a detailed plan can be developed to create clear deliverables.

Section 3: Impact Assessment - Protected Characteristics

ASC Strategy post consultation outcome and Delivery Plan

Protected Characteristic	No Impact	Positive	Negative	Description of Impact	Any actions or mitigation to reduce negative impacts	Action owner* (*Job Title, Organisation)	Timescale and monitoring arrangements
Age	☐	x	☐	By removing the traditional models of commissioned services we can ensure that services are appropriate for individuals needs.		Service Director ASC. Service Lead Commissioning and procurement.	Throughout the life of this strategy. Monthly monitoring on progress.
Disability	☐	x	☐	By removing the traditional models of commissioned services we can ensure that services are appropriate for individuals needs.		Service Director ASC. Service Lead Commissioning and procurement.	Throughout the life of this strategy. Monthly monitoring on progress.
Gender Reassignment	x	☐	☐				
Marriage & Civil Partnership	x	☐	☐				
Pregnancy & Maternity	x	☐	☐				
Race	x	☐	☐				
Sex	x	☐	☐				
Sexual Orientation	x	☐	☐				

Religion or Belief	x	☐	☐				

Section 3: Impact Assessment - Additional Community Impacts

Additional community impacts	No Impact	Positive	Negative	Description of impact	Any actions or mitigation to reduce negative impacts	Action owner (*Job Title, Organisation)	Timescale and monitoring arrangements
Rural communities	☐	x	☐	The ASC Strategy implementation will ensure that all communities are able to access Adult Social Care.			
Areas of deprivation	☐	☐	☐				
Displaced communities	☐	☐	☐				
Care experienced people	☐		☐	A multi-disciplinary approach to care and support to aid independence and reduce likelihood of unnecessary hospital admissions.		Service Director Adult Social Care	For the duration of the Strategy, monitored through the Locality Integration Board.
The Armed Forces Community	x	☐	☐				

Section 4: Review

Where bias, negative impact or disadvantage is identified, the proposal and/or implementation can be adapted or changed; meaning there is a need for regular review. This review may also be needed to reflect additional data and evidence for a fuller assessment (proportionate to the decision in question). Please state the agreed review timescale for the identified impacts of the policy implementation or service change.

Review Date	**Annually**
Person Responsible for Review	**Melanie O'Rourke, Service Director Adult Social Care**
Authorised By	**Paul Coe**

EDI employee related EQiAs should now be sent to Human Resources hrenquiries@westberks.gov.uk.

This page is intentionally left blank

Adult Social Care Strategy 2026–2030















Supporting people to live well, stay independent and thrive in our communities.

West Berkshire Council

Contents

Foreword	3
1. How This Strategy Was Developed	4
2. What is Adult Social Care?	4
3. Looking Back: Our 2022 – 2026 Strategy	5
4. Looking forward, the National Picture	6
5. Our Community	7
6. Adult Social Care: 2024/25 At a Glance	7
7. Our Priorities for 2026 – 2030	6
9. A Strategy for Everyone	10



Foreword
from the Portfolio Holder for Adult Social Care

Adult Social Care supports the lives of thousands of people in West Berkshire every year. It supports older residents, adults with disabilities, people with mental health needs, carers, families, and communities. At its heart, it is about enabling people to live the lives they choose, with dignity, independence, and connection. I am proud to introduce this Adult Social Care Strategy for 2026–2030, which sets out how we will continue to deliver on that commitment.

Over the past few years, our services have faced significant pressures. Demand has grown as more people live longer with complex needs, and the expectations placed on local authorities have continued to evolve. Despite these challenges, our teams have worked tirelessly to provide high quality support, and our **GOOD** rating from the Care Quality Commission reflects their dedication and professionalism.

This strategy builds on that solid foundation. It has been shaped through engagement with staff, partners, and people with lived experience, and it reflects both local priorities and national reforms. It sets out a clear vision for the future: one where people receive support earlier, where independence is promoted at every opportunity, and where services are joined up, modern, and responsive.

We are ambitious about what we want to achieve. We will strengthen our approach to prevention, improve the experience of young people moving into adulthood, expand the use of Technology Enabled Care, and work closely with our NHS and voluntary sector partners to support people with the most complex needs. We will also continue to modernise our services, ensuring they are sustainable, high quality and designed around what matters most to the people who use them.

