

Meeting:	Combined Executive Member Decision Session
Meeting date:	2 June 2026
Report of:	Sara Storey, Corporate Director of Adult Social Care and Integration
Portfolio of:	Councillor Steels-Walshaw, Executive Member for Health, Wellbeing and Adult Social Care

Decision Report: Occupational Therapy and Social Work Assessment and Review Programme

Subject of Report

1. Adult Social Care currently have a waiting list for Care Act assessments, including initial assessments, carers assessments, safeguarding investigations, Deprivation of Liberty Safeguard (DoLS) authorisations, occupational therapy assessments, sensory assessments, financial assessments, and reviews. This report proposes options available to address the waiting list ensuring the service is assessing individuals in a timely manner and taking every opportunity to prevent, reduce and delay the need for adult social care.
2. This report includes a recommendation to award an external contract to appoint a supplier following the completion of a framework mini-competition exercise.
3. The Care Act 2014 places a statutory duty on the council to undertake assessments and reviews for residents of York who have an appearance of need. The act is silent on timescales and waiting lists, leaving the judgement about appropriate timescales for the most part to local authorities to decide. The recent CQC report however identified waiting times as a challenge that does need to be resolved, and this was an issue raised as part of the s50 notification made to the Secretary of State.

4. The council was assessed as failing to deliver one or more aspects of the following duties to an acceptable standard: - assessment of needs; carers assessment; determination of eligibility; care and support planning; market shaping and sustainability; preventing needs for care and support; promoting wellbeing; cooperation between authorities; prevention; promoting wellbeing; safeguarding enquiries.

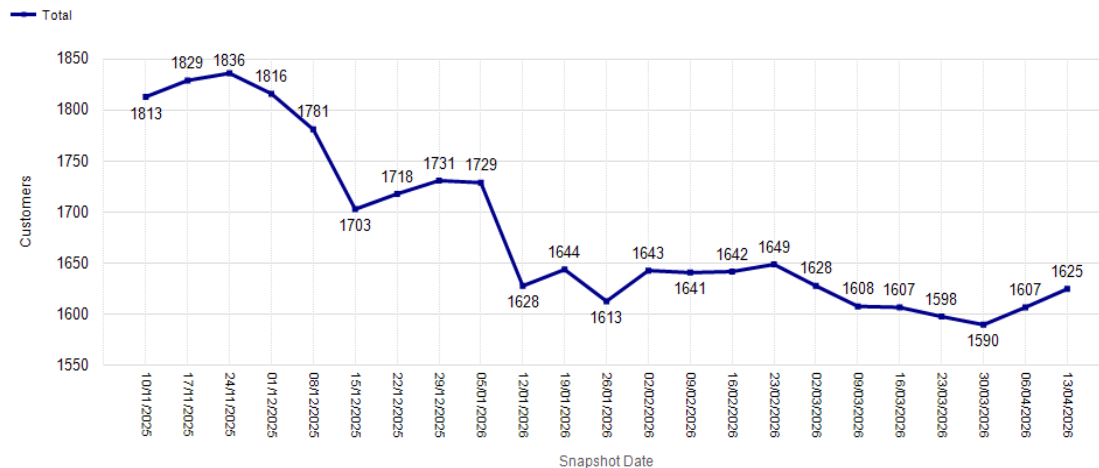
Benefits and Challenges

5. The council's overall aims are:
 - To reduce delays and improve timescales for assessments and plans for new people.
 - To increase capacity to pro-actively and more frequently review existing people.
 - To reduce failure demand associated with reactive responses and delays.
 - To develop and apply strengths based and preventive approaches to reduce the level of needs.
 - To develop new models of triaging and managing initial enquiries/referrals for/from adults to reduce the number of people who require full assessment.
 - To better support carers who are providing informal care.
6. The council has a statutory duty to deliver best value - the optimum combination of efficiency, effectiveness (quality of outcomes) and economy. CYC through this programme of assessments can identify a reduction to the number of people requiring a full assessment and also reduce the total long term spend on care and support. This will be achieved in a number of ways:
 - Reducing delays that cause increased need and crisis responses which are usually more costly.
 - Focusing on a strengths-based approach to all assessments and plans to provide a lower level of support.
 - Applying earlier intervention and prevention to reduce or delay needs for care and support.
 - Reviewing need more often to identify potential reductions to service provision through the offer of technology, equipment, community resources, and access to reablement.

