



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

Date/Time: **Monday, 4 September 2023 at 2.00 pm**

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

Contact: **Mrs. A. Smith (0116 305 2583)**

Email: **angie.smith@leics.gov.uk**

Membership

Mr. T. J. Richardson CC (Chairman)

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

AGENDA

Item

Report by

Please Note:

A webcast of the meeting can be viewed on the [Council's YouTube](#) streaming pages.

1. Minutes of the meeting held on 5 June 2023. (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. Performance Report for Quarter 1 2023/24 (April - June) (Pages 15 - 28)
9. Leicestershire and Rutland Safeguarding Adults Board Annual Report. (Pages 29 - 62)
10. Collections Development Policy and Access Policy for the Record Office for Leicestershire, Leicester and Rutland. (Pages 63 - 86)
11. Annual Adult Social Care Complaints and Compliments Report 2022-23. (Pages 87 - 110)
12. Assurance of Adult Social Care. (Pages 111 - 132)
13. Date of next meeting.

The next meeting of the Commission is scheduled to take place on 6 November 2023.

14. 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).



This page is intentionally left blank



Minutes of a meeting of the Adults and Communities Overview and Scrutiny Committee held at County Hall, Glenfield on Monday, 5 June 2023.

PRESENT

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

Mr. G. A. Boulter CC
Mr. B. Champion CC
Mr. N. Chapman CC

Mr. L. Hadji-Nikolaou CC
Ms. Betty Newton CC

In attendance

Mr. J. Morgan CC (Virtual) – As Chairman of the Health Overview and Scrutiny Committee for Agenda Items 10 and 11 (minute items 10 and 11 refer)
Mrs. C. Radford CC, Lead Member for Adults and Communities
Mrs. L. Richardson CC, Lead Member for Health for Agenda Items 10 and 11 (minute items 10 and 11 refer)

1. Appointment of Chairman

RESOLVED:

That Mr. T. J. Richardson CC be appointed Chairman for the period ending with the date of the Annual Meeting of the County Council in 2024.

Mr T. J. Richardson CC in the Chair

2. Election of Deputy Chairman

RESOLVED:

That Mr. N. Chapman CC be elected Deputy Chairman for the period ending with the date of the Annual Meeting of the County Council in 2024.

3. Minutes of the meeting held on 6 March 2023.

The minutes of the meeting held on 6 March 2023 were taken as read, confirmed and signed.

4. Question Time.

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

5. 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).

6. Urgent items.

There were no urgent items for consideration.

7. Declarations of interest in respect of items on the agenda.

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

Ms. Betty Newton CC declared a Non-Registrable Interest in agenda item 10, Leicester, Leicestershire and Rutland Joint Living Well Dementia Strategy 2024-28, as family members worked in a health environment

Whilst not declared under this item, later in the meeting during consideration of agenda item 11, Update on the Implementation of the Leicester, Leicestershire and Rutland Carers' Strategy, Mrs Betty Newton CC declared a Non-Registrable Interest in this item as she had previously worked at a University as part of a young carers research group. Mr. B. Boulter CC also declared a Non-Registrable Interest in this item as his stepdaughter worked in a home for people with learning difficulties.

Mr. T. Richardson CC declared an interest in agenda item 10, Leicester, Leicestershire and Rutland Joint Living Well Dementia Strategy 2024-28, and agenda item 11, Update on the Implementation of the Leicester, Leicestershire and Rutland Carers' Strategy, following Government guidance issued under [paragraph 2\(9\) of Schedule 5A to the Local Democracy, Economic Development and Construction Act 2009](#), which strongly recommended that the Chairman, given their pre-eminent role on the scrutiny committee, not preside over scrutiny of their relatives. Mr. Richardson, as Chairman, had been asked to make the Committee aware that his wife, Mrs. L. Richardson CC, was Cabinet portfolio holder for Health. Mr. Richardson asked Members of the Committee present at the meeting if they were comfortable with him to continue to chair the meeting, bearing in mind the meeting was looking at strategies and not questioning the Member directly. Members confirmed Mr. Richardson could continue to chair the meeting.

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

There were no declarations of the party whip.

9. Presentation of Petitions under Standing Order 35.

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

10. Leicester, Leicestershire and Rutland Joint Living Well with Dementia Strategy 2024-28.

The Committee considered a joint report of the Directors of Adults and Communities and Public Health, which invited comments on the draft Leicester, Leicestershire

and Rutland (LLR) Joint Living Well Dementia Strategy 2024-28, subject to Cabinet's approval on 23 June 2023 for the Strategy to be subject to a formal consultation exercise. The report also updated the Committee on the progress of work under the current Strategy (2019-22). A copy of the report marked 'Agenda Item 10' is filed with these minutes.

Arising from discussion and questions, the following points arose:

- i. Members welcomed the new Strategy which it was agreed was a good and well thought out document.
- ii. A Member commented that whilst it was noted the Strategy needed to set out the high level aims for improving dementia services across LLR, many residents would be most interested in the detail regarding improvements for the future delivery of services. For example, how and when would services be expanded across the County and what targets would be applied. Members were pleased to hear that the County Council and other stakeholders would each produce an action plan which would include detail on specific targets and timescales, the bare minimum of which for the County would be to meet the national target on diagnosis rates. Work on these plans would begin during the consultation period and so more detail would be provided in the next report to both Scrutiny and Cabinet in September.
- iii. The Committee was assured of ICB colleagues' commitment to working to ensure that dementia services would be more accessible for people in rural areas. Under the previous Strategy diagnosis clinics had been focused in the City area which now had significantly higher diagnosis rates than the County. The County Council would therefore be seeking to ensure this was redressed under the new Strategy. There would be challenge and support from partners and other organisations, such as the County Council to the ICB, to ensure delivery arrangements were put in place in a timely fashion and to specifically address the imbalance of diagnosis rates across LLR.
- iv. The Service would continue to strive to support people to remain independent, using a range of tools, for example, working with informal carers, working with community groups, as well as formal adult social care services in the way contracts were managed and supported. Members were pleased to hear that promoting independence for those living with dementia would be a key aim supported by the new Strategy, as it was across all adult social care services.
- v. A Member raised concerns that individuals who were illiterate could find it difficult to articulate their needs and might be unable to access advice and information. The Director assured Members that this would be taken into account during delivery of the revised Strategy, for example, by providing assistance through diagnosis and planning arrangements.
- vi. Members welcomed plans for the Council and its partners to use a range of different activities to engage with carers, family members and those experiencing dementia themselves as part of the consultation, noting that the online consultation would be just one option available. Members were pleased to hear that recognition had been given to the importance of going out and speaking directly to people as an online approach was not suitable for all. It was suggested that as part of the consultation process the Cabinet should consider

- including a section to seek feedback on the experiences of carers and patients, of how they had found the process of getting a diagnosis of dementia. Members agreed that this could provide some valuable information to support future improvements from those that had already used the service.
- vii. In response to questions raised, assurance was provided that the methodology used for collecting and recording data around dementia diagnosis rates was consistent with the approach used nationally and was in line with that used by the City Council. This included using NHS digital data and primary care data which was set against national figures for the expected level of dementia prevalence.
 - viii. A Member commented that utilising parish councils and local forums during the consultation period as another means of reaching as many people as possible within the localities should be considered.
 - ix. The all-party parliamentary group report in 2021 had contained a large section on the impact of non-suitable accommodation on people living with dementia. It was suggested that the Cabinet consider this being built into the LLR Dementia Strategy, for example, by way of a section on how the City and County Council could work to together with district councils to encourage more dementia friendly accommodation.
 - x. It was acknowledged that the City and County Council had different arrangements regarding the provision of housing and other accommodation, but it was suggested that including a description of what dementia friendly accommodation might look like within the Strategy could be helpful in addressing this issue locally.

RESOLVED:

- a) That the report on the draft Leicester, Leicestershire and Rutland (LLR) Joint Living Well with Dementia Strategy 2024-28 be noted.
 - b) That the comments now made by the Committee be forwarded to the Cabinet for consideration at its meeting on 23 June 2023.
11. Update on the Implementation of the Leicester, Leicestershire and Rutland Carers' Strategy.

The Committee considered a joint report of the Director of Adults and Communities, Children and Family Services and Public Health, the purpose of which was to provide an overview of progress in implementing the Leicester, Leicestershire and Rutland Carers' Strategy 2022-2025 and the associated action plan in Leicestershire. The report further set out details of the Carers' Week programme (5-11 June 2023), and outlined key areas being developed to support carers in Leicestershire with the Council's partners.

Prior to the presentation of the report, the Director informed the meeting of an event that had been held at County Hall that morning to mark the start of Carer's Week, with over 50 people attending with a range of partners presenting information and advice on a range of topics, including mental health and mindfulness. Good

feedback had been received from attendees and partners.

At this point in the meeting Ms Betty Newton CC declared a Non-Registrable Interest in this item as she had previously worked at a university as part of a young carers research group and noted that young carers had been captured by the Strategy. Mr. B. Boulter CC also declared a Non-Registrable Interest during consideration of this item as his stepdaughter worked in a home for people with learning difficulties.

Arising from discussion and questions, the following points arose:

- i. Between May 2022 and March 2023, the County Council through Voluntary Action South Leicestershire (VASL) had identified 1,000 new carers (around five to six a day). The Young Carers Services had also reached out to around 73 new carers to provide support, working with schools and colleges.
- ii. It was intended for the action plan to be focussed on Leicestershire to make it more contained. A multi-agency Leicestershire strategy group had been set up, with its first meeting arranged for 30th June, with partners specific to Leicestershire, who would drive the Strategy and action plan forward.
- iii. Members were pleased to hear that the Strategy and related action plan would be all encompassing and include areas such as parent carer actions around special schools, and post-16 care.
- iv. Members highlighted that young carers were often the hidden face of community care, and that very often families were ashamed that they had young carers looking after them so didn't speak out. Also, being a young carer very often meant they missed out on education and a life outside of home as they undertook their caring role. Members noted that the Young Carers service was specifically aimed to support young carers with the issues identified by Members and feedback from the young carers group would continue to inform this Strategy and related action plan.
- v. A Member commented on the small number of people (138) who had claimed the Hospital Discharge Grant for Carers, with just under £40,000 (8%) of the total £2million Adult Social Care Winter Discharge Fund having been used in this way. The Member suggested that statistics for the area showed that approximately 2,000 to 2,500 patients had been discharged from hospital during that time and therefore questioned how well the grant funding had been advertised on hospital wards.
- vi. Members noted that the Hospital Discharge Grant for Carers had been just one of a number of schemes funded by the Winter Discharge Grant. This had been a new and innovative scheme introduced by the Council to assist carers. Members noted that communication of the scheme had been limited as the Government had only announced the funding on 16 December 2022 but required this be spent by 31 March 2023. Information had reached the Royal Infirmary and Glenfield hospital wards, and the Director said the scheme had been hugely successful with over 100 new carers having been identified during that short period. Members were pleased to note that a similar scheme would be reinstated as and when equivalent funding becomes available. An evaluation

- report on take-up of the scheme over the initial 10 weeks would be shared with Members.
- vii. The Chairman commented that it was hoped it could be recognised that the work the Council had done for carers had grown and built upon each year and suggested that this provided reassurance to the people of Leicestershire that work to support carers would continue. It was suggested that this work and the availability of the scheme should be communicated widely. A Member further suggested that hospital ward staff should be informed of the scheme to help to promote the availability of this grant funding directly to patient carers.

RESOLVED:

- a) That the report on the overview of progress in Implementing the Leicester, Leicestershire and Rutland Carers Strategy 2022-2025 and the associated action plan in Leicestershire be noted;
 - b) That the Director of Adults and Communities be requested to consider the suggestions now made by the Committee to widely promote the Strategy and the work being done to implement it.
12. Performance Report 2022/23 - Position at March 2023.

The Committee considered a joint report of the Chief Executive and the Director of Adults and Communities, the purpose of which was to present an update on the Adults and Communities Department's performance for the year 2022/23. A copy of the report marked 'Agenda Item 12' is filed with these minutes.

Arising from discussion the following points were made:

- i. A Member shared his recent experience of a family members stay in hospital and raised concerns about the lack of discussion with hospital staff prior to discharge regarding their reablement needs. He suggested that a critical factor that had not been but should have been considered early on was the level of capacity and ability of the person prior to their stay in hospital. The Member suggested that this would provide a baseline to assess a person against to help determine what support was needed to help an individual's return to that level of independence wherever possible. The Member further suggested that hospital staff should be preparing patients days before their return home as part of their care in hospital to reduce the amount of support, if any, the patient would subsequently require. The Member commented that it was only after his family member had been discharged from hospital that these discussions had been held with the Homecare Assessment and Reablement Team (HART) by which time their condition had already deteriorated resulting in more home care support being required. It was suggested that holding these discussions and providing early support would help avoid the need for long term dependence on costly local authority adult social care services in a number of cases. The Committee thanked the Member for sharing their personal experience which provided an important way of identifying issues within the system that needed to be improved.

- ii. The Director commented that it was the view of the Council that if part of medical treatment included a period of recovery, that should be part of the whole NHS treatment pathway, and should not be seen as separate, as recovery was as important as the treatment itself. However, the Director said that the sheer number of people waiting for hospital treatment placed intense pressure on the NHS to free beds. This had been particularly so since the Covid-19 pandemic when a number of operations had been cancelled. To achieve the most effective long-term outcome for patients, they needed to be helped more whilst in hospital. However, this was not the most efficient approach for the NHS as this would mean beds could not be released as quickly as needed for the large number of patients waiting for treatment.
- iii. Members were assured that the treatment pathway across the whole system of Health and Social Care was being looked at and improvements were being made. The Council was working collaboratively with the NHS, which was now funding the expansion of the Authority's reablement service considerably. At present the service did not have capacity to assess all patients before they left hospital. Approximately 20% of people currently left hospital and went straight to home care without reablement support. The added funding from the NHS would help to address this and ensure everyone got a reablement assessment before leaving hospital in future. Avoiding a person's dependency on long-term home care was primarily in the patients best interest, as well as avoiding more costly home care services.
- iv. Members noted that the Department was developing a pilot aimed at getting support workers into the hospitals to work more effectively with the patient particularly regarding their reablement needs, before they are discharged. Members acknowledged that this would be easier to do in community hospitals and most difficult in an acute hospital where treatment was fast-paced and where there were bigger queues of people waiting for treatment and therefore greater demand on bedspace.
- v. Regarding out of County hospitals, there tended not to be link workers on site in the same way as in County hospitals, simply because there was not the resource to have people on site in every hospital. There should, however, be contact and information forwarded on a patient to the Authority in a timely way in order for a link worker to meet the patient and family prior to discharge. It was noted there tended to be better communication with some hospitals than others.
- vi. A Member noted that a positive example of community working, was of a parish council who had stepped in to help with funding for Hathern library which also acted as a small community hub. The Cabinet Lead Member noted the innovative work in museums and libraries, and increased footfall which was higher in some places than before the pandemic. A letter had been sent from the Director and herself thanking libraries and museums staff for all of their work.
- vii. A Member noted that statutory guidance stated a review of care plans should be undertaken every 12 months but that the Council did not complete all such reviews within that timescale. The Director advised that under the Care Act there was no time limit for carrying out initial assessments, but that reviews should be conducted every 12 months, but to the best of his knowledge this

had not been tested in the courts. He added that the Department had a 76% review completion rate within the required 12 months which was considerably above the national average of 55%, but assured the Committee that the Department would continue to aim to achieve more subject to resources. A Member queried if, amongst the 24% that did not receive a review, if reasons were known, for example, refusal to have a review. It was noted that the information on non-reviews was not captured.

RESOLVED:

That the report on the update of the Adults and Communities Department's performance for the year 2022/23 be noted.

13. Change to the Order of Business.

The Chairman sought and obtained the consent of the Committee to vary the order of business from that set out on the agenda for the meeting.

14. Care Data Matters.

The Committee considered a joint report of the Chief Executive and the Director of Adults and Communities, the purpose of which was to provide the Committee with information relating to the publication by the Department of Health and Social Care (DHSC) 'Care Data Matters: a roadmap for better data for adult social care' in February 2023. A copy of the report marked 'Agenda Item 14' is filed with these minutes.

Arising from discussion and questions, Members noted the following points:

Mr. Hadji left the meeting at this point at 3.32pm.

- i. It was clarified that the Authority would not have access to NHS health data, but that the NHS would have access to the Council's data. Members were assured that in working with the NHS information would be anonymised, but there would be much better cohesion between Health and Local Authority analytics.
- ii. Members noted that reports would continue to be brought to the Committee over the following year, with a couple of new metrics, such as the CQC ratings and safeguarding data, but changes in reporting would be seen over the next couple of years.

RESOLVED:

That the report on the information relating to the publication by the Department of Health and Social Care (DHSC) 'Care Data Matters: a roadmap for better data for adult social care' in February 2023 be noted.

15. Leicestershire Adult Learning Service Performance and Accountability Statement.

The Committee considered a report of the Director of Adults and Communities, the purpose of which was to provide and update on the performance of the Council's Adult Learning Service (LALS) and to seek the views of the Committee on the proposed Accountability Statement mandated by the Department for Education

(DfE) from 2023, appended to the report. A copy of the report marked 'Agenda Item 13' is filed with these minutes.

Arising from discussion and questions, Members noted the following points:

- i. With the decline in maths and English skills in schools, it was suggested that the future need for the service would likely increase. Members noted that the Multiply Programme was an example of the support being provided to adults regarding numeracy skills, and that the service was seeing an increase in people, particularly males, affected by the pandemic and leaving school with low results and who were now joining the programme.
- ii. The Adult Learning Service was facing the challenge and trying to engage with people to encourage them to join English and numeracy programmes, however this was challenging.
- iii. It was recognised that early intervention and working with schools was critical to breaking the cycle.

RESOLVED:

That the report on the performance of the Council's Adult Learning Service (LALS) and the proposed Accountability Statement be noted.

16. Market Sustainability and Improvement Fund.

The Committee considered a report of the Director of Adults and Communities, the purpose of which was to provide information to the Committee retrospectively on the proposed expenditure of the Market Sustainability and Improvement Fund (MSIF). The MSIF grant determination letter was published on 4 April 2023 and required all authorities to submit a return to the DHSC by 24 May 2023. A copy of the report marked 'Agenda Item 15' is filed with these minutes.

Arising from discussion and questions, Members noted the following points:

- i. A Member commented that the funding had been allocated for two years, with no guarantees that this would continue and questioned how this might affect the service in the longer term. The Director advised that the expectation would be for equivalent funding to be made available by central government through other means such as the Adult Social Care grant or the Better Care Fund instead.
- ii. The capacity plan to be submitted at the end of June would provide information on the current market projections and gaps across adult social care, and what might be needed moving forward.
- iii. The Chairman commented that the Council had done a lot of work around the cost of care and was in a better position than most other councils across the country as a result, despite its low funded position and whilst the Authority had a lot to be proud of, the funding position going forward would need to be monitored.

RESOLVED:

That the report provided to the Committee retrospectively on the proposed expenditure of the Market Sustainability and Improvement Fund (MSIF) be noted.

17. Dates of future meetings.

The dates of future meetings of the Committee scheduled to take place on the following dates, all at 2.00pm, were noted:

Monday 4 September 2023
Monday 6 November 2023
Monday 22 January 2024
Monday 4 March 2024
Monday 3 June 2024
Monday 2 September 2024
Monday 4 November 2024

2.00 – 3.58pm
05 June 2023

CHAIRMAN



ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
4 SEPTEMBER 2023

PERFORMANCE REPORT FOR QUARTER 1 2023/24 (APRIL-JUNE)

JOINT REPORT OF THE CHIEF EXECUTIVE AND
DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of the Report

1. The purpose of this report is to present the Committee with an update of the Adults and Communities Department's performance during the first quarter of 2023/24, namely, April to June 2023.

Policy Framework and Previous Decisions

2. The Adults and Communities Department's performance is reported to the Committee in accordance with the Council's corporate performance management arrangements.

Background

3. The metrics detailed in Appendix A of the report are based on the key performance measures of the Adults and Communities Department for 2023/24. These are reviewed through the annual business planning process to reflect the key priorities of the Department and the Council. The structure of Appendix A is aligned with the Ambitions and Strategy for Adult and Communities Department 2020-2024, '*Delivering Wellbeing and Opportunity in Leicestershire*'. This strategic approach is based on a set of principles with the person at the centre, ensuring the support they receive can deliver the right outcomes. Appendix B outlines the 'layered' model designed to maximise independence – Prevent, Reduce, Delay and Meet needs.
4. Appendix A is also structured in line with the Council's Strategic Plan 2022-26. This sets out the Council's overall policy framework approach and is based on five aspirational strategic outcomes: Clean and Green, Great Communities, Improved Opportunities, Strong Economy, Transport, and Infrastructure, and Safe and Well.
5. On 5 June 2023, the Committee received a report with regards the Department for Health and Social Care (DHSC) publication *Care Data Matters*. This outlined a range of developments relating to adult social care data as set out in a roadmap through to 2028. Two aspects of the roadmap have taken affect since April 2023, namely the marked transformation in the provision of data by local authorities to NHS England and phase one in a revised Adult Social Care Outcomes Framework (ASCOF). The latter point in particular has impacted on the content of Appendix A and will be reflected in the commentary where necessary through this report.

6. Where a national average is quoted, including in Appendix A, it will relate to the year 2021/22. The national averages for the most recent year (2022/23) will be known when national figures are published by NHS England in October.
7. Several metrics are not part of the ASCOF, in particular those relating to Communities and Wellbeing, and do not have a national average to compare performance with. As such, local targets have been agreed and Appendix A outlines progress towards these by comparing performance to a milestone position at the end of the first quarter.

Performance Update: April to June 2023

Adult Social Care

8. Appendix A includes four key measures to reflect each of the four layers of the Vision and Strategy. Each of these monitors the proportion of **new adult social care contacts** from people requesting support and what the sequels of these requests were. During the first three months of 2023/24, there were 7,300 new adult social care contacts, an increase of 15% on 6,400 during the same three months of the previous year. This highlights an increasing trend over the past 12-18 months in the level of new contacts the Council is receiving.
9. Of the new contacts between April and June 2023, 54% (3.9k) resulted in a preventative response, such as universal services or signposting. A further 15% (1.1k) resulted in a response relative to reducing need, such as providing equipment or adaptations; 16% (1.2k) resulted in a response relative to delaying need, namely the provision of a reablement service that supports people to relearn the skills required to keep them safe and independent at home. Finally, 15% (1.1k) resulted in a long-term commissioned service, over 700 of which were community-based such as home care, an increase of 13% compared to the first quarter of 2022/23.
10. Measuring whether someone **lives in their own home** is one way to measure independence. In previous years this metric has specifically focussed on people aged 18-64 with a learning disability. One of the changes to ASCOF involves the extension of this metric to all age-groups and to all reasons for support, not just those with a learning disability. However, linked to another aspect of Care Data Matters (the transformation of data reported to NHS England from local authorities) there needs to be a shift in recording and reporting and as such the new metric (ASCOF 2E on page 3 of appendix A) is seen as experimental in 2023/24. For this performance report, the figures used continue to relate to learning disability only and show a consistent position of 83% (1,212 out of 1,459) in settled accommodation, higher than the latest national average of 79%. Reporting will be expanded as and when further guidance is received, and recorded information is up to date. For reference the similar metric relating to people in employment is no longer part of the ASCOF.
11. On 5 June 2023, the Committee received a report outlining the Market Sustainability and Improvement Fund for which the Council will receive £4.0m additional funding for the financial year 2023/24 to build capacity and improve market sustainability. One of the three target areas identified relates to reducing adult social care waiting times. As part of the conditions of the fund a baseline number of people **waiting for a social care assessment** was reported as 1,575 at the 1 January 2023. In the intervening six months this number has reduced by over 500 to 1,059. Furthermore,

the number waiting for six months or more at the end of the first quarter was 35, half what it was on 1 January.

12. **Reablement** is a short and intensive service to help people who have experienced deterioration in their health (and/or have increased support needs) to relearn the skills required to keep them safe and independent at home. Both existing ASCOF metrics to measure a local authority's performance in this area have been retained in the revamped ASCOF – ASCOF 2A: the proportion of people with no continued needs post reablement, and ASCOF 2D: where people live 91 days following hospital discharge and reablement.
13. For the first of these metrics Leicestershire's performance during the first quarter of 2023/24 (89% or 949 out of 1,065) remained similar to last year and notably higher than the latest national average (78%). The second ASCOF metric shows that 86% (547 out of 638) people discharged from hospital to a reablement service between January and March 2023 were living at home 91 days post discharge. This is slightly down on 89% last year although above the latest known national average of 82%.
14. **Avoiding permanent placements in residential or nursing care homes** is a good indication of maximising independence and delaying dependency. Research suggests that where possible, people prefer to stay in their own home rather than move into permanent care. For people aged 18-64 there were 17 admissions during the first quarter of 2023/24 giving an early forecast for the full year of 66, notably higher than 47 during 2022/23. This increase reflects the ongoing work to undertake reviews of people in temporary placements and where appropriate re-classify their length of stay to be permanent. However, based on the forecast, the rate of admissions (15.4 per 100,000 population) would take the Leicestershire position above the latest national average (13.9 per 100,000 population). For people aged 65 or over there were 180 admissions during the first quarter giving a current forecast of 714 admissions, lower than the previous year (824). Again, it is worth noting that this is an early forecast based on just one quarter's data and it is expected that there will be a shift in the projection as the year progresses.
15. The County Council remains committed that everyone in receipt of long-term, community-based care should be provided with a **personal budget**, preferably as a direct payment. The revamped ASCOF focuses attention on the use of direct payments only as a way of measuring if people have choice and control over the care they access. At the end of the first quarter 35% (1,905 out of 5,410) of people in receipt of a long-term community service were doing so via a direct payment. This is similar to last year (36% or 1,939 out of 5,357) and higher than the latest nation average of 27% at the end of March 2022.
16. Local authorities are required to conduct two **statutory surveys** – an annual survey of people in receipt of social care services and a similar survey of carers on a biennial basis. During 2023/24 both surveys will be undertaken, firstly the carers survey in October and secondly the one for people in receipt of social care services in February 2024. Findings from the latter (previously conducted in February 2023) shows that 62% of people in receipt of services found it easy to find information. Whilst this remains lower than the latest known national average (65% in 2021/22), it is a significant improvement on 57% during the previous year. In addition, 39% stated they had as much contact as they would like, which is similar to the previous year

and 85% stated that the services they receive help them feel safe, which is a significant improvement on 81% previous year.

17. A **safeguarding** alert can include any concern for welfare and will often require a response from the Authority, but not necessarily in relation to safeguarding. During the first quarter of 2023/24 there were 1,360 alerts, a 37% increase on 990 during the same period last year. Once an alert has been investigated into any potential risk of abuse or neglect there may be need for a more in-depth enquiry under Section 42 of the Care Act 2014. Between April and June 2023 there were 142 enquiries, very similar to 143 during the comparable period of the previous year. The new look ASCOF includes a new metric that monitors the proportion of completed enquiries where the outcome of an identified risk was that it was reduced or removed. During the first quarter of 2023/24 94% (125 out of 133) of enquires involved an identified risk being reduced or removed, slightly more than 90% (265 out of 294) during the full year 2022/23.
18. Under the Care Act 2014's statutory guidance, councils should undertake a **review of care plans** no later than every 12 months, though this is not a legal duty. Undertaking reviews on a regular basis helps to identify if outcomes set out in the original support plan are being achieved. During the first three months of 2023/24, 79.5% (4,121 out of 5,185) of people who had been in receipt of services for at least a year had been reviewed in the past 12 months, notably higher than the latest known national average of 55% and an improvement on 70% at the same point last year.