Most importantly, this strategy places **people** at the centre. We are committed to co production, to listening and learning, and to collaborating with residents and carers to shape the future of Adult Social Care in West Berkshire.

I want to thank everyone who contributed to the development of this strategy, and all those who deliver care and support every day. Your work makes a profound difference to the lives of local people.

Together, we will continue to build a system that is compassionate, resilient, and focused on helping every person in West Berkshire to live well.



Cllr Patrick Clark

Portfolio Holder for Adult Social Care.

1. How This Strategy Was Developed

This strategy has been shaped through a collaborative process involving staff, partners, and local people. It was developed in five stages:

- Work by the Adult Social Care Senior Management Team
- Engagement with Executive Members and the Executive Director (People)
- Consultation with staff, partners, and stakeholders
- A public consultation using Consultation Finder reaching out to communities.
- West Berkshire Council's internal governance process
- Development of a detailed Action Plan to deliver the priorities

This approach ensures the strategy reflects local needs, national expectations, and the voices of people who draw on care and support.

2. What is Adult Social Care?

Adult Social Care (ASC) describes the wide range of support available to adults who, due to age, disability, illness or other circumstances, need help to live independently, stay safe and maintain their wellbeing. This includes both formal services provided by the local authority and informal support offered by families, friends and the wider community.

Unlike the NHS, Adult Social Care is not free for everyone at the point of use. Most support is means tested, and whether someone receives publicly funded care depends on an assessment of their needs and financial situation, as set out in the Care Act 2014. Local authorities must also offer information, advice and preventative support to all residents, even if they do not qualify for funded care.

Adult Social Care plays a vital role in helping people remain independent, healthy and connected to their communities. It supports individuals and families, reduces pressure on hospitals and emergency services, and acts as an essential link between health care, community support and personal resilience.

Adult Social Care Includes

- Personal care and daily living support: Assistance with tasks such as washing, dressing, eating, taking medication and moving around safely.
- Community and social support: Access to day services, transport, befriending schemes and activities that help prevent loneliness and isolation.
- Reablement: Short term, focused support after illness, injury or a hospital stay to help people regain skills and independence.
- Residential and nursing care: Long term accommodation and support for people with significant or complex needs who cannot live safely at home.
- Support for carers: Practical and emotional help for unpaid carers, including respite, advice and financial support.
- Housing related support: Home adaptations, equipment, supported living options and extra care housing to help people remain independent.
- Safeguarding adults: Protecting people from abuse, neglect or exploitation and ensuring they are safe and supported.



3. Looking Back: Our 2022–2026 Strategy

Our previous strategy focused on modernising Adult Social Care. It included nine themes centred on:

- Improving digital tools and Technology Enabled Care (TEC).
- Strengthening communication.
- Reviewing our care home provision.
- Expanding our Shared Lives service.

What we achieved

- Magic Notes, an AI tool, is now helping practitioners record information more efficiently.
- A new digital financial assessment system has been introduced.
- Further TEC solutions are in development to help people remain independent at home.
- The West Berkshire Directory has been refreshed, offering clearer information and advice.
- A co-produced review of our webpages improved accessibility and clarity.
- The Community Wellness Outreach Project launched in 2025, offering free health checks to people at higher risk of poor health.
- A new Market Position Statement was published, reflecting rising complexity of need and increasing demand for services.
- Work is underway to transfer the Council's three care homes to external providers.
- Significant preparation has taken place for a new Electronic Client Record System, due to launch in Spring 2026.

4. Looking forward, the National Picture

Adult Social Care is shaped by national legislation, policy, and regulation. Key influences include:

3.1 Legislation

Our duties are set out in laws such as the Care Act 2014, Mental Capacity Act 2005, and Mental Health Act 1983 and Human Rights Act 1998. These define people's rights and our responsibilities.

3.2 Demographic Change

People are living longer, often with more complex needs. This increases demand for care and support and places pressure on local services.

3.3 Public Understanding

Many people only encounter Adult Social Care at a point of crisis. This can lead to confusion about what support is available and how it is funded.

3.4 CQC Assurance

In 2024, the Care Quality Commission assessed West Berkshire and rated us GOOD across four areas:

- Working with people.
- Providing support.
- Ensuring safety.
- Leadership.