7. Management and oversight of the current levels of risks associated with high waiting lists takes up a lot of management capacity and time, and adds stress to all roles, with concerns that urgent need may be missed. Reducing waiting times will be likely to reduce work related stress for staff and enable more time and capacity to be focused on to other areas of transformation and improvement work. In general, the larger the waiting list, the higher the risk that an urgent issue may be missed, and if very urgent needs are missed, or need has escalated while an individual is waiting, there can be a significant risk of harm occurring.
8. The s50 notification identifies an overall 'Medium' level of risk to people from the shortfalls. Risks related to assessment and support planning delays are noted by CQC as: - unmet needs; deterioration in health and wellbeing; increased risk of crisis; carers unsupported risking breakdown of informal care arrangements.
9. The service has undertaken work to quantify waiting lists, with the development of a weekly report that collates the risk rating applied to every single referral and subsequent episode of case work. This provides assurance about the triaging and prioritisation process and ensures that managers at all levels have a current view of risks for each team, each service area, and for each type of assessment; and that risk ratings are applied in a consistent way across the service.
10. Data cleansing has been on-going, and a number of focused changes have been introduced to seek to better manage workloads. This has included the use of temporary agency staffing in some key areas; seconded roles to a focused review team, to work through the longest waits for reviews; a new approach trialled in Learning Disabilities to managing duty; and contract management of individual contracts where third parties carry out some types of assessment.

- Despite these interventions, there is still a significant waiting list and although progress has been made, the trajectory for improvements has now levelled out. It is likely that in the longer term, the transformation work planned for the service will reduce referral rates in some key areas. The demand from waiting lists itself however is hampering ability to focus on transformation work. Without additional interim capacity, it is unlikely that further significant gains will be made.

Customers with unallocated assessments or reviews or DoLs referrals started, 10/11/2025 to 13/04/2026



- Work is also on-going in the service to establish a new target operating model, which will include a review of structure, capacity, capability and the number and balance of roles working in social care, all of which should be sufficient to meet the changing demands for social care support in the future. The model will include new workflows, use of digital, and the optimal balance of caseloads that both challenge staff but allow them sufficient time to work effectively.
- Development of this model is likely to take 12-18 months. In the interim, recruitment to temporary roles is extremely challenging; and use of one-off agency staffing is costly and leads to inconsistency of approaches. A phased approach to waiting list reduction is underway.
- Phase one of the approach is near completion with reports in place and data cleansing ongoing.

15. A strengths based review team model has also been tested, which has identified significant improvements in outcomes, reductions in need, and an overall reduction in associated spend where an OT led, strengths based approach is utilised. This team have undertaken reviews for people where the delays are very significant (42% were 4 or more years overdue). This project follows similar successful projects utilising these approaches in a number of other LA's. By June 2026, approximately 300 planned reviews will be concluded.
16. The financial impact of the planned review team is forecast as a saving of £465k in 2025/26 with approx. £137k being recurrent.
17. Aus-Toms (Therapy Outcome Measures) scores for 56 OT led reviews –
 - Capacity: how much someone's health condition might impact their ability to function - 64.5% of the people that had OT input were observed to have a positive clinically significant change
 - Participation: an individual's ability to overall participate in their chosen daily roles and routines - 63% of people, their ability to have choice and control over their daily roles and routines increased by a significant amount, no decreases observed.
 - Activity: measuring level of ability and difficulty within an activity. - 82% of people improved their goals around activity
 - Wellbeing: an individuals' level of concern about their situation. any decreases in wellbeing - 60% positive significant change.
18. The learning from the review team and from work in other LA's has informed the phase 2 plan, which is to commission an OT provider to deliver reductions to the waiting lists as a project approach, commissioned on a price per assessment basis. In York, traditionally OT's have not been utilised to carry out care act assessments, carers assessments and reviews; therefore, the skills and knowledge as well as capacity internally is not currently available.
19. This report follows work to carry out a procurement process, in order to test the market and identify if any specialist providers are available and can meet the request. It is now known that the market can deliver the assessments and reviews through an Occupational Therapy service offering an approach built on the social model of disability; and this paper seeks permission to award a contract.

