



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

Date/Time: **Monday, 4 March 2024 at 2.00 pm**

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

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

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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

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

AGENDA

<u>Item</u>	<u>Report by</u>
1. Minutes of the meeting held on 22 January 2024.	(Pages 5 - 12)
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. CQC Assessment of Local Authorities. Director of Adults and Communities (Pages 13 - 62)
9. Review of the Social Care Investment Programme (SCIP). Director of Adults and Communities (Pages 63 - 82)
10. Nursing Care Provision in Leicestershire. Director of Adults and Communities (Pages 83 - 90)
11. Update on the Archives, Collection and Learning Centre. Director of Adults and Communities (Pages 91 - 98)
12. Date of next meeting.

The next meeting of the Committee is scheduled to take place on 3 June 2024, at 2.00pm.

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

QUESTIONING BY MEMBERS OF OVERVIEW AND SCRUTINY

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

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

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

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



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Minutes of a meeting of the Adults and Communities Overview and Scrutiny Committee held at County Hall, Glenfield on Monday, 22 January 2024.

PRESENT

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

Mr. G. A. Boulter CC

Mr. L. Hadji-Nikolaou CC

Mr. B. Champion CC

Mr. J. Miah CC

Mr. N. Chapman CC

In attendance

Mrs. C. Radford CC – Lead Member for Adults and Communities

Mr. T. Parton CC – Cabinet Support Member

44. Minutes

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

45. Question Time.

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

46. 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).

47. Urgent items.

There were no urgent items for consideration.

48. 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.

No declarations were made.

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

There were no declarations of the party whip.

50. Presentation of Petitions under Standing Order 35.

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

51. Medium Term Financial Strategy 2024/25 to 2027/28

The Committee considered a joint report of the Director of Adults and Communities and Director of Corporate Resources which provided information on the proposed 2024/25 to 2027/28 Medium Term Financial Strategy (MTFS) as it related to the Adults and Communities Department. A copy of the report marked 'Agenda Item 8' is filed with these minutes.

The Chairman welcomed Mrs. C. M. Radford, Cabinet Lead Member to the meeting for the item.

Arising from discussion, the following points arose:

Proposed Revenue Budget, Other Changes and Transfers

- i. Members questioned if the revenue budget had been compiled included pay and inflation increases. The Director reported a contingency for pay and inflation was held centrally and allocated in year when the budget was set.
- ii. Members acknowledged the challenge faced with external factors outside the control of the authority affecting ever-diminishing resources.

Growth

- iii. A Member questioned the appeared lack of rehabilitation being provided to patients on discharge from hospital which had to be picked up by family members. The Director reported that the NHS had pressures which it had to address, and that there was a different discharge process post pandemic, whereby a discharge decision used to be multi-disciplinary was now an NHS decision, which had caused some problems on the over-prescription of care on discharge. It was noted the Council had worked closely with NHS colleagues over the past 12 months on the three 'Rs': Rehabilitation, Reablement, Recovery elements. Community hospitals had recently provided additional beds for rehabilitation and recovery.
- iv. There had been some changes to the way NHS out of hospital services have been commissioned. It was reported that pre-pandemic there had been a substantial amount of community nursing and therapy services that would work with people on discharge, but that service was no longer available. However, resources had been re-directed to the development of virtual wards which had been very successful, for example, working with people with respiratory and coronary conditions. The NHS were also under immense pressure with regards to waiting lists and people waiting for

various forms of treatment. The Council was working with the NHS to address totality of need, but there was a £3.2million shortfall of funding as outlined at paragraph 34 in the report.

- v. Members queried the 30% year-on-year growth in older people demand and asked how the increase was calculated. It was reported that in order to forecast growth, finance worked on the number of service users and average costs, and used a national formula on the prediction of the number of people coming through as new entrants, which would usually be different each year.
- vi. Members queried the Discharge Fund increasing by 50%. It was reported that the growth figure was actual demand and costs which was then netted off with extra money from the NHS further down in the accounts. It was noted that the Discharge Fund was limited to certain periods of time.
- vii. Members noted the increase in costs over the next few years and asked if enquiries had been made of central government for additional money. The Director reported that conversations had been held with the Department for Health and Social Care and the Department for Levelling Up, Housing and Communities, neither of which had suggested there would be any more funding made available. It was further noted that much of the social care funding for 24/25 had been announced in 2022/23, a two-year settlement at that point. The Director commented that he was not aware of any additional funding coming through, though every opportunity would be explored by the Leadership of the Council.
- viii. The Director reported that considerable savings had been made in the past through the Target Operating Model, thought to be in excess of £10million, though likely to be much more when applying inflation. It was noted that this had alleviated some of the budget pressures being experienced currently.
- ix. Members noted that the increase in the National Living Wage (NLW) added significant pressure on the Council's budget, in particular for adults social care. This was because the majority of social care services were delivered on the basis of the NLW for care staff, of which there were in excess of 17,000k care staff the Council supported through contracts. The NLW was set to cost the Council over £20million, which was more than the Council could raise through the adult social care precept on Council Tax.