All councils will be assessed by 2026, after which a new national model is expected.

3.5 NHS 10 Year Plan (2025)

The plan emphasises:

- Closer integration between health and social care.
- A stronger, skilled workforce.
- Digital transformation.
- Prevention and early intervention.

Integrated Neighbourhood Teams will bring professionals together to support people in their communities.

3.6 Liberty Protection Safeguards

A national consultation in 2026 will shape the future of LPS, aiming to simplify processes and reduce duplication.

3.7 Independent Commission into Adult Social Care

A national commission, chaired by Baroness Louise Casey, will report by 2028 on:

- Proposals for a National Care Service.
- Long term funding.
- System reform.
- A future model of care.

3.8 National Priorities for 2026–2027

The government has set three priority outcomes:

1. High quality care delivered by a skilled workforce.
2. Support that promotes independence, choice, and control.
3. Joined up health and social care at neighbourhood level.

5. Our community

West Berkshire is home to **165,112** people *(ONS 2021)*, expected to rise to **169,853** by 2047.

- **51%** female, **49%** male.
- **61%** aged 16–64.
- **20%** aged 65+.
- **88%** born in the UK.
- **1.2%** born in the Middle East or Asia.
- **12%** born outside of the UK.

These demographics shape the type and level of support our community needs.

Data has been sourced from the public health observatory.



6. Adult Social Care: 2024/25 At a Glance.

People who requested support.

Out of 4400 requests for support.

92% received information, advice, or practical support.

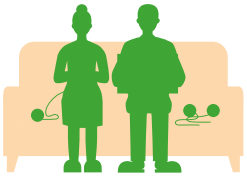
3% received short term or emergency help.

5% of new people to ASC went on to receive long term support in the community.



We supported:

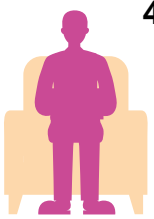
1,888 people receiving long term care



1,397 supported in the community

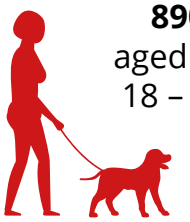


491 in residential or nursing care



As of December 2025

Overall, **2460** people received long term support during 2024 / 25



890 were aged between 18 – 64 years

1,570 were aged 65 or over



We received **1300** referrals to support people to leave hospital. **91%** were aged 65 or over



828 carers were supported



178 people had an urgent Mental Health Act Assessment



237 people were supported to manage their financial affairs through the Deputyship Team



Data has been taken from the Adult Social Care Outcomes Framework and locally sourced data.

Areas we do well on:

- Carers reporting a good quality of life.
- Overall satisfaction of carers with social services.
- The proportion of people who receive long-term support who live in their home or with family, aged 18 – 64.
- Proportion of carers who report that they have been included or consulted in discussions about the person they care for.
- The proportion of S42 Safeguarding enquiries where a risk was identified, and the reported outcome was that this risk was reduced or removed.
- The proportion of people who use services and who reported that they have as much social contact as they would like (services users).
- The proportion of staff in the formal care workforce leaving their role in the past 12 months is low.
- The percentage of residential adult social care providers rated good or outstanding by CQC.

Areas we need to improve upon:

More people's reablement outcomes:
62.8% (England average 77.1%)

Support people to receive a Direct Payments to allow them to arrange their own care:
12% (England average 24.5%)

7. Our Priorities for 2026–2030

Our priorities reflect areas where we want to improve, alongside national reforms and local needs.

Priority 1: Making Sure People Get High Quality Support

We want everyone to get timely, helpful support that makes a real difference to their daily life.

We will:

- Support people earlier, reducing waiting times.
- Provide clear advice and signposting to help people stay independent.
- Co produce care and support plans with individuals and carers.
- Adopt a "Waiting Well" approach for anyone awaiting assessment.
- Increase the number of people choosing Direct Payments to give them more control.
- Improve our performance on annual reviews.

Priority 2: Helping Young People Move into Adult Life Smoothly

We will support young people and their families early so the move from children's services to adult services is clear, calm and well planned.

We will:

- Work with young people and families earlier.
- Provide clear information about the transition into adult services.
- Ensure support is proportionate and focused on developing independence.

Priority 3: Using Technology to Help People Live Independently

We will use simple, smart technology—like home sensors and digital tools—to help people stay safe and independent for longer.