20. City of York Council (CYC) are therefore proposing to award a contract to a specialist provider to undertake a specified number of reviews and assessments across Adult Social Care. At present this is anticipated to comprise in total approximately 1000 adults reviews/assessments, and occupational therapy assessments. A full implementation timetable is to be completed pending award of contract and mobilisation of the provider.
21. This contract would exclude financial assessments, sensory, DoLS, and safeguarding investigations.
- It is proposed that due to the ability to recruit staff to fixed term posts in the finance team, that improvement in the timescales for financial assessments can be achieved through a combination of BAU work and the introduction of an online financial self-assessment (a project in progress).
 - Sensory support is part of an external contract and commissioners are working with the provider on an improvement plan for those assessments and support.
 - Safeguarding waits are being addressed through prioritisation of this work internally; changes to process between the front door and safeguarding team; and a short-term increase in capacity through a secondment and agency use.
 - DoLS waits are currently managed utilising a national ADASS (Association of Directors of Adult Social Services) triage tool; some internal business improvement is in progress, however it is proposed that further improvements are assessed following the completion of care act assessment waiting list reduction (as these and reviews may indicate changes in the number of placements and therefore DoLS that the service manages).
22. **Benefits** of awarding a contract to a provider include but are not limited to, an opportunity to provide clear expectations on how assessments and support planning must be delivered with measurable standards to quality assure the work. The time scales to meet all the demands of the waiting list will be addressed within a 6 month period enabling statutory duties to be met at pace without impacting quality. Improved outcomes for people by taking a different approach that promotes independence, the use of assistive technology, prevents, reduces and delays the need for costly long term care.

23. The learning from a different approach to assessment will create an opportunity for the adult social care workforce to change the operating model of practice. The re-design of the front door is intended to take a 'can do' approach to supporting people when they make contact. This approach will reduce the number of people who are assigned to a waiting lists in the future. Allocating the waiting list outside of the current staffing resource allows time to begin and embed a culture change across the workforce that is outcome and performance driven that will deliver financial benefits.
24. The alternative would be to continue to monitor the waiting list allocating based on risk. This reduces the opportunity to offer early intervention that may reduce or delay the need for social care and cost more in the mid and longer term.
25. This project demonstrates potential for an invest to save approach as the short term investment enables the service to both meet statutory duties, and in a way that drives improved outcomes for people and longer term financial resilience for the service.

Policy Basis for Decision

26. Health inequalities and affordability - the reduction in delays will enable ASC to meet the social care and wellbeing needs of all adults with social care needs more quickly and more effectively, reducing inequalities compared to those adults who can afford to self-fund their care.

Financial Strategy Implications

27. If awarded the contract value would be set at a maximum cost of £400k but with no guarantee to the provider of any minimum amount. The actual contract value will depend on the number of assessments commissioned and it is proposed that the provider will be paid per assessment, rather than offered a total contract value up front. CYC would have the ability to pause/stop allocation of assessments to the provider at any time, should the outcomes delivered not be of sufficient quality, following a process to seek to improve that quality. The budget for this has been set aside from the £10.3m growth ASC were allocated at February's Budget Council.
28. This investment is intended to ensure that CYC can move to a position where all citizens awaiting a formal care act assessment will receive this within a 6 month period. The longer it takes to assess and support people in York the more likely that their needs are growing and the opportunity to prevent, reduce and delay the need for care could be missed. It will always be the case that some level of wait will be expected, and cases will continue to need to be triaged and risk rated for allocations.
29. There is a predicted initial short-term increase in costs as assessments are completed and lower level services are started for those people for whom need cannot be fully prevented or met through one off interventions. The change in the approach to assessment will however reduce the need for high cost care in the future and reduce the financial burden for CYC in the longer term.

Recommendation and Reasons

30. A procurement process has taken place through a suitable framework mini competition exercise that confirms that there is resource within the market to deliver adult social care assessments in a different way. It is recommended that CYC agree to award a contract. This will enable Adult Social Care to meet its statutory duties under the Care Act 2014. The approach will be strength based seeking to offer assistive technology and equipment prior to considering person led care and delivered through the lens of the social model of disability.