Communities and Wellbeing

19. There is no national performance framework covering the Communities and Wellbeing section of the Adults and Communities Department and as such performance is monitored against locally agreed targets. Appendix A highlights a monthly milestone of where performance ideally needs to be if the annual target is to be met.
20. There were 127.1k physical **visits to heritage sites** during 2022/23 and whilst a 31% increase (+30.0k) on the previous Covid-19 pandemic disrupted year, the visitor numbers remain lower than prior to the outbreak of the pandemic (an annual average of 147.0k visits). For the period April to June 2023 there were 40.1k physical visits, 10.5% higher than the equivalent period during the previous year and when combined with 53.8k website visits the total (93.9k) for the quarter is above the milestone for the period.
21. During 2022/23 there were 539.6k **visits to libraries** across the county, 54% (+188.7k) more than the previous year. As with visits to heritage sites, the level remains lower than pre-pandemic, with 891.2k visits to libraries in 2019. Due to the replacement of software to count **website** visits during 2023/24, the local annual target for the year relates to physical visits only. By the end of the first quarter of 2023/24 there had been 141.6k visits to libraires, slightly higher than the milestone for the period of 136.3k.
22. During 2022/23 there were 2.3 million **loans** in total, up by 13.5% from 2.0 million during the previous year. For the period April to June 2023 there were 558.4k loans in total, just about in line with the milestone for the period. This total includes 189.9k

junior loans which are 14k lower than the milestone of 203.8k and 231.8k E-loans, 4.8k higher than the milestone of 227.0k.

23. The County Council's **Creative Learning Service** supports schools with a wide range of resources, pupil sessions and professional help to stimulate reading and creative learning across the curriculum. Between April and June there were 5.9k attendances at Creative Learning Service workshops, 800 more than the milestone for the period.
24. There were 5.7k hours of **volunteering** at libraries, museums and heritage services between April and June 2023, 1.4k higher than the milestone for the period.
25. The **Leicestershire Adult Learning Service's** (LALS) performance relates to the proportion of learning aims due to be completed in a given period that were successfully achieved. The current academic year started in September 2022, and performance at the end of June was 88%, above the 86% target.

Conclusions

26. For adult social care, reporting data and the monitoring of performance via the national ASCOF is entering a period of change as previously outlined in the DHSC Care Data Matters roadmap.
27. With regards performance in the first quarter, delaying people's needs through supporting them with a reablement service continues to have beneficial outcomes. Admissions to permanent care is a mixed picture with early full-year forecasts suggesting an increase for those aged 18-64 and a slight decrease for those aged 65 or over. However, it is recognised that these projections may change through the year.
28. Two statutory surveys will be completed in 2023/24 whilst findings from the survey undertaken last year showed a significant improvement in finding information and feeling safe. National figures will be published in the autumn.
29. As previously noted in the performance report to the Committee on 5 June 2023, the ongoing growth in new requests for support highlighted in paragraph eight, combined with the proportion that lead to a service – primarily home care – remains a challenge and is the current focus of detailed analysis.
30. The first quarter of 2023/24 was generally a positive one for Communities and Wellbeing Services which has seen increased activity across a range of services albeit the level remains lower than the before the pandemic outbreak in 2020.
31. Monitoring and analysis continues on a regular basis including key metrics of activity and performance across the Adults and Communities Department.

Background papers

Adult Social Care Outcomes Framework

<https://www.gov.uk/government/publications/adult-social-care-outcomes-framework-handbook-of-definitions>

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>

Leicestershire County Council Strategic Plan 2022-26

<https://www.leicestershire.gov.uk/about-the-council/council-plans/the-strategic-plan>

Better Care Fund

<https://www.england.nhs.uk/ourwork/part-rel/transformation-fund/better-care-fund/>

Adults and Communities Overview and Scrutiny Committee – 5 June 2023 – Performance Report (Item 12)

<http://cexmodgov01/ieListDocuments.aspx?CId=1040&MId=7108&Ver=4>

Circulation under the Local Issues Alert Procedure

32. None.

Equality Implications

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

Human Rights Implications

34. Data relating to equalities implications of service changes are assessed as part of Equality Impacts Assessments.

Other Relevant Impact Assessments

Health Implications

35. Better Care Fund (BCF) measures and associated actions are overseen and considered by the Integration Executive and Health and Wellbeing Board.

Appendices

- Appendix A - Adults and Communities Department Performance Dashboard for Quarter One (April to June) of 2023/24
- Appendix B – Adult Social Care Strategic Approach

Officers to Contact

Jon Wilson, Director of Adults and Communities
Adults and Communities Department
Tel: 0116 305 7454
Email: jon.wilson@leics.gov.uk


Matt Williams, Business Partner – Business Intelligence Service
Chief Executive's Department
Tel: 0116 305 7427
Email: matt.williams@leics.gov.uk


This page is intentionally left blank


Adults and Communities Performance 2023/24

April to June 2023

Performance Rating and Progress

 Performing **better** than the latest national average or local target

 Performing **similar** to the latest national average or local target

 Performing **below** the latest national average or local target



Performance has **improved** on last year






Performance is **similar** to last year




Performance is **not as good** as last year

PREVENT NEED

Leicestershire County Council's Strategic Plan 2022-26	Safe and Well Carers and People with care needs are supported to live active, independent, and fulfilling lives
--	---

Measure	Description	Aim	Rating	Progress	2023/24 Performance	2022/23 Performance
Local	% of sequels that 'Prevent Need'	Target Band Width	55% - 60% Local target 2023/24		53.7%	56.7%
ASCOF 3C	% of SUs who find it easy to find information	High	64.6% 21/22 Nat. Ave.		Survey is annual and will next run in February 2024	61.8%
ASCOF 3C	% of carers who find it easy to find information	High	57.7% 21/22 Nat. Ave.		Survey is biennial and will next run in October 2023	49.4% (2021/22)

Measure	Description	Aim	Rating	Progress	2023/24 Performance	2022/23 Performance
Local	Hours of Volunteering (Heritage & libraries)	High	4.3k Local Q1 Milestone		5.7k	3.9k

Leicestershire County Council's Strategic Plan 2022-26

Great Communities

Cultural and historical heritage are enjoyed and conserved

Measure	Description	Aim	Rating	Progress	2023/24 Performance	2022/23 Performance
Local	Heritage visits (inc. website visits)	High	86.8k Local Q1 Milestone	▲	93.9k	82.9k
Local	Library visits (Physical visits only)	High	136.3k Local Q1 Milestone	▲	141.6k	123.6k
Local	Total library loans	High	565.2k Local Q1 Milestone	▲	558.4k	537.8k
Local	Junior loans	High	203.8k Local Q1 Milestone	▲	189.9k	180.6k
Local	E-loans	High	227.0k Local Q1 Milestone	▲	231.8k	222.2k
Local	Total community library issues	N/A	For Information Only	N/A	70.8k	67.9k
Local	Community library children's issues.	N/A	For Information Only	N/A	39.6k	38.7k
Local	Attendances at Creative Learning Service workshops	High	5.1k Local Q1 Milestone	▲	5.9k	4.3k

Leicestershire County Council's Strategic Plan 2022-26

Strong Economy, Transport, and Infrastructure

There is close alignment between skill supply and demand

Measure	Description	Aim	Rating	Progress	2023/24 Performance	2022/23 Performance
Local	LALS Success Rate	High	86% Local Target 2022/23	▲	Term starts in September	88.0%

REDUCE NEED

Leicestershire County Council's Strategic Plan 2022-26	Improved Opportunities Young people and adults are able to aim high and reach their full potential
--	--

Measure	Description	Aim	Rating	Progress	2023/24 Performance	2022/23 Performance
ASCOF 2E	% of people living at home or with family	High	78.8% 21/22 Nat. Ave.		83.1%	85.6%

Leicestershire County Council's Strategic Plan 2022-26	Safe and Well Carers and People with care needs are supported to live active, independent, and fulfilling lives
--	---

Measure	Description	Aim	Rating	Progress	2023/24 Performance	2022/23 Performance
Local	% of sequels that 'Reduce Need'	Target Band Width	18% - 23% Local target 2023/24		15.5%	16.3%
ASCOF 5A	% of SUs who had as much social contact as they would like	High	40.6% 21/22 Nat. Ave		Survey is annual and will next run in February 2024	38.7%
ASCOF 5A	% of carers who had as much social contact as they would like	High	28.0% 21/22 Nat. Ave.		Survey is biennial and will next run in October 2023	24.7% (2021/22)
Local	Number of people awaiting a care assessment	Low	<1,575 Position as at 1 st Jan 2023		1,059 End of Q1 2023/24	1,520 End of Q1 2022/23
Local	Number of people awaiting a care assessment for more than six months	Low	<71 Position as at 1 st Jan 2023		35 (3% of total waiting at end of Q1 2023/24)	38 ¹ (2% of total waiting at end of Q2 2023/24)

¹ Due to restructure of Adult Social Care and its associated work trays in April 2022 the first opportunity to count cases awaiting allocation for at least six months is the end of September 2022.

DELAY NEED

**Leicestershire County
Council's Strategic Plan
2022-26**

Safe and Well

Carers and People with care needs are supported to live active, independent, and fulfilling lives

Measure	Description	Aim	Rating	Progress	2023/24 Performance	2022/23 Performance
Local	% of sequels that 'Delay Need'	Target Band Width	10% - 15% Local target 2023/24	▲	16.3%	12.8%
ASCOF 2A	% of people who had no need for ongoing services following reablement	High	77.6% 21/22 Nat. Ave	◀▶	89.1%	87.4%
ASCOF 2D <i>*BCF*</i>	Living at home 91 days after hospital discharge and reablement	High	81.8% 21/22 Nat. Ave	▼	85.7%	89.4%
ASCOF 2B	Permanent admissions to care (aged 18-64) per 100,000 pop.	Low	13.9 per 100k pop. 21/22 Nat. Ave	▼	15.4 per 100k Pop. Forecast 66 Admissions in 23/24	11.1 per 100k Pop. Actual 47 Admissions in 22/23
ASCOF 2C <i>*BCF*</i>	Permanent admissions to care (aged 65+) per 100,000 pop.	Low	538.5 per 100k pop. 21/22 Nat. Ave	▲	466 per 100k Pop. Forecast 714 Admissions in 23/24	538 per 100k Pop. Actual 824 Admissions in 22/23

MEET NEED

Leicestershire County Council's Strategic Plan 2022-26	Safe and Well Carers and People with care needs are supported to live active, independent, and fulfilling lives
---	---

Measure	Description	Aim	Rating	Progress	2023/24 Performance	2022/23 Performance
Local	% of sequels that 'Meet need'	Target Band Width	7% - 12% Local target 2023/24		14.5%	14.3%
ASCOF 3D	Adult aged 18+ receiving direct payments	High	26.7% 21/22 Nat. Ave		35.2%	36.2%

Leicestershire County Council's Strategic Plan 2022-26	Safe and Well People at most risk are protected from harm
---	---

Measure	Description	Aim	Rating	Progress	2023/24 Performance	2022/23 Performance
ASCOF 4A	% of service users who say that services have made them feel safe	High	85.6% 21/22 Nat. Ave.		Survey is annual and will next run in February 2024	85.3%
ASCOF 4B	% of safeguarding enquiries where the identified risk was reduced or removed		New ASCOF metric for 2023/24 No national figures yet available		94%	90%
Local	% of service users who received their annual review	High	55.2% 21/22 Nat. Ave		79.5%	76.4%

This page is intentionally left blank

ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
4 SEPTEMBER 2023

LEICESTERSHIRE AND RUTLAND SAFEGUARDING ADULT BOARD
ANNUAL REPORT 2022/23

REPORT OF THE INDEPENDENT CHAIR OF THE LEICESTERSHIRE AND
RUTLAND SAFEGUARDING ADULT BOARD

Purpose of Report

1. The purpose of this report is to seek the views of the Committee on the draft Annual Report of the Leicestershire and Rutland Safeguarding Adult Board (LRSAB) for 2022/23, attached as an Appendix to this report.
2. The final Annual Report is the report of the Independent Chair who must publish an annual report on the effectiveness of safeguarding adults in the local area. This is a statutory requirement under the Care Act 2014.

Policy Framework and Previous Decisions

3. The LRSAB is a statutory body established as a result of the Care Act 2014. The main purpose of the LRSAB is to ensure effective, co-ordinated multi-agency arrangements for the safeguarding of vulnerable adults.
4. The Committee considered the Strategic Plan of the LRSAB for 2020-2025 at its meeting on 7 September 2020.

Background

5. Safeguarding Adult Boards have three core duties. They must:
 - Develop and publish a Strategic Plan setting out how they will meet their objectives and how their member and partner agencies will contribute;
 - Publish an Annual Report detailing how effective their work has been;
 - Commission Safeguarding Adults' Reviews (SARs) for any cases which meet the criteria for these.
6. The Annual Report relates to the second of these duties.

Annual report for 2022/23

7. The Annual Report provides a full assessment of performance on the local approach to safeguarding adults in line with the requirements of the Care Act 2014.

8. The key purpose of the Annual Report is to assess the impact of the work undertaken in 2022/23 on service quality and on safeguarding outcomes for adults with care and support needs in Leicestershire and Rutland. Specifically, it evaluates performance against the priorities that were set out in the LRSAB Business Plan 2022/23, which is attached for reference as Appendix B.
9. The key messages from the LRSAB, specifically in relation to Leicestershire are:
 - a) As is reported nationally, there continues to be pressure on the health and care services in Leicestershire, and in turn this impacts on the workforce.
 - b) Our Hidden Harm Business priority reviewed how we work together across society to support the needs of, and prevent harm to, adults with care and support needs being missed or hidden and ensuring we respond effectively. The LLR SAB performance subgroup produced a Hidden Harm Assurance Report for 2022/2023. It collated information from across subgroups and partnerships on hidden harm, including analysis of insights project, alerts and community concerns. It was presented to the SABs early in the new business year. Work was subsequently completed in relation to self-neglect, domestic abuse, cuckooing, and adults with learning disabilities.
 - c) In relation to our care homes business priority, work included a resource pack which was developed by the LLR SAB training subgroup for care providers. It highlights procedures, guidance, information and resources available to care homes. Also a multi-agency audit was carried out, and the LLR SAB performance subgroup collated data and assurance on safeguarding in care homes and produced a report for 2022/2023. It will be presented to the SABs early in the new business year. Data has not altered significantly; this will be reviewed in the next year as return to pre-Covid service levels.
 - d) There were fewer SARs commenced in 2022/23 and work continues to implement the lessons learnt from SAR reviews.
 - e) Stronger links were formed between the SAB and the LLR Carers Delivery Group through the representative of that group joining the Board.

Proposals

10. The Committee is asked to consider the draft Annual Report for the LRSAB appended to this report and to make any comments or proposed additions or amendments. Any comments will be considered and addressed prior to the final report being published.

Consultation

11. The draft Annual Report is produced as a summary of the work of the SAB which has been carried out in relation to safeguarding and prevention. A copy of the report will be published on the Leicestershire and Rutland Safeguarding Adults Board website [here](#)
12. All members of the Board have had opportunities to contribute to and comment on earlier drafts of the Annual Report.

Resource Implications

13. There are no resource implications arising from this report. The LRSAB operates with a budget to which partner agencies contribute.
14. SAB statutory partners have, along with safeguarding partners for safeguarding children, have agreed to share the operating costs of the Safeguarding Children Partnerships (SCPs) and SABs for Leicester, Leicestershire and Rutland. Costs are shared between the Local Authorities, Police and Integrated Care Boards.
15. As part of this agreement the County Council contributed £119,266 to the LRSAB and SCP in 2022/23. This is 33% of the total funding for the LRSAB and SCP (£364,633). This compares with £102,496 in the previous year which was 31% of the total pooled budget for the Leicestershire and Rutland LSCB, SCP and SAB of £327,126 in 2021/22. This change in percentage was due to last year's reduction in contributions returning to normal level.
16. Expenditure has significantly reduced in the last year. This is due to the Board no longer paying for support services, with those processes being brought in-house. Additionally, expenditure on SARs decreased due to the number of reviews already being in an advanced stage and alternative methodologies being used, as appropriate. There was no cost for engagement as a number of projects had been paid for in the previous year. As of 1 April, the Safeguarding Partnership's reserve funds, stand at £168,895 and there is an agreed methodology for sharing the funds if not required.
17. The County Council also hosts the Safeguarding Partnerships' Business Office that supports the LRSAB and the SCP.
18. The Director of Corporate Resources and Director of Law and Governance have been consulted on the content of this report.

Timetable for Decisions

19. This reports seeks comments from this Committee prior to presenting the report to Cabinet on 15 September 2023 to note and comment on the Annual Report for 2022/23 particularly in relation to the business of the County Council.
20. Subject to consideration by the Cabinet, the Annual Report will be published by the end of September 2023 and presented to a future meeting of Leicestershire's Health and Wellbeing Board.

Equality Implications

21. The LRSAB seeks to ensure that a fair, effective and equitable service is discharged by the partnership to safeguard vulnerable adults. At the heart of the work is a focus on any individual or group that may be at greater risk of safeguarding vulnerability. The Annual Report includes a summary analysis of the characteristics of the subjects of SARs.

Human Rights Implications

22. There are no Human Rights implications arising from this report.

Crime and Disorder Implications

23. The LRSAB works closely with Community Safety Partnerships in Leicestershire to scrutinise and challenge performance in community safety issues that affect the safeguarding and wellbeing of individuals and groups, for example domestic abuse and Prevent. The Safeguarding Partnerships Business Office also supports Community Safety Partnerships in carrying out Domestic Homicide Reviews.

Partnership Working and Associated Issues

24. Safeguarding is dependent on the effective work of the partnership as set out in national regulation relating to the Care Act 2014.

Background Papers

Report to the Adults and Communities Overview and Scrutiny Committee: 7 September 2020 - LRSAB Annual Report 2019/20, Strategic Plan 2020 – 2025 and Business Plan 2020/21: [http://politics.leics.gov.uk/ieListDocuments.aspx?CId=1040&MIId=6170&Ver=4
\(item 14\)](http://politics.leics.gov.uk/ieListDocuments.aspx?CId=1040&MIId=6170&Ver=4(item%2014))

Circulation under the Local Issues Alert Procedure

None.

Appendices

- Appendix A -Leicestershire and Rutland Safeguarding Adult Board Draft Annual Report 2021/22
- Appendix B – Leicester, Leicestershire and Rutland Safeguarding Adults Board Business Plan 2022/23

Officers to Contact

Seona Douglas, Independent Chair, Leicestershire and Rutland SAB
Telephone: 0116 305 7130
Email: lrsdbo@leics.gov.uk

Jon Wilson, Director of Adults and Communities
Adults and Communities Department
Telephone: 0116 305 7454
Email: jon.wilson@leics.gov.uk



**Safeguarding
Adults Board**
LEICESTERSHIRE & RUTLAND

**Leicestershire & Rutland
Safeguarding Adults Board
Annual Report - 2022-23**



A Message from the Independent Chair

I was delighted in December 2022 to be offered the role of chairing the Leicester and Leicestershire & Rutland Safeguarding Adults Boards. Partners have already impressed me with their commitment to people who use our services, and working together to make sure that we understand the profile of those adults at risk, and ensuring they receive the care, support and services they require when necessary.

Since taking up the role, I have started to make sure that I get out and about in the area to gain an understanding of the local issues. I am passionate about supporting the Boards to constantly ensure that residents are at the centre of all that we do, and that our processes and procedures support this focus.

The subgroups that support the work of the Safeguarding Adults Boards have delivered a great amount this year which is all detailed in the Report; however, partners are aware we still have a lot of work to do. Currently we are looking at the information and data collected by partners across the Boards to see what this is telling us about the nature of safeguarding activity, so that we can consider how we prevent adults being in vulnerable situations which lead to them being at risk of abuse. It is also important where there are risks that we all work together to swiftly address any concerns highlighted. All partners want to ensure that we work, and make decisions that are evidence based, and take account of the people who use our services views and aspirations.

It is hard for people at the current time, with emergence from COVID 19, and isolation and loneliness still significant issues for many. The pressures on households may continue in the foreseeable future with the fluctuations of economic pressures, which partners are all aware can add to stress within families. This at times can be very challenging.

I would like to thank all partners for their hard work and dedication and professionalism in working to support adults at risk and being open to continually looking to improve the services/support provided, and I look forward to continuing the work with them in the future.

I hope you will find that this Annual Report reflects well on the work of the Leicestershire & Rutland Safeguarding Adults Board for 2022/23 as already highlighted and the challenges some of which remain for our communities.

The Safeguarding Adults Boards are currently reviewing their Strategy and refreshing some elements of this, so that we focus on the issues that really matter in Leicester, Leicestershire, and Rutland, and we work to increase our ability to gain feedback from as many people as possible to inform future objectives.

We are also working with other partnership Boards, and the Health and Wellbeing Board to continue to coordinate across the area with regard to protecting and supporting any adult at risk, is safe from harm.

There is a lot that we need to do and want to do to reduce the risks of abuse and neglect in our communities and support people who are most vulnerable to these risks. This is a journey that we are all making together, and I look forward to chairing the Safeguarding Adults Boards in the next year to continue this journey.

Seona Douglas, Independent Chair

The Safeguarding Adults Board

The Care Act 2014 stipulates that each local authority must set up a Safeguarding Adults Board (SAB). The main objective of a SAB is to assure itself that local safeguarding arrangements and partners act to help and protect adults in its area. A SAB must publish an annual report detailing what the SAB has done during the year to achieve its main objective and implement its strategic plan, and what each member has done to implement the strategy as well as detailing the findings of any safeguarding adults reviews and subsequent action.

The Leicestershire & Rutland Safeguarding Adults Board brings together organisations across the counties of Leicestershire and Rutland to oversee the multi-agency approach to safeguarding adults with care and support needs.

The work of the SAB is informed by the six key principles which underpin all adult safeguarding work, as set out in the [Care and Support Statutory Guidance](#):

- Empowerment
- Prevention
- Proportionality
- Protection
- Partnership
- Accountability.

The SAB:

- Sets how organisations should work together to safeguard adults with care and support needs
- Provides multi-agency training and development resources to support good safeguarding
- Tests how well organisations are working together and the difference this is making
- Reviews serious safeguarding incidents to identify improvements needed
- Uses learning and feedback to improve and develop how agencies work together to safeguard adults.



Safeguarding adults means helping adults at risk who need support from community care services to keep their independence, remain safe and exercise choice in their life. The Board partner agencies from the statutory, voluntary and independent sector come together to seek assurance that the persons thought to be at risk stay safe, are effectively safeguarded against abuse, neglect, discrimination, are treated with dignity and respect and enjoy a high quality of life.

The SAB members are made up of the following agencies:

LEICESTERSHIRE & RUTLAND SAB MEMBERSHIP	
Criminal Justice	Leicestershire Police
	HMP Prisons
	National Probation Service (NPS)
Emergency Services	East Midlands Ambulance Service (EMAS)
	Leicestershire Fire and Rescue Service (LFRS)
Health	Leicester, Leicestershire and Rutland Integrated Care Board (ICB)
	Leicestershire Partnership NHS Trust (LPT)
	University Hospitals Leicester NHS Trust (UHL)
Local Authorities (Leicestershire and Rutland)	Adult Social Care
	Public Health
	Lead Member
District and Borough Councils	Joint representative for all areas
Government Department	Department of Work and Pensions
Consumer Champions	Healthwatch

For the beginning of the period this report covers, the Clinical Commissioning Groups (CCGs) for the area were partners, but these were replaced by an Integrated Care Board (ICB) from July 2022.

A new Independent Chair, Seona Douglas, was appointed in December 2022. The Independent Chair for Leicestershire and Rutland is jointly appointed with the Leicester Safeguarding Adults Board.

The full membership of the partnership can be found on the SAB website <https://lrsb.org.uk/sab-membership-list>

This is the statutory annual report of the SAB outlining the work it has carried out during 2022/23.

For more information on how the Board works please visit www.lrsb.org.uk/adults

Safeguarding Data

Leicestershire

Safeguarding Enquiries and Alerts

	2021/22	2022/23
Individuals Involved In Safeguarding Concerns	4423	4035
Individuals Involved In Section 42 Safeguarding Enquiries	621	457
Conversion rate of concerns to enquiries	14%	11%
Number of Concluded Section 42	694	494

Concluded Enquiries by Types of Abuse

(more than one type of abuse can be recorded against enquiries so percentages will not add up to 100%)

	2021/22	2022/23
% of completed enquiries which record – Physical Abuse	31%	28%
% of completed enquiries which record – Sexual Abuse	9%	10%
% of completed enquiries which record – Psychological Abuse	21%	23%
% of completed enquiries which record – Financial or Material Abuse	24%	23%
% of completed enquiries which record – Discriminatory Abuse	1%	<1%
% of completed enquiries which record – Organisational Abuse	19%	22%
% of completed enquiries which record – Neglect or Acts of Omission	28%	32%
% of completed enquiries which record – Domestic Abuse	7%	10%
% of completed enquiries which record – Sexual Exploitation	3%	2%
% of completed enquiries which record – Modern Slavery	2%	2%
% of completed enquiries which record – Self-Neglect	4%	5%

Making Safeguarding Personal

Concluded Enquiries – outcomes asked / expressed

	2021/22	2022/23
Yes they were asked and outcomes were expressed	54%	56%
Yes they were asked but no outcomes were expressed	14%	14%
No	17%	15%
Don't know	5%	5%
Not recorded	10%	10%

Concluded Enquiries where outcomes expressed – outcomes achieved

	2021/22	2022/23
Fully Achieved	60%	58%
Partially Achieved	33%	35%
Not Achieved	7%	7%



INDIVIDUALS INVOLVED IN SAFEGUARDING CONCERNS

2021/2022 **4423** - 2022/2023 **4035**

Individuals Involved In Section 42 Safeguarding Enquiries
2021/2022 - **621** - 2022/2023 - **457**

CONVERSION RATE of concerns to enquiries

2021/2022 **14%** 2022/2023 **11%**

Number of **Concluded** Section 42 **694** - **494**



Leicestershire has seen a drop in concerns and enquiries. There has been a drop in the category of physical abuse and an increase in neglect. Consequently, the highest category of abuse in 2022-23 is neglect and acts of omission. “Fully achieved” desired outcomes is still primarily the recorded outcome at the end of the enquiry.

“My relative is being looked after in the care home very well. I am more than satisfied. I go into see her every day and I see for myself the excellent care she receives.”

“Excellent carers – kind and caring. They keep in touch with my daughter-in-law and let her know if the nurse or GP needs to be contacted.”