Digitalisation

We will continue to use digital tools, including AI, to support efficient and accurate case recording.

- We will implement a new case recording system.

Priority 4: Working Better with Our Partners

We will join up our work with the NHS, voluntary groups and others so people don't have to repeat their story and can get more coordinated support.

We will:

- Establish a West Berkshire Safeguarding Adults Board.
- Work with the NHS to develop multi disciplinary support for people with the most complex needs.
- Strengthen prevention and early intervention through Integrated Neighbourhood Teams.

Priority 5: Providing the Right Support, in the Right Place, at the Right Time

We'll make sure the services people need are available locally, modern, and suitable for different types of needs.

Using the Market Position Statement and Joint Strategic Needs Assessment, we will ensure people can access high quality, modern services through a strategic partnership with providers.

Key areas include:

- Affordable care home beds and extra care housing.
- More supported living for people with learning disabilities and mental health needs.
- Short term crisis, respite, and step down accommodation.
- Technology enabled solutions for adults with physical disabilities.
- Modernising support for people with learning disabilities and / or autism.
- Ensure there is a resilient equipment service is in place.
- Effective budget management to ensure that services are value for money.

Priority 6: Designing Services Together with Local People

We'll listen to residents, carers and people with lived experience and work with them to shape future services.

We will collaborate with people with lived experience, carers, partners, and the wider public to:

- Shape strategies
- Learn from feedback.
- Improve services.
- Respond to complaints and audits.

Co production will be central to how we design and deliver support.

8. A Strategy for Everyone

This strategy sets out our commitment to supporting people to live well, stay independent and feel connected to their community. It reflects our ambition to deliver high quality, person centred care in partnership with local people and organisations.



WBC/ASC/MO/0426

Adult Social Care Strategy 2026 / 30
Delivery plan

This document outlines a comprehensive delivery plan for the ASC Strategy from 2026 to 2030, focusing on improving quality, transitions, technology use, partnerships, and service design to enhance support for individuals.

• High-quality support delivery: The strategy aims to ensure timely, effective care with reduced waiting times for assessments, active participation in care planning, and maintaining good ratings for care providers and internal care homes. It promotes strength-based conversations to resolve issues promptly.

• Smooth transition for young people: Emphasis is placed on early engagement with young adults and families to support their move into adult life, focusing on independence goals, reducing out-of-area placements, and creating clear transition pathways to prevent abrupt changes at ages 18 and 25

• Technology to support independence: Introduction and evaluation of Technology Enabled Care (TEC) options like Howz, Vocala, and Robopets aim to assist independent living. The use of AI tools for timely documentation and exploration of self-service options to reduce reliance on adult social care are key components.

• Collaborative and person-centred service design: The strategy promotes working closely with partners including NHS and voluntary sectors, engaging communities and forums, and incorporating feedback from people with lived experience to design accessible, local, and integrated services. Safeguarding vulnerable adults remains a priority.

Priority one: Making Sure People Get High-Quality Support

"We want everyone to get timely, helpful support that make a real difference to daily life"

What	Measure	KPI	Lead officer	Anticipated start date	Anticipated completion date	Q1 Outturn position (KPI) and RAG	Q1 Comments	Q2 Outturn position (KPI) and RAG	Q2 Comments	Q3 Outturn position (KPI) and RAG	Q3 Comments	Q4 Outturn position (KPI) and RAG	Q4 Comments
People receive good quality care	Providers rated good or above. Care Quality team do not have concerns	People who are supported in care provision that is Good or above captured on a quarterly basis	Commissioning	01 10 26									
Shorter waits for assessments.	Waiting lists are reduced 1st phase project to address the longest waits People who only need items of equipment will be supported through Millbrooks Trusted Assessors for a quicker response	# of people on waiting list as a snapshot # of people who are supported through Trusted Assessor	Service Manager Localities BCES Commissioner	01 10 26	30 04 27								
People have an improved experience of their annual reviews	All relevant people are invited and participate. We will audit our work to ensure that we achieve this objective	Annual audit	Service Manager Localities / Principal Social Worker	01 08 26									
People are active participants in their care and support planning. The voice of the person is evident in support planning	We will audit our work to ensure that we achieve this objective	Annual audit (combined with above)	Service Manager Localities / Principal Social Worker	01 10 26									
Quality and Monitoring Officer oversee practice within our care homes.	Our internal care homes receive a CQC rating of GOOD or above upon inspection	100 % of homes are Good or above	Service Manager Responsive Services	01 10 26									
Promote Strength based conversations when people contact ASC to resolve issues immediately without the need to wait for intervention	Reduction of new people having to wait for services	# of people on waiting list as a snapshot	Service Lead / Service Manager Localities / Principal Social Worker	Ongoing									

