



Meeting: **Adults and Communities Overview and Scrutiny Committee**

Date/Time: **Monday, 7 November 2022 at 2.00 pm**

Location: **Sparkenhoe Committee Room, County Hall, Glenfield**

Contact: **Mrs. J. Twomey (0116 305 2583)**

Email: **joanne.twomey@leics.gov.uk**

Membership

Mr. T. J. Richardson CC (Chairman)

Mrs. L. Broadley CC Mr. L. Hadji-Nikolaou CC
Mr. B. Champion CC Mr. J. Miah CC
Mr. N. Chapman CC Mrs. A. Wright CC

Please note: this meeting will be filmed for live or subsequent broadcast via the Council's web site at <http://www.leicestershire.gov.uk>

AGENDA

<u>Item</u>	<u>Report by</u>
1. Minutes of the meeting held on 5 September 2022.	(Pages 5 - 14)
2. Question Time.	
3. Questions asked by members under Standing Order 7(3) and 7(5).	
4. To advise of any other items which the Chairman has decided to take as urgent elsewhere on the agenda.	
5. Declarations of interest in respect of items on the agenda.	
6. Declarations of the Party Whip in accordance with Overview and Scrutiny Procedure Rule 16.	



7. Presentation of Petitions under Standing Order 35.
8. Progress in Delivering the Social Care Reform Programme. Director of Adults and Communities (Pages 15 - 22)
9. Update on the Provision and Procurement of Community Life Choices Services (Day Services). Director of Adults and Communities (Pages 23 - 28)
10. Managing Demand in Adult Social Care. Director of Adults and Communities (Pages 29 - 40)
11. Consultation on Eligibility for Care Technology Services. Director of Adults and Communities (Pages 41 - 44)
12. Date of next meeting.

The next meeting of the Committee is scheduled to take place on Monday 23 January 2023 at 2pm.

13. Any other items which the Chairman has decided to take as urgent.

QUESTIONING BY MEMBERS OF OVERVIEW AND SCRUTINY

The ability to ask good, pertinent questions lies at the heart of successful and effective scrutiny. To support members with this, a range of resources, including guides to questioning, are available via the Centre for Governance and Scrutiny website www.cfgs.org.uk. The following questions have been agreed by Scrutiny members as a good starting point for developing questions:

- Who was consulted and what were they consulted on? What is the process for and quality of the consultation?
- How have the voices of local people and frontline staff been heard?
- What does success look like?
- What is the history of the service and what will be different this time?
- What happens once the money is spent?
- If the service model is changing, has the previous service model been evaluated?
- What evaluation arrangements are in place – will there be an annual review?

Members are reminded that, to ensure questioning during meetings remains appropriately focused that:

- (a) they can use the officer contact details at the bottom of each report to ask questions of clarification or raise any related patch issues which might not be best addressed through the formal meeting;
- (b) they must speak only as a County Councillor and not on behalf of any other local authority when considering matters which also affect district or parish/town councils (see Articles 2.03(b) of the Council's Constitution).

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Minutes of a meeting of the Adults and Communities Overview and Scrutiny Committee held at County Hall, Glenfield on Monday, 5 September 2022.

PRESENT

Mr. T. J. Richardson CC (in the Chair)

Mr. B. Champion CC
Mr. N. Chapman CC
Mr. L. Hadji-Nikolaou CC

Mr. J. Miah CC
Mrs. A. Wright CC

In attendance

Mrs. C. M. Radford CC – Cabinet Lead Member for Adults and Communities
Mr. T. Parton CC – Cabinet Support Member
Gemma Barrow – Healthwatch Leicester and Leicestershire (via Microsoft Teams)

17. Minutes.

The minutes of the meeting held on 6 June 2022 were taken as read, confirmed and signed.

18. Question Time.

The Chief Executive reported that no questions had been received under Standing Order 34.

19. Questions asked by members under Standing Order 7(3) and 7(5).

The Chief Executive reported that no questions had been received under Standing Order 7(3) and 7(5).

20. Urgent Items.

There were no urgent items for consideration.

21. Declarations of interest.

The Chairman invited members who wished to do so to declare any interest in respect of items on the agenda for the meeting.

No declarations were made.

Later in the meeting Mrs. A. Wright CC declared a Non-Registerable Interest and Other Registerable Interest in agenda items 9, 10, 11, 12, 13 and 14 (Adult Social Care Reform – Market Shaping and Charging Reform, Extra Care Service and Procurement, Initial Consultation Findings on Draft Leicester, Leicestershire and Rutland Carers' Strategy 2022-2025, Commissioning and Procurement of Home Care Services, Performance Report for Quarter 1 2022/23 (April – June) and Annual Adult Social Care Complaints and Compliments Report) as she was a health and social care solicitor and partner for

Browne Jacobson (minute 25 refers).

Mr. L. Hadji-Nikolaou also later declared a Non-Registerable Interest and Other Registerable Interest in agenda item 9 as he was a consultant for the NHS (minute 25 refers).

22. Declarations of the Party Whip in accordance with Overview and Scrutiny Procedure Rule 16.

There were no declarations of the party whip.

23. Presentation of Petitions under Standing Order 35.

The Chief Executive reported that no petitions had been received under Standing Order 35.

24. Leicestershire and Rutland Safeguarding Adults Board Annual Report 2021/22.

The Committee considered a report of the Director of Adults and Communities, the purpose of which was to seek its views on the draft Annual Report of the Leicestershire and Rutland Safeguarding Adult Board (LRSAB) for 2021/22. A copy of the report marked 'Agenda Item 8', is filed with these minutes.

The Chairman welcomed Ms. Fran Pearson, Independent Chair of the Leicestershire and Rutland Safeguarding Adults Board (SAB), to the meeting for this item.

Noting that the period being reported on was Ms. Pearson's final year in the role as the Independent Chair for the SABs, the Committee invited Ms. Pearson to give an overview of the three years she had held the post and her opinion on how Leicester and Leicestershire's position compared with other areas of the Country. In response, the following points were noted:

- (i) A key focus had been working to ensure a more joined up approach between the two local SABs and the various sub-groups, the process of which had been accelerated by the Covid-19 pandemic. It was felt that locally the strategic alignment between the various councils to enable urgent issues (such as responding to the needs of Ukrainian refugees) to be managed in a timely manner was exemplary.
- (ii) Over the years the Board had become more data driven to support a more strategic approach. The continuation of such an approach would be important, particularly when current and future priorities were being considered.
- (iii) The issues being identified by the local SABs were mostly similar to those of other partnerships across the Country. It was expected that most Boards would have a key priority identified in relation to 'self-neglect'. The local SABs referred to this as 'hidden harm' and there was concern that this issue, along with safeguarding issues in care homes, would become more relevant as time went on.
- (iv) Many SAB's across the Country were receiving a large number of Safeguarding Adult Review referrals. Leicestershire had been keen to trial a new process to improve the rate in which such reviews were conducted which had been welcomed. Whilst there had been some challenges adopting this new process,

those involved had felt the experience had been worthwhile and that much learning had been gained.

- (v) For a number of reasons children's services often benefitted from more frequent statutory guidance revisions. It was felt that adult services would very much benefit from the same approach.

In concluding her comments, Ms. Pearson offered thanks to Jon Wilson, the Director of Adults and Communities, for all of his support during her time as Independent Chair of the SAB.

Arising from discussion, the following points arose:

- (vi) In response to concerns raised by a Member around the lack of diversity in the group of people considered as subjects of the Safeguarding Adult Reviews (SARs), it was acknowledged that whilst a fair amount of engagement work had been undertaken during the period there was still more to be done locally to raise awareness of adults safeguarding in diverse communities. This was a key strategic priority in the joint LLR SABs Strategic Plan (Priority 4). An example of engagement work recently undertaken to raise awareness was that, as part of a joint campaign between the SAB and the Children's Safeguarding Partnership, a video had been produced which had been widely distributed and covered in the media.
- (vii) Looking ahead, plans were in place to progress the engagement work through an agreed set of principles with involvement from partners and the County's Health and Wellbeing Board. A key focus would be on reaching out to wider communities. Learning from some of the practices used by Leicester City was also being considered to determine any beneficial aspects to take forward for the County.
- (viii) It was confirmed that the outcomes of SARs were analysed to determine any patterns of issues in line with statutory guidance. However, in some parts this steered away from root cause analysis in its direct form. The analysis undertaken was usually contained in each individual case report and any learning identified published on the website of the relevant Board. In light of the comments now made consideration would be given to how information relating to SARs was presented in the Annual Report going forward.
- (ix) The Committee offered its thanks to Ms. Pearson for all the work she had undertaken during her time as the Independent of Chair of the SAB. The Chairman said that the way the SAB had moved forward with working strategically with partners was remarkable and something he had personally observed over time. The Lead Member offered her personal thanks for all the support Ms. Pearson had given to her and the Cabinet Support Member, including her input at regular meetings.

RESOLVED:

That the Annual Report of the Leicestershire and Rutland Safeguarding Adults Board for 2021/22 be welcomed.