Feedback from people who use Leicestershire services

Rutland

Safeguarding Enquiries and Alerts

	2021/22	2022/23
Individuals Involved In Safeguarding Concerns	277	261
Individuals Involved In Section 42 Safeguarding Enquiries	33	44
Conversion rate of concerns to enquiries	12%	17%
Number of Concluded Section 42	36	24

Concluded Enquiries by Types of Abuse

(more than one type of abuse can be recorded against enquiries so percentages will not add up to 100%)

	2021/22	2022/23
% of completed enquiries which record – Physical Abuse	19%	4%
% of completed enquiries which record – Sexual Abuse	8%	4%
% of completed enquiries which record – Psychological Abuse	6%	0%
% of completed enquiries which record – Financial or Material Abuse	0%	13%
% of completed enquiries which record – Discriminatory Abuse	0%	0%
% of completed enquiries which record – Organisational Abuse	0%	0%
% of completed enquiries which record – Neglect or Acts of Omission	64%	75%
% of completed enquiries which record – Domestic Abuse	3%	4%
% of completed enquiries which record – Sexual Exploitation	0%	0%
% of completed enquiries which record – Modern Slavery	0%	0%
% of completed enquiries which record – Self-Neglect	0%	0%

Making Safeguarding Personal

Concluded Enquiries – outcomes asked / expressed

	2021/22	2022/23
Yes they were asked and outcomes were expressed	86%	79%
Yes they were asked but no outcomes were expressed	11%	0%
No	0%	0%
Don't know	0%	4%
Not recorded	3%	17%

Concluded Enquiries where outcomes expressed – outcomes achieved

	2021/22	2022/23
Fully Achieved	55%	58%
Partially Achieved	39%	26%
Not Achieved	6%	16%



INDIVIDUALS INVOLVED IN SAFEGUARDING CONCERNS

2021/2022 **277** - 2022/2023 **261**

Individuals Involved In Section 42 Safeguarding Enquiries
2021/2022 - **33** - 2022/2023 - **44**

CONVERSION RATE of concerns to enquiries

2021/2022 **12%** 2022/2023 **17%**

Number of **Concluded** Section 42 **36** - **24**



Rutland has seen a small drop in concerns; however, an increase in enquiries. There has been a drop in the category of physical abuse and an increase in financial abuse compared to 2021-22. Rutland believe that there may be some interaction between neglect and physical abuse – i.e. they may be cross-recorded as multiple categories of abuse. Rutland are starting to see multiple recording of categories of abuse as it is a true reflection of the abuse that occurred. This has only happened in a couple of enquiries in 2022/23 but will be more present in 2023/24 reporting. The highest category of abuse remains neglect and acts of omission. “Fully achieved” desired outcomes is still primarily the recorded outcome at the end of the enquiry.

“They were helpful and they did their best for me.”

“I could say what I wanted to say and they listened to me.”

Feedback from people who use Rutland services

Meeting our Strategic Priorities

The SAB set a joint Strategic Plan for 2020-2025 with the Leicester SAB in 2020 which provides the framework for forward priorities of the two SABs.

The strategic priorities are:

1. Core Priorities
2. Ensuring Statutory Compliance – carrying out the required functions of the SAB
3. Enhancing Everyday Business of our partners
4. Developmental Priorities
5. Strengthening User and Carer Engagement
6. Raising awareness within our diverse communities
7. Understanding how well we work together
8. Prevention – helping people to stay safe, connected and resilient to reduce the likelihood of harm, abuse or neglect

The SAB also sets annual Business Plans to progress work as part of the Strategic Plan. The work on these priorities is embedded within the assurance, training, procedure and review work of the SAB outlined further in the following sections of this report.

The annual business plan priorities for 2022/23 were Hidden Harm and Care Homes. Further detail on these is provided later in the report.



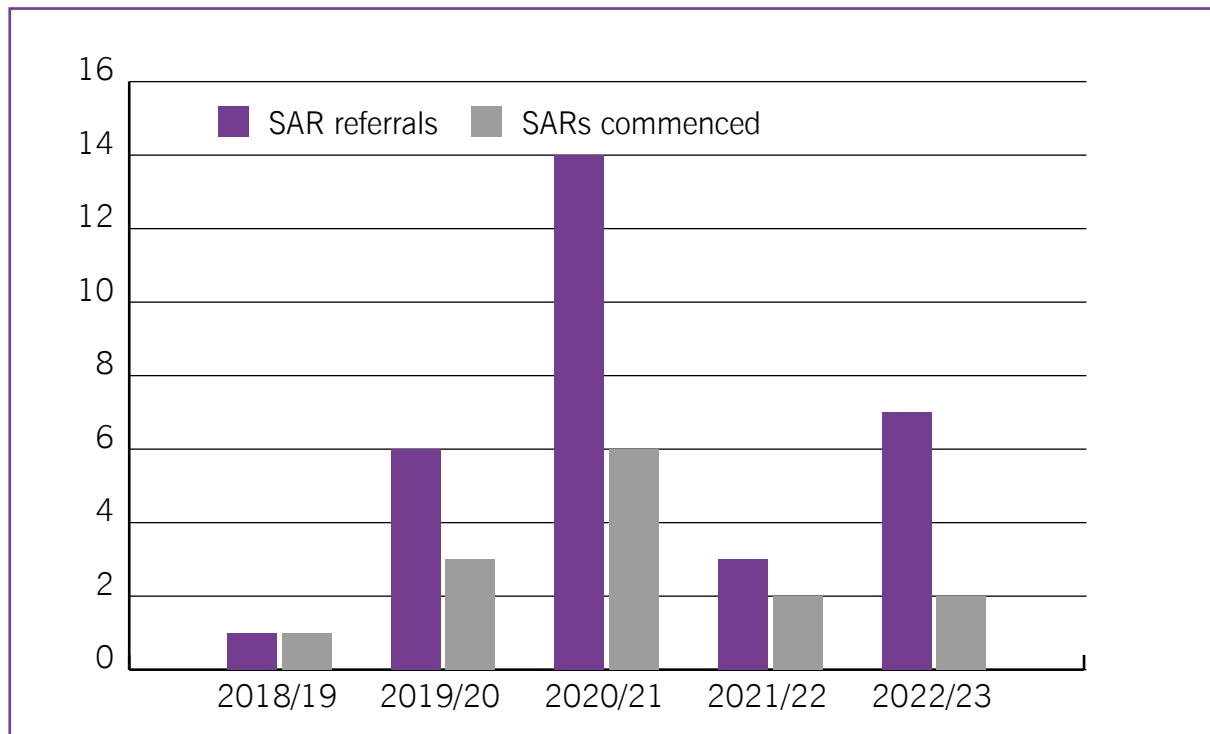
Core Priority 1: Ensuring statutory compliance

Safeguarding Adults Reviews

Safeguarding Adults Boards have a statutory duty under Section 44 of the Care Act 2014 to undertake Safeguarding Adults Reviews (SARs) into cases where individuals with care and support needs have been seriously harmed or died and abuse or neglect is suspected. The reviews are focused on identifying how multi-agency safeguarding systems and practice can be improved in future.

During 2022-23 the SAB had seven referrals for SARs. This is an increase of three referrals from 2021-22 but a reduction from 14 in 2020-21. The SAB identified two of these met the criteria for a review. One of these SARs resulted from a re-referral. Another SAR from a referral made in 2022-23 will be commenced within 2023-24. With the other referrals, the SAB determined the cases did not meet the criteria for a SAR. The SAB continued work on seven other SARs, with four of these being completed and two being published during the year.

The chart below shows the number of referrals for SARs and SARs commenced each year for the past five years. In some cases, a SAR may have been referred in one year and commenced in the next year.



Of the nine people considered as subjects of SARs agreed or under way during 2022/23:

- Five (55%) were female and four (45%) male
- Seven (78%) were of White British ethnicity, one (11%) of Asian ethnicity and one (11%) of White and Black mixed heritage
- Two (22%) were aged over 65 and one (11%) was aged under 25
- Three (33%) had mental ill-health.
- Three (33%) had a learning disability.

Over the last few years, the SAB has identified an under-representation of people from non-white backgrounds as subjects of SARs. We have reviewed how we record protected characteristics of adults in our Safeguarding Adults Reviews to ensure that each individual's diverse needs and experiences are identified and analysed appropriately. We recognise the importance of continuing to develop our understanding of this under-representation.

Of the five reviews open at the end of March 2023, one had been in progress for more than 18 months, two further had been in progress for around 12 months and two had been in progress for 6 months.

Key areas of learning from the SARs worked on during 2022-23 were:

- When working with adults with a learning disability, agencies need to be assured that they place their voice at the centre of care plans
- Practitioners need to feel confident to address and challenge the use of inappropriate language, including if used by carers and family members of adults with a learning disability
- Adults with a learning disability are at risk of diagnostic overshadowing
- Opportunity to apply the Mental Capacity Act is sometimes missed resulting in decisions being made that are not necessarily always in the best interest of the person at risk
- Practitioners need to understand how and when to escalate concerns
- Agencies need to promote advocacy services and empower their practitioners to know when and how to seek advocacy services
- Work needs to continue around the identification of carers, carer's assessments and to recognise carer strain
- Practitioners need to be cognisant to the signs and indicators of Domestic Abuse in older people and not assume behaviour is due to carer's stress or symptomatic of physical/mental ill health e.g., Dementia.

Action plans are in place to address the findings from reviews.

The SAB shared key messages from SARs through its [Safeguarding Matters newsletter](#). To support workers to put learning from SARs into practice, the SAB has continued to use [7-minute learning briefings](#). These concise documents are focused on encouraging reflection and development within teams and by individuals to develop practice in response to the learning.

A Leicestershire Adults & Communities' Staff Survey showed that 87% of respondents agreed that 'The Council has a Safeguarding Adults Board which has a clear understanding of safeguarding risks and a clear, resourced plan to address them'. Some comments indicated that improvements had been made within safeguarding and having a Lead Practitioner for Safeguarding within Leicestershire Adult Social Care was beneficial. Learning from SARs was also identified as a strength during the staff workshops. Suggestions to improve partnership working in relation to safeguarding included, building on the work of the SAB, open and honest communications, greater awareness of roles and responsibilities amongst all partners, joint training and events.

As a result of learning from SARs we have:

- Produced a special issue of Safeguarding Matters on working with adults with learning disabilities, including case studies based on SARs and articles on topics such as being a good communicator, addressing and challenging inappropriate language, Annual Health Checks, Diagnostic Overshadowing and Mental Capacity.
- Formed better and closer links between the SAB and the Transforming Care Team and LeDeR
- Carried out awareness raising regarding the LLR Escalation procedure via Safeguarding Matters Live
- Sought assurance from key agencies regarding their approach to informing staff about escalation routes and how to address professional differences
- Added Mental Capacity Act (MCA) Training as a development objective to the workplan of the LLR SAB Training Subgroup. Also, the SAB Audit Subgroup has decided to carry out an MCA audit in 2023-24
- Commissioned a training session from POHWER, a UK Advocacy Charity, on Independent Mental Capacity Advocates (IMCAs), focusing on safeguarding, and published an article on “Understanding Mental Health Terminology”, including IMCA and Advocate, in Safeguarding Matters
- Formed stronger links between the SAB and the LLR Carers Delivery Group, with a representative now sitting on the SAB. This will help track progress against the priorities identified in the “Joint Carers Strategy Refresh 2022-2025 – Recognising, Valuing and Supporting Carers in Leicester, Leicestershire and Rutland”
- The multi-agency Domestic Abuse procedure was updated throughout to reflect changes as a result of the introduction of the Domestic Abuse Act 2021.

This business year, Leicestershire & Rutland SAB also added its published reviews to the [National Safeguarding Adults Review \(SAR\) Library](#) developed by the National Network for Chairs of Adult Safeguarding Boards.

Regional work

Leicestershire & Rutland SAB were involved in an East Midlands regional review of SARs. In preparation for the Care Quality Commission (CQC) inspection framework, the SAB took advantage of some work commissioned by Partners in Care and Health to provide evaluation and advice on safeguarding adults work.



Core Priority 2: Enhancing Everyday Business

Multi-Agency Safeguarding Procedures

Leicestershire and Rutland Safeguarding Adults Board works with Leicester Safeguarding Adults Board to maintain up-to-date multi-agency adult safeguarding policies and procedures across Leicester, Leicestershire and Rutland. These policies and procedures are hosted on our dedicated website called the MAPP (Multi-Agency Policies and Procedures) www.lradultsafeguarding.co.uk/.

Throughout 2022/23 these policies and procedures continued to be reviewed and updated in line with learning from reviews, audits, and best practice.

Updates include:

- A new chapter on No Recourse to Public Funds
- Resolving Professional Disagreements procedure updated (to include a specific reference to Escalation)
- Modern Slavery chapter updated
- Whistleblowing chapter updated
- Mental Capacity chapter updated
- Making Safeguarding Personal chapter updated
- Domestic Abuse chapter updated
- Disclosure and Barring chapter updated
- The Care Act 2014 chapter updated
- A new chapter on Whole Family Approach
- Safeguarding Adults Data Returns chapter updated
- Best Interests chapter updated
- Criminal Offences and Adult Safeguarding chapter updated.

A full list of new chapters and amendments made can be found on the [‘Amendments’](#) page of the Leicester, Leicestershire and Rutland MAPP.

If you want to sign up for alerts regarding SAB procedure updates, please [click here](#).

If you have any comments or feedback on the procedures, you can use the [contact form](#).

Training

The SAB continued to support up-to-date training in single agencies, including all key partners and many care providers, through providing a competency framework for adult safeguarding and disseminating learning from reviews and updates to procedure and legislation.

The SAB's training co-ordination and delivery function is shared with the Leicester Safeguarding Adults Board to support consistent and effective partnership working.

We provided training resources and events in support of our priorities and learning from reviews. We continued to use a more blended approach to learning, incorporating video resources and resource packs alongside online training sessions.

Resources

The [LLR SABs' YouTube channel](#) continues to develop a bank of safeguarding videos and other resources that can be utilised by partners for learning and development – for example, in single agency training and supervision.

A regular Trainers' Network is facilitated, monthly email briefings are disseminated and regular [Safeguarding Matters newsletters](#) are published. As of this year, we have also introduced Safeguarding Matters Live (see below). During 2022-23, 167 additional people signed up to the Safeguarding Matters distribution list.

Training Delivery

This year [Safeguarding Matters Live](#) was launched. These are live online briefings for all staff across the children and adults multi-agency partnerships. They share learning from reviews and audits, procedure and guidance updates, and resources to support practice. The June 2022 briefing was attended by 289 delegates with the December 2022 briefing attendance increasing to over 500 delegates. The slides from the events are made available via our website and sessions are available to watch on the Safeguarding Children Partnerships' [YouTube Channel](#).

In November 2022, a training session from POHWER, a UK Advocacy Charity, was delivered on Independent Mental Capacity Advocates (IMCAs), focusing on safeguarding.



Training Impact

We want to improve our understanding of access to and impact of SAB training resources to enable us to focus on providing effective training and learning resources that support changes in practice. To do this, we are going to join up with the Safeguarding Children Partnership who are commissioning a learning management system that will work with our continued blended approach.

Free online information session on what adult safeguarding is



The session covers:

- What is adult safeguarding?
- What is abuse and neglect?
- Signs of abuse and neglect in adults
- What to do if you're worried about an adult



**Safeguarding
Adults Board**
LEICESTERSHIRE & RUTLAND

Leicester
Safeguarding
Adults Board

WORKING IN PARTNERSHIP
TO KEEP ADULTS SAFE



Developmental Priorities 1 & 2: Strengthening User and Carer Engagement & Raising awareness within our diverse communities

Engagement

During this business year, the Leicester Engagement Subgroup became the Leicester, Leicestershire and Rutland Engagement and Communication Subgroup, allowing for a sub-regional response to this important area of safeguarding.

'What is Adult Safeguarding?' online information sessions have been regularly delivered to support those who work in Leicester, Leicestershire & Rutland, including to community members and groups.

"I have a clearer idea about the actions I could take if I suspected someone was in trouble."

"[Following the session] I will be more attentive to the possibility of adults being in need of care and support on a daily basis."

"[The information provided] will help me, as I work with vulnerable families, to speak up when I see something."

Feedback from delegates on "What is Adult Safeguarding" training

Our "See Something Say Something" awareness campaign and [video](#) continued to be promoted with the video having reached 1,041 views by quarter one and over 1,500 views by the end of the business year. In November 2023, the Engagement and Communication Subgroup split this longer video into three shorter videos to make them more accessible on social media:

- See Something, Say Something: [Exploitation – Frank's Story](#)
- See Something, Say Something: [Domestic Abuse – Joe's Story](#)
- See Something, Say Something: [Neglect – Jenny's Story](#)

The Engagement & Communication Subgroup oversaw the SAB's promotion of adult safeguarding during National Safeguarding Adults Week 2022 (15th-21st November). This included an awareness campaign and promotion of the above safeguarding animations. A Leicestershire County Council Facebook post relating to this had over 10,000 hits by people who read, shared or commented on it, which was the highest received for a Facebook post on the County Council channel that month.

In response to the potential for exploitation, the [local 'Tricky Friends' animation](#) (adapted from Norfolk SAB's animation) was translated into [Ukrainian](#) and promoted across the partnership.

Developmental Priority 3: Understanding how well we work together

Quality assurance and service improvement

Performance data

The Performance Subgroup set up a new dataset for the Safeguarding Adults Boards (SABs). Returns are now being considered on a quarterly basis and exceptions reported into the SABs.

Self-Assessment

The LLR SAB Performance Subgroup refreshed the Quality Assurance Framework (QAF) during 2022-23.

Also, during 2022-23, the safeguarding partners and specific relevant agencies carried out a self-assessment of their safeguarding effectiveness. The Safeguarding Adults Assurance Framework (SAAF) is designed for agencies to provide assessment of their current performance in several key areas in relation to safeguarding adults and to provide a reasonable comparison with results from the previous year.

Following improvement work in the year the majority of partner agencies provided evidence that they were effective across all areas in the assessment:

- Strategic and Governance Arrangements
- Impact on Safeguarding Considered in Service Change
- Workforce Capacity and Resilience
- Use of Making Safeguarding Personal (MSP) principles and response to safeguarding needs and welfare
- Effective response to adults at risk affected by 'hidden harm'.

Where agencies judged themselves as not meeting the standard for being 'fully effective' against an area of assessment, additional information was required to indicate how they plan to achieve full effectiveness and by when. All agencies were asked for their plans for how they would improve effectiveness. Returns will be fully analysed and presented to the SABs at the start of the 2023/24 business year.

Audits

The SAB carried out two multi-agency audit processes during 2022/23. The process brings together workers from different organisations to give a multi-agency view on practice in safeguarding cases in order to identify areas of good practice and areas for learning and improvement. The audits focus on particular themes or parts of the safeguarding process. Practitioners are invited to give a frontline perspective on cases.

The first audit focused on repeat referrals from care homes. It looked at situations where there were three repeat safeguarding referrals/alerts for adults living in a care home within in a 6-month period (from 1st June 2021 to 1st December 2021).

The repeat referrals from care homes audit found:

- There was evidence that the principles of Making Safeguarding Personal are being applied. There were some good examples of practice where safeguarding was explained well, the views, wishes and desired outcomes of the adult at risk were recorded and mental capacity was considered, and assessed if appropriate to do so.
- Multi-agency involvement within cases, for the most part was strong, involving a variety of relevant professionals.
- Many of the cases discussed involved people with trauma in their history.
- There were some delays in providers giving access to records/care plans.
- The three Local Authorities have different expectations and processes in place for incident reporting and providers might find it difficult if Local Authorities are asking for different things.

The findings from this audit are being taken forward as follows:

- The SAB Training Subgroup is taking forward Trauma-Informed Practice as a training need relating to Safeguarding Adults.
- The SAB Procedures Subgroup is going to update and re-launch the 'Causing Enquiries to be Made' guidance, with additional information regarding the importance of timely information sharing.
- The SAB Procedures Subgroup is to consider guidance regarding information sharing with GPs.

The second audit focused on cuckooing. This is a practice where people take over a person's home and use the property to facilitate exploitation. It takes the name from cuckoos who take over the nests of other birds. Locally, in 2020, "Guidance for Working with Adults at Risk of Exploitation: Cuckooing" was produced and launched during Safeguarding Adults Week.

The cuckooing audit found:

- Whilst cuckooing guidance has been produced and promoted locally, and there was good awareness locally of what cuckooing is, there was not much awareness of the existence of the local guidance.
- Despite the cuckooing guidance not being used, there was good evidence of multi-agency working.
- With cuckooing, an adult at risk can also sometimes be a person accused of causing harm and this can be interchangeable.
- Where there is a case with suspected cuckooing, but it does not meet the safeguarding threshold, it might be closed by Adult Social Care. Agencies might think it is being dealt with when it is not.
- Building a therapeutic relationship is important, as it enables an individual to seek and receive help. Practitioners need to consider communication methods.

The findings from this audit are being taken forward as follows:

- The SAB Procedures Subgroup will review the Cuckooing Guidance / Templates in light of learning from this audit.
- The SAB Training Subgroup will consider how the Cuckooing Guidance can be re-promoted.

Other assurance work

Partners Inspection Reports

The SABs received information on inspections of:

- Leicestershire Partnership NHS Trust (LPT) Acute Wards for Adults of Working Age and Psychiatric Intensive Care Units by the Care Quality Commission (CQC)
- Police Efficiency, Effectiveness and Legitimacy (PEEL) Assessment of Leicestershire Police by Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS).

The Health and Care Act 2022 introduced a new independent assessment process for Local Authority Adult Social Care Services and Integrated Care Systems. The Care Quality Commission (CQC) will assess services using their Assessment framework for local authority assurance.

Homes for Ukraine and safeguarding duties

There are specific safeguarding duties related to the Homes for Ukraine scheme. Therefore, in September 2022, the SABs received assurance from each of the Local Authorities about how the scheme is working in their area, support processes in place, such as checks and visits, and the process in place to deal with any safeguarding risks. 999 Ukrainian guests arrived in Leicestershire in 2022/23. The approximate number of active sponsors at the end of the year was 300. In Rutland, the number of active sponsors fluctuated during the 2022/23 period, but by March 2023 it was 32 sponsors. 131 people were housed in Rutland in 2022/23.

Information Sharing Agreement

The local Information Sharing Agreement of the Leicester, Leicestershire and Rutland Safeguarding Children Partnerships and Safeguarding Adults Boards was updated throughout 2022/23 and re-published in April 2023.

Developmental Priority 4: Prevention – helping people to stay safe, connected and resilient to reduce the likelihood of harm, abuse or neglect

Annual Business Plan Priorities

The two priorities in the Business Plan for 2022-23 were continued from 2021-22. This was due to the continued national and local prevalence of these themes, particularly due to the exacerbation of issues during the Covid-19 pandemic, and the breadth of the work requiring completion to achieve an appropriate level of assurance.

Hidden Harm

Reviewing how we work together across society to prevent the needs of, and harm to, adults with care and support needs being missed or hidden and ensuring we respond effectively.

Rationale (established 2021-22):

- Local and national SARs identify people “hidden in plain sight” as a recurring theme for improvement.
- We are concerned that, during Covid-19, services had less physical contact with and ‘eyes on’ people to fully understand their needs and circumstances. In addition, some informal care arrangements that support safeguarding of individuals may not have functioned in the same way when restrictions were in place.
- Specific areas of concern include self-neglect and individuals with mental ill-health and/or learning disabilities, and individuals from black and other diverse backgrounds.

What we did

As part of the Safeguarding Adults Assurance Framework (SAAF), agencies were asked “What does your agency/organisation have in place to effectively hear and respond to adults at risk affected by ‘hidden harm’?” and to rate their effectiveness. Early analysis shows that all Leicestershire & Rutland agencies that responded to the question reported full effectiveness in 2022/23.

The LLR SAB Performance Subgroup produced a Hidden Harm Assurance Report for 2022/2023. It collated information from across subgroups and partnerships on hidden harm, including analysis of insights project, alerts and community concerns (see below for more detail). It was presented to the SABs early in the new business year.

Different areas where adults could be considered “hidden in plain sight” were considered across 2022-23 and the following work was completed:

Self-Neglect

- The LLR SAB Performance Subgroup’s deep dive assurance exercise analysed data around the specific areas of concern identified regarding individuals who self-neglect, who have mental ill-health and/or learning disabilities, and individuals from black and other diverse backgrounds. Local Authority demographic data indicated that:
 - The ethnicity of the majority of people across Leicestershire and Leicester, who were supported via safeguarding for either self-neglect or domestic violence categories of abuse, was White British. This may indicate under-reporting of abuse for BAME residents of our communities.
 - The percentage of people who experienced mental ill-health whilst being supported through safeguarding for either self-neglect or domestic violence categories of abuse was significantly higher in Leicestershire than Leicester.
- There was a comprehensive discussion about Self-Neglect at the SAB meeting in November 2022, considering and analysing the ongoing challenges.
- The LLR SAB Procedures Subgroup is in the process of reviewing self-neglect policy, including the use of the Vulnerable Adult Risk Management (VARM) process for individuals at high risk due to self-neglect.

Domestic Abuse

- In June 2022, a presentation on the Domestic Abuse Act 2021 was delivered to the SABs, setting out the three stages of implementation and the potential local impact.
- A Domestic Abuse and Safeguarding Research Project, entitled “Perpetrators of Domestic Abuse Against Older Adults: Characteristics, Risk Factors and Professional Responses” and carried out by Durham University, was supported by the LLR SABs. Initial findings from the research project were received at the start of the year, with a fuller update provided during March 2023. The research focuses on (i) perpetrators of domestic abuse and (ii) safeguarding older adults from domestic abuse. Learning identified is likely to be important nationally. Full analysis and outcomes will be shared once the research has been published and, in the meantime, the 2023/24 Business Plan will focus on actioning areas of improvement and promoting best practice identified so far.

Cuckooing

- A multi-agency audit focusing on “cuckooing” was facilitated by the LLR SAB Audit Subgroup. A local Safeguarding Adults Review (Leicestershire and Rutland SAB, Person D, published June 2022) identified that there was a gap in understanding the level of recording of cuckooing incidents locally. The results of the audit are discussed in more detail in the “Quality assurance and service improvement” section.

Adults with learning disabilities

- In June 2022, a presentation was given to the LLR SABs on the Transforming Care Programme (TCP) and the outcome of the Safe and Wellbeing Reviews carried out for LLR inpatients between November 2021 and February 2022.
- The “LeDeR Annual Report 2021/22 and Annual Health Checks” was presented to the LLR SABs at their Board meeting in November 2022.

Impact:

Whilst work has been undertaken locally, there is ongoing work to be done, particularly around the local self-neglect approach and responding to perceptions of domestic abuse, which still appear to focus on intimate partners rather than encouraging consideration of abuse by the wider family.

There needs to be a clearer understanding of the different groups and existing forums across the partnership that focus on adults with learning disabilities, which bring together providers and those in quality assurance and commissioning roles, and their safeguarding remit. The Board is linking with LeDeR to achieve an improved understanding of the volume and type of safeguarding issues for people with learning disabilities. It will continue to seek assurance that local safeguarding partners are working together to effectively safeguard adults with learning disabilities, challenging discrimination against people with learning disabilities and actively responding to the perspectives and experiences of people with learning disabilities.

Care Homes

Work together to support and sustain effective safeguarding in care homes.

Rationale (established 2021-22):

- A number of issues in care homes regarding quality of care and safeguarding became apparent during Covid lockdowns with increase in safeguarding alerts relating to care homes and care homes closing.
- Closure of care homes and lack of capacity in the system increases risk around safeguarding.
- As care homes open up for visitors, more people are seeing those in care homes, and therefore potential for more concerns to be raised.