Priority Two: Helping Young People Move into Adult Life Smoothly

What	Measure	KPI	Lead officer	Anticipated start date	Anticipated completion date	Q1 Outturn position (KPI) and RAG	Q1 Comments	Q2 Outturn position (KPI) and RAG	Q2 Comments	Q3 Outturn position (KPI) and RAG	Q3 Comments	Q4 Outturn position (KPI) and RAG	Q4 Comments
We will work with young adults and families at an earlier stage to assist in the journey to adulthood.	During the life of the strategy the Transitions Team will move to supporting people from 17.5 years to 16 years	# allocated at age 16 years.	Service Manager Localities	01 04 27									
There will be a greater focus on creating goals towards independence in support plans, which is supported through Occupational Therapy (subject to successful bid) People access services where goals are a focus e.g. cooking skills.	Goals are achieved. Less support is needed	Case file audit to demonstrate reduction in long term need	Service Manager Localities	01 04 27									
People can access resources locally	Fewer out of area placements	Decrease in number of people placed out of area. # of people who are supported in Travellers Friend SL.	Commissioning	01 04 27									
Young people and their carers do not feel like they are falling off a cliff edge at age 18 and 25	Clear Transitions pathways are created.	Pathway in place	Transitions and Review Manager	01 04 27									
Dedicated Management support enables practitioners to have focused support and leadership.	Create a dedicated Transitions and Reviews Manager.	Subject to staff consultation	Service Director ASC	22 09 26	31 12 26								

Priority Three: Using Technology to Help People Live Independently

What	Measure	KPI	Lead officer	Anticipated start date	Anticipated completion date	Q1 Outturn position (KPI) and RAG	Q1 Comments	Q2 Outturn position (KPI) and RAG	Q2 Comments	Q3 Outturn position (KPI) and RAG	Q3 Comments	Q4 Outturn position (KPI) and RAG	Q4 Comments
New Technology Enabled Care (TEC) options are provided to assist people to live independently.	Howz and Vocala projects are implemented	Under development through the TVI Project Board	Service Manager Responsive Services	01 10 26									
Evaluation of Robopets to be undertaken	Evaluation will determine the efficacy of the TEC and whether there should be continued investment	Evaluation completed and decision made as to the future of the service.	Project Officer (TEC)										
People will receive timely records of assessments, reviews and support plans	Practitioners will use AI tools to ensure that records are completed in a timely way.	New procurement exercise is completed, and AI solution is in place.	Transformation team	01 04 27									
Opportunities will be considered to create self-service options for people to create less reliance on ASC	People can access more independent from ASC.	Mosaic Phase 2	Transformation team										

Priority Four: Working Better with Our Partners

What	Measure	KPI	Lead officer	Anticipated start date	Anticipated completion date	Q1 Outturn position (KPI) and RAG	Q1 Comments	Q2 Outturn position (KPI) and RAG	Q2 Comments	Q3 Outturn position (KPI) and RAG	Q3 Comments	Q4 Outturn position (KPI) and RAG	Q4 Comments
Deliver the NHS 10-year objective of Neighbourhood Integrated Care	Multi-Disciplinary Team meetings are scheduled with a focus on preventative interventions	Neighbourhood plan to be signed off by April 2027.	Service Lead Integration and Health										
Work with Oxfordshire to determine the model of ASC in the new to be formed Ridgeway Council.	Plans are clearly in place to retain service levels.	Clear, articulated plan is signed off by the Shadow executive	Executive Director Service Director	01 09 26	01 04 28								
Delivery services that are right for local people	Engage with service providers to shape the services needed through Provider Forums and Meet the Buyer events	ASC attend all provider forums	Service Director / Service Leads	01 04 26	Ongoing		Provider Forum attended		Meet the Buyer attended				
The Safeguarding Adults Board will work collaboratively with partners to ensure the safety of vulnerable adults within West Berkshire	Annual SAB report will evaluate the impact of the board.	Annual report	SAB Business Manager	01 04 2027									Report to be prepared