25. Adult Social Care Reform - Market Shaping and Charging Reform.

[Gemma Barrow from Healthwatch Leicester and Leicestershire left the meeting at this point and did not return to the meeting.]

The Committee considered a report of the Director of Adults and Communities, the purpose of which was to provide a further update of the work being undertaken in preparation for the Government's planned Adult Social Care Reforms. The report set out the policy background to the Charging Reform and the key implications for adult social care in Leicestershire to set the current activity in context. It also provided information on the nationally mandated Fair Cost of Care analysis and Market Sustainability Plan which were intended to be submitted to the Cabinet for approval in September 2022. A copy of the report marked 'Agenda Item 9', is filed with these minutes.

Mrs. A. Wright CC entered the meeting at this point and declared a Non-Registerable Interest and Other Registerable Interest in agenda items 9, 10, 11, 12, 13 and 14 (Adult Social Care Reform – Market Shaping and Charging Reform, Extra Care Service and Procurement, Initial Consultation Findings on Draft Leicester, Leicestershire and Rutland Carers' Strategy 2022-2025, Commissioning and Procurement of Home Care Services, Performance Report for Quarter 1 2022/23 (April – June) and Annual Adult Social Care Complaints and Compliments Report) as she was a health and social care solicitor and partner for Browne Jacobson.

Mr. L. Hadji-Nikolaou also declared a Non-Registerable Interest and Other Registerable Interest in this particular item as he was a consultant for the NHS.

In introducing the report, the Director clarified that the Government's plan to introduce a new £86,000 cap on the amount anyone in England would have to spend on their personal care over their lifetime did not refer to an individual's 'total cost of care' but only to the components of any care package considered to be related to personal care. For example, daily living costs related to items such as food, rent, accommodation costs and electricity were not included (including those that the Local Authority provided support with).

Arising from discussion the following points arose:

- (i) Members noted with concern the severe financial impact the implementation of the Adult Social Reforms was expected to have on the Council's budget. As to how the £22m shortfall predicted over the next ten years would be offset, the Director emphasised that the figures cited in the report relating to cost were estimates at this stage. However, it was clear that any such shortfall would be a significant issue to manage. He explained that each local authority was undertaking the same exercises and making similar assumptions on the figures and finding a shortfall. The ways of managing this issue were not yet clear but through means such as taxation was possible.
- (ii) In response to a question regarding the table at paragraph 61 of the report, which summarised the areas and estimated figures of additional expenditure/funding resulting from the Adult Social Reform Programme, it was clarified that the figures pertaining to the period 2032/33 had been included to give an example of a period in the future when the implications were expected to stabilise.
- (iii) It was questioned how financial contributions made by an individual towards the cost for care cap would be tracked, for example, if they moved from one area of the Country to another. In response, Members noted that the Government was still working on the details to confirm how this would work in practice, particularly given that local authorities currently used a range of different care systems. However, the plan was for each individual approaching their local authority for support to

have their own care account set up which were expected to be portable and able to produce annual statements enabling the relevant financial information to be monitored by the appropriate users.

- (iv) There was no certainty at this time how the split between personal care costs and daily living costs would be determined and monitored. However, for the daily living costs element the Government had indicated that a national tariff of £200 would be set for the period of 2022/23.
- (v) In response to comments raised by a Member about the key proposal set out in the Government's "People at the Heart of Care" White Paper relating to local authorities and providers making the best use of Technology, Members were reminded of the work the Department had been undertaking, alongside Hampshire County Council and its strategic partner PA Consulting Group, to transform Leicestershire County Council's care technology services. This work was ongoing and expected to go a way to support the implementation of the Reforms, which would require extra systems to be in place. For example, further development of the Department's online care and financial assessments was something that was being considered in conjunction with the new care accounts process proposed under the Reforms.
- (vi) Whilst it was positive the 'quality of care' in Nursing Care Homes compared well with the national picture, it was questioned how the Department was seeking to address the bed capacity issues which it was commented had an impact on inpatient and secondary care delivered by the NHS. Members noted that the issue of the Council having a lower number of beds for a local authority of its size was historical. A key factor was the local care market being predominantly made up of larger providers which impacted funding and the care provision available. A further issue was that, in Leicestershire, the local NHS funded just half of the number of people for Nursing Care (FNC) when compared to comparator areas.
- (vii) It was confirmed that there were a number of areas the Department was working on in conjunction with the care market to help stimulate the nursing care provision available. This included work on nursing care costs and the potential to set a specific fee rate. It was also possible that a number of people placed in residential care might have otherwise been placed in nursing care which was a further area being considered.
- (viii) In regard to the Fair Cost of Care analysis it was confirmed that the survey issued to care homes would have been sent to every care home in Leicestershire. Though, it was important to note that a small proportion of these were not 'active' and the County citizens that resided in care homes in Leicester would be included in the City Council's analysis rather than the County's.
- (ix) It was clarified that the level of demand for long term residential care was relatively stable and potentially declining which was in line with the Department's Strategy to support people to live at home for longer and partly as a consequence of the Covid-19 Pandemic. However, it was possible that if growth relating to 'older people' increased over the coming years more provision would need to be available which would need reflecting in the County's Market Sustainability Plan at the appropriate time.

RESOLVED:

- (a) That the update regarding the work being undertaken to prepare for the Government's planned Adult Social Care Reforms be noted.
- (b) That the financial implications of implementing the Adult Social Care Reforms be noted with concern.
- (c) That the comments now made be submitted to the Cabinet for consideration at its meeting in September 2022.

26. Extra Care Service Review and Procurement.

The Committee considered a report of the Director of Adults and Communities, the purpose of which was to advise the outcome of a service review that had been undertaken on the Extra Care Service, engagement with residents and stakeholders that had been carried out, and the proposed changes, including the way in which elements of the Service were commissioned. The report also invited the Committee's comments on the proposed way forward. A copy of the report marked 'Agenda Item 10', is filed with these minutes.

Arising from discussion the following points were raised:

- (i) Regarding the proposed removal of the Wellbeing Services (£70 per week) charge to tenants, it was clarified that this only related to 'unplanned' care services and that any care needs assessed as ongoing would be deemed as 'planned' with costs charged under the relevant Local Authority system in the usual way.
- (ii) Members commented on the vital role Extra Care Services played in society as a whole and the support they offered to individuals and their families. It was pleasing to note that the Department was looking at the potential to expand Extra Care Services in the County to provide people with more options. Supporting Extra Care Service providers to take on people with more complex needs in a balanced way was part of the considerations being made.
- (iii) The Committee welcomed the report and confirmed its support for the proposed way forward.

RESOLVED:

That the report regarding the Extra Care Service Review and Procurement be noted and the proposed way forward be supported.

27. Initial Consultation Findings on Draft Leicester, Leicestershire and Rutland Carers Strategy 2022-2025.

The Committee considered a joint report of the Directors of Adults and Communities, Children and Family Services and Public Health, the purpose of which was to advise on the initial findings from the public consultation on the draft joint Leicester, Leicestershire and Rutland (LLR) Carers Strategy 2022-25. A copy of the report marked 'Agenda Item 11', is filed with these minutes.

Arising from discussion the following points were raised:

- (i) Considering the amount of engagement that had been undertaken locally, responses to the consultation had been disappointingly low overall. In response to a suggestion for messages for carers to be included in information packs handed out by the Voluntary and Community Sector (VCS) to various Health trusts, it was confirmed that the idea would be considered in terms of future engagement. Whilst the consultation had had a fair amount of coverage throughout the VCS the findings from the consultation received so far had highlighted the need to do more to get information and advice out to carers more widely, particularly where Primary Care was concerned. It was expected that once the new contract for the Carers Support Service (currently run by Voluntary Action South Leicestershire) was in place, further engagement work would be undertaken with the aim of bringing in different types of funding for the County to progress such actions forward.
- (ii) A Member commented that it was difficult to draw meaningful outcomes from the consultation with such a low response and suggested that engaging with people face to face might be best to gain a better response rate in future. The Director confirmed that face to face events had been held and that further information on the outcomes of these events would be included in the report due to be submitted to Cabinet in October 2022 which would present the full outcomes of the consultation.
- (iii) Regarding the identification of carers and holding the NHS to account for its responsibilities to progress the aims of the joint Strategy, it was confirmed that GPs had the responsibility built into their contracts to ensure that carers were identified and included on the designated register. Also, past feedback had confirmed that GP surgeries/Primary Care Services were the most suitable place for publicising information and advice for carers. However, as part of the Strategy refresh, consideration had been given to this approach and recent feedback had highlighted the need for the Department to perhaps widen the information it made available at other venues such as libraries which could prove useful.
- (iv) In noting the update, the Committee urged officers to find as many ways as possible to get the messages for carers out more widely through existing contracts and partnerships.

RESOLVED:

That the initial findings from the public consultation on the draft joint Leicester, Leicestershire and Rutland Carers Strategy 2022-2025 be noted.