What we did

A resource pack was developed by the LLR SAB Training Subgroup for care providers. It highlights procedures, guidance, information and resources available to care homes, including:

- A brief overview of the role of Safeguarding Adults Boards
- Local Multi-Agency Policies and Procedures
- Escalation guidance
- Thresholds guidance
- Causing enquiries to be made
- Information about Leicestershire Social Care Delivery Group (LSCDG)
- Safeguarding Adults Trainers' Network

- Safeguarding Matters newsletter
- Our YouTube channel and resources
- Social Care Institute for Excellence (SCIE)
- Research in Practice for Adults (RiPfa)
- Where to find our local, published Safeguarding Adults Reviews
- Free Mental Capacity Act Training
- Our local basic safeguarding awareness resource for safeguarding children and adults.

The resource was added to the safeguarding section of the provider.net website. Oversight of the document remains with the LLR SABs Training Subgroup where it will be reviewed on an annual basis.

In addition, Contracts and Commissioning Teams across Leicester, Leicestershire and Rutland Local Authorities and the Integrated Care Board (ICB) have reviewed the National Institute for Health and Care Excellence (NICE) “Safeguarding adults in care home guidance” published in 2021.

Local escalation procedures have also been reviewed in line with the NICE “Safeguarding adults in care home” guidance.

A multi-agency audit on care homes was completed by the SABs’ Audit Subgroup. The audit focused on situations where there were 3 repeat safeguarding referrals/alerts for adults living in a care home within a 6-month period (from 1st June 2021 to 1st December 2021). For more detailed information on learning from this audit, see the “Quality assurance and service improvement” section.

During 2022/23 the SABs received assurance on dementia care home oversight across Leicester, Leicestershire and Rutland with all three Local Authorities and the Integrated Care Board providing reports.

The LLR SAB Performance Subgroup collated data and assurance on safeguarding in care homes and produced a report for 2022/2023. It will be presented to the SABs early in the new business year.

Impact:

Work undertaken has led to a better understanding of the local picture and how local policies are informed by statutory guidance. The SAB acknowledges the challenging national picture around workforce capacity within the care sector and will ensure that resources for care providers offer up to date information and support.



Finance

The work of the SAB is supported by the Leicestershire & Rutland Safeguarding Partnerships Business Office that also supports the Safeguarding Children Partnership and carries out Domestic Homicide Reviews. The SAB is funded by contributions from its partners.

A single funding arrangement for the Safeguarding Adults Boards and Safeguarding Children Partnerships for 2020 onwards has been agreed between the statutory partners for the Safeguarding Adults Boards and the children's Safeguarding Partners for Leicester, Leicestershire & Rutland.

The contributions from partners for the Leicestershire & Rutland SCP and SAB as a whole for 2022/23 can be seen below alongside contributions for the previous year:

	2021/22	2022/23
Leicestershire County Council	£102,496	£119,266
Rutland County Council	£45,833	£50,367
Leicestershire Police	£88,725	£97,500
West Leicestershire CCG and East Leicestershire & Rutland CCG*	£88,724	£97,500
National Probation Services	£1,348	N/A
Total income for SCP and SAB	£327,126	£364,633

*Note – the contribution was made before the two Clinical Commissioning Groups became the Leicester, Leicestershire & Rutland Integrated Care Board (ICB)

Statutory partners agreed to reduce contributions for one year in 2021/22 with the difference to be funded from the SCP and SAB reserves.

Overall expenditure across the SCP and SAB for 2022/23 was £317,689. Expenditure for the SAB was apportioned as follows:

	2021/22	2022/23
Staffing	£105,579	£115,342
Independent Chairing	£4,448	£5,418
Support Services	£3,250	£0
Operating Costs	£4,556	£4,540
Engagement	£4,453	£0
Case Reviews	£19,391	£6,975
Total Expenditure	£141,677	£132,275

Expenditure has significantly reduced in the last year. This is due to support services no longer being used, with the processes being brought in-house. Additionally, expenditure on Safeguarding Adult Reviews decreased due to the number of reviews already being in an advanced stage and alternative methodologies being used, as appropriate. There was no cost for engagement as a number of projects had been paid for in the previous year.

Forward priorities 2023 onwards

The Leicestershire & Rutland SAB is developing a new joint Strategy for 2023-2026 with the Leicester SAB. The Strategy provides the framework for forward priorities of the two SABs.

The two annual priorities in the Business Plan for 2023/24 are:

Self-Neglect

**Mental Capacity Act /
Assessments**

Domestic Abuse

For each of these areas, we have set out our rationale for prioritising the topic, and presented the key deliverables, leads, activities, impact measures and timescales. This will enable us to monitor progress and secure assurance that our actions are making a positive difference to the lived experience of adults with care and support needs. The [Joint Leicester, Leicestershire & Rutland Safeguarding Adults Board Business Plan for 2023-24](#) is published on our website.

The SAB will also work to continue to meet its statutory responsibilities and continue to develop its approach to learning and improving safeguarding of adults.

This page is intentionally left blank

LEICESTER, LEICESTERSHIRE AND RUTLAND SAFEGUARDING ADULTS BOARD BUSINESS PLAN APRIL 2022 to MARCH 2023

This plan outlines the priorities of the Leicestershire Safeguarding Adults Board and Leicestershire & Rutland Safeguarding Adults Board for 2022-2023.

In addition to the priorities identified for this year the Board will continue to operate business as usual to improve safeguarding of adults with care and support needs and meet its statutory obligations as follows:

Group	Role	Specific additional deliverables for 2022/23
Review Group	Carry out Safeguarding Adults Reviews and disseminate learning from these to identify and implement improvement to partnership approaches to safeguarding adults.	Pilot Rapid Review scoping approach for SARs.
Procedures Group	Review and develop multi-agency safeguarding adults' procedures to support effective safeguarding responses	
Audit Group	Carry out multi-agency case audits to gain assurance regarding practice and identify opportunities for improvement in adult safeguarding.	
Training Group	Seek assurance regarding each agency's safeguarding adults training provision. Assess additional multi-agency training needs and co-ordinate and oversee delivery regarding these.	Review the current training strategy to cover Leicester, Leicestershire & Rutland. Work with the Local Implementation Network (LIN) re: Liberty Protection Safeguards
Performance Group	Maintain an overview of multi-agency performance and assurance regarding safeguarding adults.	Agreement of performance framework.
Engagement Group (Leicester SAB only)	Strengthen user and carer engagement and raise awareness within our diverse communities in Leicester City.	
Safeguarding Adults Board	Produce Annual Reports. Review and develop business plan. Explore specific areas of concern.	

1. Hidden Harm

Rationale:

- Local and national SARs identify people “hidden in plain sight” as a recurring theme for improvement.
- We are concerned that that during Covid-19 services have less physical contact with and ‘eyes on’ people to fully understand their needs and circumstances, in addition some informal care arrangements that support safeguarding of individuals may not be functioning as they were with restrictions in place.
- Specific areas of concern include self-neglect and individuals with mental ill-health and/or learning disabilities, and individuals from black and other diverse backgrounds.

Focus will be on community culture shift across practitioners and public to: Help people to: a) see concerns b) have confidence to want to respond and c) respond.

What will success look like?

- The SAB has a clearer understanding of the extent and nature of hidden harm
- Prevention of escalation of harm
- An increase in reports of certain types of harm and from certain groups, based upon our understanding of hidden harm
- The SAB has assurance that the partnership approach responds quickly and appropriately to harm reported.

Key Deliverables	Lead	Other Partnerships involved	Activity	Timescale
Analysis that outlines the nature and extent of hidden harm relating to Safeguarding Adults in Leicester, Leicestershire & Rutland.	Performance Group Engagement Group		<ul style="list-style-type: none"> • Engagement Group (L) / Engagement Activity (L&R) to feed information on hidden harm into performance group. 	Oct 2022
			<ul style="list-style-type: none"> • Collate information from across subgroups and partnerships on hidden harm, including analysis of insights project, alerts, and community concerns. 	Jan 2023
			<ul style="list-style-type: none"> • Take part in DA research project and receive report. 	Sep 2022
Plan in place to respond to the learning identified regarding hidden harm.	SAB		<ul style="list-style-type: none"> • Review learning from analysis and amend business plan with key activities to address learning identifying what is require for different groups. 	Mar 2023
Training and campaigns for managers to enable effective safeguarding - encourage professional curiosity, escalation and advocacy, including ‘Was not brought’	Training Group & Task and Finish group as required	Safeguarding Children Partnerships	<ul style="list-style-type: none"> • Identify key messages regarding good practice and routes for communications 	Sep 2022
			<ul style="list-style-type: none"> • Develop or commission training for managers around supporting professional curiosity in staff and knowledge of local escalation policy 	Jul 2022
			<ul style="list-style-type: none"> • Plan and deliver promotion with professionals through partners 	Dec 2022
Assurance that safeguarding processes are minimising risk of hidden harm.	Audit Group	Transforming Care Partnership	<ul style="list-style-type: none"> • Follow up multi-agency audit regarding strategy meetings in new financial year as required. 	Jan 2023
Systems developed to support safeguarding of these with Learning Disabilities	Business Offices	LeDeR, Transforming Care Partnership.	<ul style="list-style-type: none"> • Survey of practitioners regarding barriers to working to safeguarding those with learning disabilities. 	Oct 2022
			<ul style="list-style-type: none"> • Communications campaign to promote good safeguarding of those with learning disabilities 	Mar 2023

Transitional Safeguarding approach in place	SAB / Task & Finish Group	SCPs, Adolescence Safety & Diversion Board	<ul style="list-style-type: none"> Understand full range of transition pathways Seek assurance re: safeguarding in less-developed pathways 	Aug 2022 Mar 2023
Multi-agency safeguarding and the work of the SAB is becoming anti-racist and more inclusive.	Tbc Business Offices	Healthwatch	<ul style="list-style-type: none"> Collate and review information from across partners regarding work with individuals from diverse backgrounds Review SAB procedures and working processes to ensure they support anti-racism and inclusion. 	Nov 2022 Mar 2023

<p>2. Care Homes</p> <p>Rationale: A number of issues in care homes regarding quality of care and safeguarding have become apparent during Covid lockdowns with increase in safeguarding alerts relating to care homes and care homes closing. Closure of care homes and lack of capacity in the system increases risk around safeguarding. As care homes open up for visitors more people are seeing those in care homes, and therefore potential for more concerns to be raised.</p> <p>What will success look like?</p> <ul style="list-style-type: none"> - Approach in place to prevent escalation of harm - Indicators of concern regarding Care Homes and safeguarding are identified and responded to sooner - Fewer incidences of significant harm in care home settings 				
Key Deliverables	Lead	Other Partnerships involved	Activity	Timescale
Clear view of learning regarding care homes and impact on safeguarding of recent care home closures in particular.	Performance Group	(MAIP / Contracts teams, CQC) LSCDG	<ul style="list-style-type: none"> Collate intelligence regarding safeguarding in care homes and recent events including: Analysis of concerns data, information from CQC, findings from SARs, Local Authority reports and criminal investigations regarding Care homes. 	Sep 2022
			<ul style="list-style-type: none"> Seek assurance that care homes understand and respond to care staff welfare to support effective safeguarding. Identify action for the SAB to support prevention in future in relation to care homes 	Sep 2022 Mar 2023
The SAB is supporting safeguarding in Care homes appropriately	Procedures Group & Training Subgroup	LSCDG & Contracts teams	<ul style="list-style-type: none"> Review escalation procedures in line with NICE guidance on safeguarding in Care homes Finalise SAB support document to send out to care homes 	Jun 2022 Jun 2022

This page is intentionally left blank



ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
4 SEPTEMBER 2023

COLLECTIONS DEVELOPMENT POLICY AND ACCESS POLICY
FOR THE RECORD OFFICE FOR LEICESTERSHIRE,
LEICESTER AND RUTLAND

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 revised Collections Development Policy and Access Policy, for the Record Office for Leicestershire, Leicester and Rutland (ROLLR). These policies are a requirement of archive accreditation and will support the Record Office's accreditation submission to The National Archives in November 2023.
2. The Committee is invited to comment on the policies prior to seeking Cabinet approval on 15 September 2023.

Policy Framework and Previous Decisions

3. The current Collections and Access policies have expired and are due for renewal. The policies must address the key requirements set out in the Accreditation standard, administered by The National Archives. These two policies are key elements of Archive Service Accreditation and are used by the ROLLR to guide its activity and ensure consistency, transparency, effective use of resources and adherence with archive sector ethics.
4. The Collections Development Policy, attached as Appendix A, sets out the vision and purpose for the ROLLR collections remit, including loans, transfers, donations, purchases, and bequests.
5. The Access Policy, attached as Appendix B, sets out the ROLLR's commitments to create a culture where people of all backgrounds and experiences feel appreciated and valued, providing access for everyone.
6. These policies support the Adults and Communities Department's ambition to "*Save and make accessible the cultural and historic heritage of the County,*" which is also a key commitment in the Adults and Communities Strategy "*Delivering Wellbeing and Opportunity 2020–2024*".
7. The policies support the County Council's Strategic Plan 2018–2022, in particular the 'Great Communities' outcome, by helping ensure "*cultural and historical heritage and the natural environment are enjoyed and conserved*".

8. The statutory basis of the archive service rests on the Local Government Act 1972 sections 224-229. Section 224 instructs principal authorities (the definition of which includes the County Council) to make 'proper arrangements' for the safekeeping of their records and records in their custody. This includes making arrangements for inspection and copying of various specified documents. The Freedom of Information Act 2000 places obligations on the County Council to maintain its records in line with the provisions of a Code of Practice on records management issued by the Secretary of State which states that archives of public authorities should only be transferred to an accredited archive service or to a storage provider compliant with relevant British Standards and able to provide the necessary access.
9. Archive Service Accreditation is the UK Standard for Archive Services. The scheme is administered by The National Archive.

Background

10. The County Council manages the ROLLR on behalf of a partnership with Leicester City Council and Rutland Council. These arrangements are based upon a legal agreement with each partner and ensure each authority is able to dispense its statutory responsibilities with regard to the provision on an archive service. Each partner makes a proportionate financial contribution towards the annual operating costs of the ROLLR.
11. The ROLLR is delivered from the Record Office, Long Street, Wigston.
12. The Accreditation standard defines good practice and identifies agreed standards, encouraging and supporting development and is made up of three sections:
 - Organisational health;
 - Collections;
 - Stakeholders and their experiences.
13. Each section is broken down into requirement grouped as follows:
 - *Policies* – describing the overall intentions and direction of an organisation;
 - *Plans* - forward looking documents that set out the objectives of the organisation and identify the actions needed to achieve them in line with the organisations policies and to deliver its mission;
 - *Procedures* – which describe a specified way to carry out an activity or process.
14. The ROLLR's last accreditation standard award was received in February 2018 and The National Archive have advised that the resubmission for accreditation is required by November 2023.

Collections Development Policy

15. The Collections Development Policy, attached as Appendix A, approved by the County Council as the governing body, is a requirement of accreditation. The policy must cover the acquisition, passive and proactive accruals, appraisal and deaccessioning of material (taking material out of the collection), as well as analogue and digital materials where these are held. The amendments to the

Collections Development Policy, are minimal and primarily relate to consistent terminology.

16. Below is a brief summary of the key elements of policy:
- a) *Introduction* - This contains the ROLLR's mission statement ("*We aim to collect and preserve the written, printed, recorded and digital heritage of Leicestershire, Leicester and Rutland and encourage as many people as possible to access, use and contribute to this rich and diverse archive in many different ways.*") and a brief description of the service provided.
 - b) *Scope* - This outlines the different types and format of collection that are within the ROLLR remit.
 - c) *Purpose* - This explains the full collecting remit of the ROLLR, including loans, transfers, donations, purchases, and bequests.
 - d) *Definition of Terms* - This explains what is meant by the key terms of loans, donations, purchases, bequests, transfers, and targeted and commissioned collecting.
 - e) *Responsibilities* - This explains the governance and review processes used by the ROLLR, including the role of the Scrutiny Committee and the Cabinet.
 - f) *Policy statements* - A series of statements which sets out how, why and where the ROLLR will collect. The overarching intention is "*The Record Office collects (on loan or by donation, purchase or bequest), maintains and makes available to all any significant recorded material relating to the life and history of the diverse communities of the counties of Leicestershire and Rutland and the City of Leicester.*"
 - g) *Related Policies, Legislation and Guidance* - This refers to any related policies, including the ROLLR Access Policy.
 - h) *Review of policy* - This records dates of previous policy reviews and sets future review dates. This policy is due to be reviewed no later than 2028.

Access Policy

17. The proposed Access Policy 2023-28, attached as Appendix B, must be approved by the County Council, as the governing body and is a requirement of accreditation. The policy sets out the service's approach to access and ensures that the service works in accordance with the Equality Act 2010. This policy has a new clearer format, similar to the Museum Service Access Policy approved by the Cabinet in November 2021.
18. The Access Policy must specify the ways in which access is provided and enhanced for all users and stakeholders, appropriate to the organisation's mission statement and the nature and scale of its collection.

19. The policy also sets out the ROLLR's commitment to providing a culture where people of all backgrounds and experiences feel appreciated and valued and access will be provided for everyone.
20. Below is a brief summary of the key elements of policy:
- a) *Introduction* - This contains the ROLLR's mission statement ("*We aim to collect and preserve the written, printed, recorded and digital heritage of Leicestershire, Leicester and Rutland and encourage as many people as possible to access, use and contribute to this rich and diverse archive in many different ways.*") and states the intention of the Access Policy which is to "engage openly, positively and equally with communities and our commitment to achieve equality of opportunity by working to remove or minimise barriers that prevent people engaging with our archive service, buildings, collections, website, social media channels, learning programmes, events, volunteer opportunities and engaging with our staff."
 - b) *Scope* - This outlines that the policy extends across respective buildings and collection facilities, website and other online activities, and other venues where outreach and engagement programmes will be delivered. It also covers access for users. It does not cover access in relation to staff, volunteers, freelancers, or contractors, which are addressed elsewhere within corporate policies and procedures.
 - c) *Purpose* - This states the County Council's commitment to increasing access to services and resources by identifying ways to provide an accessible, engaging, innovative, sustainable, relevant, and responsive service of the highest quality.
 - d) *Definition of Terms* - This recognises seven principal barriers to access these being:

• Attitudinal	Intellectual
• Cultural	Economic
• Geographic	Physical/sensory
• Technological	
 - e) *Responsibilities*: This explains the governance and review processes used by the ROLLR, including specific reference to the role of this Scrutiny Committee and the Cabinet, how audiences are consulted and engaged with and responsibilities in respect of the Corporate Equalities Policy and Action Plan.
 - f) *Policy statements* – This section gives detail on how barriers to access are overcome or mitigated by the ROLLR, with reference to each of the seven principal barriers to access outline above. The overarching intention is "*The Record Office makes available to all the written and digital heritage of the counties of Leicestershire and Rutland and the City of Leicester. Access exists within the framework of resources, legislative requirements, and preservation needs. The Record Office aims to facilitate and extend access by understanding user needs and ensuring that the resources can be accessed in a variety of ways.*"

- g) *Related Policies, Legislation and Guidance* - This highlights key policies and legislation that inform and guide the Access Policy. This includes national legislation such as the Equality Act 2010 and local plans and guidance.
- h) *Policy Review* - This records previous reviews and sets future review dates. This policy is due to be reviewed no later than 2028.

Partnership Working and Associated Issues

- 21. The ROLLR is delivered in partnership with Leicester City and Rutland Councils and there are individual Service Level Agreements with Leicestershire County Council. Each partner retains ownership of the archive material related to their geographic area of responsibility. Partners have been consulted on the revised policies and have not requested any changes.

Risk Assessment

- 22. The Collections and Access policies are key elements of the Archive Service Accreditation submission. Failure to secure accreditation would result in the ROLLR's status as an approved place of deposit being removed. In this circumstance compliant provision would need to be made to avoid the County Council, and partners, being in breach of their statutory responsibilities with regard to the Local Government Act 1972 and the Code of Practice issued under the Freedom of Information Act 2000.

Proposals

- 23. These two policies have now been reviewed and updated, which is a requirement of Archive Accreditation. It is proposed that they are now approved by the County Council as the governing body. Such approval will be sought from the Cabinet at its meeting on 15 September 2023.

Consultation

- 24. Officers from Leicester City Council and Rutland Council were consulted as part of the review process, as partners in the ROLLR.

Resource Implications

- 25. There are no new resource implications associated with these policies. However, they set the standards by which the ROLLR will operate and care for the collections it holds in trust for the people of Leicester, Leicestershire, and Rutland. Achieving these standards will require an ongoing resource commitment from all three partners.
- 26. The most significant implication of maintaining these standards is the need for the ROLLR to resolve its current lack for storage space. This is being addressed through work on the Archives, Collections and Learning (ACL) Hub, a report on which was considered by the Cabinet on 12 June 2018.
- 27. A Programme Board, chaired by the Assistant Director (Strategic Commissioning), is in place and has commissioned the development of a Royal Institute of British Architects stage 2 design. This work will provide a costed design proposal for the

delivery of an ACL Hub on the County Hall campus. The outcome of this work will be reported to this Committee and the Cabinet, in order to determine whether this scheme should be progressed.

28. There is no capital allocation in the current Medium Term Financial Strategy 2023-2027, although the scheme is reflected in the future development programme.
29. The Director of Corporate Resources and the Director of Law and Governance have been consulted.

Timetable for Decisions

30. The revised and approved policies are required for the ROLLR's accreditation submission to The National Archives in November 2023.
31. Partners have been consulted on the revised policies and this report seeks comments from this Committee prior to seeking Cabinet approval on 15 September 2023.

Conclusions

32. The two policies have been revised in line with relevant guidance from The National Archives and in consultation with partners. If adopted these policies will guide the ROLLR over the next five years, or until they are next reviewed.

Recommendation

33. The Committee is invited to comment on the revised policies with a view to them subsequently being approved by the Cabinet on 15 September 2023. The Committee's comments will be reported to the Cabinet.

Background papers

Archive Service Accreditation - <https://www.nationalarchives.gov.uk/archives-sector/archive-service-accreditation/>

Delivering Wellbeing and Opportunity in Leicestershire – Adults and Communities Department Ambitions and Strategy for 2020-24 <https://bit.ly/3swoTal>

Leicestershire County Council Strategic Plan 2018-22 <https://bit.ly/3Pe6nh5>

Report to the Cabinet: 19 November 2021 – Updated Policies for Leicestershire County Council's Museum Service - <https://politics.leics.gov.uk/ieListDocuments.aspx?MIId=6448> (Item 78)

Report to the Cabinet: 18 June 2018 – Archives, Heritage and Learning Collections Hub <https://politics.leics.gov.uk/ieListDocuments.aspx?MIId=5181> (Item 159)

Code of Practice on the management of records issues under section 46 of the Freedom of Information Act 2000 - https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1010395/Freedom_Information_Code_Practice_Web_Accessible.pdf

Circulation under the Local Issues Alert Procedure

34. None.

Equality Implications

35. An Equalities Impact Assessment has been undertaken and concluded the impact was neutral. The policies do not represent any change to current functions or services.
36. Ensuring the Access Policy is regularly reviewed helps ensure continued deployment of the County Council's responsibilities in relation to the Equalities Act 2010 and seeks to ensure services are accessible to everyone.

Human Rights Implications

37. There are no human rights implications arising from the recommendations in this report.

Appendices

Appendix A: Collections Development Policy, 2023-2028

Appendix B: Access Policy, 2023–2028

Officers to Contact

Jon Wilson, Director of Adults and Communities

Tel: 0116 305 7541 Email: jon.wilson@leics.gov.uk

Inderjit Lahel, Assistant Director of Strategic Services

Tel: 0116 305 7379 Email: inderjit.lahel@leics.gov.uk

Franne Wills, Head of Service, Communities and Wellbeing

Tel: 0116 305 0692 Email: franne.wills@leics.gov.uk

This page is intentionally left blank

The Record Office for Leicestershire, Leicester and Rutland

Archives Collections Development Policy 2023-28

Contents

1. Introduction	pg 1 -2
2. Scope	pg 2
3. Purpose	pg 2
4. Definition of terms	pg 2 -3
5. Responsibilities	pg 3
6. Policy	pg 3-5
7. Related policies, legislation, and guidance	pg 5-6
8. Policy review date	pg 6

1.0 Introduction

1.1 Mission Statement: We aim to collect and preserve the written, printed, recorded and digital heritage of Leicestershire, Leicester and Rutland and encourage as many people as possible to access, use and contribute to this rich and diverse archive in many different ways.

1.2 The Record Office for Leicestershire, Leicester and Rutland (ROLLR) is provided by Leicestershire County Council in partnership with Leicester City Council and Rutland County Council. This service is the means by which all three local authorities meet their legal responsibilities to collect, care for and provide access to records.

1.3 We are an area with a rich history that values its heritage, engages its communities, welcomes those who visit here, and works together with other agencies and organisations to ensure a future for the past. We will do everything that we can to achieve this, whilst recognising the limitations of our building/s and resources, by collecting, preserving and making accessible records from Leicestershire, Leicester and Rutland.

1.4 Our Access Policy (2023-28) states our intention to engage openly, positively and equally with those communities and our commitment to achieve equality of opportunity by working to remove or minimise barriers that prevent people engaging with our archive service, building/s, collections, website, social media channels, learning programmes, events, volunteer opportunities, and engaging with our staff.

1.5 This Collections Policy sets out what we collect and states how we will ensure all our communities can be represented within the collections which we preserve for the future on their behalf.

1.6 The Record Office wants to create a culture where people of all backgrounds and experiences feel appreciated and valued and where we represent the heritage and experiences of, and provide access to, everyone - regardless of their ability, age, gender, cultural or social background, sexual orientation, faith, language, or wealth.

1.7 The Record Office is recognised by The National Archives as an Accredited Archive Service.

2.0 Scope

2.1 The policy covers provision at The Record Office for Leicestershire, Leicester and Rutland, which is a partnership between Leicestershire County, Leicester City Council and Rutland County Council.

2.2 The collections include the Public Record (NHS, Coroners, Magistrates and Prison records), diocesan, regimental, estate, family, business and local authority records and personal archives. The Local Studies Collections, including newspapers and periodicals, printed maps, a local authors collection, printed ephemera and a library of local printed books.

2.3 The collections exist in a variety of formats including parchment, paper and other similar materials, digital records and photographic, film and sound recordings.

3.0 Purpose

3.1 The purpose of this policy is to state the parameters of our collecting remit, covering loans, transfers, donations, purchases and bequests.

4.0 Definition of terms

4.1 We collect by loan, donation, purchase or bequest, by transfer from other archives and records collections and through commissioned collecting initiatives.

4.2.1 Loans: These are accepted where a depositor does not have the legal right to give away their records. Loans where the depositor is not inclined to transfer the title of ownership will be considered but we will advocate for donation as a preferred route.

4.2.2 Historically, the Record Office has also received documents on 'permanent loan'. This term is no longer used, although the principal of material not donated, yet held permanently without a right of withdrawal, is still recognised in the case of material which has been deposited historically. Permanent loan is no longer an acceptable method of deposit.

4.3.1 Donations: These are gifts to the collection where the depositor or their agents transfer the title of ownership to the Record Office.