Priority Five: Providing the Right Support, in the Right Place, at the Right Time

What	Measure	KPI	Lead officer	Anticipated start date	Anticipated completion date	Q1 Outturn position (KPI) and RAG	Q1 Comments	Q2 Outturn position (KPI) and RAG	Q2 Comments	Q3 Outturn position (KPI) and RAG	Q3 Comments	Q4 Outturn position (KPI) and RAG	Q4 Comments
Care and support will focus on maintaining or gaining independence Care is focused on achieving goals of independence	Following completion of Reablement, 70% of people do not require any ongoing care or support services Staff are trained to be focused on goals and achievements.	70%	Service Lead, Health and Integration	01 04 26									
Supported Living options are prioritise over residential care for people with Learning Disabilities and or Autism	Reduction in Residential Care for people with Learning Disabilities and or Autism	Reduction in residential placements as a proportion of supported provided to people 18 – 64 Learning Disability.	ASC Commissioning	01 10 26									
We will improve the experience and accessibility of Direct Payments to offer greater choice	Number of people in receipt of Direct Payments increases	190	Service Lead, Client Financial Services and Localities	01 10 26									
Care and Support is provided in the least restrictive way	Following the AGNI High Court Ruling there will be less people who are subject to a Deprivation of Liberty	Awaiting national guidance to determine KPI	Service Manager Safeguarding	02 06 26									
People can remain in their own home wherever possible	Reduction in number of people who require a care home placement (including home first approach)	Reduction in care home placements as a proportion of over 65's	Service Lead for Health and Integration	01 10 26									
Staff are well trained and competent to provide high-quality support	We can retain our staff through delivery of the Workforce Strategy which will address retention of staff through effective training, strong leadership support and career development	Workforce strategy signed off. Annual Training Needs Analysis and plan. Progression criteria completed and implemented.	Principal Social Worker Training Officer Principal SW Principal OT										
People can access community activities.	The directory is up to date with all available options and ASC promote the options available.	Captured through statutory survey. Capture through local survey	Service Manager Localities Quality Assurance Manager	01 10 26									
People are aware of the services ASC can offer and where other organisations would be the right service	Webpages to be updated to include links to alternate provision e.g. memory clinic's.	Capture through local survey	Information Officer	01 10 26									

Priority Six: Designing Services Together with Local People

What	Measure	KPI	Lead officer	Anticipated start date	Anticipated completion date	Q1 Outturn position (KPI) and RAG	Q1 Comments	Q2 Outturn position (KPI) and RAG	Q2 Comments	Q3 Outturn position (KPI) and RAG	Q3 Comments	Q4 Outturn position (KPI) and RAG	Q4 Comments
We will ensure that we gain views of people with lived experience when updating our website or leaflets	All webpages and leaflets are designed together with people with lived experience	Where there are material changes people with lived experience are involved in the creation of content	Information Officer	01 10 26									
We will learn from all feedback mechanism	Trends and Themes will be captured from all feedback loops. Including, Feedback forms, Complaints, Compliments,	Quarterly and Annual complaints report. Feedback forms are analysed for themes which are disseminated to teams.	Quality Assurance Manager, Principal Social Worker	01 10 26									
We will actively engage with forums and groups	Attendance at Carers Forum, LD Forum, Autism Forum	Attendance all groups	Members of ASC Management Team	01 10 26									
We will work with Public Health and the NHS in the design of Integrated Neighbourhoods	Healthwatch will have completed a series of community-based sessions to capture views	Outcome of Healthwatch activity and feedback	Director of Public Health	01 10 26									
Understand the impact of the Vocala and Howz Technology Enabled Care	Surveys to people who receive the TEC and staff will be surveyed to evaluate the impact.	Outcome of survey which will form the projects evaluation	Service Manager Responsive Services	01 10 26									
Listen to views from communities through “Let’s Talk”	Questions and feedback are shared with ASC and acted upon.	Number of enquiries forwarded to ASC.	Community Coordinator (Engagement) Building Communities Together	01 10 26									

This page is intentionally left blank