28. Commissioning and Procurement of Home Care Services.

The Committee considered a report of the Director of Adults and Communities which provided an update on progress made on the procurement of home care services as previously requested by the Committee. The report also summarised the outcomes of the recent tender for integrated home care services in partnership with the NHS Clinical Commissioning Groups (CCGs) for the County to create additional capacity through a Framework of providers with effect from 1 November 2022. A copy of the report marked 'Agenda Item 12', is filed with these minutes.

Arising from discussion the following points arose:

- (i) Regarding the map at paragraph 23 of the report which showed the Home Care zones identified as challenging, it was clarified that the most challenging areas were those highlighted by text boxes. These were predominantly rural areas around the edge of the County.
- (ii) In response to a question regarding the incentives for people to work in such areas where it was suggested that travel was usually the issue, the Director confirmed that providers were paid premiums to provide care packages in rural areas. However, such payments did not always resolve the issue. For example, if there were staff shortages exception providers would be asked to cover at a higher cost to the Council. Members heard that the Department was continuing to look at ways to ensure enough capacity in rural areas. A pilot to cluster certain areas together and paying for staff journeys was one approach currently being explored.
- (iii) In terms of whether the premiums paid to providers filtered down into staff wages, it was confirmed that capacity for the County had increased considerably (by around 30%) at a time when nationally this had reduced which could suggest that the County's rates of pay (which varied by up to £7 an hour in rural areas) were favourable compared to other areas. However, it was recognised that this may not be true in all cases and could instead mean that higher profitability for providers was stimulating them to do more in terms of recruitment. The Director stated that finding a balance would be key, ensuring more work was undertaken to ensure that carers were paid appropriately and remunerated for any extra costs they incurred (such as travel), but also that providers were suitably stimulated to sustain the market. Members also emphasised the need to ensure continuity of care for service users.
- (iv) There were a number of reasons why 14% of the total current market capacity would not be on the Home Care for Leicestershire Framework. These reasons included care provider choice and being unsuccessful in their application to join the Framework. In response to a question raised, it was confirmed that even if full market capacity on the Framework was reached, demand for home care services would still likely outweigh service supply, so whilst the Department would continue to encourage new providers to join the Framework, the key to service delivery moving forward would be working with current providers to build and maintain their workforces and increase care supply in the most challenging areas.
- (v) The Committee was pleased to note the progress made to date and the plans in place to develop the Framework and mitigate assessed risks.

RESOLVED:

That the report providing an update on the progress made on the procurement of home care services be welcomed.

29. Performance Report for Quarter 1 2022/23 (April-June).

The Committee considered a joint report of the Director of Adults and Communities and Chief Executive which provided an update of the Adults and Communities Department's performance during the first quarter (April to June) of 2022/23. A copy of the report marked 'Agenda Item 13', is filed with these minutes.

Arising from discussion, the following points were raised:

- (i) Whilst it was encouraging that the Department's performance regarding permanent admissions to care (aged 18-64) was "better than the latest national average or local target", it was important to note that the national information currently available and being compared against was that of the year 2020/21 (when the pandemic began) and so not a direct comparison for the quarter being reported on (i.e. quarter one 2022/23). A further update on the national context was expected by the time the next performance report was due to be produced which would enable a more up to date comparison to be made.
- (ii) Further points to note when considering performance on permanent admissions to care were that:
 - a. the Department was continuing to make good progress with the development of supported living accommodation to provide alternatives to residential care in line with its strategic objectives.
 - b. people were not ordinarily admitted into residential care until a full assessment of their care needs had been undertaken to confirm this was necessary. Therefore, anyone placed into temporary care whilst awaiting such an assessment would not fall into the permanent admissions figures but would be accounted for separately.
- (iii) It was positive to note that the increase to the 'hours of volunteering' was not only above the levels recorded last year but also above those seen prior to the Covid-19 pandemic.
- (iv) Regarding the gradual reduction in the number of E-loans from libraries, it was expected that the number would increase again. However, it was unlikely to be as high as the level seen during the Covid-19 pandemic given that physical visits had since resumed.
- (v) Members were pleased to see and offered thanks to officers for the changes made to enhance the appearance of the report following comments raised at the Committee's last meeting.

RESOLVED:

That the Adults and Communities Department's performance for the period during the first quarter of 2022/23 (April to June) be noted.

30. Annual Adult Social Care Complaints and Compliments Report 2021/22.

The Committee considered a report of the Director of Adults and Communities, the purpose of which was to provide a summary of the complaints and compliments for adult social care services commissioned or provided by the Adults and Communities Department in 2021/22. A copy of the report marked 'Agenda Item 14', is filed with these minutes.

In response to a question raised regarding the steps being taken to speed up the overall response rates to complaints:

- (i) Members were reminded of the additional review step that had been built into the complaints process not so long ago in recognition of the fact that some complaints previously forwarded to the Local Government and Social Care Ombudsman for

review had not been fully warranted which had a negative effect on response times. The extra step was to ensure enough consideration was given to a matter before determining which action to take. In light of this, improvements were intended to be made to the format of future annual reports presented to the Committee to provide a fuller picture of the steps taken to resolve complaints.

- (ii) Members were assured that the Corporate Complaints and Information Services Manager worked closely with the Department to ensure complaints were resolved in the timeliest way possible. However, it was acknowledged that continued pressures mostly related to the recovery of the pandemic had had an impact on the period being reported on. Though this was expected to be less of an issue going forward.

RESOLVED:

That the Annual Adult Social Care Complaints and Compliments Report for 2021/22 be noted.

31. Dates of future meetings.

It was noted that the next meeting of the Committee would be held on 7 November 2022 at 2.00pm and future meetings would be held at the same time on the following dates in 2023:

23rd January
6th March
5th June
4th September
6th November

2.00 – 4.09pm
5 September 2022

CHAIRMAN



ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
7 NOVEMBER 2022

PROGRESS IN DELIVERING THE SOCIAL CARE REFORM PROGRAMME
REPORT OF DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of the report

- 1 The purpose of this report is to update the Committee with the progress on the Social Care Reform Programme in respect of charging policy reform, digital and system development, and assurance.

Policy Framework and Previous Decisions

- 2 The “People at the Heart of Care” White Paper sets out the Government’s 10-year vision of how it proposes to transform support and care in England. The proposals contained within the White Paper include:
 - i. Enabling individuals to navigate the system to find the right care and support and setting a cap on what individuals will need to pay towards their care;
 - ii. An emphasis on the duty of a Local Authority to shape healthy and diverse social care markets;
 - iii. Supporting local authorities to deliver reform by giving the Care Quality Commission (CQC) the power to assure the quality of local authority social care;
 - iv. Initiatives to support the social care workforce, emphasising transferable learning and wellbeing.
- 3 Social care reform has been discussed at several previous Committee meetings. An overview of the social care reform proposals was presented on 24 January 2022. On 6 June 2022, the Committee considered a report which set out the policy background to the Charging Reform and the proposed Assurance Criteria which the CQC will use when visiting local authorities.
- 4 On 5 September 2022, the Committee received a report setting out the policy background to the Charging Reform and the key implications for adult social care in Leicestershire. The Committee was also provided with information on the nationally mandated Fair Cost of Care (FCOC) analysis in preparation for a report being presented to the Cabinet in September to seek approval for submission to the Department of Health and Social Care (DHSC) for the FCOC analysis and Market Sustainability Plan (MSP).
- 5 On 23 September 2022, the Cabinet agreed that the Director of Adults and Communities, in consultation with the Director of Corporate Resources and following consultation with Lead Members for Adults and Communities and Resources, be authorised to:

- a) submit a response to the Government consultation on the distribution of funding to support the reform of the Adult Social Care Charging System in 2023 to 2024;
- b) submit the final version of the outcome of the FCOC exercise for care homes and home care and the initial MSP, including commissioning proposals for 2023/24 and 2024/25, to the DHSC before the 14 October 2022 deadline.

Background

Key implications of Social Care Reform

- 6 As noted in the previous reports, the Government has set out a vision for Social Care Reform which has several implications for local government, including:
 - i. The requirement to complete a FCOC and produce a MSP by 14 October 2022 (covered above).
 - ii. The introduction of Charging Reform, the Care Cap, and the greater requirement to support self-funders purchase care, requires local authorities to establish systems for metering against the Cap, and look at ways to help self-funders navigate how to access support and purchase appropriate care.
 - iii. The CQC will be given powers to assure the effectiveness of local authorities in delivering adult social care (initial proposals for which were set out in the report to this Committee on 6 June 2022).
 - iv. Funding issues resulting from the potential costs of the FCOC exercise, implementing Charging Reform, including new technological tools to help self-service and meter the Care Cap, additional staffing required to support self-funders, and resources to support and prepare for the CQC assurance visit.