4.3.2 Donations or loans may be accepted with certain limitations required by the depositor regarding its public accessibility. Most owners deposit their records free of charge to be used by researchers, however some owners may request certain controls on access as a condition of deposit; however, unduly restrictive conditions are discouraged. The Record Office will not accept collections which have excessively onerous access conditions attached or those which would conflict with the

principle of equal access for all. All access conditions imposed by owners will be clearly communicated to users.

4.4 Purchase: The Record Office may occasionally purchase material and will seek financial support for these acquisitions from local and national funding bodies, including the Friends of the Record Office for Leicestershire, Leicester and Rutland (FROLLR), The National Archives, the British Library and the partner authorities. Purchase of material is an important option to enable gaps in otherwise complete collections are to be filled, or to create or 'prime' a new area of collecting which will help ensure the collections are representative of our communities.

4.5 Bequest: Archive material may also be received in the form of a bequest. This may be by prior arrangement with the testator and will be subject to the same restrictions as any other means of deposit. Where appropriate (and in agreement with either testator or executors) material may be taken and if not relevant to our collections, passed on to another appropriate archives, or sold for the benefit of the collection.

4.6 Transfer: Archive and records may be collected as transfers from other archive collections where the material is considered to have a greater relevance to this area. Links through relevant professional bodies and the National Archives are maintained to ensure that negotiation and collaboration over appropriate places of deposit exists with other archives. Archive material is customarily 'taken in' to be passed to other archives; just as material is received as part of an informal, widespread, reciprocal arrangement. Material is also received from archives re-evaluating their holdings, or institutions (such as the former British Record Association) processing large deposits taken in purely for distribution.

4.7 Targeted and Commissioned Collecting: Targeted collecting is where we use our own resources, both staff and volunteers to collect material relating to events such as local elections or national celebrations etc. Commissioned or project-led collecting is where we work with communities and other agencies to co-create collections which document, reflect and represent communities.

5.0 Responsibilities

5.1 The Record Office reviews performance, policies, and procedures through the County Council's governance and reporting structure and through the Partnership Board which includes representatives from the three Partner authorities. Cabinet is responsible for the executive functions and decisions of the Council. The Adults and Communities Overview and Scrutiny Committee scrutinises the executive functions and decisions of the County Council in respect of the Adults and Communities Department. Together they help ensure the Record Office, the Department and the Council meet their obligations.

5.2 The Head of Service is responsible for ensuring service managers work with their teams and colleagues to ensure that the Record Office develops, manages, preserves and makes accessible the collections for which it has responsibility.

5.3 It is the responsibility of the Senior Archivist, working with all of the Record Office team and other colleagues, including the collections and conservation, museum collections and audience development and participation teams to ensure that the collections remain relevant, reflective of our communities, accessible and in good order.

5.4 We are committed to improving our understanding of our communities and ensuring that their records and archives are preserved for the future.

6.0 Policy statement

6.1 The Record Office collects (on loan or by donation, purchase or bequest), maintains and makes available to all any significant recorded material relating to the life and history of the diverse communities of the counties of Leicestershire and Rutland and the City of Leicester.

6.2 The aim of the Record Office is to provide a central point for the accumulation and safe keeping of archival material, under professional supervision. To that end, the Record Office will accept material which meets its criteria for collecting (see 6.5). The Record Office will also actively seek out material, or appeal for material in order to complete or supplement a collection; or to strengthen holdings where they are weak or unrepresentative. Special events, commemorations, new local communities, groups, or activities may also give rise to a special collecting or campaign to ensure that the collections remain representative.

6.3 The Record Office undertakes to keep all deposited material safely and securely, subject to its policies on conservation and access. Archive material will not be accepted unless it can be safely stored and cared for, if its condition presents a risk to staff, volunteers or service users (e.g. has active mould growth etc).

6.4 The Record Office is subject to national legislation, which will affect the availability of certain classes of record. Similarly, the provision of copies is subject to legal controls. Archive material will be made available in accordance with the Record Office Access Policy (2023-28).

6.5 Criteria for Collecting

6.5.1 The collecting parameters of the Record Office are consciously broad, potentially including any archival or printed material that reveals, affects or reflects life in the area covered by the three partner local authorities. This also includes the activities elsewhere of those born in the area or those who have made it their home at some point.

6.5.2 The Collecting Policy also reflects contemporary as well as historical life, so that the archive collections remain responsive, relevant and reflective of our changing communities and of modern life in general.

6.5.3 The acceptance of any deposit is subject to the professional judgement of a qualified Archivist, supported by collections managers and conservators. In addition to the other basic requirement (that the material relates in some way to Leicestershire or Rutland) it is important that any item offered to the Record Office also meets a series of further requirements including:

- Relevance to current and future research and use.
- Whether it was produced in circumstances which impart a historical value it did not possess when new.
- If it relates to a sequence of local events or casts an unexpected light on typical or commonplace local experiences.
- The document/s must serve the purpose of the archive in revealing the life and history of the diverse communities of Leicestershire, Rutland and the City of Leicester.
- Age, but not to the exclusion of contemporary material.
- Duplicate material is unlikely to be accepted into the collections unless it can be identified for use in learning or audience development activities.
- Condition.
- The Record Office must have the resources to be able to store, care for and make accessible the material under consideration.

6.5.6 These criteria (particularly relevance, condition and the ability to store, care for and make accessible the material) will remain even when the archive is formed through a commissioned collecting initiative, although the criteria would be widely shared at project inception.

6.5.7 These criteria are applied for the benefit of future users of the Record Office and to ensure that the existing collections, and those which are added to its development can be preserved and made accessible to the standards required of Accredited archive collections.

6.6 Media

6.6.1 The Record Office collects and houses a wide and developing variety of means of recording information; from the traditional written, typed and printed word, to sound and video recordings, photographic media and digitally stored data.

6.6.2 This Policy allows for a flexibility of approach, to adapt to and embrace future developments in technology use. We recognise the increasingly swift obsolescence of some modern media and are seeking robust and sustainable methods to preserve and make accessible born-digital records.

6.6.3 Exceptionally, small items will be accepted as part of an archival deposit, where there is a clear link in provenance between the artefact and archive material. However, the presumption would be that the majority of artefacts would be transferred to the museum collections of the relevant authority or locality.

6.7 Geographical Area

6.7.1 The geographical areas served by and represented in the collections held by the Record Office are the County of Leicestershire, the City of Leicester and the County of Rutland.

6.7.2 These have and may alter with changes in local government.

6.7.3 From 1974 until 1997, the historic county of Rutland remained in existence, yet was administered as part of Leicestershire, but throughout the boundaries of Rutland have remained the same. The boundaries of both Leicester and Leicestershire have, however, been subject to frequent amendments, both in relation to each other and, in the case of the county, with bordering counties - in particular Derbyshire.

6.7.4 For clarity and consistency, the area covered by the Record Office's collections remains constant, as any area which is, or has ever been in Leicestershire or Rutland. This is, however, subject to local agreements with bordering authorities' archives where a more practical solution is in the best interests of potential users.

6.7.5 This is particularly relevant where a 'regional' approach has been adopted by the creators of archival material (such as both the established and some nonconformist churches, where the hierarchy has transcended county boundaries) or where records have been created by a business, which has branches, or even its headquarters, elsewhere. In such cases the Record Office will be prepared to accept ('take in') such material whilst also remaining prepared to negotiate an appropriate alternative agreement for deposit elsewhere, with other interested archival bodies.

6.7.6 The Record Office also regularly receives Public Records - national archive material of local relevance, with the approval of the National Archives.

6.7.7 Other general material from other sources will be collected where there is a clear local significance. This is particularly so in the case of local studies material.

7.0 Related Policies, legislation and guidance

7.1 Legislation

- The 1962 Local Government (Records) Act and the 1972 Local Government Act cover provision of an archive service and proper arrangements for records generated by the constituents organisations.
- The 1958 and 1967 Public Records Act
- The 1978 Parochial Registers and Records Measure
- The 1924 Law of Property (amendment) Act stipulate which records need to be retained.

7.2 Local policies

- The Record Office for Leicestershire, Leicester and Rutland Access Policy 2023-2028
- Leicestershire County Council Museum Collections Management Framework
- Leicestershire County Council Museum Collections Development Policy

7.3 Guidance is given by The National Archives, the Archives and Records Association and other professional bodies

8.0 Review

8.1 This policy will be reviewed periodically to ensure that it remains relevant and appropriate. This may be undertaken regularly, or in response to a specific event such as new legislation. Final date of review and renewal is 2028.

8.2 Previous Review Dates

8.2.1 Established: February 2009

8.2.2 Reviewed: January 2014, October 2016, October 2017, January 2021, Reviewed May 2023

The Record Office for Leicestershire, Leicester and Rutland

Archive Access Policy 2023-28

Contents

1. Introduction	pg 1
2. Scope	pg 2
3. Purpose	pg 2
4. Definition of terms	pg 2
5. Responsibilities	pg 2-3
6. Policy statements	pg 3 - 8
7. Related policies, legislation, and guidance	pg 8 - 9
8. Policy review date	pg 9

1.0 Introduction

1.1 Mission Statement: *We aim to collect and preserve the written, printed, recorded and digital heritage of Leicestershire, Leicester and Rutland and encourage as many people as possible to access, use and contribute to this rich and diverse archive in many different ways.*

1.2 The Record Office for Leicestershire, Leicester and Rutland (ROLLR) is provided by Leicestershire County Council in partnership with the City of Leicester and County of Rutland. This service is the means by which all three local authorities meet their legal responsibilities to collect, care for and provide access to records.

1.3 We are an area with a rich history that values its heritage, engages its communities, welcomes those who visit here, and works together with other agencies and organisations to ensure a future for the past. We will do everything that we can to achieve this, whilst recognising the limitations of our building/s and resources, by offering the broadest, most engaging and relevant access for all our users.

1.4 Our Collections Policy (2023-28) sets out how we want to ensure that all our communities can be represented within the collections which we make accessible and preserve for the future on their behalf.

1.5 This Access Policy states our intention to engage openly, positively and equally with those communities and our commitment to achieve equality of opportunity by working to remove, or minimise, barriers that prevent people engaging with our archive service. This includes our buildings, collections, website, social media channels, learning programmes, events, volunteer opportunities and engaging with our staff.

1.6 The Record Office wants to create a culture where people of all backgrounds and experiences feel appreciated and valued and where we provide access for everyone regardless of ability, age, gender, cultural or social background, sexual orientation, faith, language, location or wealth.

1.7 The Record Office is recognised by The National Archives as an Accredited Archive Service.

2.0 Scope

2.1 The policy covers provision at The Record Office for Leicestershire, Leicester and Rutland, which is a partnership between Leicestershire County, Leicester City and Rutland County Councils. It extends to our building and collection facilities, our website and other online activities, and in other venues where we might deliver outreach and engagement programmes such as schools, universities and community venues.

2.2 The policy relates to access for our users and does not cover access in relation to staff, volunteers, freelancers, or contractors, which are addressed elsewhere in our policies and procedures.

3.0 Purpose

3.1 The purpose of this policy is to state our commitment to increasing access to our services and resources by identifying ways to provide an accessible, engaging, innovative, sustainable, relevant, and responsive service of the highest quality.

4.0 Definition of terms

4.1 When we refer to access, we mean the opportunity to engage with our service through our building/s, collections, content, events, and expertise. We have listed the key barriers to access below, with an example to illustrate how they could be experienced.

- **Attitudinal** - e.g. Some people may feel that the Record Office is not relevant to them, and our service does not reflect their lived experiences.
- **Intellectual** - e.g. Some people may find our procedures unfamiliar and our collections difficult to access or understand.
- **Cultural** - e.g. Some people may feel that our collections do not reflect their communities, social and cultural heritage or interests.
- **Economic** - e.g. Some people may not be able to afford to use some of our services or have access to the internet where we publish our online catalogue.
- **Geographic** - e.g. Some people may not be able to visit our sites due to their location (many of our collections are nationally and internationally relevant).
- **Physical/sensory** - e.g. Some people with physical disabilities, limited mobility, hearing or visual impairment may not be able to, or may find it challenging to access our building, services, collections, activities, websites, or social media channels.
- **Technological** - e.g. Some people may not have access to the internet and therefore are excluded from our digital content.

5.0 Responsibilities

5.1 The Record Office reviews performance, policies, and procedures through the County Council's governance and reporting structure and through the Partnership Board which includes representatives from the three Partner authorities. Cabinet is responsible for the executive functions

and decisions of the Council. The Adults and Communities Overview and Scrutiny Committee scrutinises the executive functions and decisions of the County Council in respect of the Adults and Communities Department. Together they help ensure the Record Office, the Department and the Council meet their obligations under the Equality Act (2010) through doing everything reasonably possible to make the service accessible to the widest range of people and improve lives through culture.

5.2 The Head of Service is responsible for ensuring service managers work with their teams and colleagues to maximise access by addressing the barriers outlined above.

5.3 It is the responsibility of all County Council employees and volunteers to behave in ways that promote equality and are non-discriminatory. This also applies to the way they behave to members of the public in the delivery of services and through the development and maintenance of sites to be as accessible as possible.

5.4 Our service carries out regular evaluation with audiences and consults stakeholders on any proposed changes to services. We are committed to improving our understanding of our non-users to help ensure the broadest possible access to our facilities, services, and collections.

5.5 Leicestershire County Council have a Corporate Equalities Policy and Action Plan, this is disseminated through Departmental Equality Groups, which focus on addressing areas for improvement and reviewing Equalities Impact Assessments (EIA). We will complete an EIA for any new provision and changes to existing provision.

6.0 Policy statements

6.1 The Record Office **makes available to all** the **written and digital heritage** of the counties of Leicestershire and Rutland and the City of Leicester. **Access exists within the framework of resources, legislative requirements and preservation needs.** The Record Office aims to **facilitate and extend access** by **understanding user needs** and ensuring that the **resources can be accessed in a variety of ways.**

6.2 These statements are explained below.

6.3 “Makes available to all”

6.3.1 Approach to requests for access: The Record Office understands that access to the information it holds may be requested for many and varied reasons.

6.3.2 Presumption of openness and equality: This policy assumes that records will be open to the public unless there is a legitimate reason to deny access, for example, a legal prohibition. All researchers will be treated equally, and data collected relating to the subject and purpose of research will be for statistical and monitoring purposes only. Researchers denied access for legitimate reasons will always have the reasons fully explained and be able to appeal any refusal.

6.3.3 Restrictions imposed by owners: Most owners deposit their records free of charge to be used by researchers. The owners of documents may request certain controls on access as a condition of deposit (see Record Office Collections Policy 2023-28) All access conditions imposed by owners will be clearly communicated to users.

6.3.4 The community we serve: The Record Office takes the widest possible approach when defining our community of users and stakeholders and includes future generations whose needs we aim to anticipate. Our community includes those living within Leicestershire, Leicester and Rutland as well

as all those who have an interest in the history of our region. Physical visitors, remote users, social media followers, those who attend our outreach events or see exhibitions using our material, depositors and funding partners are all part of the community we serve.

6.4 “Written and Digital Heritage”

6.4.1 Information is held in many forms and formats from parchment and paper to vinyl records, compact discs and other digitally stored data. In order to ensure present and future access to material the Record Office will endeavour to maintain the best possible storage conditions and suitable technologies appropriate to each format.

6.4.2 The written word is not necessarily always accessible: unfamiliarity with handwriting, language and its historical context can put much of our heritage out of reach for most people. It is therefore essential to provide guidance tailored to individual needs. The Record Office will ensure access to records by providing finding aids which explain, interpret and, where possible, translate the material in a way which enables more people to use and understand it.

6.4.3 Information which is not in a hard copy format presents its own challenges. The Record Office will be active in maintaining ways to access all its collections, for example, in migrating records to different formats.

6.5 Access exists within the framework of resources, legislative requirements and preservation needs

6.5.1 Resources: The Record Office functions within available resources of budgets, space and staffing. Access to records exists within this framework.

6.5.2 Legislative requirements: Access to certain classes of records is governed by legislation. The main statutes governing access are the Data Protection Act 2018 (DPA), the Freedom of Information Act 2000 (FOIA), the Environmental Information Regulations 2004 (EIR) and the and the General Data Protection Regulation 2021 (GDPR).

6.5.3 The DPA covers rights of access to personal data. The FOIA and EIRs relate to the rights of citizens to have access to information held by public authorities.

6.5.4 The Human Rights Act (1998) will also inform, where relevant, decisions on access. Article 8: the right to private and family life includes (in case law) the right of an individual to understand their childhood and early development and to be helped to obtain information relating to this. Article 6: the right to a fair trial encompasses the right of an individual to obtain relevant information held pursuant to a case or tribunal.

6.5.5 Provision of copies is also subject to legal controls such as the Copyright, Designs and Patents Act (1988).

6.5.6 Preservation needs: A principal duty of the Record Office is to ensure the long-term preservation of the material in its custody. Access may need to be restricted if harm to the records would result but will only be refused as a last resort. The Record Office aims to make full use of available technology to facilitate access to records which are too fragile or damaged to be handled.

6.6 Facilitate and Extend Access

6.6.1 Physical and remote access: Access to collections will be provided in a building with appropriate storage and public facilities including provision for those with disabilities.

6.6.2 Searchrooms will be invigilated by trained and qualified staff who will assist visitors and ensure the security of the collections.

6.6.3 It is recognized that many people will not be able to visit the office in person or may not wish to. Access to finding aids, collections and professional advice and support will be provided to remote users in the most effective ways possible, making best use of available technologies.

6.6.4 To ensure the widest possible access to the resources, users and potential users must be provided with information about the service.

6.6.5 Audience development and participation activities will ensure awareness of the service for all who have need of it.

6.6.6 Requests for access: The Record Office responds to requests for access in a variety of formats including by letter, email, telephone, in person and via social media.

6.7 Understanding User Needs

6.7.1 Collection of user data: The Record Office will participate in national and local surveys, benchmarking and other exercises which will enable a greater understanding our users and their needs. These currently include the Public Services Quality Group survey of visitors to British archives, the annual CIPFA Survey and regular review of comments, complaints and compliments.

6.7.2 Users will be encouraged to comment on the service provided and all feedback will be considered seriously and acted upon where appropriate and resources allow.

6.7.3 Non-users: The service aims to understand the needs of non-users by identifying groups which are under-represented in profiles of users. We will aim to break down barriers to use of the service by the widest possible audience and will actively promote its collections to ensure as many people as possible are aware of the service.

6.8 Resources can be accessed in a variety of ways

6.8.1 Records may be accessed in a number of ways: These include personal consultation during public opening hours, provision of surrogates (e.g. microform, digital media and online access through third parties) or research undertaken by a third party.

6.8.2 We shall provide an accessible building and with adaptive technology to enable access to the records in person.

6.8.3 The Record Office will seek to ensure that all who wish to can use the service.

- Staff will be trained in and support equalities principles relating to protected characteristics defined in the Equality Act 2010 and include gender, race, age, disability, faith and belief, sexual orientation, gender reassignment, pregnancy and maternity and marriage and civil partnership.
- Provision of access to people who cannot visit in person through the extension of online facilities and advice and research services.
- Acquiring, where possible, specialist equipment to enable those with disabilities to use the records.

6.9 We are committed to maximising access and will uphold the statutory requirements of the Equality Act (2010). We will do this in a number of ways, including, but not limited to:

6.10 Physical/Sensory access

6.10.1 Physical access to the Record Office is an essential requirement for our service delivery and we will take all reasonable steps to ensure our building is accessible to all. We work in an historic building and, whilst this presents us with some accessibility challenges, we will overcome these by:

- Providing accessible seating throughout our public spaces including our search rooms.
- Ensuring our building and facilities are accessible and have adaptive technology where possible.
- Providing alternative engagement opportunities when access is difficult.
- Providing access to online content for those who cannot leave their homes or access the Record Office search rooms.
- Considering sensory requirements in the design of our buildings, exhibitions and engagement.
- Striving to consult on sensory requirements with users and non-users and working with specialist organisations.
- Providing quieter spaces with less sensory engagement for those who need it.
- Providing training for staff and volunteers.

6.11 Intellectual access

6.11.1 We recognise that not everybody thinks, learns and understands in the same way and we will try to provide a variety of ways to provide access to the archives and information that we have.

6.11.2 We will do this by:

- Providing signage and information that is accessible to a broad range of visitors.
- Ensuring that our staff are able to 'translate' and interpret archival documents which are not easily understood by many people.
- Using best practice standards and guidelines (including the Museums Style Guide and MENCAP guidelines) to ensure the text we use in exhibitions, educational resources, publications, websites and social media channels meet the needs of our intended audiences.
- Providing a varied learning programme for schools, SEN schools and SEN units in mainstream schools through the Creative Learning Service team.
- Ensuring our staff receive training and resources to support them to tailor our services to meet the needs of different audiences.
- Using technology and providing information in other formats to help people engage with our collections.
- Evaluating our online presence to make sure that we are communicating effectively.
- Consulting with specialist user groups and organisations to make sure that we are doing things in the right way.
- Working in a collaborative way with specific groups to make sure that our services are accessible to people with a wide range of learning skills.

6.12 Attitudinal access

6.12.1 We will strive to remove barriers to our service created due to a lack of understanding, misconceptions or bias.

6.12.2 We will do this by:

- Engaging with a range of communities and groups to understand potential barriers, including those where there are low levels of engagement.
- Fully embedding our shared corporate values of Positivity; Trust & Respect; Flexibility; Openness & Transparency; Confidence, Clarity, Respectfulness, Fairness and Accountability.
- Providing training that supports our staff and volunteers to effectively communicate and engage with different types of service users.
- Ensuring our activities and platforms do not use negative stereotypes or re-enforce misconceptions.

6.13 Cultural access

6.13.1 We recognise that our collections and public profile may not reflect the cultural experiences, heritage and interests of all the communities of Leicestershire, Leicester and Rutland and therefore we will strive to reflect our communities better.

6.13.2 We will do this by:

- Evaluating and identifying areas where we can improve the relevance of our collections to communities who are not currently well represented.
- Working in a collaborative way with our service Participation and Audience Development team and with specific groups and communities to remove cultural barriers and make sure that our collections and public profile are more representative.
- Ensuring our staff and volunteers receive training and resources to support them to identify and overcome cultural barriers to accessing our services.
- Consulting with specialist user groups and organisations to make sure that we are doing things in the right way.

6.14 Economic access

6.14.1 We recognise that our geographic location and some of the charges which we make can prevent some audiences from accessing our building and some of our services, so we will ensure we offer a variety of access arrangements and price points to make it easier for these audiences to engage with us.

6.14.2 We will do this by:

- Offering remote access to our collections, knowledge and services.
- Offering a variety of prices within our retail offer and our charges.
- Offering free activities and resources on site and online.
- Further developing online resources and a schools learning offer delivered by Creative Learning Services for schools that cannot afford transport to our building.

6.15 Geographic access

6.15.1 We are a single site, located in a town on the immediate outskirts of Leicester with public transport links to the city and its railway and central bus stations. We have limited free car parking for service users. However, we acknowledge that it is difficult for some service users (especially

international users) to visit us in person. We will continue to develop ways of giving access to our collections and knowledge remotely. We will also seek to develop new ways of allowing audiences to engage with us in different ways.

6.15.2 We will do this by:

- Providing a remote enquiry service which includes telephone, written and email enquiries.
- Loaning our collections and exhibitions to other venues, archives, museums and galleries locally, nationally and internationally.
- Providing quality online experiences and resources which enable local people, people from across the UK and from around the world to engage with our collections and stories.
- Continuing to develop our remote learning offer in partnership with LCC's Creative Learning Service and by building relationships with our three local universities.
- Working with the Participation and Audience development team to engage with those people who are unable to visit the Record Office for a wide variety of reasons.

6.16 Technical access

6.16.1 New technologies are providing new ways for us to interpret and share our collections; tell the stories contained within them and engage with our audiences. However, we recognise lack of access to technology, poor content and systems and applications that do not meet access standards create new barriers for audiences and we are committed to avoiding this.

6.16.2 We will do this by:

- Making our website and mobile applications accessible, in accordance with the Public Sector Bodies (Websites and Mobile Applications) (No. 2) Accessibility Regulations 2018.
- Ensuring that our onsite WIFI provision allows our users to engage with our digital content on their own specialist devices if required, as well as providing networked pcs with access to the internet for our visitors to use.
- Aiming to make access to our own specialist and technical expertise and resources fully available to all, including those who cannot access our digital offer, through visits, on-site engagement, activities and events, and remote enquiries and contact.
- Learning from and sharing with technological learning and practice with other heritage and community organisations.

7.0 Related policies, legislation, and guidance

7.1 Government

- The Equality Act 2010 <https://www.gov.uk/government/publications/inclusive-communication/accessible-communication-formats>
- Public Sector Bodies (Websites and Mobile Applications) (No. 2) Accessibility Regulations 2018.

7.2 Leicestershire County Council

- Leicestershire County Council's Equality Strategy 2020-24 Action Plan 2020-21
<https://leics.sharepoint.com/sites/intranet/AboutUs/Pages/Equality-Strategy.aspx>
- International WCAG 2.1 AA accessibility standard <https://www.leicestershire.gov.uk/about-the-council/equality-and-diversity/equalities-policy-statement>

7.3 ROLLR Policies

- Record Office for Leicestershire, Leicester and Rutland Collections Development Policy 2023-2028
- Leicestershire County Council Museum Collections Management Framework
- Leicestershire County Council Museum Collections Development Policy

7.4 Guidance

- Autism East Midlands Environmental Audit
- Association for Accessible formats <https://www.ukaaf.org/>

8.0 Review of this policy

8.1 This policy will be reviewed periodically to ensure that it remains relevant and appropriate. This may be undertaken regularly, or in response to a specific event such as new legislation.

8.2 Final date of review and renewal is 2028.

8.3 Previous Review Dates

8.3.1 Established: February 2009

8.3.2 Reviewed: January 2014, October 2016, October 2017, January 2021, May 2023

This page is intentionally left blank



ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
4 SEPTEMBER 2023

ANNUAL ADULT SOCIAL CARE COMPLAINTS AND
COMPLIMENTS REPORT 2022-23

REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of report

- 1 The purpose of the report is to provide members of the Committee with a summary of the complaints and compliments for adult social care services commissioned or provided by the Adults and Communities Department in 2022-23. The annual report is attached as an Appendix.
- 2 The Committee is asked to note the report and are invited to make comments.

Policy Framework and Previous Decisions

- 3 The Committee last received a report on complaints and compliments on 5 September 2022, covering the year 2021-22. Reports are presented on an annual basis at the Committee's request.

Background

- 4 The Department has a long-standing statutory duty to have a complaints process in place for adult social care. The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009, effective from 1 April 2009, introduced a two-stage process with flexible investigation methods and timescales to suit the nature and complexity of the complaint. If there is no agreed resolution at Stage 1, the complainant can ask the Local Government and Social Care Ombudsman (LGSCO) to investigate.
- 5 The regulations provide a framework for those handling a complaint relating to a local authority's social care functions. This includes directly provided services and independent services provided through commissioning.
- 6 The actions, omissions, or decisions of the local authority in respect of social care functions are covered. The regulations do not, however, apply more generally to independent providers.
- 7 People who are paying for their own social care (self-funders) may complain to the local authority, for example, about assessment or failure to assess. Services people have arranged or purchased themselves are not covered but the local authority could be challenged if it commissions those services, for example, by a complaint that it

has commissioned a sub-standard service or is not performance managing contracted services sufficiently.