Background

31. The current number of people waiting at time of writing in scope of work for the external provider is 1223 and the longest wait is 636 days for a Care Act assessment, 370 days for a carers assessment and 1267 days for a planned review.
32. A procurement exercise has taken place through a suitable framework mini competition, where 4 tenders were received, each have been assessed against quality criteria. Evidence is available to demonstrate that the market can meet the specification taking a strength-based approach, preventing, reducing and delay the need for care; promoting independence and utilising the vast and diverse voluntary sector in York.

Consultation Analysis

1.

Options Analysis and Evidential Basis

33. **Option 1 – recommended.** To agree to procure an external agency to provide Care Act assessments, Reviews, Carers assessments and Occupational Therapy assessments.
34. The assessments will be Occupational Therapy led. Prioritising assistive technology, equipment, personal and community resilience to meet the needs of the people of York and mitigate the disabling impacts of a person's environment.
35. The procurement process and learning from other LA's has provided evidence that similar projects have taken place with positive outcomes. Success has been measured by meeting statutory responsibilities, preventing, reducing and delaying the need for care and significant financial savings were achieved.

36. Having external support will give the service more time and capacity to refocus a performance driven culture in the existing workforce, and to deliver transformational change which will in turn reduce overall demand. This includes the capacity to develop a new target operating model, with an evidence based and right-sized workforce model.
37. **Option 2** – not recommended. To continue to support the workforce to adopt a different approach, whilst continuing to manage the workload, risks, and demands. This approach will be much slower and the opportunity to prevent, reduce and delay the need for care may be missed while people are waiting for assessment. Risks may increase to individuals as waiting lists do not reduce as rapidly; or may grow. Statutory duties continue to not be addressed for all people waiting assessments.

Recommendation

38. Approve the procurement of a new contract for assessments, reviews and carers assessments up to a maximum value of £400,000 funded from ASC budget growth as allocated at February's Budget Council.
39. Delegate authority to the Corporate Director of Adult Social Care and Integration (and their delegated officers) in consultation with Chief Finance Officer (and their delegated officers in Commercial Procurement) to award a contract via a process and evaluation criteria in compliance with the Council's Contract Procedure Rules.
40. Delegate authority to the Corporate Director of Adult Social Care and Integration (and their delegated officers), in consultation with the Director of Governance (and their delegated officers in Legal Services), to determine the provisions of the new contract, and the provisions of any subsequent modifications. Delegate authority to the Corporate Director of Adult Social Care and Integration (and their delegated officers), in consultation with the Chief Finance Officer (and their delegated officers in Commercial Procurement) and the Director of Governance (and their delegated officers in Legal Services), to award and conclude the new contract for the Sensory Support Service following an open, fair, and transparent competitive process and evaluation criteria in compliance with the Council's CPRs and (where applicable) the Procurement Regs.

41. Reason: The option proposed will comply with CYC's CPRs. Further, the provision of the contract ensures the Council can meet statutory duties under the Care Act 2014 to carry out assessments and reviews.

Organisational Impact and Implications

- Legal, contact: Head of Legal Services.

Commercial Legal

42. Any procurement processes will need to be conducted in accordance with the Procurement Act 2023 (and related legislation) and the Council's own Contract Procedure Rules, in consultation with CYC Procurement.

CYC Legal Services can support regarding drafting any contracts.

Further Legal Comments

43. Under section 9 Care Act 2014 the local authority must carry out a needs assessment for adults who have an appearance of care and support needs. Similarly under section 10 Care Act 2014 the local authority must carry out a carer's assessment for carers with an appearance of support needs. Care and plans produced as a result of both type of assessment must be produced in a timely fashion. Needs and care's assessments must include the impact of the person's needs on their wellbeing, detail the outcomes they wish to achieve and whether the provision of care and support could contribute to achieving those outcomes. Needs and carer's assessments must also consider whether the adult or carer would benefit from the provision of information or advice or preventative services, facilities or resources to reduce needs or prevent deterioration.
44. Assessments can be carried out by a range of professionals, with the Care and Support Statutory Guidance considering social workers and occupational therapists to be key professions. A local authority may delegate assessments provided that the body completing the assessment complies with all requirements under the Care Act 2014 and associated regulations and everything completed by the delegated body is treated as if completed by the local authority.