Progress in Delivering the Social Care Reform Programme

- 7 Robust programme management governance structures have been put in place to manage the requirements of Social Care Reform. Seven workstreams have been established, each led by a member of the Departmental Management Team, to manage specific aspects of the programme which are accountable to a monthly Programme Board. A Programme Manager has been appointed to manage programme risk and have strategic oversight of the workstreams and ensure that the programme deliverables are delivered to target dates in the most cost-effective way possible.
- 8 The work programme for the Social Care Reform Programme is progressing well and to target. During the next three months there are a number of deliverables to be achieved and key milestones for the Social Care Reform Programme, summarised in the table overleaf:

Workstream	Key Milestones	Current status
Assurance	Initial draft self-assessment in preparation for CQC Quality Assurance to Programme Board on 8 November 2022	Green
	Draft Assessment to be discussed at East Midlands Association of Directors of Social Services annual conversation on 19 December 2022	Green
Market Shaping and Sustainability	Initial MSP Submission to DHSC - 14 October 2022 (includes Spend Report, Annex A and B)	Green
	Self-Funder Wealth Analysis to be presented at Programme Board on 8 November 2022	Green
	Workforce Demand and capacity Management Programme Board on 8 November	Green
Supporting Social Care Workforce	Soft Market Questionnaire responses shared with Programme Board on 8 November 2022	Green
	Demand and Capacity findings to be shared with Programme Board on 8 November 2022	Green
Systems And Digital	First Party Top Ups Process defined in December 2022	Green
	Purchase order for Care Account functionality (including client finance portal) in November 2022	Green
Charging Reforms	Demand and Capacity analysis, initial analysis of numbers for the financial model in November	Green
	Charging Policy consultation next steps identified by end of November	Green
	Charging policy changes business case for Corporate Resources Departmental Management Team in December	Green
Policy, Communications and Engagement	Invitation to quote starts for specialist consultant to support - Consultation, Engagement and Co-Production support is launched 11 October 2022	Green
	Invitation to quote ends 1 November 2022 - Consultation, Engagement and Co-Production	Green
	Kick Off meeting with awarded consultancy - early November	Green
	CQC preparation position to Programme Board around the collation of the evidence base of relevant Policies and Strategies/Gap analysis by mid-November	Green
	Share draft Equalities Review with Adult Social Care Programme Steering Group on 18 November 2022	Green
	Departmental Equalities Group sign-off Equalities Review on 29 November 2022	Green
	Launch revised Fairer Outcomes Policy in December 2022	Green

Progress in delivering Charging Reform and consultation on changes to the Adult Social Care Charging Policy

- 9 Work continues on the scoping of the key deliverables to ensure that the Charging Reforms are successfully implemented by October 2023.

- 10 Key changes include the Cap on care costs, the introduction of associated care accounts needed to track spend, and the more generous thresholds which increases the capital limits from £14,250-£23,250 to £20,000-£100,000. This means that the Council's Adult Social Care Charging Policy will need to be revised to meet new legislative requirements. The key proposed changes to policy, to take effect from October 2023, can be summarised below:
- i. Additional definitions added to clarify new issues:
 - Administration/arrangement fees;
 - New capital limits;
 - Care Accounts;
 - Care costs cap;
 - Daily living costs;
 - Tariff income.
 - ii. Added care and support services when a person has reached their 'care costs Cap' to the care and support which the Council will not charge for.
 - iii. Top-up Section – redrafted based on current guidance, July 2022 - will need to be further reviewed against new Care and Support and After-care (Choice of Accommodation) Regulations – expected to be issued in Autumn 2022.
 - iv. Right of Appeal and Waiver Section separated into two sections for clarity.
- 11 The Council is required to consult on the changes being proposed to the Adult Social Care Charging Policy. This consultation will also seek to include questions that consider the impact of the current cost of living crisis and operational issues/decisions that may affect the proposed charging policy, such as:
- charging model for respite stays;
 - First party and Third party top-up payments;
 - Disability Related Expenditure (DRE);
 - Charges when absent from services.
- 12 Consideration will be given to the Council's Public Sector Equality Duty to ensure the policy is fair, equitable and non-discriminatory in line with statutory guidance and regulations, and case law.
- 13 More detailed analysis of the current DRE self-assessment levels will take place to provide an evidence base for consultation consideration.
- 14 Subject to further Government announcements regarding the implementation timeline for the reforms, indicative timescales are for a formal launch of an eight-week consultation exercise during January 2023, with the consultation due to close in March 2023. Subject to Cabinet approval the policy could be formally adopted in May 2023.

Technical readiness

- 15 The level of additional demand as a result of the introduction of Care Accounts and the Care Cap is still being assessed. However, it is apparent that the level of demand

is likely to overwhelm the Council's services and potentially lead to a backlog of assessments.

- 16 Therefore, a robust digital first approach needs to be taken with self-funders who approach the Council to complete assessments, and set up and maintain a Care Account on their behalf.
- 17 System suppliers have developed additional capability that will enable the Council to incorporate the new functionality within the case management system. There is also an additional module to provide the self-serve elements.
- 18 The annual cost of this to the Authority is a further £74,000 per annum. It is anticipated that these additional modules will be released in April/May 2023. The supplier is currently putting together a deployment plan for all of its 70+ customers.
- 19 In the interim, self-assessment forms can be designed and processes developed in readiness for the system modules to be installed.
- 20 The self-service functionality will enable people to do 'light touch' assessments that will enable them to get an indicative position on their eligibility and a likely timeframe for when they would reach the Care Cap. Once an account has been set up, people will be able to go online to see the contributions that are being counted towards their Care Cap and be able to produce and download statements at any time.

Digital Readiness

- 21 In order for the Authority to be able to respond to the new demand without adversely affecting the timeframes for all financial assessments, the take-up of digital technology is vital. A robust approach will be taken to make the digital channel the primary means to access Care Accounts.
- 22 Many Government services are further ahead on their journey in moving to online provision. For example, Driver and Vehicle Licensing Agency, Passport Office and Department of Work and Pensions where Universal Credit applications are predominantly online.
- 23 The Authority will maintain an alternative option for those who do not have access to digital tools and/or have no one to support them or where this is required for other accessibility reasons in line with duties in the Equality Act 2010.
- 24 The workforce challenge is twofold, firstly, training in the changes to policy and practice and secondly embedding changes in culture to adopt a digital first approach.
- 25 Staff will continue to be encouraged to use the digital tools available to them, and to promote digital first alternatives that already exist for people such as online care and support assessments and financial assessments.

Preparing for a CQC Assurance Visit

- 26 The CQC will begin Assurance Visits to local authorities regarding their adult social care functions in April 2023. Adult social care services will receive a rating ranging

from Outstanding, Good, Requires Improvement, to Inadequate. The last may trigger intervention either via peer support or directly from the Government.

- 27 In October 2022, the CQC released updated proposals for the four main themes which form the assurance and inspection process and clarified what it considers to constitute good practice. These are:
- *Working with people (including unpaid carers)* – assessing needs, care planning and review, supporting people to live healthier lives, prevention, well-being, information and advice.
 - *Providing support* – market shaping, commissioning, workforce capacity and capability, integration and partnership working.
 - *Ensuring safety* – through safeguarding enquiries, reviews, Safeguarding Adults Board, safe systems and continuity of care.
 - *Leadership* – culture, strategic planning, learning, improvement, innovation, governance, management and sustainability.
- 28 The CQC has provided detailed proposals on the best practice evidence it will be looking for in each of the four themes.
- 29 At the start of the assessment process, the Council will be asked to complete and submit a Local Authority Self-Assessment and Information Return. This requests several contextual documents and information items for the local authority to provide to the CQC Assessment Team.
- 30 The Council will also be required to undertake a self-assessment of performance in relation to the quality statements. The purpose of this is to enable the Council to assess and make judgements about its performance in relation to the quality statements, using evidence to support those judgements, highlight key successes and identify any mitigating actions being taken to address areas for improvement.
- 31 Work has been undertaken to identify policies and documentation produced by the Adults and Communities Department and corporately which are relevant to the evidence which CQC will use to review service performance. An initial self-assessment is currently being developed, aimed at identifying the strengths of the Department's adult social care services, any potential areas of improvement and improvement plans. This will be produced by the end of November 2022, followed by further engagement with staff and refinement of the self-assessment, with a second iteration completed by the end of March 2023.
- 32 Some areas have already been identified as a focus for improvement, including:
- How well the Council engages with people who access services and the co-production of policies, strategies and service design;
 - Feedback on satisfaction with services and access to information and advice;
 - Development of joint-commissioning strategies with partner agencies;
 - Addressing the delays/people waiting for assessments and reviews.
- 33 A programme of engagement activities to engage partners, providers, residents, service users and carers in drafting the self-assessment and to raise awareness of the assurance process will take place from January-March 2023. In February or

March 2023, it is proposed to share the draft self-assessment with the Committee to provide the opportunity for the Committee to review its contents around strengths, areas for improvement and improvement plans.

Consultation

- 34 As set out in paragraph 14 above, it is intended to consult with the public on the changes required to the Adult Social Care Charging Policy. Indicative timescales are for a formal launch of the eight-week consultation to commence in January 2023, subject to Cabinet approval.
- 35 It is also intended to carry out engagement with Adults and Communities staff, Elected Members, the voluntary sector, and partner organisations on the contents of our self-assessment (paragraph 31 above).