- 8 The Adults and Communities Department is contacted on a daily basis by service users, carers and other interested parties to share concerns, request information or seek clarity on care arrangements. These queries are dealt with and resolved at a local level within care teams or through the Directorate without recourse to the formal complaints process. The Complaints Team do, on occasion, also receive queries and concerns that suggest an adult requires immediate support or that raise safeguarding concerns. Such reports are best handled outside of the formal complaints procedure and are referred into the Customer Service Centre or allocated workers for urgent consideration as appropriate in accordance with relevant safeguarding protocols.
- 9 Under the complaints' regulations, there is a further requirement to produce an annual report that reviews the effectiveness of the complaints and compliments procedures and provides a summary of statistical information. The attached report fulfils this requirement and presents a summary of the complaints handled in 2022-23.
- 10 Complaints and compliments about all other aspects of the Adult and Communities Department are reported separately as part of the corporate complaints process. These are reported annually to the Scrutiny Commission as part of the Corporate Annual Complaints and Compliments Report. The 2022-2023 report was considered at the Commission meeting held on 12 June 2023.

Partnership Working and Associated Issues

- 11 The National Health Service Complaints (England) Regulations 2009 places a duty to co-operate on local authorities and health organisations. During the year, four complaints were handled under joint complaints protocols using an agreed joint complaints handling framework. No issues were experienced with partnership working.

Key Points

- 12 Complaint volumes decreased very slightly in 2022-23 compared to the previous year (204 compared to 210).
- 13 When complaint volumes are set against the context of overall numbers in receipt of long-term support during the year (10,421), it is clear that a very small percentage go on to make a formal complaint (204 complaints which equates to approximately 2%).
- 14 For complaints resolved during 2022-23, the proportion where fault was identified decreased from the previous year (61 complaints or 30%, compared to 92 or 44%).
- 15 During the year, the LGSCO assessed or investigated 23 new complaints (approximately 12% of the total volume). This figure compares with 10 investigations started in 2021-22.
- 16 The LGSCO published Final Decisions on 24 complaints during the year. Fault was found in nine instances. This was an increase from 2020-21 (4). Details for each of the cases appear within the appended report.

- 17 72 (35%) complaints were resolved within 10 working days (67 or 32% in 2021-22) with 138 (68%) resolved within 20 working days. This represents a slight improvement at each point.
- 18 An extra indicator has again been added in response to a request made by the Committee at its meeting in September 2019 to show complaint responses within 40 working days. This shows that 183 (90%) of cases are responded to within this timescale and just eleven complaints exceeded the statutory maximum time allowed (65 working days). These were complex cases all seeking a review of the original decision.
- 19 This year marks the first full year of reporting on timescales for complaints where a senior manager review was offered. This has proved an effective way of ensuring complaints have been appropriately remedied before escalation to the LGSCO.
- 20 44 complaints were reviewed by a senior manager during the year. There is no previous data to allow for comparative analysis.
- 21 The most common complaint theme was again around assessments and care-planning. This is a broad area where complaints are often around professional decision-making and professional opinion. The most notable area of change was a decrease in complaints relating to charging.
- 22 At the request of the Committee at its September 2019 meeting, detail is again provided within this year's annual report of complaints mapped to each district. Although there is some variance, no significant outliers present.
- 23 There have been good examples this year of how systemic learning has been identified and implemented. In 20 cases (33%) where complaints were upheld, clear actions were highlighted by Investigating Managers that focus on improving future performance.
- 24 29 compliments were received about adult social care services during 2022-23. This is a significant decrease on the previous year (85) but continues to add balance to the annual report and recognises the good work that is also taking place across the Department.

Recommendations

- 25 The Committee is asked to:
 - a) note the contents of the Adult Social Care Complaints Annual Report, covering the period 1 April 2022 to 31 March 2023.
 - b) provide comment and feedback on the content and analysis within the report.

Background Papers

Report to Adults and Communities Overview and Scrutiny Committee: 5 September 2022
– Annual Adult Social Care Complaints and Compliments Report 2021/22
<https://politics.leics.gov.uk/ieListDocuments.aspx?CId=1040&MId=6841&Ver=4>

Report to the Scrutiny Commission: 12 June 2023 – Corporate Complaints and compliments 2022/23
<https://politics.leics.gov.uk/documents/s176678/Corporate%20Annual%20Report%202022-23.pdf>

Circulation under the Local Alert Issues Procedure

26 None.

Equality Implications

27 The Adults and Communities Department supports vulnerable people from all the diverse communities in Leicestershire. Complaints and compliments are an important way of ensuring that service responses are fair and equitable to all sections of society. This report does not highlight any specific equal opportunities implications.

Human Rights Implications

28 There are no human rights implications arising from the recommendations in this report.

Officers to contact

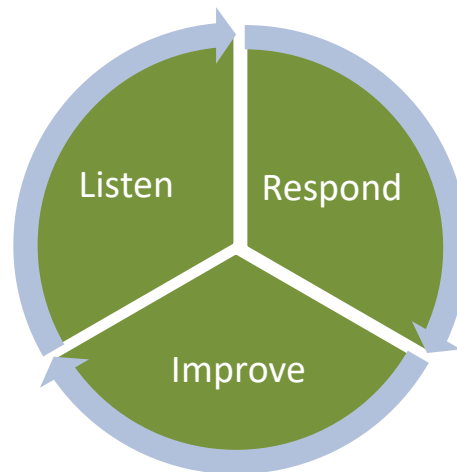
Jon Wilson
Director of Adults and Communities
Adults and Communities Department
Tel: 0116 305 7454
Email: jon.wilson@leics.gov.uk

Simon Parsons
Complaints and Information Manager
Corporate Resources Department
Tel: 0116 305 6243
Email: simon.parsons@leics.gov.uk

Appendix

Social Care Statutory Complaints and Compliments: Annual Report - April 2022-March 2023

Adult Social Care



Statutory Complaints and Compliments Annual Report April 2022 – March 2023

CONTENTS

1. Purpose and Context of Report	2
2. Adult Social Care Complaints Procedure	3
3. Complaints and compliments recorded 2022-23	4
4. Complaints resolved 2022-23	8
5. Learning from complaints	10
6. Local Government Ombudsman	13
7. Monitoring the process	15
8. Concluding comments	15
Appendix – sample of compliments	16

1. Purpose and Context of Report

1.1. Purpose & Scope

The purpose of this report is –

- To report on Leicestershire County Council's (LCC) adult social care complaints and compliments activity from 1 April 2022 to 31 March 2023.
- To set out future developments and planned improvements.
- To meet the Council's statutory duty requiring the production of an annual report each year.¹

This report provides analysis and comment for Adult Social Care Services on all complaints managed under the statutory complaints process. Those complainants not qualifying under the statutory process have been considered under the County Council's Corporate Complaints and Compliments Annual Report presented to the Scrutiny Commission.

1.2. Background Context

The Adult Social Care Service sits within the Adults and Communities Department, and both arranges and supports the provision of a wide variety of services.

This includes helping people to remain living independently in their own homes with increasing levels of choice and control over the support they receive. When this is no longer possible, the department supports residential or home care as well as having lead responsibility for safeguarding adults at risk of harm.

10,421² people received long-term support from the Social Care service during 2022-23. This was a 2.3% increase on the previous year (10,184)

The department always aims to provide high quality services that meet the needs and circumstances of individuals and their families. The department actively promotes involving clients and carers in shaping services; using their skills and experiences to help ensure they meet customer needs. However, given the personal and complex nature of some adult social care services, sometimes things do go wrong.

The complaints process is a mechanism to identify problems and resolve issues.

¹ [Statutory Instrument 2009 no.309 \(18\)](#)

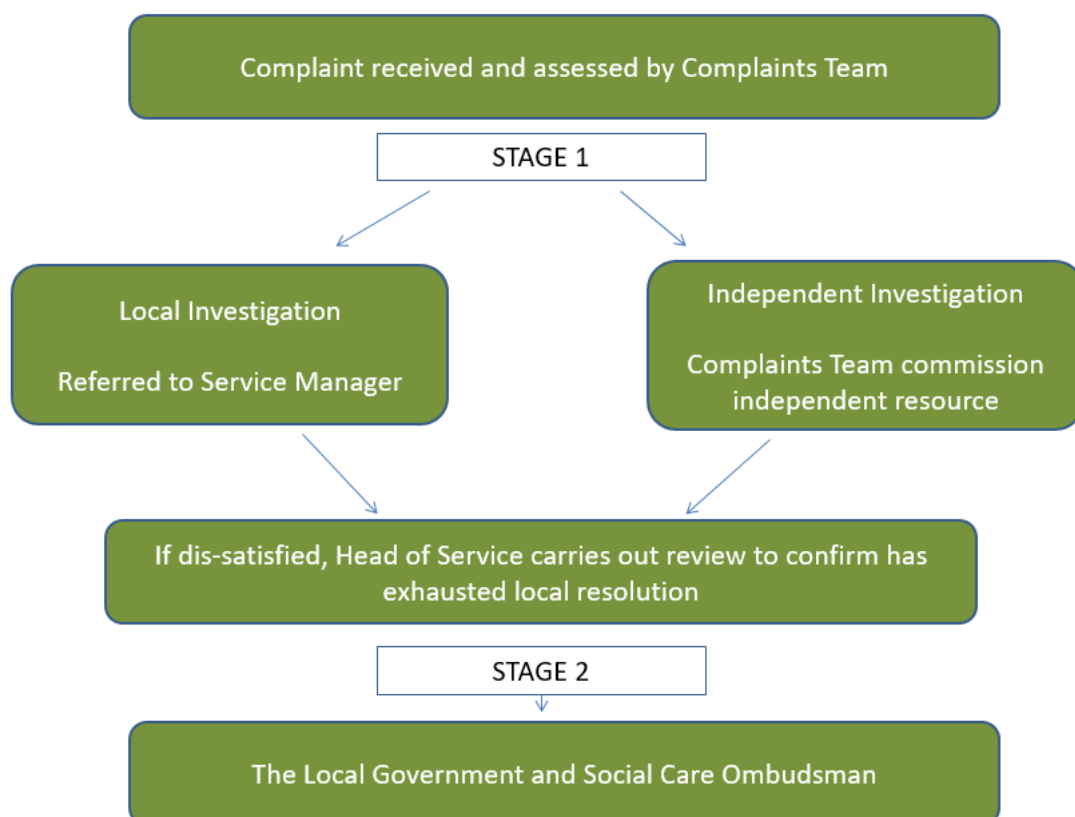
² Figures supplied by Performance and Business Intelligence Team

If things go wrong or fall below expectation, the County Council will try to sort things out quickly and fairly. Learning from our mistakes and concerns that are raised is used to make changes and improve services.

Analysis of information about complaints received during 2022 -23 gives Adult Social Care an opportunity to reflect on the quality of the services it provides and consider how well it listens and responds to service users.

2. Adult Social Care Complaints Procedure

The Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 outlines the statutory responsibilities of the County Council. This is broadly set out below:



The above procedure was designed to offer Local Authorities flexibility to resolve complaints in the most appropriate manner. Stage 1 resolution can therefore consist of several processes (for example meetings or reviews) but the Local Authority must not unduly delay finalising this process which should always be concluded within 65 working days.

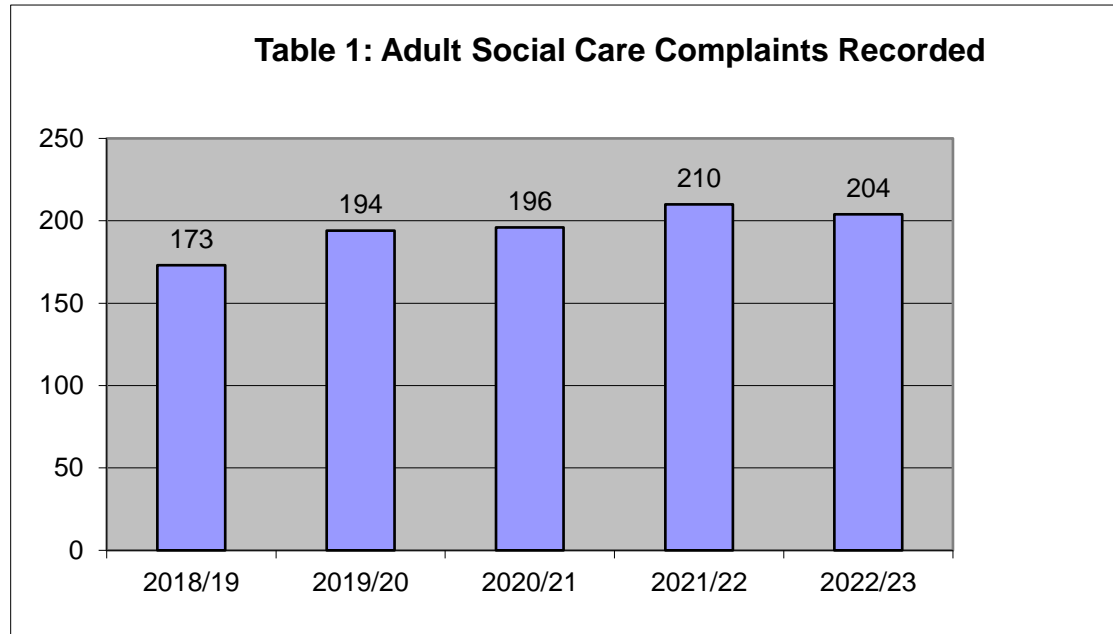
The Local Authority must advise all complainants of their right to approach the Local Government and Social Care Ombudsman should an agreed resolution not be found.

During 2022-23, no independent investigations were commissioned

3. Complaints and compliments recorded in 2022-23

3.1 Complaint Volumes

Graph 1: Adult Social Care Complaints recorded over last 5 years



As illustrated above, the total number of social care complaints responded to this year reduced by 6 (-3%). Volumes over the 5 term period also present as a very stable picture.

When considered against the context of service users in receipt of long-term support, complaints continue to represent a relatively low number at 1.9%.

3.2 Complaints by District

Wherever possible, complaints have again been recorded by District during the year. The breakdown appears below along with respective uphold rates.

It is important to note that for some complaints this information was either not captured or the complaint was more policy related rather than any specific area.

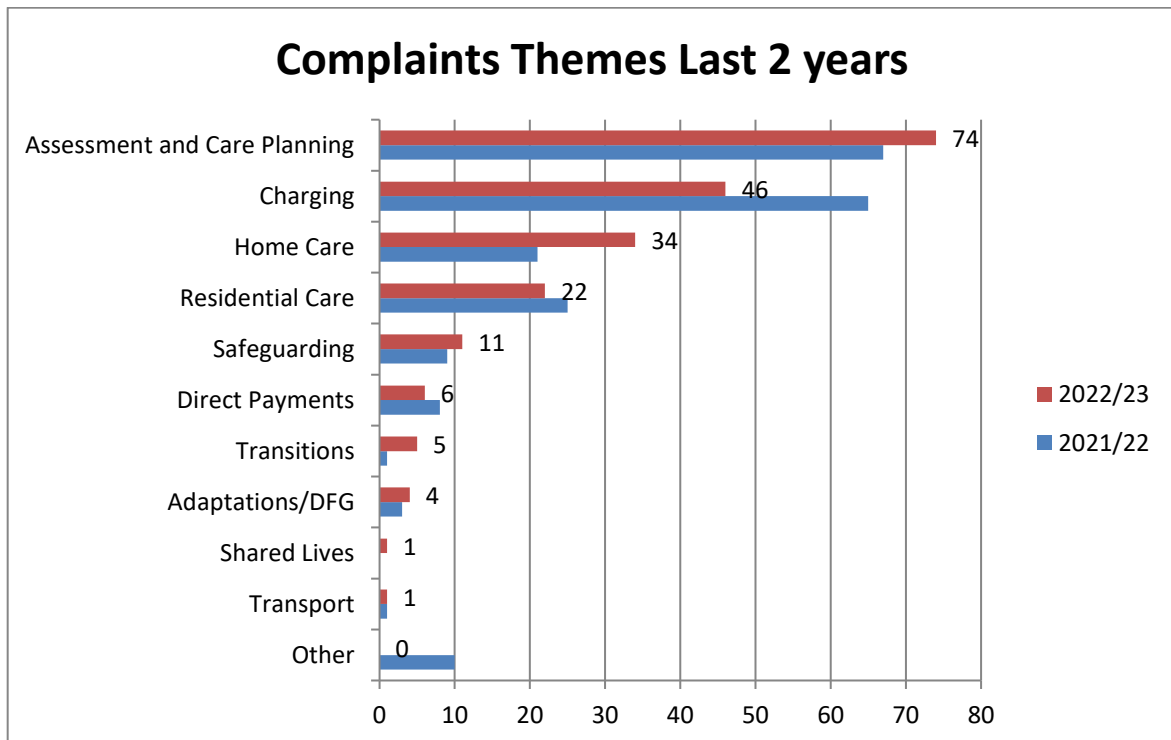
District	Number of Complaints	Number (%) Upheld
Hinckley	29	12 (41%)
Harborough	23	5 (22%)

Blaby	18	4 (22%)
Melton	32	4 (13%)
North West Leics	33	9 (27%)
Oadby & Wigston	30	17 (56%)
Charnwood	31	9 (29%)
Unknown	8	1 (12%)
TOTAL	204	61 (30%)

Although there are some variances in Locality volumes and uphold rates, nothing that presents as a significant outlier.

3.3 Complaints by Theme

Graph 2: adult social care complaints by theme



Complaint themes mirror the Local Government and Social Care Ombudsman classifications and can provide helpful insight as to the underlying topics that are generating complaints.

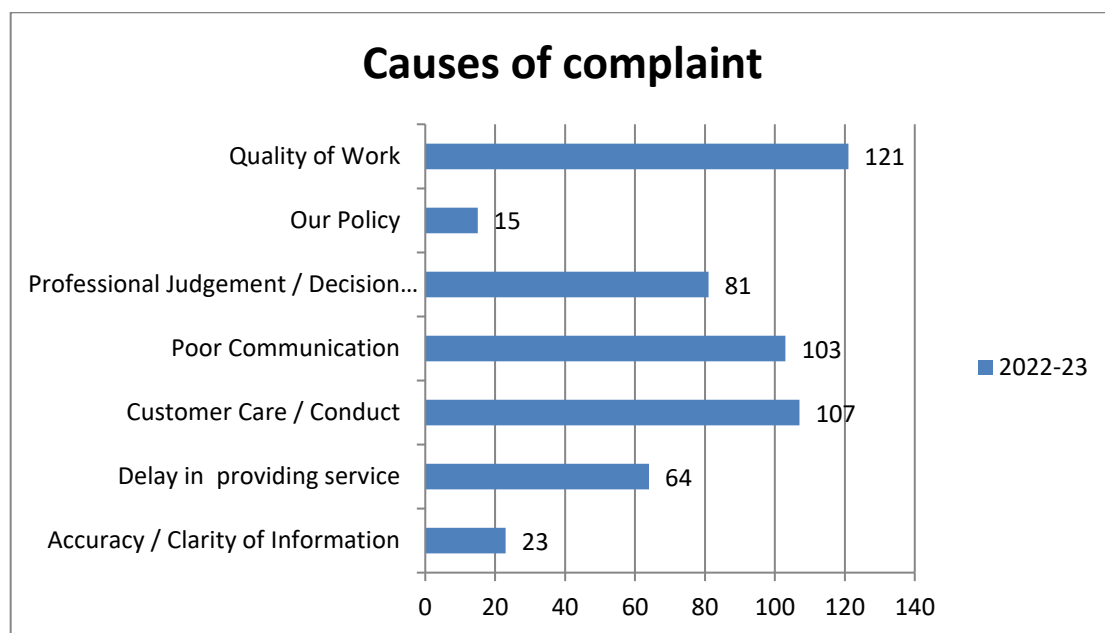
As last year, the largest segment is also the broadest category around Assessment and Care Planning. This equates to 36% of the overall volume.

Complaints were mostly about poor communication, delays and waiting times for assessments rather than the actual decisions made.

It is important to note the reduction in Charging complaints during the year. This has been an area of focus and it is pleasing to see a healthy reduction in this area. Significant work has taken place on improving the clarity of information provided and this is starting to show an impact here.

The Complaints team also undertake analysis of each complaint to try to understand any significant factors. This can help prioritise areas for the department to focus on improving.

Graph 3: Complaint causes for Complaints resolved in 2022-23



Recording allows for multiple causes to be selected. So, if a complaint features “delay” as well as “Customer Care” then both will be selected. It follows that the data above will not match the overall number of complaints resolved.

Quality of Work remains the most frequently identified topic cited within complaints. This is of little surprise as it is the broadest category, including for quality of home and residential care.

3.4 Joint Complaints

The Health and Social Care complaints regulations place a duty on Local Authorities to work together with health partners in responding jointly to complaints³. Leicestershire County Council accordingly has a joint complaint handling protocol,

³ [Statutory Instrument 2009 no. 309 \(9\)](#)

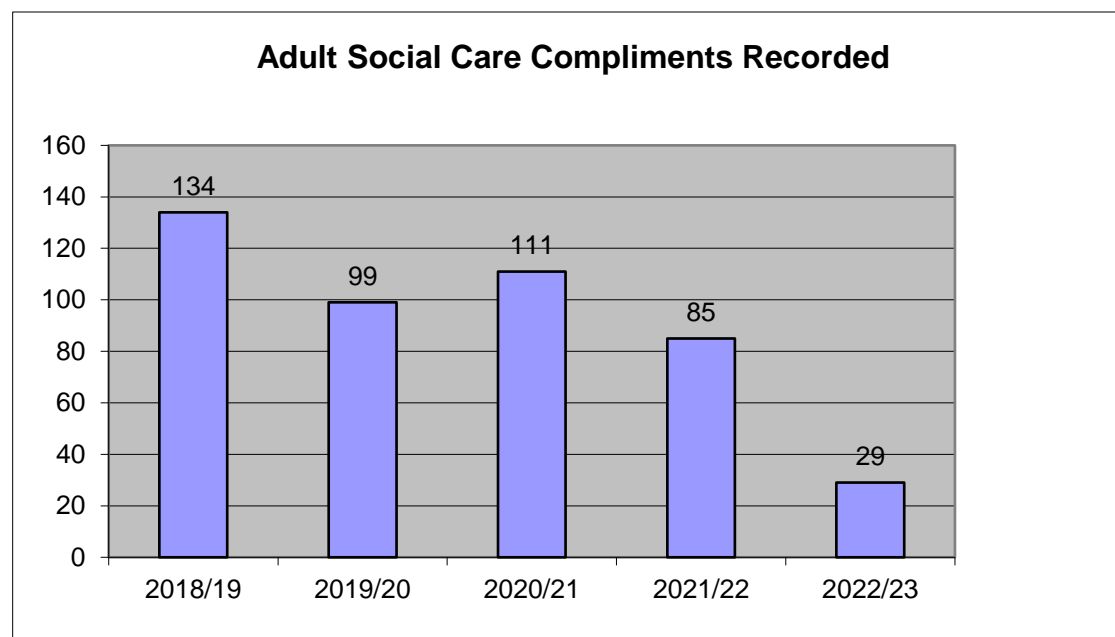
supported by a multi-agency group, which sets out common guidelines and approaches to this.

Members include Leicester City Council, the Integrated Care Board (ICB), University Hospitals Leicester (UHL) and the Leicestershire Partnership Trust (LPT).

During the year 2022-23, four complaints were considered using the Joint Complaints protocol. No difficulties were experienced this year with partnership working.

3.5 Compliments received 2022-23

Graph 4 below shows the long-term trend in compliments recorded.



There has been a decrease in compliments recorded during 2022-23. As many compliments are received directly by front line team, it is hard to say whether fewer were received or whether some have not been passed on to the Complaints and Information Team.

It is always important to recognise the good work that is being delivered by the department and to provide balance within the complaints annual report. For this reason, the complaints' function does encourage the recording of un-solicited compliments which can either be submitted directly online or if received by council officers should be passed on for central recording.

A small selection of the compliments received can be found in Appendix A. They show some of the 'real-life stories' where Adult Social Care makes a huge difference to peoples' lives.

The Complaints team will continue to work closely with the department to try to reflect all the unsolicited feedback received across the teams and ensure visibility in annual reports.

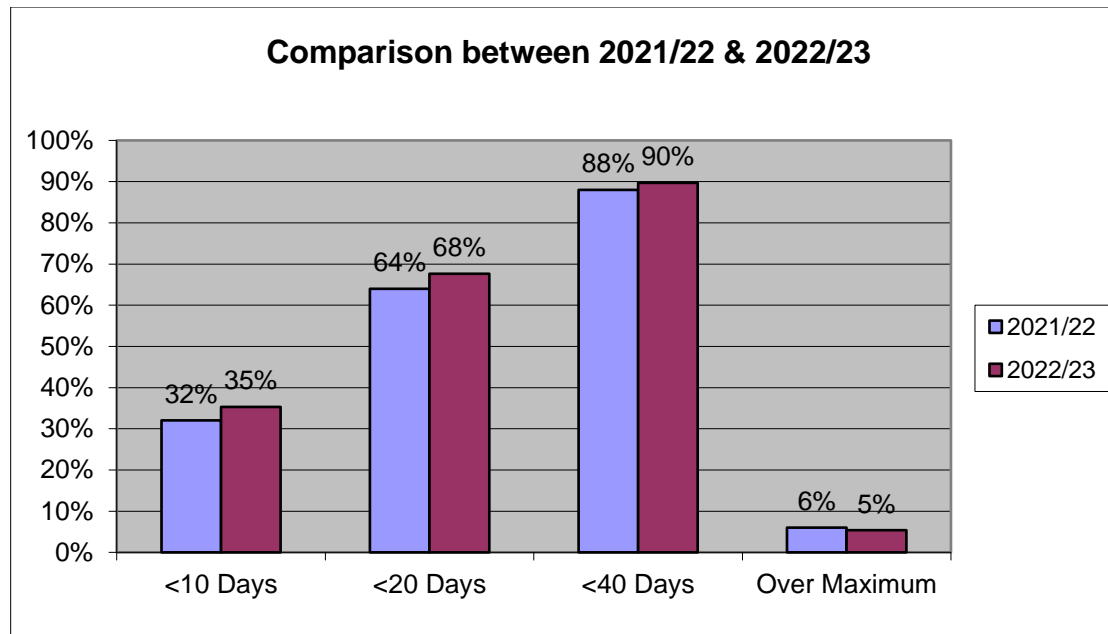
4. Complaints resolved 2022-23

The key performance indicators for speed of response, outcomes, causes and identified learning are linked to complaints that have been *resolved* within any given reporting period rather than received.

This is important as it ensures that full data sets can be presented, both to departments on a quarterly basis, and at year end. It also avoids the scenario whereby Ombudsman findings of maladministration might not appear in annual reports (where outcomes are not known at the time of production).

4.1 Responsiveness to complaints

Graph 5: Adult Social Care Performance at Stage 1



The above graph shows a slightly improved performance at each of the performance indicators. 68% of all complaints were responded to within 20 working days and 95% within the statutory timescale of 65 working days.

