ADULTS SOCIAL CARE AND HEALTH SCRUTINY BOARD
10/03/2026 at 6.00 pm

Present: Councillor Rustidge (Chair)
Councillors Adams, Davis, Hamblett, J. Hussain, Iqbal and McLaren (Vice-Chair)

Also in Attendance:

Mike Barker	Deputy Chief Executive (Health & Care)
Councillor Barbara Brownridge	Cabinet Member for Adults, Health and Wellbeing
Rebecca Fletcher	Director of Public Health
Jack Grennan	Constitutional Services
Claire Hooley	Joint Commissioining for People (Health & Social Care)
Jayne Ratcliffe	Director of Adult Social Services
Christian Walsh	Deputy DASS

1 **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillors Hurley, Ibrahim and Sharp.

2 **URGENT BUSINESS**

There were no items of urgent business received.

3 **DECLARATIONS OF INTEREST**

There were no declarations of interest received.

4 **PUBLIC QUESTION TIME**

There were no public questions received for the Committee to consider.

5 **MINUTES OF PREVIOUS ADULTS SOCIAL CARE AND HEALTH SCRUTINY BOARD MEETING**

RESOLVED that the minutes of the meeting held on 27th January 2026 be approved as a correct record.

6 **PERFORMANCE ASSURANCE REPORT 2025/26 Q3**

The Deputy Chief Executive (Health & Care) introduced the Performance Assurance Report, noting that the report covered overall performance within the Directorate. It was highlighted that the figures were relatively good despite challenge of demand across the system and that there was an improved customer experience.

Members queried whether job vacancies were open to fill permanently the roles currently being undertaken by agency staff. It was noted that vacancies were open but that the service had struggled to recruit, particularly around mental health posts.

Members queried the statistic of 'percentage of adult social care providers rated good or outstanding by CQC', particularly around why the service was not hitting the 80% target. It was

highlighted that the figures were not a fair reflection as some providers were waiting for re-ratings by the CQC who had their own backlog. It was also highlighted that the Council does its own due diligence checks on providers too, so there was some assurance around these providers.

Members raised concerns about the 'TBCs' in the Directorate Overview, and queried why these officers would not attend the Scrutiny board. It was advised the two posts with 'TBC' next to them were only recently appointed and their names were given to members. It was highlighted that they would not be attending the Adults Social Care and Health Scrutiny Board but would be attending the Governance, Strategy and Resources Scrutiny Board, as their work was not specifically within the remit of this Board.

Members highlighted that some services had been brought back in house, and whether that meant that the Council would not be working with Pennine Care on these going forward. It was noted that this agreement had been a multilateral decision around 18 months ago, as part of a fundamental review and was in the best interest of those impacted for the service to be provided by the Council. It was highlighted that this was a different way of doing partnership work and that these arrangements were now the norm across GM.

Members also noted that SARs received and answered had both fallen, and it was noted that there would be a dedicated officer for these requests.

Members questioned how targets are set, and it was noted that for some, work is done with performance colleagues to determine what is ambitious but realistic, whilst others are statutory targets that are set nationally. It was noted that a review of targets might be helpful. Members also queried how our performance compares to other GM authorities, and it was advised that Oldham performs well across GM. It was also highlighted that a groupings such as the Association of Directors of Adult Social Services and the GM Group of Directors also help to compare across boroughs.

Members asked about residents of other boroughs being looked after in Oldham and out of borough placements. It was noted that the Council does not record the number of residents of other boroughs placed in Oldham, and that for Oldham residents in out of borough placements, the number was not a lot but still too many, with work ongoing to reduce the number. It was also noted that Oldham's out of borough numbers compare favourably to other GM authorities.

RESOLVED that the Performance Assurance Report be noted.

7 **CQC FEEDBACK**

The Director of Adult Social Services presented the feedback from the CQC inspection, noting that Oldham had received a 'Good' rating and 67% score. It was noted that the inspection

was carried out over 9 quality statements, and Oldham was in the top third of local authorities nationally, meaning that other authorities were looking to Oldham for good examples. The feedback around four key themes was outlined, as were areas for development and next steps. It was noted that Oldham was striving to keep building on this work and driving for an 'Outstanding' rating in future. It was also noted that the rating was delivered within the context of a challenging financial position.

Members queried the timeline for an action plan to address the CQC's concerns, and it was highlighted that the CQC hadn't asked for any improvements to be made, and that there were no surprises within their feedback around areas for development. It was noted that when the business plan was submitted, this would focus on areas for development. It was also noted that this would be an annual conversation.