Resource Implications

- 36 The programme continues to take up significant resources across the Department and within the Transformation Unit.
- 37 Considerable work continues to monitor and model the financial implications of Social Care Reform to inform the Medium Term Financial Strategy for 2023/24 to 2026/27. Analysis of the implications of the additional care and financial assessments is underway to help plan for any additional staff required to undertake this increased workload. The financial position of self-funders is being modelled so that the Council can forecast how many are expected to reach the Care Cap and how many will come under the new £100,000 threshold for means-tested support.
- 38 The system supplier has now released costs of their module that will be required to deliver the base Care Account functionality. This is an annual charge based on population and, for Leicestershire, the annual cost is £50,000 per annum. There is a further annual charge of £23,700, as referenced in paragraph 18 above, for an optional module that will enable self-service functionality for people. Both modules are required if the Council is to avoid more recruitment of staff to process applications and Care Cap statements.
- 39 The Director of Corporate Resources and Director of Law and Governance have been consulted on the content of this report.

Timetable for Decisions

- 40 It is intended that the proposed approach for consulting on the Charging Policy will be presented to the Cabinet on 13 January for approval.
- 41 The Committee will continue to receive regular updates with the next report scheduled for January 2023.

Conclusions

- 42 The Social Care Reform Programme brings challenges for its successful implementation around the cost of the changes required, staffing capacity, the

charging reforms, and meeting tight government deadlines. A robust programme management structure is in place to minimise and mitigate risk where possible. Considerable progress has been made within the programme workstreams in delivering Social Care Reform which is highlighted in this report.

- 43 There remains significant work to complete all the requirements of Charging Reform, market sustainability and assurance.
- 44 Lobbying continues from the local government on the pressures Social Care Reforms are bringing to local authorities at a time of significant fiscal challenge. With rising inflation and uncertainty as to how the reforms will be funded, it is unclear if the timescales initially set by the Government will change. Members will be kept informed should any changes to the programme be announced in the next few months.

Background Papers

“People at the Heart of Care” White Paper

<https://bit.ly/3TWwXg7>

Report to the Adults and Communities Overview and Scrutiny Committee: 24 January 2022 – Adult Social Care Reform and Charging

<https://politics.leics.gov.uk/ieListDocuments.aspx?CId=1040&MId=6838&Ver=4>

Report to the Adults and Communities Overview and Scrutiny Committee: 6 June 2022 – Update on the Social Care Reform Programme

<https://politics.leics.gov.uk/ieListDocuments.aspx?MId=6840>

Report to the Cabinet: 23 September 2022 – Adult Social Care Reform – Market Shaping and Charging Reform

<https://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MId=6776&Ver=4>

Circulation under the Local Issues Alert Procedure

- 45 None.

Equality and Human Rights Implications

- 46 A review of the equalities implications of the implementation of the Social Care Reform Programme will be undertaken through workshops with officers and individuals with lived experience of accessing adult social care services and/or who represent different protected characteristics. The findings of this review will be presented to the Programme Board for approval in January 2023.

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ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
7 NOVEMBER 2022

UPDATE ON THE PROVISION AND PROCURMENT OF
COMMUNITY LIFE CHOICES SERVICES (DAY SERVICES)

REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of the report

1. The purpose of this report is to provide the Committee with an update on the provision and procurement of commissioned Community Life Choices (CLC) services and the progress in supporting existing service users to transfer from in-house CLC services to appropriate alternative services.
2. The Committee is asked to note the update and consider and comment on the progress and developments to date.

Policy Framework and Previous Decisions

3. On 7 June 2021, the Committee received a report which outlined proposals for the future provision of in-house CLC services and procurement for commissioned CLC services. The Committee confirmed its support on the proposed way forward and requested to be kept informed of future developments.
4. On 22 June 2021, the Cabinet subsequently agreed to a procurement exercise to establish a new CLC provider Framework, with a view to the new service being implemented by the end of November 2021; and agreed that the Director of Adults and Communities be authorised to commence a consultation exercise on proposals to reduce and re-focus the Council's in-house CLC services and help existing service users move to appropriate alternative services.
5. On 1 November 2021, the Committee received a report with an update on the procurement of commissioned CLC services and consultation feedback received on the proposed changes to the provision of in-house CLC services.
6. On 14 December 2021, the Cabinet received a report advising of the outcomes of the CLC Framework procurement and the consultation on proposed changes to the provision of the in-house CLC services (day services). In summary, the Cabinet agreed the following recommendations:
 - The in-house short breaks services integrate a CLC offer as part of people's short breaks stay at the existing facilities in Melton Mowbray, Wigston and Hinckley;

- That all in-house services providing long term maintenance CLC packages be closed and future provision of care and support for existing and new service users be provided via the CLC Framework;
- That it be noted that the existing users of the Council's in-house CLC services will be fully supported in their transition to alternative services.

Background

7. The County Council operates a commissioning framework for the provision of day services known as CLC, which allows service users choice of provision from a selection of pre-approved providers.
8. In addition to the Framework, at the commencement of the consultation there were 10 building-based day services provided in-house employing 43 full time equivalent staff across locations in Ashby, Blaby, Coalville, Hinckley, Loughborough (two centres), Market Harborough, Melton Mowbray, South Wigston and Wigston. The Council provided a mix of CLC services which were either within a group or one-to-one setting delivered either from building-based or community services as half or full day sessions depending on the customer's assessed need.
9. The County Council's market share within the CLC provider market had steadily reduced over several years. The Covid-19 pandemic also meant that capacity to deliver in-house services was dramatically reduced, leading to a requirement to consider how best to use the resources available to the Council to deliver the right outcomes for service users. This resulted in proposals to better utilise alternative provision within the provider market where there is greater and more flexible capacity.
10. To that end the Council proposed to re-focus its in-house services on crisis care, short term reablement and enablement, support for carers through the delivery of a responsive seven day a week service and ceasing the provision of long-term maintenance CLC support.
11. Through the procurement of the CLC Framework, it was determined that sufficient capacity could be developed in the external market to meet the needs of people who attend or attended in-house CLC services.

Update on procurement of the new CLC Framework

12. The CLC Framework closed to bidders on 27 September 2021. Of the 37 tender responses received, 16 providers included an application to deliver services for people with Profound and Multiple Learning Disabilities (PMLD). The outcome of the CLC commissioning resulted in 27 providers successfully joining the CLC Framework.
13. Following the decision to close in-house services, the CLC Framework was re-opened to allow further providers to apply to join the framework. The Framework re-opened on 27 April 2022 resulting in a further three additional providers being commissioned to provide CLC services in the County.

14. Out of the three new providers, one is currently unable to offer a PMLD service and the remaining two providers tendered to provide PMLD services. However, neither of them are operationally ready to start providing PMLD services at this time. The Council is currently working with these providers to establish when they will be in a position to support people via the CLC framework.
15. Currently the main gaps within CLC services are for PMLD services within the Market Harborough and Loughborough areas. There are also shortages in Personal Assistants (PAs) across the County, which has been impacted by the national recruitment shortages within social care. The Commissioning Team is currently working with existing and new potential PA providers to develop these services.

Update on the In-house CLC Provision

16. Following approval by the Cabinet in December 2021 to the changes to in-house CLC services, the Council's Adults and Communities Department continues to fulfil its commitment to work closely and sensitively with all existing service users and their relatives and carers. A dedicated team was established to conduct holistic service user reviews to ensure the complex care and support needs of all individuals are fully considered. The team have developed personalised transition plans and engaged with all relevant individuals in supporting service users to identify appropriate alternative services.
17. From the initial 112 service users registered with the in-house CLC services at the start of the consultation in 2021, 93 individuals have been successfully supported to move to alternative appropriate services. One example of a successful transition of service is set out below:

A person with a learning disability and sensory impairment (registered blind) who is a keen music enthusiast. The family were very concerned about the decision taken by the Council and worried about the negative impact this would have on their relative in transitioning to an alternative CLC arrangement after 20 years of attendance at an in-house CLC service.

The individual is now settled and enjoying their attendance at an alternative CLC service close to home, actively participating with meaningful activities, making friends, and pursuing opportunities in music.

Following a review of the arrangements, the family expressed their positive experiences in the way the Council engaged, reassured, and facilitated a person-centred transition plan for their relative. The individual and their family are all really pleased with the outcome.

18. Transition plans have been prepared for the remaining 19 service users where alternative provision has been identified.
19. The current in-house CLC service provision is outlined below:

In-house CLC position	No. of service users
The Trees, Hinckley	Closed
Timber Street, Wigston	Closed
Community Resource Centre, Coalville	Closed
Hood Court, Ashby	Closed
Roman Way, Market Harborough	5
Bridgeview, Melton	2
Carlton Drive/Blaby Base, Wigston	4
Charnwood CLC/Victoria, Loughborough	8
Total	19

20. The impacts of these service changes on staff within the service areas affected is considered in parallel with transition arrangements for service users.
21. The Council maintains a strong focus on the wellbeing support for staff and wherever possible working with staff to develop skills, access training and consider redeployment opportunities in minimising redundancies.