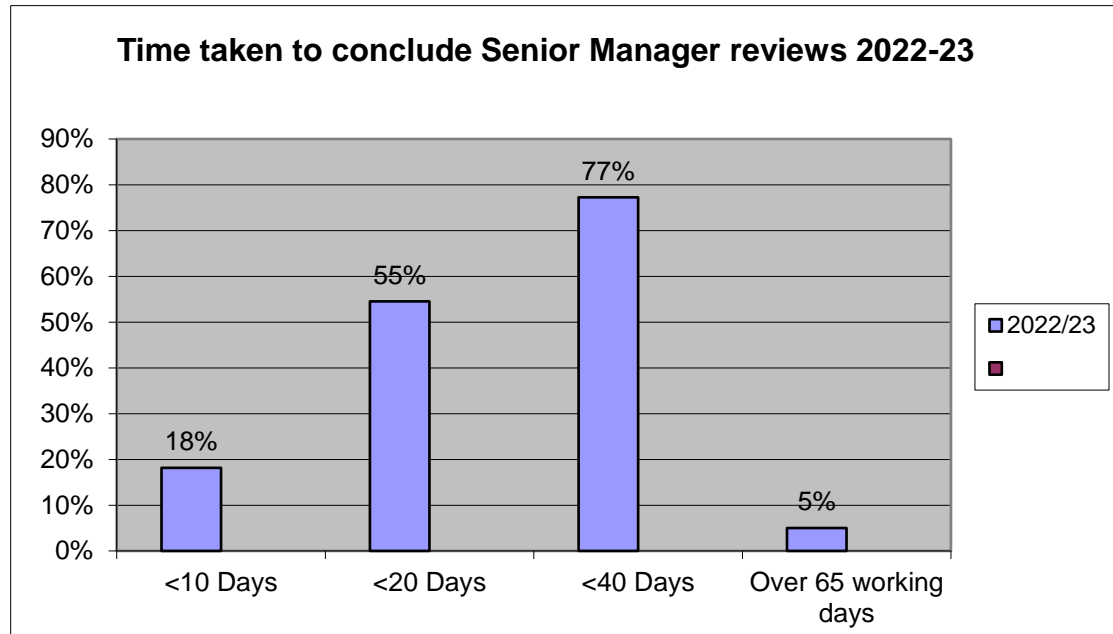
Whilst the statutory regulations give wide flexibility in terms of response times and allow up to 65 working days for complaints to be resolved, a key expectation of the public is that their concerns are dealt with promptly and this report provides good assurance of the department's commitment to this despite the challenges seen this year.

Adult Social Care Performance at Review Stage

44 complaints requested escalation to the Council during the year and were reviewed by a senior manager. This year, reporting is available for each of these as to how long these reviews took to complete and as displayed in the table below.

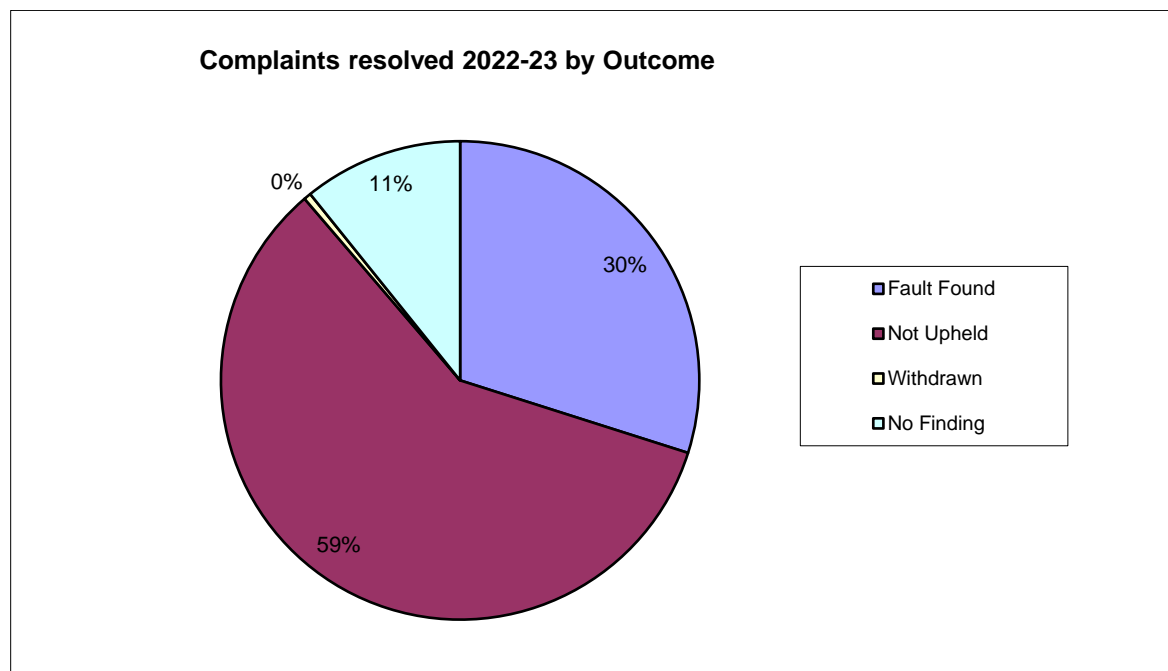
As this is new reporting functionality there are no comparative figures available. Work is ongoing however to raise the response rates within 20 working days.

Graph 6: Adult Social Care complaints reviewed by Senior Managers



4.2 Complaint Outcomes

Graph 7: Adult Social Care complaints recorded by outcome



Graph 6 above shows that 61 (30%) complaints were upheld. This is a significant decrease on the previous year (44%) with the principal reason being the reduction in complaints solely about delays.

Prompt acceptance and ownership of any mistakes can help prevent costly complaint escalation including to Senior Managers and the Local Government and Social Care Ombudsman.

5. Learning from Complaints

Complaints are a valuable source of information which can help to identify recurring or underlying problems and potential improvements. We know that numbers alone do not tell everything about the attitude towards complaints and how they are responded to locally. Arguably of more importance is to understand the impact those complaints have on people and to learn the lessons from complaints to improve the experience for others.

Lessons can usually be learned from complaints that were upheld but also in some instances where no fault was found but the Authority recognises that improvements to services can be made.

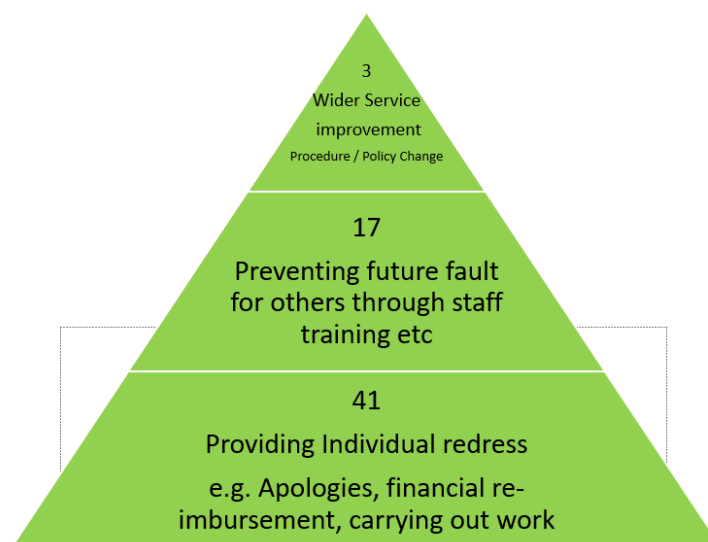
Occasionally during an investigation, issues will be identified that need to be addressed over and above the original complaint. The Complaints Team will always try to look at the “bigger picture” to ensure that residents receive the best possible service from the Council.

5.1 Corrective action taken

All the 61 complaints where fault has been found have been reviewed by the Complaints Team to ascertain what action the relevant department has taken, both in remedying the fault, and any wider learning to avoid such issues occurring in the future.

Remedial action typically consists of both individual redress (e.g., apology, carrying out overdue work) and wider actions that may affect many. The diagram below shows the actions taken during 2022-23. 33% of complaints upheld resulted in clear actions that should improve service for other residents. This is a slight increase on the previous year (26%)

Graph 7: Actions taken for upheld complaints 2022-23



The most common action taken was staff training. There are lots of good examples of this taking place both at individual and team level. This includes reminding teams of the need to keep accurate records, refresher training on procedures for raising invoices amongst others

The most powerful are whole system changes, where it is identified that a process or policy needs amending. There were 3 such scenarios during the year arising from local investigation. These were around account finalisation, oversight of safeguarding concerns at the front door and oversight of carer support grants.

Financial redress was also arranged on several occasions this year and to ensure that the complainant was put back in the position they would have been in had the fault not occurred. Typically, this is re-imburement of care costs where these had either been calculated wrongly or there was evidence that clear explanations were not given.

The Local Government and Social Care Ombudsman expects Councils to consider such financial redress as appropriate and has introduced new reporting this year highlighting those occasions where Councils have already put things right before consideration by the Ombudsman.

6. Local Government Ombudsman

6.1 New complaints received by the Ombudsman 2022-23

Should a complainant remain dissatisfied following internal consideration of their complaint, they can take their complaint to the Local Government and Social Care Ombudsman to seek independent investigation.

The Ombudsman will usually check with the Authority whether the complaint has exhausted the Local Authority's complaints procedure. Where this has not been done, the Ombudsman will usually refer the complaint back to the Authority, to give us an opportunity to attempt to resolve the complainant's concerns through our internal complaints processes first.

The Local Government and Social Care Ombudsman opened enquiries on 23 complaints during the year. This represents approximately 12% of the overall complaints.

6.2 Complaints resolved by the Ombudsman 2022-23

The Ombudsman made decisions on twenty-four cases during the year with fault being found in 9 cases (37%). This represents a higher number of adverse decisions to last year (5) but a reduced proportion of fault (50%).

One of the decisions was issued as a Public Report. This was considered by Cabinet as required by the statutory guidance.

Brief details for the nine cases where fault was found appear below:

1. Fault found on how the Council communicated that charges would apply for care

The Ombudsman found fault that the Council failed to provide clear information following a review of reablement. This caused injustice as the family were not properly informed about charges that were then applied.

The Council agreed to waive 6 weeks worth of charges, make a symbolic payment of £150 in recognition of the distress caused and review its guidance on informing service users about the outcome of reviews.

2. A complaint regarding the quality of care delivered by a Residential care provider.

The Ombudsman found fault that the provider had failed to keep accurate monitoring records and had failed to properly assess a resident.

As the commissioning organisation, the Council is accountable for actions of providers and agreed to apologise, make a symbolic payment of £250 in

recognition of the fault found and to undertake improvement work with the provider.

3. A complaint regarding a care provider not delivering care calls in line with the agreed plan.

The Provider had responded to a formal complaint explaining that staffing issues had led to some calls either being delivered late or with carers that were not fully trained to deliver all aspects of the care package. An apology was given. The Council was already working with the provider to help them with recruitment issues.

The Ombudsman welcomed the work already taking place but ruled that in addition to apologising the Council should make a payment of £500 in recognition of the partial delivery of the care plan. The Council accepted this finding.

4. A failure to ensure eligible care needs were delivered following temporary suspension during the pandemic

This decision was issued as a Public Report on the grounds of there being significant fault and resulting injustice.

The Council was found at fault for extensive delay in carrying out both a needs assessment and financial assessment. This left the Service User without eligible support for a significant period of time.

The Council agreed to make a compensatory payment of £10,020 to reflect the lost support that would have been in place. The Ombudsman also asked the Council to review other cases that may have been similarly affected.

The Council accepted the findings and identified some 5 other families that potentially were affected. All were written to but none sought further investigation or support. It also issued a number of reminders to teams on the importance of record-keeping and timely communication with families.

5. A failure to ensure continuity of home care provision following a number of changes of provider.

Fault was found that there was a gap in home care provision which was not adequately bridged by the Council following several breakdowns in placement. Although care was in place, afternoon calls were not for a period of 2 months

The Council agreed to apologise and deduct £200 from outstanding care invoices to reflect the lack of home care in line with the support plan.

6. A failure to provide appropriate advice and support to a carer

This complaint centred on poor advice and support when the complainant approached the Council seeking support.

The Council had by this point backdated personal budget support but the Ombudsman found that it should also apologise for the distress caused and take steps to improve how it communicates with those who are experiencing stress or difficulties in understanding information being given. An additional distress payment of £150 was also agreed.

7. Concerns that the Council placed a family member in an unsuitable care home.

Although the Ombudsman did not conclude that there was any evidence the placement was unsuitable, there was evidence of poor record keeping and inadequate communication with the family by the care provider.

The Council agreed to apologise and make a payment of £300 in recognition of this. CQC were already working with the provider so no wider recommendations were made

8. Concerns regarding top up charges requested by the Council

This complaint had already been upheld by the Council who had agreed to waive the charges and make a further payment of £200.

The Ombudsman concluded this was an appropriate offer which adequately addressed the fault

9. Concerns regarding quality of care in a residential care home

The Ombudsman found fault in how the provider dealt with family members during end of life care and how it responded to safeguarding concerns raised.

Both the Council and provider were asked to formally apologise to the family and set out the actions being taken to generate improvements and how the learning would be taken from this complaint.

For the remaining fifteen complaints

- In nine cases the Ombudsman decided not to investigate, either because there was no evidence of any fault, or the matter had already been appropriately addressed by the Council
- In three cases, the Ombudsman, after detailed investigation, was satisfied with the actions the Council had taken.

- In two cases the Ombudsman concluded initial enquiries with a finding that the matters complained about were outside of his remit
- In one instance the Ombudsman ruled that the complaint was raised too late to be accepted.

The Ombudsman also monitors remedies being carried out by the Council where fault has been found and remedial actions proposed. Failure to carry out remedies within agreed timeframes is recorded as non-compliance and can lead to public reports being issued. All 5 of the above cases were recorded as compliant (100%). This compares to the national average of 99%

7. Monitoring the Process

The Complaints Team continues to support Adult Social Care Services to manage and learn from complaints. The key services offered are -

1. Complaints advice and support
2. Production of Performance Reports
3. Liaison with the Local Government and Social Care Ombudsman
4. Quality Assurance of complaint responses
5. Complaint handling training for Operational Managers
6. Scrutiny and challenge to complaint responses

Assistance continues to be routinely provided to Service Managers and other associated managers in drafting responses to complaint investigations. This helps ensure a consistency of response and that due process is followed.

Complaints training has been offered this year on a quarterly basis. This has included several new managers within Adult Social Care

Quarterly performance reports are produced and delivered at Senior Leadership Team (SLT)

8. Final Comments

There has been a very slight decrease in complaint volumes this year. In the context of increased demand pressures that is pleasing to see.

It is also good to start seeing a decrease in charging complaints following 2 years of this being a significant area of challenge. Not only are volumes coming down but there are far fewer upheld complaints in this area and only one instance where fault was found by the Ombudsman.

Other areas remain largely stable although there is a slight rise in Home Care complaints. This may be linked to new providers that we are working with but it is difficult to draw any definite conclusions.

Complaints data is routinely shared with our Quality and Improvement team who work closely with providers in making improvements as required.

It is vital that service users are provided with a complaints process that is easy to access and fair. This year's Annual Report shows that Adult Social Care does listen and provides a number of examples of how complaints intelligence directly drives and improves service delivery.

Appendix A: Sample of compliments received 2022-23

- Thank you, C for the support that you provided a service user and also for your professional and helpful manner.
- Thank you to S for all the work you have done on Dad's case. I am grateful that you dealt with him with such empathy and respect.
- Thank you C for arranging to get my front step and rail outside done, it is so much easier for me to negotiate.
- Thank you K, we are are truly grateful for all your help and support over the recent weeks.
- Thank you, E, for all your help with this case and for being wonderful, caring, cautious and very professional in your approach.
- Our grateful thanks to R, on how she has dealt with our daughter's move from her old accommodation to her now perfect one.
- Thank you, M for all your support & also for your professional and helpful manner, which made a difficult situation easier.
- Thank you, Y for everything that you have done for mum, we really do appreciate it.
- Thank you, Z for all your help with a complex service user, your approach has helped in building a trusting relationship with him.
- Thank you Z for all the help and support that you provided to my parents during a very difficult time.
- I just wanted to say a massive thank you to G for supporting the case for my dad to stay at the Willows and for all your help.
- Thank you to S for your contribution at Park Road & Little Glen & for the improvements to the wellbeing of the tenant at Park Road.
- Thank You P, for all your help and support when I had to take over my young sisters care.
- Thank you so much A, for the things you have provided for me. The rails are amazing honestly & also great for my son.
- Thank you O for all your help and support, I no longer feel alone and my Quality of life has improved.

This page is intentionally left blank



ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
4 SEPTEMBER 2023

ASSURANCE OF ADULT SOCIAL CARE

REPORT OF DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of report

1. The purpose of the report is to provide the Committee with the feedback from the Annual Conversation visit 2023 which was undertaken to provide an impartial review of the Adults and Communities Department prior to a forthcoming Care Quality Commission (CQC) Assurance visit.
2. The report also provides the Committee with information on the Intervention Framework published by the Department of Health and Social Care.

Policy Framework and Previous Decisions

- 3 The Committee received regular updates on the CQC assurance process during 2022, as part of broader reports on the Social Care Reform Programme (on 7 November, 5 September, 6 June, and 24 January) and as a standalone report focusing on the assurance self-assessment and improvement plan in March 2023.
- 4 The Committee also reviewed and commented on the draft self-assessment produced to support the assessment process at a standalone workshop on 13 February 2023.

Background

5. The CQC is due to start its programme of assessing councils' adult social care functions later in 2023. The CQC will assess and rate councils' performance across four themes: working with people; providing support; ensuring safety; and leadership. It will rate each council against a series of quality statements and publish its findings, also providing a single word rating using its existing ratings of: Inadequate; Requires Improvement; Good; or Outstanding.
6. It is not yet known when Leicestershire will be assessed by the CQC, but as part of the Department's preparations for an assurance visit, an independent review of the Department's existing performance has been undertaken. The Council, along with all Local Authorities across the East Midlands, commissioned Dr Carol Tozer, a former Director of Adult Social Care, to visit the councils across the region during July and August 2023 to undertake an independent review of their services. The County Council's visit took place on 9 and 10 August. Dr Tozer reviewed Adult Social Care performance and focused on the four CQC Assurance Framework themes of working with people; providing support; ensuring safety; and leadership.

7. Dr Tozer reviewed the publicly available performance data, prior to the visit, read the self-assessment and other key documents provided. Dr Tozer also carried out 'mystery shopper' research on the County Council's website. Dr Tozer used this research and pre-reading activity to develop the lines of enquiry to pursue during discussions with departmental colleagues, partners, and people with lived experience.
8. As can be seen from the detailed programme for the Annual Conversation visit, attached as Appendix A to this report, on Day One of the process Dr Tozer met with colleagues, partners, and people with lived experience in a series of 45 minute meetings. These meetings each involved up to eight people and Dr Tozer had a specific set of questions and issues to direct the discussion with each group.
9. On Day Two Dr Tozer prepared her findings, attached as Appendix B to this report, and fed back to the participants of the first day her key findings regarding the Council's strengths and areas to develop, based on the information and feedback received from the different groups of people.
10. Overall Dr Tozer's feedback is positive, indicating Leicestershire is a well-run authority with dedicated and skilled staff, and examples of excellent practice were highlighted. In particular, Dr Tozer cited Leicestershire's reablement services, reductions in long term placements, support to care providers, and approaches to independent living as areas of good performance alongside a culture of innovation and forward thinking.
11. Dr Tozer also commented on areas where improvement is needed, many of which the Department were already aware of, and an Action Plan is being developed to address these areas prior to any CQC Assurance assessment. One area of improvement is demonstrating and evidencing the Department's good delivery outcomes for people, and linked to this showing that the Department audits, reflect on, and assures its own practice.
12. In addition, there are several areas of service delivery that it is recognised must be improved upon in order to deliver the best services, specifically in areas of customer care, information and advice, financial pathways, direct payments, waiting times and safeguarding processes.

Recommendations arising from the review

13. Dr Tozer's overall comments about adult social care services in Leicestershire were positive including that, "*Leicestershire's adult social care services (ASC) can point towards several areas of impressive performance and good outcomes for the people it serves:*
 - a) *Led by the two Principal Workers, that ASC identify a number of colleagues from across different teams to undertake a case file audit. This could become an annual event – but it would enable colleagues to come together to review the quality of strength based practice as revealed by their peers – to celebrate their colleagues' work as well as then to co design any changes needed to care pathway systems and processes with managers;*
 - b) *Review the SA (self-assessment) so that it is clear that evidence from audits detailing the quality of strength based practice is fully reflected with resulting actions identified;*

- c) *Undertake workshops with ASC colleagues to review their experiences of the processes comprising the Improvement Cycle – highlighting best practice and agreeing any refinement of those processes. And language matters – so ASC might also wish to consider reframing these processes as part of its Quality Cycle;*
- d) *Secure feedback from people with lived experience at the conclusion of every assessment or review as to how well the process enabled them to express what matters to them and whether they are confident that the support they receive from ASC (will) supports them to live in a way that matters to them.*
- e) *In short, ASC appears to be managing its waiting lists assertively and assuredly – but I think that greater assurance would derive from the development of a “waiting well” action plan – which is shared with frontline colleagues and people with lived experience.*
- f) *Collectively, therefore, I think that ASC and its health partners could revisit how well they are working together to promote best outcomes for people with the most complex needs - perhaps considering whether the sort of risk sharing agreement currently in place to help deliver the Home First agenda is a model that might be replicated.*
- g) *In terms of CQC preparation, the SA needs to better reflect how ASC is working to identify and support people with care and support needs from BAME (Black Asian and Minority Ethnic) communities – and ensure that its performance management includes interrogation of impact.*
- h) *Accordingly, ASC could supplement its existing work to transform its Direct Payment offer by undertaking a survey/workshops with Direct Payment users – direct service users and carers alike – using the outputs to check that its action plan is the right one.*
- i) *ASC needs to understand what happens to safeguarding referrals that do not meet the safeguarding enquiry threshold – e.g. are people routed into VARM (Vulnerable Adult Risk Management) processes, are people referred for a Care Act assessment/review. In this way, it can have better assurance that people’s needs and circumstances are being responded to – as this is currently not in place.”*

Intervention Framework

14. On 8 August 2023, the Department for Health and Social Care published the Operational Framework for adult social care intervention in local authorities. A summary of the framework is provided below for information. The Secretary of State may use a variety of information and evidence to assess failure, although, in practice, it is expected that CQC local authority assessment reports will be the main source of independent evidence. Intervention is not currently planned in Leicestershire.
15. The powers in the Care Act enable the Secretary of State for Health and Social Care to intervene when the Secretary of State is satisfied that an authority is failing or has failed to discharge any of its functions under Part 1 of the 2014 Care Act to an acceptable standard. The nature of the failure, impact, and likelihood of it happening

again are all key areas that will be considered by the Secretary of State. Decisions to intervene will be based on:

“a judgement by the Secretary of State of all available information considered engagement with authorities to understand their capacity, capability and commitment to lead their own improvement.”

16. Where the Secretary of State for Health and Social Care considers that neither enhanced support nor statutory intervention is appropriate, it is expected that the Department of Health and Social Care will work with improvement delivery partners to signpost authorities to resources and training and/or tailored support available through the national improvement programme.
17. Where the Secretary of State for Health and Social Care considers the failure is more serious but does not warrant statutory intervention, it is envisaged asking the authority to work with a non-statutory improvement adviser that the Council would be expected to fund and appoint to provide guidance, support, and constructive challenge.
18. Where an authority has failed to produce a realistic improvement plan or engage with support, the Secretary of State may consider escalating to statutory intervention. During the intervention, regular reports on progress to the Secretary of State for Health and Social Care will be expected.
19. Putting in place a statutory intervention in an authority is a very significant step for the Secretary of State. Intervention may involve a range of responses from the Secretary of State for Health and Social Care. For example, from requiring the authority to take further action to ensure improvements are made to address significant failings through to specified functions of the authority to be exercised by the Secretary of State or a nominee.
20. If the Secretary of State is considering statutory intervention, a ‘minded to’ letter will be sent to the Chief Executive and the Director of Adult Social Care Services of the relevant authority from a senior civil servant. Any representations received will be carefully considered by the Secretary of State and may receive substantive responses where appropriate.
21. Once the Secretary of State has considered the representations received in response to the ‘minded to’ letter, they may decide either not to go ahead with the intervention, or to put in place the directions.
22. Directions may vary significantly depending on the extent and type of the intervention involved but may include:
 - explicit references to the evidence for this decision, including representations received as well as references to the legislation;
 - actions that the authority is required to take – this generally includes definitions and all the measures around access to documents and the payment of fees and expenses with which the authority must comply;
 - description of any specified functions to be exercised by the Secretary of State or nominee.

23. Non-executive commissioners may work on a full-time basis within existing authority accountability structures. However, should the Secretary of State think it is necessary, an executive commissioner may be appointed who would exercise all adult social care functions.

Consultation

24. In developing the self-assessment there has been considerable engagement of internal staff across the Department, including a staff survey and workshops. These explored staff perceptions of the Council's strengths and areas for improvement in relation to the CQC themes and gathered staff views on how the Department could improve in its delivery of Care Act duties. The Department also undertook significant external engagement to obtain the views of service users and carers, partner agencies, and care providers. Findings from this engagement helped to shape the latest version of the self-assessment.
25. Representatives from the Engagement Panel and the Learning Disabilities Partnership Board met with Carol Tozer during her visit (see Appendix A) to help inform the conclusions of her visit.

Resource Implications

26. Officer resources have been assigned to finalise the self-assessment and improvement plan. Delivery of the improvement plan will, however, require support from officers throughout the Department and potentially from corporate colleagues.
27. As set out in the Corporate Risk Register (corporate risk 7.6), failure to achieve a rating of 'good' or 'outstanding' in the CQC inspection would be likely to result in considerable resource and financial investment requirements to address any areas requiring improvement.

Timetable for Decisions

28. The self-assessment will be updated to reflect comments from Dr Tozer and the improvement plan will be reviewed to ensure it fully reflects the areas of improvement which have been identified. A further report on this work will be presented to the Committee later in the year.

Conclusions

29. Dr Tozer's independent review of Leicestershire concluded, "*ASC has many impressive initiatives and improved outcomes it can evidence. The firm and sure leadership of ASC is fully aware of the areas to improve and can demonstrate a track record of improvement. There are, therefore, very strong foundations already in place as ASC continues its preparations for CQC inspection. But there are some issues which, if not tackled with its characteristic purpose and pace, might compromise how CQC assesses ASC in Leicestershire.*"
30. The recommendations from the review will be incorporated into the Department's improvement plan. Progress on the improvement plan will be reported to future meetings of this Committee.

31. Powers for the Secretary of State to intervene in a local authority were inserted by Section 164 of the Health and Care Act 2022 into the Care Act 2014. Under new Sections 72A and 72B of the Care Act 2014, where they are satisfied that local authorities have failed or are failing to discharge any of their Care Act functions to an acceptable standard, the Secretary of State may give to local authorities directions that they consider appropriate to deal with the failure. This may include requiring the County Council (1) to act in accordance with advice given by the Secretary of State (2) to collaborate with the Secretary of State; and (3) to provide the Secretary of State with information. The direction may include provision for specified functions of the Council to be exercised by the Secretary of State for so long as considered appropriate. The Secretary of State also has the power to make regulations disapplying or modifying an enactment in respect of a function of a local authority and may require the local authority to provide financial assistance to the Secretary of State (or a person nominated by the Secretary of State) for the purpose of meeting costs incurred as a result of the directions. Any directions given must be published with reasons.