Members noted that it was positive but noted that the next CQC review would be in around 4 years, highlighting that this was a while off. It was noted that internal reviews would be regularly carried out as they already are and that the CQC rating was a validation of what the service is already doing.

Members congratulated the service on the rating but noted concerns about staff fatigue and burnout as well as EDI. It was noted that staff burnout was a concern, but staff enjoyed the CQC visit and meetings with them, and were asking 'what next?' for improvements after the report was unveiled. It was also highlighted that such a positive CQC rating would attract new staff to the borough. Work around EDI was underway with conversations ongoing with staff and residents.

Members noted the reports reference to 'strong leadership and governance' and the fact that Oldham placed high in the league table of local authorities and queried what more the service could learn from the authorities higher up the table. It was noted that the service had reviewed the other authorities' CQC feedback reports too, noting their work on EDI, engagement and coproduction and highlighting that Oldham's work on this was still in its infancy. It was also highlighted that waiting lists in the top performing authorities were not as significant as they are in Oldham.

RESOLVED that the CQC feedback be noted.

8 **ORAL HEALTH ALL AGE APPROACH**

The Director of Public Health presented the item, noting that it was about the Council's oral health approach, not about dentistry. It was noted that there were four key areas of focus which were: Early Years, Targeted Groups, Food Environment, and the Oral Health System. New and upcoming initiatives were outlined and it was highlighted that whilst significant progress had been made, there was more to do.

Members noted the community fund and queried whether this had yet been set up. It was noted that dental packs had already been funded and gone out to young people, and that community groups had been previously funded. It was highlighted that the community fund had not yet opened but that it was likely to do so in the first quarter of the 2026/27 financial year.

Members queried what work was being done with schools, and it was noted that the Council did work with schools on oral health, particularly around education and the food and drink available in schools.

Members noted the preventative measures outlined in 3.1 of the report and asked what actions were being taken to promote these. It was noted that the provision of free toothbrushes and toothpaste were a part of this approach as was the Smile Month initiative. Members also queried how success on these measures would be gauged. It was highlighted that real results won't be seen for 2-3 years but that proxy measures such as the uptake of provisions could show some indications of whether progress is being made in the meantime.

RESOLVED that the approach be noted.

9 **MARKET POSITION STATEMENT AND COMMISSIONING DELIVERY PLAN**

The Assistant Director of Commissioning and Market Management presented the item, noting that the Council was required to have a market position statement under the Care Act 2014, which outlined both current and future need. It was outlined that the strategic commissioning documents were a suite of documents to allow for time sensitive updates and keeping stable data.

The local picture, including demographics and projected growth, was outlined, noting that strategies were being put into place now for the future. Key service areas, market strengths and challenges, commissioning intentions and future demand were also highlighted.

Members requested clarity around residential fees, querying how these are benchmarked. It was advised that the service looks at a number of factors and the uplift is agreed as part of the budget process. It was also highlighted that Oldham's approach is based on the fair cost of care model and is tracked thoroughly. It was noted that the gap needs to be kept down with predicted costs tracked and monitored throughout the year. It was also highlighted that the relationship with providers was crucial in helping to benchmark as well.

Members highlighted the focus on working collaboratively, querying how the Council is involving the voluntary sector. It was noted that the Council was collaborating with the voluntary sector around the Live Well approach and that there were opportunities as part of commissioning services. Funding and training were also noted as further areas to develop the work

with the voluntary sector. Members also highlighted concerns around the lack of voluntary sector information on the website, and it was highlighted that whilst this was outside the scope of the item, officers would take a look at this and get back to members.

Members requested that the statements be brought to a future meeting, specifically a snapshot with a description of the process and elements of feeding in.

RESOLVED that the Market Position Statement and Commissioning Delivery Plan be noted.

10 **WORK PROGRAMME**

Members noted the request from the previous item regarding the statement could be added to the Work Programme for 2026/27 and all members were invited to suggest items.

RESOLVED that the 2025/26 Work Programme for the Adult Social Care and Health Scrutiny Board be noted.

11 **KEY DECISION DOCUMENT**

The Board reviewed the Key Decision Document.

Members noted concerns over current telephone systems and hoped that the Telephony contract item would help address this.

12 **RULE 13 AND 14**

There were no rule 13 or 14 decisions to be noted.

The meeting started at 6.00 pm and ended at 7.50 pm