Resource Implications

22. The budget for in-house CLC services before the changes were implemented was circa £3 million. Analysis is ongoing to quantify future funding, balancing the cost of in-house provision against expenditure on externally provided alternative services.
23. Staffing at in-house CLC services will be carefully managed to maintain a safe level of service and good quality of support whilst facilitating the transition of the remaining service users. There are sufficient alternative posts within the Department for any staff displaced as a result of the changes.
24. The Director of Corporate Resources and Director of Law and Governance have been consulted on the content of this report.

Conclusions

25. To date, the Council has made significant progress in supporting transitions for individuals to appropriate alternative services using the CLC framework.
26. The Committee is asked to note the update and consider and comment on the progress on the developments to date.

Background papers

- Leicestershire County Council Strategic Plan 2018-22 - <https://www.leicestershire.gov.uk/sites/default/files/field/pdf/2021/2/1/LCC-Strategic-Plan-2018-22.pdf>
- Delivering Wellbeing and Opportunity in Leicestershire – Adults and Communities Department Ambitions and Strategy for 2020-24 – <https://resources.leicestershire.gov.uk/sites/resource/files/field/pdf/2020/9/30/Vision-and-Strategy-for-Adults-and-Communities-Department-2020-2024.pdf>

- Report to Adults and Communities Overview and Scrutiny Committee: 6 September 2016 - Community Life Choices Framework 2017-20 and Consultation on Future Delivery - <http://politics.leics.gov.uk/ieListDocuments.aspx?CId=1040&MId=4521&Ver=4>
- Report to the Cabinet 11 October 2016 – Community Life Choices Framework 2017-20 - Outcome of Consultation on Future Delivery - <http://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MId=4606&Ver=4>
- Report to Adults and Communities Overview and Scrutiny Committee – 1 November 2016 - Community Life Choices Framework 2017-20 – Outcome of Consultation on Future Delivery - <http://politics.leics.gov.uk/ieListDocuments.aspx?CId=1040&MId=4936&Ver=4>
- Report to Adults and Communities Overview and Scrutiny Committee – 7 June 2021 – Procurement of Community Life Choices Services – <http://politics.leics.gov.uk/ieListDocuments.aspx?CId=1040&MId=6462>
- Report to the Cabinet: 22 June 2021 – Procurement of Community Life Choices Services - <http://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MId=6444>
- Report to the Cabinet: 14 December 2021 - Procurement of Community Life Choices Services - <https://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MId=6449&Ver=4>

Circulation under the Local Issues Alert Procedure

27. None.

Equality and Human Rights Implications

28. An Equality and Human Rights Impact Assessment screening document was completed in relation to the consultation. It concluded that the recommendations should have a neutral impact on the services.

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ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
7 NOVEMBER 2022

MANAGING DEMAND IN ADULT SOCIAL CARE

REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of the report

1. The purpose of this report is to advise the Committee of the current demand pressures being faced by the County Council's Adults and Communities Department, including people waiting for care and support, an overview of waiting lists and the current allocations across the County Council's Adults and Communities Department Care Pathway Teams.
2. The Committee is asked to note this report and make any comment on the issues covered.

Policy Framework and Previous Decisions

3. The Care Act (2014) places a duty on local authorities to carry out an assessment of anyone who appears to require care and support, regardless of their likely eligibility for state-funded care. The focus of the assessment is on the person's needs and how they impact on their wellbeing, and the outcomes they want to achieve.
4. Where it appears to the local authority that a person may have needs for care and support, the authority must assess their needs and ascertain the level of support required.
5. The local authority has a duty to carry out an assessment regardless of the perceived level of need of the person or what financial resources that person has available to them.
6. The Care and Support (Eligibility Criteria) Regulations 2015 implemented a new national eligibility criteria for access to adult care and support, and for access to carer support which applies to all English Local authorities. Local authorities cannot restrict eligibility beyond this level.
7. The national eligibility criteria requires that for a person's needs to be eligible for social care support, they must relate to a physical, or mental impairment or illness, such that a person cannot achieve at least two outcomes in their day-to-day life (as set out in the regulations), with the consequence that there is a significant impact on their wellbeing. The eligibility determination must be made without regard to whether a carer might be meeting those needs at the given time.
8. The Adults and Communities Department Ambitions and Strategy for 2020–2024 "Delivering Wellbeing and Opportunity in Leicestershire," approved by the Cabinet in

September 2020 sets out how the Council aims to meet its responsibilities to deliver Wellbeing to the people of Leicestershire.

Background

9. On 4 August 2022, the Association of Directors of Adult Social Services (ADASS) published the results of a survey, "People Waiting for Assessments, Care or Reviews".
10. Some key headline information is listed below. The report collated information and figures from local authorities and stated that, nationally adult social care is buckling under unprecedented pressures:
 - i. The latest figures have emerged from a count carried out by ADASS on 30 April 2022, through its members in local councils across England. The results are extrapolated from responses from 83 councils (55% of those concerned).
 - ii. Almost 300,000 people are now waiting for an assessment of their needs by social workers, an increase of 90,000 (44%) in five months. One in four has been waiting longer than six months.
 - iii. At this rate of increase, the number waiting will hit 400,000 by November 2022 – double the total 12 months previously.
 - iv. On the count date, a total 294,449 people were awaiting the for an assessment of their care and support needs, of whom 73,792 had been waiting more than six months.
 - v. A further 37,447 people who had been assessed as needing a service were waiting for it to begin or for their first direct payment to arrange it for themselves. 210,106 people receiving a service or payment were overdue for a review under the terms of the Care Act.
 - vi. In all, 542,002 people were awaiting assessment, review or the start of a service or direct payment – an increase of 37% on an equivalent count in November last year.
 - vii. 82% of respondents reported increased numbers of referrals of people from hospital and 74% were reporting more referrals or requests for support from the community.
11. In April 2022, the adult social care teams within the Department were restructured. The restructure introduced several service and performance improvements towards delivery of the Adults and Communities Strategy and the Target Operating Model, reflecting the short-term focussed interventions provided to prevent, delay, and reduce dependency, and the longer-term case management of people who use the Council's services to meet their eligible social care needs.

Adult Social Care teams and service delivery models following restructure

12. Following restructure, the Care Pathway model of working is determined by a Home First, Short Term Intervention and Hospital Discharge, and a longer-term Operational Commissioning service which deals with complex case management and commissioning.

Home First, Short Term Intervention and Hospital Discharge, East and West

13. This service, on the whole deals, with older adults over the age of 65. Home First services aim to provide short-term, targeted intervention to:
- support discharges from hospitals;
 - prevent hospital admission;
 - prevent admission to long-term building-based care;
 - respond to people experiencing a social care crisis in the community;
 - support recovery to regain independence or a level of sustained and stable improvement.
14. Staff within the service work with partners to achieve the best possible outcome for individuals with health and social care needs. The case management function will provide a knowledgeable and flexible response to meet local demand. The aim is to work in a more co-ordinated way to make best use of available services.

Operational Commissioning

15. This includes a Cognitive and Physical Disability Service, Learning Disability and Autism Service and the Mental Health Service and is a place-based service within the County divided into three paired locality district areas:
- Blaby, Oadby and Wigston, and Harborough;
 - Charnwood and Melton;
 - North West Leicestershire and Hinckley and Bosworth.
16. Complex and longer-term work (not within the remit of Home First) is assigned to teams in three specialisms as outlined below in paragraphs 17-19. Co-working is encouraged when meeting the needs of complex individuals. The clear expectation is that place-based teams will meet the needs of those within their locality area.
17. Locality based teams include a mix of the following with a primary focus to promote and progress independence and wellbeing:
- i. Community Reablement Workers who support people for a time limited period to achieve independence goals;
 - ii. Community Support Workers who deliver Care Act assessment, support planning, commission eligible services, and case management;
 - iii. Social Workers who are responsible for more complex work including Care Act Assessment, Safeguarding, Vulnerable Adults Risk Management, Mental Capacity Assessments/Best Interests decisions, Court work.
18. *Cognitive and Physical Disability* - The service provides support for adults with physical disabilities and older people with eligible needs related to frailty and cognitive disabilities, arising from long term conditions such as dementia, stroke, Parkinson's disease and brain injury. The service supports adults with early onset dementia including alcohol related dementia where the primary need is linked to needs arising from dementia rather than alcohol dependency.