45. The recent CQC inspection highlighted a number of areas where improvement is required, and the recommended proposal would appear to support CYC to both carry out the duties required by the Care Act 2014 as specified above and also support the areas for improvement identified in the CQC inspection.
 - Procurement, Mark Woolford (Category Manager – Commercial Procurement Team).
46. The Adult Social Care Integrated Commissioning team working with the Commercial Procurement team were tasked to identify a suitable framework to complete a procurement process to identify and evaluate suitable suppliers to undertake around 1,000 assessments and reviews with the aim to help reduce assessment backlogs/waiting lists.
47. The YPO Framework 1141: Managing Consultancy Professional Services was identified as a suitable framework and working with the framework sole provider Consultancy+ that manages this framework to develop the Request For Information (RFI) documents to invite RFI submissions from a number of suitable providers that are appointed onto this YPO Framework 1141. The completion of a mini competition exercise through an appropriate framework, which the YPO Framework 1141: Managing Consultancy Professional Services is, was in compliance with the council's Contract Procedure Rules (2025) and also the Procurement Act 2023 legislation and ensures the council delivers Best Value defined as (high-quality, cost-effective, and meets local needs).
 - Health and Wellbeing, contact: enquiries.publichealth@york.gov.uk
48. Public health support the recommendation of option 1.
49. Measures which can affordably put in place which results in the reduction of health inequalities, the burden of ill health for the individual and the health and social care system will support the residents in York to live and age well.
 - Equalities and Human Rights, contact: Assistant Director of Customer, Communities and Inclusion.
50. Every Decision Report must consider whether to have an Equalities Impact Assessment (EIA).

51. Data Protection and Privacy, contact: information.governance@york.gov.uk - every report must consider whether to have a Data Protection Impact Assessment (DPIA) and this section will include the compliance requirements from the DPIA or explain why no DPIA is required.
52. The data protection impact assessment (DPIAs) screening questions were completed for the recommendations and options in this report and as there is no personal, special categories or criminal offence data being processed to set these out, there is no requirement to complete a DPIA at this time. However, this will be reviewed following the approved recommendations and options from this report and a DPIA completed if required.
- Communications
53. There are no direct external communication implications at this stage. This will need to be kept under review in terms of any additional communications support to enable and support a streamlined process for assessments in the future. This should be considered as part of the wider communications support for service developments.
- Finance
54. The maximum cost of the proposal is £400k. This will be funded from 2026/27 growth allocated to ASC at Budget Council in February. Finance colleagues will work with the provider to track the financial impact of the reviews/assessments to assist with monitoring the effectiveness of this approach. This will support contract management to highlight any issues or good practice that can be addressed/shared as the lists are worked through.

No comments

- Human Resources (HR), contact: Directorate HR Manager and Chief Officer HR and Support Services. There are no HR implications from this report.
- Economy, contact: Head of City Development.
- Environment and Climate action, contact: Director of Transport, Environment and Planning, and Head of Carbon Reduction.
- Affordability, contact: Director of Customer and Communities.

Risks and Mitigations

55. Risk associated with option 1. Current levels of unmet need are unknown, and there is a likelihood of short term increased spend due to the cost of assessments, and due to some people entering services sooner. There is the likelihood of longer term reduced spend if assumptions are correct; however, some low risk that the population in York may have different needs at different levels that may not easily be met by lower level one off interventions.

56. Risk associated with option 2. Having a waiting list constitutes a risk for CYC as the need to maintain public trust and confidence in the organisation is linked to the ability to keep people safe; and the need to demonstrate rapid improvement against the CQC improvement plan. Costs of future care are rising while needs remain unknown. Mitigation can only be achieved with additional resource and taking a different approach to assessment. in the longer term, reshaping the offer at the front door will prevent wait lists becoming unmanageable in the future. There are direct risks to individuals in York from delays in assessments of need.

Wards Impacted

All wards

Contact details

For further information please contact the authors of this Decision Report.

Author

Name:	Sara Storey
Job Title:	Corporate Director Adult Social Care & Integration
Service Area:	Adult Social Care & Integration
Telephone:	07720 155 632
Report approved:	Yes
Date:	13 May 2026

Co-author

Name:	Anne Howgate
Job Title:	Assistant Director Access, Prevention & Improvement
Service Area:	Adult Social Care & Integration
Telephone:	07735 482 2580
Report approved:	Yes
Date:	13 May 2026

Background papers

N/A

Annexes

Annex A: Health and Equalities Impact Assessment (HEIA)