Background papers

“People at the Heart of Care” White Paper: December 2021

<https://www.gov.uk/government/publications/people-at-the-heart-of-care-adult-social-care-reform-white-paper/people-at-the-heart-of-care-adult-social-care-reform>

Report to the Adults and Communities Overview and Scrutiny Committee: 7 November 2022 – Progress in Delivering the Social Care Reform Programme

<https://politics.leics.gov.uk/ieListDocuments.aspx?MIId=6842>

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?MIId=6840>

Report to the Adults and Communities Overview and Scrutiny Committee: 5 September 2022 – Adult Social Care Reform – Market Shaping and Charging Reform

<https://politics.leics.gov.uk/ieListDocuments.aspx?CIId=1040&MIId=6841&Ver=4>

Corporate Governance Committee: 27 January 2023 – Risk Management update (item 7) -

<https://politics.leics.gov.uk/ieListDocuments.aspx?MIId=7128>

Report to the Adults and Communities Overview and Scrutiny Committee: 6 March 2023 Adult Social Care Assurance Self-Assessment -

<https://politics.leics.gov.uk/ieListDocuments.aspx?MIId=7107> (item 65)

Guidance on Adult Social Care intervention framework for local authorities -

<https://www.gov.uk/government/publications/adult-social-care-intervention-framework-for-local-authorities>

Circulation under the Local Issues Alert Procedure

32. None.

Equality Implications

33. The self-assessment includes an assessment of the Council's overall performance around equalities, diversity, and inclusion, with a focus on the Adults and Communities Department. It sets out some key strengths in this area along with some potential areas for development.
34. Any proposed changes to the Council's policies, procedures, functions, and services which may arise from delivery of its improvement plan will be subject to an Equality Impact Assessment.

Human Rights Implications

35. There are no human rights implications arising from this report. Any proposed changes to the Council's policies, procedures, functions, and/or services which may arise from delivery of its Assurance improvement plan will be referred immediately to the Council's Legal Services for advice and support regarding human rights implications.

Appendices

Appendix A - Adult Social Care Annual Conversation Timetable
Appendix B - Adult Social Care Annual Conversation Feedback

Officers to Contact

Jon Wilson
Director of Adults and Communities
Adults and Communities Department
Tel: 0116 305 7454
Email: jon.wilson@leics.gov.uk

Christine Collingwood
Social Care Reform Programme Manager
Tel: 0116 3050696
Email: christine.collingwood@leics.gov.uk

This page is intentionally left blank

Adult Social Care Annual Conversation Timetable
9th and 10th August 2023

Time	Day 1	
	Meeting Title	Room
8.00 - 8.30am	Overview & confirmation of programme	Sparkenhoe Committee Room
8.30-9.15am	Frontline assessment and review colleagues	Sparkenhoe Committee Room
9.15-9.25am	GAP	
9.25-10.10am	Commissioning colleagues	Sparkenhoe Committee Room
10.10-10.20am	GAP	
10.20-11.05am	People who draw on care and support and carers (Engagement Panel and LD Partnership Board members)	Sparkenhoe Committee Room
11.05-11.15am	GAP	
11.15-12.00pm	NHS colleagues – including acute, community and ICP colleagues	Sparkenhoe Committee Room
12.00-12.10pm	GAP	
12.10-12.55pm	VCS and advocacy partners	Sparkenhoe Committee Room
12.55-1.30pm	LUNCH	
1.30-2.15pm	Care providers	Sparkenhoe Committee Room
2.15-2.25pm	GAP	
2.25-3.10pm	Key senior corporate colleagues	Sparkenhoe Committee Room
3.10-3.15pm	GAP	
3.15- 3.45pm	Financial Pathway Improvement, Charging and deputyship colleagues	Sparkenhoe Committee Room
3.45-3.50pm	GAP	
3.50-6.30pm	DASS and ASC leadership team (including the PSW; POT; ASC Business Partners).	Sparkenhoe Committee Room

Time	Day 2	
	Meeting Title	Room
8.00am - 2.00pm	Carol Tozer Prepares feedback slides	Exec Room
2.00-2.30pm	Overview of key messages with DASS	Exec Room
2.30-2.45pm	GAP/prep for feedback session	
2.45-4.30pm	Feedback presentation	Council Chamber/Hybrid

This page is intentionally left blank

Leicestershire

Adult Social Care Annual Conversation Feedback

Dr Carol Tozer OBE

10 August 2023

An overview of the 2023 ASC Annual Conversation

- Grounded in the **principles of sector led improvement**, the 2023 ADASS East Midlands regional **annual conversation** process with adult social care (ASC) is designed to **support the council's existing improvement programme and preparations for the forthcoming assurance of ASC** by the Care Quality Commission (CQC).
- This is the **second year that the ADASS East Midlands region has commissioned an annual conversation** for each of the region's 10 councils, conducted with Carol Tozer, a former DASS, for each of the 10 councils. It is important to note that **the methodology differs from last year** because of the considerable improvement work that councils have undertaken in the last year in preparing for CQC assurance as well as the Region's DASSs wanting to introduce their colleagues in ASC to the experience of external scrutiny and assessment.
- Over the last year, **councils have been working on the development of their ASC self assessment** in readiness for CQC assurance and the region's preference for the focus of the 2023 annual conversation process is: **scrutiny of the council's ASC self assessment; an assessment of the progress secured over the last year across ASC in each of the four CQC assurance themes; and direct engagement with people with lived experience, ASC staff, partners and corporate colleagues in testing ASC's own assessment of its strengths and areas to improve.**
- As such, the 2023 annual conversation process involves: pre reading of key documents (including the self assessment) and data and a series of face to face meetings with groups of people with lived experience, ASC colleagues, partners and corporate colleagues. The challenge session with the DASS and their senior teams remains an intrinsic component of the process. Structured around CQC's four assurance themes for the assessment of ASC, the challenge session comprises the identification, and detailed scrutiny, of ASC's key strengths as well as key areas to improve.
- I have **met with over 70 people** during the course of this year's Annual Conversation process in Leicestershire including: colleagues from across ASC as well as ASC senior leaders; partners from the voluntary, community and social enterprise (VCSE), NHS and care providers; members of the council's Corporate Leadership Team. It should be borne in mind, therefore, that my conclusions and recommendations arise from meeting only a fraction of the people working in, and engaged with, ASC. By contrast, CQC will bring a team of inspectors who will spend several days in the council. Moreover, the Annual Conversation did not involve any case file analysis – and this will be a vital component in how CQC arrive at a rating for the council.
- This **feedback presentation** is provided at the end of day two spent in Leicestershire – and concludes the 2023 ASC Annual Conversation process with the council.

Confident, competent and critical thinking

- Despite its low spend on adult social care (i.e., £405.13 compared with an England average of £490.42 per adult in 2021/22), Leicestershire's adult social care services (ASC) can point towards **several areas of impressive performance and good outcomes** for the people it serves. This includes:
 - The outcomes achieved by its reablement service compare very favourably – e.g., in 2022/23, 87.8% of people aged 65 and older needed less or no service after reablement (compared to a 2021/22 England average of 77.6%) and 89.2% were still at home 91 days after being discharged from hospital (compared to an England average of 81.8%)
 - During 2022/23, 85.6% people with learning disabilities aged 18-64 lived in their own home or with their family – compared to an England average of 78.8% (21/22).
- **ASC colleagues, across the entire department demonstrate high levels of professionalism and motivation to achieving best outcomes with the people they serve.** Front line operational colleagues are proud in their practice, and focussed on supporting people to achieve their preferred outcomes and community connections. Commissioners and contracts colleagues “know” and support their care providers and understand their care markets, there is notable and determined partnership working with District and Borough councils in the county to drive the proliferation of housing with care options and an impressive coalescence with the NHS in the delivery of the Home First agenda. Equally, finance colleagues, whilst clearly competent in their respective areas of expertise (e.g., appointeeship and deputyship) also understand their vital role in driving ASC's ongoing savings requirements and continued transformation plans.
- **Self aware**, ASC understands its performance and where it needs to improve. It also accepts external challenge in a positive and purposeful manner. An example pertains to the challenge issued in the previous Annual Conversation about ASC's limited understanding as to how it was securing a very low level of permanent admissions to care homes for people aged 18-64 during 2021/22. ASC reviewed its short term placements for this age group and as a result agreed that some should be regarded as permanent admissions – meaning that its 2022/23 performance in this area has deteriorated (albeit performance is still below the England 2021/22 average). This demonstrates a maturity of leadership and commitment to authentic accuracy.

Confident, competent and critical thinking

- Whilst benefitting from **good performance intelligence**, including financial, **ASC is outward looking** in its twin pursuits of best outcomes for the people it serves and best use of the public purse.
- Prior to the pandemic, ASC undertook very detailed work with Newton Europe to understand people's outcomes, assess people's journey's through its care pathway and explore all opportunities for efficiencies and savings.
- This was necessitated in equal part by the council's very significant financial challenges (the council is amongst the very lowest funded county councils in England, has already delivered £250m savings over in the last 13 years and must deliver further savings of £150M between 2023/24 and 2026/27 – of which £7.270m is needed from ASC in this financial year) and an authentic ambition to support people with care and support needs to live fulfilling, independent and connected lives. This work resulted in the ASC Target Operating Model (TOM), now fully operational, and attributed to how ASC has secured many of the improvements identified in its Self Assessment.
- ASC has also worked with a variety of other highly regarded agencies in driving practice excellence at operational and more strategic levels. For instance, it has worked with Partners 4 Change (in creating a series of Hubs to pilot and then mainstream strengths-based approach) and Ideas Alliance (to review its co-production practices and support the development of a hospital discharge pack for carers and embedding co-production in the strategic planning of mental health services).
- **ASC's transformation programme has been matched by a step change in its development of online platforms** – including self assessment, sector wide recruitment portals and the use of Tableau to provide “live” performance dashboards across ASC.
- There is a **high level of confidence in senior ASC leadership by corporate counterparts** – and several corporate initiatives have been instrumental in driving ASC's transformation journey, including the focus on business intelligence and the adoption of Tableau. Moreover, regular joint meetings of senior leaders across ASC, children's services and public health provide a key forum by which council wide approaches to key issues such as prevention, and population health management, all age disability and partnership working with the NHS are developed.

Some key issues to consider: Working with People

- **Moving to online ways of working:** in so many ways, ASC is “ahead of the curve” with regards to its move towards online working.
- Many councils have moved their Continuing Professional Development (CPD) offer to predominantly online methods, provide improved accessibility to live performance data live and have updated their website to render it more intuitive and responsive for the public to use. LCC has done all of these things. Some councils are also supporting care providers from across the entire ASC sector to recruit their staff – e.g., offering one stop recruitment portals: and LCC is doing this also (which includes some inspiring videos with people working in ASC - Pip and Fiona are excellent). Equally, many ASC departments, working with their NHS colleagues, have developed the ability to read access across some areas of health and social care records in order to improve integrated working: ASC and its NHS partners have also done this.
- ASC, however, has made particular progress in the implementation of online self assessment, including on line financial assessments. Indeed, comparing April-July 2022 to the same period in 2023, ASC received a 217% increase in the number of contacts to adult social care through online self-assessments. This has included financial on line assessment – and although initial take up is reported as fairly modest, refinements to the online form is now seeing increased numbers come through.
- There are, however, a number of considerations that ASC should bear in mind as it continues its journey to mainstream online ways of working including:
 - **The need for ongoing curation of the website:** I undertook some mystery shopping of the ASC website on 1 August 2023 and identified the following: I went through the online carers assessment process – which prompted the following message: *“You’ll be informed of the outcome of your assessment as soon as possible, we are currently experiencing a high volume of requests so this may take several weeks.”*; the key “featured” jobs to appear on the ASC “Join our team” page (search for latest jobs) were Finance Analyst in County Hall, Waste Management Operative and Team Manager Ecology and Biodiversity; and the advert for Shared Lives Carers stated *“Do you currently work in the care industry but are fed up with the same caring role and want to do something different?”*. I spent only 45 minutes or so perusing the website – my examples above suggest that assured capacity is needed to ensure ongoing curation and quality assurance of the contents.
 - **Ensuring that emails and telephone messages are monitored and responded to:** feedback from some people with lived experience expressed concern and frustration that they did not know which number to call for a particular team or worker, with several telling me that they have, on occasion, waited for very long periods for a call to be answered by the council’s contact and support centre. This experience of a lack of response from Care Pathway was echoed by care providers (NB this did not apply to ASC contract and monitoring colleagues), whilst some VCSE colleagues also highlighted that they receive multiple approaches from people unable to get through to ASC and that they, too, spend, an unacceptable amount of time trying to get through to ASC (one VCSE colleague stated that they had recently waited over an hour for a call to be answered before being cut off. Moreover, at the Annual Conversation challenge meeting, the DASS confirmed that he receives more issues and complaints about the responsiveness of his service to queries from members of the public than anything else. ASC have explained that they are considering sharing workers’ mobile numbers with the people they are working with – and that will clearly have to be discussed with those colleagues to ensure that the right checks and balances are also put into place. But equally, ASC needs to work with its colleagues to identify how best to ensure that urgent emails are picked up and responded to – as the worker themselves will not always be able to do so.
 - **Bringing people with lived experience and partners “with you” on your digital transformation journey** – ASC is developing its co-production vehicles and processes and that includes some work on the information contained on the ASC website. This is very positive. However, I also think that ASC needs to work with care providers to develop an agreed protocol of how they might notify contracts colleagues about an urgent issue pertaining to someone using their service when they cannot get in touch with the person’s allocated worker or social work team.

Some key issues to consider

- **Evidencing strength based practice:** positively, front line colleagues were proud to work in strength based ways with comments including: *“We support people to stay at home – I work with older people and residential care is the last resort. Our focus is reablement at home and equipment to keep people in their homes”*; *“We are allowed to be creative in considering different types of solutions for people – we look at what is out there and available to them to help them be part of their community”*; *“I am fairly new to Leicestershire and have come from other councils – we are definitely working in more strength based ways than elsewhere”*.
- In addition, in response to a November 2022-January 2023 staff survey, 70% of ASC colleagues agreed that assessment and care planning arrangements are person-centred and strengths-based; and 77% agreed that ‘the wellbeing principle is embedded throughout the Council's care and support system and is clearly promoted in care and support’.
- In terms of the experiences of people drawing on care and support, the April-June 2023 assurance survey pilot reveals that 78% (n=45) felt that the services they receive support them to maintain a sense of wellbeing.
- Equally, a variety of performance data suggests that ASC has secured improved outcomes for the people it serves by working in strength based ways including: over 40 working-age adults have moved out of residential settings into more independent settings; 100 fewer older adults being permanently placed in residential homes per year – from 921 people per year in 2019/20 to 804 people in 2022/23.
- So it is clear that progress has been made in the adoption and implementation of strengths based ways of working. Indeed, in its presentation to the Annual Conversation, ASC points towards a: *Strong focus on supporting peoples’ wellbeing and independence through person-centred, strengths-based approaches embedded in assessment and care planning processes, with carers’ needs considered as distinct from the person they care for.*

Some key issues to consider

- **Evidencing strength based practice (contd)**

- But there are some key absences in the evidence needed to fully substantiate this assertion. In particular, ASC's self assessment (SA) provides little evidence about the findings from its case file audit programme. ASC has adopted the ADASS East Midlands quality assurance framework and case file audit tools – albeit they have been adapted slightly to suit ASC's purposes – and it reports that there is a detailed case file audit programme in place. But the results of the audits are not clearly set out. This matters because in rating the council, CQC will accord heavy weight to the quality of frontline practice.
- Equally, several front line colleagues expressed concern to me that working in strength based ways is compromised by their workloads, reporting also that the team Group Supervision Meetings and three weekly case progression discussions introduced as integral parts of the TOM are, perhaps because of vacancy levels (ASC offset approximately £4m of its 2022/23 overspend due to staff vacancies) insufficiently reflective and do not drive strength based practice.
- For instance, I was informed that it was not uncommon for full time workers to have high caseloads (although the data provided by ASC reveals that the average caseload is just over 10 cases per allocated worker). In addition, some ASC colleagues informed me that case progression discussions were “transactional” not reflective – focussing on the tasks completed and tasks still to complete.
- ASC colleagues also described feeling very pressured: “I am given a lot of autonomy but I am expected to have a case closed by a certain date – you are constantly reminded that you have to have a case closed.”; “The staff I talk to just feel that they are failing the whole time”; “I have been working for the department for 19 years and I used to do 3 pieces of work (ie an assessment or review) per week in long term teams – and that pushed me to the limit. Now I am expected to do 4.5.”; “Staff shortages are a massive issue – we can't recruit and we depend on agency”.
- Indeed, through the TOM Improvement Cycle, service managers, supported by data, hold weekly improvement cycle meetings, and assign resources to resolve issues. Highlights around service status are shared and discussed by heads of service every 4 weeks – again using live performance data. This reveals a high level of grip – one that, necessarily, should remain. But I picked up a definite sense that the TOM is experienced, at least by some ASC colleagues, as focussed on activity rather than quality – and that it could be constraining, as opposed to embedding, strength based practice. Of course, the reality is that there needs to be a balance between the two – one that is difficult to consistently get right.
- **I recommend that ASC consider the following actions:**
 - **led by the 2 Principal Workers, that ASC identify a number of colleagues from across different teams to undertake a case file audit. This could become an annual event – but it would enable colleagues to come together to review the quality of strength based practice as revealed by their peers – to celebrate their colleagues' work as well as then to co design any changes needed to care pathway systems and processes with managers;**
 - **Review the SA so that it is clear that evidence from audits detailing the quality of strength based practice is fully reflected with resulting actions identified;**
 - **Undertake workshops with ASC colleagues to review their experiences of the processes comprising the Improvement Cycle – highlighting best practice and agreeing any refinement of those processes. And language matters – so ASC might also wish to consider reframing these processes as part of its Quality Cycle; and**
 - **Secure feedback from people with lived experience at the conclusion of every assessment or review as to how well the process enabled them to express what matters to them and whether they are confident that the support they receive from ASC (will) supports them to live in a way that matters to them.**

Some key issues to consider

- **Waiting well:** it is important to stress that the great majority of councils are experiencing significant difficulties with regards to waiting lists for assessments, reviews and for care and support to become available. Exacerbated by the pandemic, these waiting lists are every bit as a reflection of the systemic issues facing ASC (i.e., increasing levels and complexity of demand, severe workforce shortages, fragile care markets and significant funding pressures) as the treatment backlogs currently experienced by the NHS. The risks inherent in waiting lists are obvious: people might be suffering harm and people's needs might be escalating whilst they are on the waiting list (meaning that by not being able to undertake all assessments and reviews the council will also incur additional costs). The issue, therefore, is as much one of how to ensure that people "wait well" as much as how best to reduce the waiting lists fairly and effectively.
- ASC is experiencing waiting lists – across many areas of its Care Pathway services and financial assessment service. But it is also accurate to stress that **ASC can demonstrate good progress in reducing those waiting lists**. For instance: during 2021/22, 67% of people who had been in receipt of services for at least a year had been reviewed – this has improved to 79% people by July 2023; whereas in May 2023, 637 people were waiting for a DoLs assessment, this had reduced to 499 by 9 August 2023; and whereas 200 people were waiting for their home care to start in early 2021, this has reduced to 13 in July 2023. There are also significant waiting lists for carers assessments.
- In the areas of **financial assessments** (i.e., the means test that everyone who receives support from ASC must undergo with the few exceptions of reablement and s117 care), there is a backlog of approximately 800 cases. It takes an average of 65 working days for a financial assessment to be started – although an average of 2.4 days for the assessment to them be completed. This means that some people are receiving invoices for as much as 3 months' backdated care and support – and this is an issue of concern at any time, let alone during a cost of living crisis.
- ASC has implemented the risk prioritisation tool developed by East Midlands ADASS – which categorises people into different levels of risk and urgency – and determines the response that should be given to people whilst they remain on the waiting list. However, whilst senior ASC leaders express confidence that they are fully aware of the profile of the waiting lists and monitor the details contained on the risk prioritisation tools at team level, this is not reflected in its self assessment, nor in ASC's monthly performance report. Equally, I think that discussion should be held with corporate colleagues as to how explicitly the successful management of ASC waiting lists should be considered.
- **In short, ASC appears to be managing its waiting lists assertively and assuredly – but I think that greater assurance would derive from the development of a "waiting well" action plan – which is shared with frontline colleagues and people with lived experience.**

Some key issues to consider

- **Mental health outcomes:** in 2022/23, only 3% of mental health services users in contact with secondary mental health services were in paid employment (compared to a 2021/22 England average of 6%). Equally, only 11% % were known to be living independently (with or without support) – compared to an 201/22 England average of 26%.
- As with many councils, frontline colleagues pointed towards a real issue with recruiting and retaining AMHPS – and I was informed that temporary arrangements are currently in place to ensure that Adult Mental Health Professionals (AMPHs) receive professional supervision.
- Some frontline colleagues informed me that mental health receives less priority than older people services whilst both ASC and health colleagues point towards ongoing issues with agreeing funding contributions for people in receipt of s117 aftercare (as well as continuing health care (CHC) and funded Nursing Care arrangements).
- **Collectively, therefore, I think that ASC and its health partners could revisit how well they are working together to promote best outcomes for people with the most complex needs - perhaps considering whether the sort of risk sharing agreement currently in place to help deliver the Home First agenda is a model that might be replicated.**
- **Short term placements:** currently 51% of all short term placements, most coming from people discharged from hospital on P2, exceed 6 weeks. The likelihood of many of these people ever returning to their own home diminishes rapidly with every week they are in a care home. In the same way that ASC reviewed short term placements for people aged 18-64, it needs to do the same for people aged 65 and older. Equally, it needs to ensure that reviews are happening, without fail, at one week and two weeks admission to the care home – as this is where we know maximum ability to return someone home is at its maximum (i.e., post recovery).
- **Ensure that people with a Black Asian and Minority Ethnic (BAME) heritage enjoy equal access to care and support:** at strategic levels, there are clear equality and inclusions plans and priorities. However, ASC senior leaders accept that they need to do more to understand, and be assured that, people from BAME communities have the same rights of access to care and support and that care and support provided meets people’s different cultural needs. **In terms of CQC preparation, the SA needs to better reflect how ASC is working to identify and support people with care and support needs from BAME communities – and ensure that its performance management includes interrogation of impact.**
- **Direct Payments:** 100% carers supported by ASC receive a Direct Payment (DP) as well as a high proportion of people receiving care and support (**36%** in 2022/23 compared to a 2021/22 England average of 26.4%). ASC is fully aware of several difficulties in the administration of its DP service and complicated DP fee structures and feedback from the Engagement Panel confirms that it is right to accord priority to this area. It is important to acknowledge that ASC simplified its Direct Payment rates in July 2023 – but carers who are members of the Engagement Panel explained that their DP rate and amount does not allow them to fund the support specified on their plan (e.g., gardeners were quoted as costing £30 an hour) and that the “traditional” practice of allocating a carer with eligible needs a £250 one off annual DP payments still remains what many people receive, simply because administering a weekly DP via pre paid card is too complicated (and involves contacting a call centre in Ireland that is rad to get through to). **Accordingly, ASC could supplement its existing work to transform its Direct Payment offer by undertaking a survey/workshops with DP users – direct service users and carers alike – using the outputs to check that its action plan is the right one.**

Key issues to consider

- **Ambitions for joint commissioning** – ASC and the NHS have worked well together on agreeing its Better Care Fund (BCF) arrangements and can point key progress in the Home First agenda. In my meetings with NHS and senior ASC leaders, I tested my hypothesis of whether or not, whilst strategically aligned in intent and ambition, multiple operational fractures exist between the NHS and ASC – which mean that when either (or both) face a key performance, financial or workforce pressure, the leadership response changes from system to organisation. I conclude that this is the case and I recognise that it is not uncommon. I queried why there were no joint senior roles in either the Home First or commissioning – as this is where any opportunity for integration is borne out of existing good partnership working. Again, I think there was relatively little appetite to do so.
- Structures, as and of themselves, do not deliver good outcomes for the people being served. But I think an opportunity is currently being missed in Leicestershire in identifying how more joined up arrangements might help simplify care pathways, make best use of the different specialist professionals involved in those pathways and best use of the common public purse. There has been excellent work undertaken to reduce reliance on P2 discharges to care homes – so there can be confidence that doing things together is the right way to drive and deliver transformation and improved outcomes. This could be extended beyond the immediate remit of hospital avoidance and discharge.
- **Dynamic Purchasing System and implementation of the Framework:** The implementation of Integrated Neighbourhoods Teams (INT) provides an opportunity to think about commissioning arrangements. It is, of course, in the best interests of local people for ASC to have a wide ranging market offer – providing people with assured market capacity. But there is an opportunity to explore the potential for care homes to offer a wider range of support to people living in their own homes as community hubs and for domiciliary care providers to become intrinsic components of an INT. Moreover, it would be remis if I did not feedback that the domiciliary care providers I met are concerned that in the longer term, such a wide ranging domiciliary care market will undermine longer term market sustainability.

Key issues to consider

- **Safeguarding thresholds:** in 2021/22, ASC received 5,513 safeguarding alerts and started 656 safeguarding enquiries: a conversion rate of **11.9%**. In 2022/23, ASC received 4,991 safeguarding alerts and started 476 enquiries were started: a conversion rate of **9.5%**. This means that ASC is undertaking very large volumes of work – only to find that the vast majority of referrals it has received do not hit the threshold. In the context of waiting lists and staff vacancies, this appears to be both inefficient and ineffective.
- Such a low conversion rate suggests either that there is too low a threshold for safeguarding alerts or that there is too high a threshold for starting a safeguarding enquiry. The Leicestershire and Rutland Safeguarding Adults Board has undertaken a multi agency review of its multi agency safeguarding thresholds – which confirmed that thresholds are being applied accurately. I have not seen the report, but I think that **ASC needs to understand what happens to safeguarding referrals that do not meet the safeguarding enquiry threshold – e.g.,. are people routed into Vulnerable Adult Risk Management (VARM) processes, are people referred for a Care Act assessment/review. In this way, it can have better assurance that people's needs and circumstances are being responded to – as this is currently not in place.**
- **People experiences of safeguarding:** in 2022/23, 65% of people using services who feel safe – compared to an 2021/22 England average of 69.2% . And 85.3% of people using services say that those services have made them feel safe and secure – compared to the 2021/22 England average of 85.6%. In addition, as of 13 July 2023, 53% of alerts had been open for up to 4 weeks (with 35% open for up to 2 weeks) and 18% had been open for over 3 months. 40% of enquiries had been open for less than 6 weeks, with 14% open for up to 3 months, **25% for 6-12 months and 10% open for over 12 months.** Put together, there is a need to better understand the experiences of people with lived experience who have undergone safeguarding processes. ASC is already planning to do so – **but I think the focus should also be on why more than a third of all enquiries are taking so long to complete.**

Finally....

- ASC has many impressive initiatives and improved outcomes it can evidence. The firm and sure leadership of ASC is fully aware of the areas to improve and can demonstrate a track record of improvement. There are, therefore, very strong foundations already in place as ASC continues its preparations for CQC inspection.
- But there are some issues which, if not tackled with its characteristic purpose and pace, might compromise how CQC assesses ASC in Leicestershire.
- This feedback and my recommendations are offered in that vein.