

COUNCIL
26 MARCH 2026

OVERVIEW OF ADULTS PORTFOLIO

Purpose of the Report

1. Since the last meeting of Council, the following are the main areas of work undertaken under the Adults Portfolio.

Operational Services

2. We have successfully recruited to a new Service Manager to join the Adult Social Care (ASC) Adult Leadership Team (ALT), interim arrangements are in place until they start on 13 April 2026.

Blue Badges

3. There is a continued stable position with Blue Badges. The calls are higher for January as it was forecasted that January would be a busy month for blue badge calls/enquiries due to blue badge renewals for this month. We undertook a blue badge campaign in November, promoting that applicants can renew their blue badge up to two months prior to their old one expiring, that did help.
4. Most of the blue badge renewal applicants needed the support of an advisor to help complete their blue badge renewal application. The months can vary depending on when applicant's badges expire some months can be higher than others. Customer services are currently experiencing some high volumes of new blue badge applications, but we are still within the Service Level Agreement (SLA).

Hospital Discharges

5. The Winter Initiative pilot started in November 2025 identifying ASC as the lead agency for admission to the intermediate care beds, resulting in earlier involvement, timely reviews and better outcomes and a 'Ticket Home' approach. Initial findings are positive with reduced use of spot purchased short break stay beds. The Rapid Intervention and Assessment Care Team (RIACT) capacity funded via the Better Card Fund (BCF) to manage the demand within this pilot.
6. We have experienced the highest hospital discharge pressure this year compared to previous years; 1,088 referrals since April 2025 compared with 1,030 in 2024/2025, and 933 in 2023/2024. This continued rise reflects a combination of system-wide factors, including higher acuity among patients presenting at hospital, seasonal pressures, and increased demand linked to population health needs. The impact has been particularly evident through winter, where hospitals have reported sustained bed pressures and a greater reliance on community services to support timely flow.

7. Despite this increased demand, the majority of people continue to be supported to return home safely wherever possible — 748 individuals as of Quarter 3. This reflects the success of the Winter Initiative pilot, earlier ASC involvement, strengthened partnership working in discharge planning, and the continued focus on strengths-based practice and community alternatives. These approaches are supporting improved outcomes, reducing reliance on short-term bed-based care, and enabling more people to regain independence at home.
8. An overnight support pilot was also started in November 2025. This is to enable consideration of return home with overnight care calls with the aim of reducing admission into short break stays and provide a further period of assessment. Initial data and cases are suggesting a positive uptake and reduction in need for bed based stays.

Permanent placements

9. Permanency admissions for older people aged 65+ have reduced from previous years with 111 admissions at Quarter 3 compared to 151 in 2024 / 2025 and 146 2023/2024. The teams have a proactive approach of high support and high challenge which has impacted this position positively.
10. Permanency admissions for working age adults aged 18-64 have also reduced from previous years with 9 admissions at Quarter 3 compared to 11 in 2024/2025 and 25 in 2023/2024. This has largely been as a result of working with providers and developing new models of accommodation in line with our commissioning needs.

Transformation

11. Our transformation programme continues to develop activity to manage increasing demands. Recent activity included; trusted assessment and electronic referrals to support our hospital discharges, utilising AI to capture conversations around safety planning and triage of safeguarding concerns, and amendments and roll our opportunities with Netcall telephony advancements.
12. The introduction of the Netcall telephony system has strengthened Adult Social Care's ability to manage demand by improving call flow, enhancing accessibility and ensuring a more consistent customer experience. The system's AI-enabled automation and unified communication tools streamline routine processes, reduce administrative burden and help staff respond more efficiently to enquiries. Its integrated reporting and analytics provide clearer insight into performance and demand trends, supporting better planning and service improvement. Netcall's flexibility and proven success in local government environments also enable rapid adaptation to operational pressures, contributing to a more responsive and resilient front-door service for residents.