19. *Learning Disability and Autism* provides support for all adults over the age of 18 who approach the local authority for social care support in relation to either learning disability or autism.
20. The *Mental Health Service* provides support for all adults over the age of 18 who approach the local authority for social care support in relation to either mental health or substance misuse support. This in the main is linked to whether people will be supported through the Leicester, Leicestershire and Rutland (LLR) Integrated Community Mental Health System.
21. The Adult and Communities Department also includes a range of other service areas that are responsible for supporting the County Council with compliance with its Care Act duties. These services and their roles are outlined below:
 - i. The *Customer Service Centre (CSC)* is the first point of contact for adult social care. It receives all new requests for support for adult social care by three channels - telephone, web-based contact form, or via the digital portal. The CSC provides advice and information to the people of Leicestershire, internal and external partners. Staff signpost people to the most appropriate service and/or refer to external partners such as the police, Leicestershire Partnership NHS Trust or LLR Integrated Care Board. The CSC aims to resolve as many queries at the first point of contact as possible.
 - ii. The *Safeguarding Adult Team* ensures that there is a consistent and timely approach to applying safeguarding thresholds, identifying and addressing immediate risk and establishing the outcomes of the person involved, in line with "Making Safeguarding Personal" principles.
 - iii. The *Domiciliary Review Team* provide a county-wide response undertaking statutory reviews of domiciliary care, Community Life Choices and direct payments for all people living in their own homes (save where a person has Section 117 aftercare eligibility under the Mental Health Act 1983, or is living within supported living).
 - iv. The *Accommodation Review Team* is responsible for carrying out an annual statutory Care Act Review for all service users with a funded residential/supported living/Shared Lives package of care from the local authority.
 - v. The *Occupational Therapy (OT) Service* carries out assessments and makes recommendations to promote safety and maximise people's independence and wellbeing. OTs focus on activities and occupations which are meaningful to a person and look at ways of enabling them to manage these activities as safely and independently as possible. OTs work closely with care providers and provide equipment to enable safe moving and handling in the home.
 - vi. The *Deprivation of Liberty Safeguards (DOLS) Team* provides multi-professional assessments for people who lack the mental capacity to consent to their support package or restrictions in place to keep them safe and well. There are five assessments that make up the DOLS that require sign-off by social care managers.

- vii. The *Young Adult Disabilities Team* supports young people with an Education Health and Care Plan, who are likely to have needs for care and support as an adult to ensure those eligible social care needs are met. The team works in partnership with Council's Children and Family Services Department and other agencies, including local special education schools and health, and provide information advice and guidance about adult social care for people aged over 16 (from year 11) to help prepare them for the journey into adulthood.

Departmental Activity

22. The table below illustrates activity completed during the last full year of data collection during 2021-2022:

Activity	Number in 2021-22
Contacts	38,909
Assessments	7,795
Reviews	12,195

23. The data on waiting lists and current allocations collected by managers is from:

- Tableau dashboards which were developed in relation to providing managers with data and overview of key performance indicators, relating to the Target Operating Model.
- Reports from the Council's IT care management system (LAS).
- Soft information that is collected by individual managers to aid performance and quality monitoring.
- Departmental performance considered monthly by management.

24. Below is a summary of the findings from a managers' audit undertaken on 1 September 2022, and the Business Intelligence Information available in October 2022. Although there is no national set timeline to complete a Care Act assessment, best practice timescales for assessment set within the Department would be within four weeks/28 days from referral.

25. The number of people awaiting allocation to a named worker in October 2022 is shown in the table below:

Service Area	Total Waiting	Waiting >28 Days #	Waiting >28 Days %	Waiting >6 Mths #	Waiting >6 Mths %
Home First	899	576	64.1%	1	0.1%
Cognitive and Physical Disability	328	217	66.2%	22	6.7%
Learning Disability and Autism	76	33	43.4%	2	2.6%

Mental Health	250	159	63.6%	9	3.6%
Occupational Therapy	624	521	83.5%	133	21.3%
Deprivation of Liberty Safeguards	799	687	85.9%	174	21.8%

26. The Care Act statutory timescales for review of people who are in receipt of services is 12 monthly (or before if there is a significant change in circumstance).
27. The table below shows the number of overdue reviews for people in receipt of long-term services for more than 12 months as at October 2022:

Service Type	Total Overdue	Overdue by < 6 Mths	Overdue by 6-12 Mths	Overdue by >12 mths	Overdue by >6 Mths
Community	782	605	126	51	22.6%
Residential	529	387	117	25	26.8%
Total	1,311	992	243	76	24.3%

Management of Case Allocation

28. New referrals are either resolved by the CSC team or transferred to the appropriate Care Pathway Team for follow up.
29. All teams operate an urgent function on a rota basis. The urgent function is in place to pick up immediate need and deals with new referrals, unallocated cases and cases where the allocated worker is not available due to annual leave or other short-term absence.
30. Team Managers/Leaders review the lists of unallocated cases as they are received into the team trays. Cases are given a priority status – High, Medium, Low - based on the adult social care system definitions. The attached Appendix sets out the breadth of activity in terms of high, medium and low priority.
31. Unallocated cases are reviewed on a weekly basis and re-prioritised as needed. Cases are allocated weekly on a priority basis.
32. Case progression and one-to-one supervision sessions are held with allocated workers and group supervision sessions are in place with managers and staff from other areas of Adults and Communities to ensure best outcomes and use of wider resources where appropriate.
33. Requests for new DOLS assessments are prioritised in date order and there is a framework contract in place to procure independent assessments to increase capacity and manage demand. Requests for renewals are up to date.

Nature of waits and activity held in teams

34. The table below sets out the proportion of cases of cases awaiting allocation within each priority weighting:

Service Area	Low	Medium	High
Home First	11.6%	48.8%	39.6%
Cognitive and Physical Disability	15.5%	45.0%	39.5%
Learning Disability and Autism	12.7%	51.2%	36.1%
Mental Health	21.6%	39.8%	38.6%
Occupational Therapy	14.7%	76.6%	8.7%
Total	14.2%	56.5%	29.4%

Analysis of local and national data

35. Further detail and analysis of the ADASS survey report, completed by the Council's Data and Business Intelligence Team, compared data within the national ADASS report and the position for the Adults and Communities Department.
36. In the report, ADASS stated that the number of people waiting for assessment, care, or review across the country had increased by 36.9% between November 2021 and April 2022. Leicestershire took part in the ADASS surveys of these two months, and equivalent figures show a 34.7% increase from 2,700 waiting in November 2021 to 3,629 in April 2022.
37. The number of people specifically waiting for an assessment increased by 30.2% across England based on those responding to the ADASS surveys in March and April 2022. In Leicestershire the equivalent increase was 4.6%.
38. It should be noted these figures do not compare back to November 2021 due to an adjustment in ADASS definitions to include those awaiting a DOLS assessment.
39. In England, one in four (25%) people had been waiting for an assessment in April for over six months. In Leicestershire this proportion was lower at 16%.
40. Comparing the position between April 2022 and March 2022, the number of people waiting for care and support or a direct payment to begin in England, increased by 39.8% in just one month. In Leicestershire, the change in those few weeks was a 4% decrease (three people) from 72 to 69 people. [The Department's Home Care wait list numbers have been decreasing through this calendar year, particularly the first 4-5 months, when the current figure as of 30 August was 56.]
41. The number of people in receipt of services for 12 or more months who had waited for more than a year for their Care Act review increased by 2.9% nationally between March and April 2022 (having fallen by 6% between February and March). In Leicestershire the difference between March and April was a 2% reduction – down from 1,600 waiting in March to 1,570 in April.

Resource Implications

42. Following the restructure in April 2022, the Care Pathway establishment staff numbers of full-time equivalent posts (FTE) was 365 excluding management posts. Of the 365 posts, there were 49 FTE vacancies. Following a targeted recruitment drive, this had reduced to 19 FTE vacancies as at September 2022.
43. The staff resource available to meet demand for assessments and reviews of care arrangements has a direct bearing on the number of people waiting for allocation and the time people will wait to be allocated. Whilst the Department has had some success in recruitment during the last year, reducing vacancies from 13% to 5% across the pathway, there remains a target reduction in posts as part of the departmental Medium Term Financial Strategy requirement.
44. The numbers of people waiting for assessment or review could affect the forecasting of departmental spend against budgets regarding retrospective funding of agreed service provision.
45. Increased demand for assessment and review could affect the amount of staff resource needed if the ambition is to reduce waiting times significantly.
46. Social Care reforms due to be implemented April 2023 could see a significant increase in Care Act assessments for self-funders and quality assurance inspection will look at how the Department manages its Waits and Risks to inform its assurance outcomes ratings.
47. The Director of Corporate Resources and Director of Law and Governance have been consulted on the content of this report.

Conclusions

48. Managing demand and associate risk is a core part of adult social care activity. Following the unprecedented years of the Covid-19 pandemic, work previously undertaken with Newton Europe on the Target Operating Model, and the subsequent staffing review, the Department is seeking assurance that current demands are well managed and risks identified.
49. Whilst it is accepted that teams will have waiting lists for case allocations, the timeliness of interventions to manage demands are key to providing good outcomes for individuals and managing demands and costs for the Council.
50. The audit undertaken gives assurance that people waiting for assessment and or review within Care Pathway teams are well managed and that the Department has a good oversight via the data dashboards and the individual team management process.
51. Senior managers have oversight and access to performance data and this is reported within the Department on a monthly basis. Team Managers have access to Tableau dashboards that collect team performance information to inform service delivery and individual worker performance.