Safeguarding (SG) and Deprivation of Liberty safeguards (DoLs)

13. Safeguarding contacts continue to increase across all teams, reflecting both rising levels of community need and greater awareness of safeguarding pathways. Of these contacts, 33.5% progress to strategy discussions, and each case is managed with robust oversight, clear professional scrutiny, and established governance processes to ensure that all concerns are assessed promptly, proportionately, and in line with statutory requirements.

14. Two care homes remain within our Executive Strategy Procedures (ESP) one being on phased admissions. ASC continue to work closely with system partners to support the providers to make required improvements against their action plans.
15. DoLS standard authorisation documentation is now received via a portal. Moving DoLS standard authorisation documentation onto a portal strengthens compliance and efficiency by ensuring applications are submitted in a consistent format, reducing delays linked to incomplete or incorrectly routed paperwork. It also provides a clear audit trail, improves information security, and enables faster allocation and processing by the DoLS team. This supports better oversight, timeliness, and statutory assurance in a high-risk area of practice.

Adult Learning Disability (ALD)

16. We have seen an increase in referrals, with a significant proportion coming through the Preparing for Adulthood (PfA) pathway as young people transition from Children's to Adults' Social Care. This rise reflects both growing levels of need and improved early identification and planning. Darlington Borough Council (DBC) continues to strengthen its Preparing for Adulthood offer by working closely with Children's Services, Education and health partners to ensure timely assessments, clear transition plans and consistent support for young people and their families. This joint approach provides assurance that increasing demand is being managed proactively, with a strong focus on independence, personalised planning and good outcomes into adulthood.

Social Work Practice

Working Age Adults Project with IMPOWER

17. IMPOWER is working in partnership with Darlington Borough Council's Adult Social Care service to deliver a major transformation programme focused on improving outcomes for Working Age Adults and strengthening financial sustainability. The approach combines detailed diagnostic work, behavioural insight and strengths-based practice, enabling the service to understand demand and cost drivers, benchmark performance, and identify priority groups who would benefit from more independence-focused pathways. This partnership was formally approved by Cabinet in December 2025 and is structured into clear phases: diagnostic, test-and-learn, and scale-up to ensure rigour and system-wide impact.
18. Early achievements include the identification of opportunities to reduce reliance on high-cost residential placements, trialling new interventions, and developing more personalised, preventative models of support. IMPOWER's methodology provides Adult Social Care with evidence-based insight and practical tools to embed sustainable change, with the project expected to deliver a minimum 3:1 return on investment, saving £0.25m in the first year and creating an estimated £0.75m in annual savings thereafter.

Commissioning and Contracts

19. Commissioning is continuing to work with Adults Services, Finance and Procurement colleagues to deliver its ambitious 2026/27 re-tendering programme. This consists of a

number of critical commissioned services including Day Opportunities, Direct Payments Support Service and Personal Care and Domestic Support in Extra Care settings. The programme will require a re-modelling of services to inform specifications, engagement surveys/events with potential future providers of these services and ending with formal evaluations leading to contract awards.

Darlington Safeguarding Partnership

20. The Partnership's Lead Safeguarding Partners Strategic Group and Management Group have not met in this reporting period. The Multi-Agency Safeguarding Partnership Group met on 16 January 2026, the agenda focused on the delivery of the Family First Partnership reforms and the ICB's Strategic Transition Programme.
21. A presentation was provided by the North East and North Cumbria Integrated Care Board (ICB) on its Strategic Transition Programme, which will see the ICB move from nine directorates to five. The impact of these changes on safeguarding teams and partnership working was discussed, with recognition of the challenges posed by the reduction in resources and the need for effective representation and attendance at partnership meetings. It was noted that while statutory duties will not change, the partners responsible for delivering them may do so, changes are intended to streamline with no planned transfer of statutory functions and the ICB will continue to work in partnership. The group noted the importance of retaining sight of statutory responsibilities and holding the ICB and other partners to account for any changes that may impact safeguarding, and there is a need to ensure that safeguarding, particularly for children, remains a priority in all documentation and planning. The need for clear communication and engagement with local partners was emphasised with an expectation having discussions prior to the implementation.

Adult Scrutiny

22. No comments

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