52. Whilst it is expected that the Department will always have some waits for allocation it would be reasonable to expect that new referrals are allocated within four weeks and that people who are in receipt of services are reviewed within a 12-month period.
53. The levels of unallocated cases and duration of waits currently have been impacted by increased demand, recruitment and retention issues, and a legacy backlog of cases already in the system pre-restructure as an impact of the Covid pandemic over the past two years.
54. It is recognised that teams are proactive in their management of risks but need to have further guidance and a consistent approach. A policy document is being developed aimed at providing the advice, information, and data references to ensure a robust and consistent management of waits and associated risks going forward.
55. In the National Survey report, ADASS stated that the number of people waiting for assessment, care, or review across the country had increased by 36.9% between November 2021 and April 2022. Leicestershire took part in the ADASS surveys, and the equivalent figures show a 34.7% increase from 2,700 waiting in November 2021 to 3,629 in April 2022.
56. Overall, the position in Leicestershire is consistent with the position experienced across all English authorities and compares favourably in some areas, with an improving trajectory as noted below.
57. Summary of data performance since April 2022:

Definition	23 May 2022	27 June 2022	1 September 2022
Count of cases in locality planned trays and DOLS	1,663	1,454	1,494
Count of cases in locality planned trays for over six months	305	246	165
Count from LAS of current requests with Home Care Brokers and awaiting package of care start	46	47	69
Number of service users without a review in the past 12 months	1,598	1,566	1,364

58. As part of performance monitoring within the Target Operating Model, the audit of waits and risks will be included within the regular audit programme.

Background papers

- Report to the Cabinet: 23 November 2018 – Adult Social Care Target Operating Model - <https://politics.leics.gov.uk/ieListDocuments.aspx?MId=5185>
- Delivering Wellbeing and Opportunity in Leicestershire – Adults and Communities Department Ambitions and Strategy for 2020-24 - <https://bit.ly/3swoTal>
- Association of Directors of Adult Social Services (ADASS) - Results of a survey, People Waiting for Assessments, Care or Reviews – <https://www.adass.org.uk/surveys/waiting-for-care-july-22>

Circulation under the Local Issues Alert Procedure

59. None.

Equality and Human Rights Implications

60. The Adults and Communities Department supports people from all diverse communities in Leicestershire. However, there are no specific equal opportunities implications to note as part of this report.

Appendix

Assessment of Priority for Assessment in Adult Social Care

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Assessment of Priority for Assessment in Adult Social Care

Team Managers/Leaders review the lists of unallocated cases as they are received into the team trays. Cases are given a priority status – High, Medium, Low - based on the adult social care system definitions. The tables below set out the breadth of activity in terms of high, medium and low priority.

High priority	<ul style="list-style-type: none"> • New cases requiring care and support assessment • Environmental concerns • Safeguarding concerns • Care placements at risk • Significant carer strain • Hospital discharge to assess reviews • Mental Capacity Assessments • Deputyship concerns • Re-assessment due to change in needs • Hospital discharge with no assessment • Court of Protection • Legal involvement cases • Significant self-neglect concerns • Complex family issues impacting on care and support needs • Urgent home closures and reprovision • Urgent respite or carer unavailability
Medium priority	<ul style="list-style-type: none"> • Planned respite • Fund droppers • Social inclusion • Change in direct payments rates • Direct payment queries • Assessment for supported living/family relinquishing care • Request for reablement • Sourcing new provider Court of Protection for deputyship • Review non-urgent • Reablement (existing service provision) • Carers assessment • Section 117 aftercare • Mental Health reablement assessments • Change in need – requires review • Review for potential for supported living • Carers - personal budget/one off grants • Prison discharge and Continuing Healthcare reviews • Direct payments increase requested • Direct payments balance clawback review
Low priority	<ul style="list-style-type: none"> • Fund droppers • Await package of care • Request for increase in care home/residential charges (no change in needs)

- | | |
|--|---|
| | <ul style="list-style-type: none">• Change of service provider requests• Mental Capacity Act finances• Request to find new Personal Assistant• Housing issues• Consideration of Community Life Choices• Debt resolution from finance – not paying contribution• Community DOLS referral• Ordinary Residence dispute• Debt cases |
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ADULT AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
7 NOVEMBER 2022

CONSULTATION ON ELIGIBILITY FOR CARE TECHNOLOGY SERVICES

REPORT OF DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of the Report

1. The purpose of this report is to seek the views of the Committee on a proposed consultation on the eligibility for care technology services that were previously provided on a discretionary basis.

Policy Framework and Previous Decisions

2. The relevant policy framework is the Adults and Communities Department Ambitions and Strategy for 2020–2024.

Background

3. The newly transformed County Council Care Technology (CT) service has been in place since 25 April 2022. Following the launch, demand for the service has been strong and is growing.
4. The service is currently on track to meet or exceed its current targets for new CT users (of 1,450 in year one). The new equipment being provided includes falls and seizure sensors, linked to 24-hour monitoring services; sensor pads in respect of personal care and alerts for people who are at risk of wandering.
5. The CT service is provided on an eligibility basis. This is defined as a person being assessed as having eligible needs under the Care Act (2014) or is likely to do so in the next six months. The person must also be over 18 and live in Leicestershire. If a person is not eligible, then they are signposted to alternative support.
6. The Council has an amount of legacy equipment that has been previously provided on a discretionary basis, particularly to people who are deaf or hearing impaired. Calls continue to be received regarding repairs/maintenance of this legacy equipment. This equipment includes doorbells, smoke detectors and loop systems.
7. Since the launch of the new CT service, a discretionary repair and maintenance service has been provided, but this is not sustainable as demand increases for statutory provision.
8. It is proposed that requests for repairs and maintenance for legacy equipment are considered as part of a care and support review and be subject to Care Act eligibility criteria to ensure fairness across the service and those it supports.

9. When a person who is deaf or hard of hearing is assessed as having eligible care and support needs and care technology can help meet their outcomes, then a service will continue to be provided for them as part of the new service offer provided by the County Council. For example, where a deaf person is eligible and susceptible to falling, then the assessor would look to install both a falls protection device and a hearing loop system.
10. However, should a person who is deaf or hard of hearing be assessed as not having eligible needs for local authority funded social care, any future maintenance or repair of equipment would not be provided by the County Council. The person would instead be signposted to alternative support, as would be the case for any person who is not eligible. The legacy equipment would not be removed by the County Council unless a person specifically requested its removal.
11. Since 2018, installations and repairs/maintenance of this legacy equipment has been provided to 1,306 service users who are deaf or hard of hearing. Requests for repairs and maintenance are generally to replace batteries or replace defective equipment.
12. Over 90% of current demand for services for the deaf or hard of hearing concern a request for a repair or equipment maintenance.

Consultation

13. It is proposed that a four week public consultation is undertaken from 11 November to 9 December 2022 to seek feedback on the proposed cessation of the universal discretionary repair and maintenance services provided and to instead apply the same eligibility criteria to all who approach the service for support.
14. In particular, the consultation will specifically seek the views of members of the deaf and hard of hearing community in Leicestershire who have used the former Assistive Technology services that were provided on a discretionary and/or universal basis.
15. In the interim, the repairs and maintenance service will be provided by the CT service until at least the end of March 2023.

Resource Implications

16. The consultation process will involve the Council's Communications Team, Data and Business Intelligence Team, and the Chief Executive's Policy Team, alongside the Adults and Communities Department.
17. The Director of Law and Governance has been consulted and provided information confirming that the approach being taken is in keeping with the Council's statutory duties under Section 9(1) of the Care Act 2014 and that the extension of the eligibility criteria to all persons ensures that all persons in need of support qualify on an equal or comparable basis.
18. The Director of Corporate Resources has been consulted on the content of this report.

Timetable for Decisions

19. The consultation will take place from 11 November to 9 December 2022.
20. Following analysis of the results, it is intended that a report on the outcome of the consultation will be presented to the Cabinet in January 2023. The Committee will be sent a copy of this report and any comments received will be submitted to the Cabinet meeting.
21. Subject to the Cabinet's agreement the proposed approach will be implemented from 1 April 2023.

Conclusion

22. The Committee is invited to comment on the proposed consultation.

Background papers

Adults and Communities Department Ambitions and Strategy for 2020–2024 - <https://bit.ly/3yOxuZA>

Circulation under the Local Issues Alert Procedure

23. None.

Equality and Human Rights Implications

24. Ensuring services based on eligibility will mean the withdrawal of universal/discretionary services previously offered by the former Assistive Technology Team. This is likely to impact people who are deaf or hard of hearing in particular, as the former service had a focus in this area.
25. Under the new service, where a person, including anyone who is deaf or hard of hearing, is assessed as having a care and support need and the Care Act eligibility criteria are met, care technology services would continue to be offered.
26. Those considered not eligible will be directed to alternative support available in the same way as anyone else not eligible under the criteria
27. An Equalities and Human Rights Impact screening assessment has been undertaken and concluded that there are no specific impacts on other protected characteristic groups. The Equality and Human Rights Impact Assessment will be reviewed again following feedback from the consultation and this will be presented alongside the report to the Cabinet in January 2023.

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