Adult Social Care – Savings

- x. A Member queried under AC16 (Eff) how the demarcation between care and non-personal care was made, and how, if the situation arose that a person would not do a job because it wasn't allocated to them would be addressed, or if a person on a lower hourly rate was being sent some distance to undertake a five-minute job. The Director confirmed that each individual circumstance would be looked at on its own merits, and that nothing would be implemented without reviewing all roles prior to any changes being made. It was noted that home care fee rates in the county compared well with other authorities, with upwards of £26 to £27 an hour being paid which, if being used for shopping, could be delivered through working with the volunteering community sector for £15 to £20 per hour, therefore some significant savings could be made, but only if not detrimental to the individual.

- xi. A Member questioned under *AC6 (Eff) – Direct Payment Commissioning Efficiencies, if surplus balances would be taken back from people. The Director reported that the review of Direct Payment packages was undertaken every year and was considered to be good housekeeping. It was noted that people were given direct payments into a bank account to pay for their own care with a contingency of at least four weeks in advance. Where people built up a surplus balance, they would be asked to return anything over a four weeks need they had not used, the sums of which could be in the thousands of pounds of public money. Members noted that largely people returned it when requested to. Over £40million had been made in Direct Payments, with around 3-4% being returned. It was further noted that if people were given the opportunity to purchase care, they would often purchase less than when Adult Social Care services arranged it, often relying on family and friends instead. Members raised a concern that, if people were not spending the money sent to them, were they receiving adequate care. Members requested that during the course of the year, a report on direct payments be brought to the committee to allay the concern that Members had made.

Communities and Wellbeing

- xii. In response to a Member's query regarding *AC19 (SR) Review Green Plaque Service, and if sponsorship had been considered, the Director reported that sponsorship had been looked at with potentially joining or integrating with some of the district council that ran similar schemes in the past. However, this had not been a viable option. Other options had also been considered before ceasing the service, the decision for which had been made in the previous financial year by full Council, though it had only recently been implemented.

Savings Under Development

Transitions Review

- xiii. Members noted the work to be undertaken over the next 12 months with Children and Family Services to look at the way people moved from Children's Services into Adult Services. The Director confirmed there would be no changes until the outcome of the review was known.

Health and Social Care Integration

Better Care Fund

- xiv. Members noted that the BCF at £82.5million for 2024/25 and £22.9million as a minimum contribution of the NHS allocation would be used to sustain adult social care services, with a further £8million of NHS funding going towards adult social care services, therefore it was vital the funding was maintained.

Other Funding Sources

- xv. Members noted the smaller grants expected for 2024/25 which were received to sustain adult social care services, the most significant of which was the market sustainability improvement fund worth over £10million.

Capital Programme

- xvi. Members noted the main source of external funding of the capital programme totalling £22million was the BCF grant programme of £19.4million passported directly through to district councils for the disabled facilities grant, leaving a balance of just under £3million of discretionary funding to be used for the social care investment programme.

Future Developments

- xvii. Members noted the disabled facility grants had brought in a substantial amount of money to the district councils, and the way the scheme had run, particularly Lightbulb, and the way the County Council worked with district councils was exemplary.

RESOLVED:

- a) That the report regarding the Medium Term Financial Strategy 2024/25 to 2027/28 and the information now provided be noted;
 - b) That the comments now made be forwarded to the Scrutiny Commission for consideration at its meeting on 29th January 2024;
 - c) That the Director be requested to provide a report on Direct Payments to a future meeting of the Committee.
52. National Performance Benchmarking 2022/23 and Performance Report 2023/24 - Position at November 2023.

The Committee considered a joint report of the Chief Executive and Director of Adults and Communities, which highlighted the comparative performance position in 2022/23 through national benchmarking and presented an update on the Adults and Communities Department's performance at the end of November 2023. A copy of the report marked 'Agenda Item 9' is filed with these minutes.

Arising from the discussion, the following points were made:

- i. Members noted that the proportion of people who felt they had as much social contact as they would like, remained low at 39%, which was below the national position of 44%. Members queried if this was as a result of keeping people in their own homes rather than in the care environment. The Director commented that it would be worth considering the results against service provision to see if this might be a factor.
- ii. Members questioned how, with the population increasing, pro rata, the number of people receiving a service had gone down and asked what the Authority was doing to ensure people were not accidentally being missed from receiving a care. The Director clarified that the number of people going into residential or nursing care on a permanent basis had reduced because more people were being supported in their own home, where they would rather be.
- iii. Members questioned why permanent admissions to care (aged 18 to 64) per 100,000 population appeared to be performing below the latest national average or local target. The Director explained that the Council's performance was not yet known as

the national average for 23/24 had not been confirmed to make a proper comparison. Members suggested that the figures should remain green until the full picture was known, as it could cause confusion and suggested that Leicestershire in certain areas was not performing well, which might not be the case.

RESOLVED:

That the National Performance Benchmarking 2022/23 and Performance Report 2023/24 – Position at November 2023 report be noted.

53. Creative Learning Services.

The Committee considered a report of the Director of Adults and Communities which provided an update on the purpose, performance and outcomes of Creative Learning Services (CLS). A copy of the report marked 'Agenda Item 10' is filed with these minutes.

Prior to consideration of the report a short video was played to the meeting on Creative Learning Services: <https://www.youtube.com/watch?v=iaYX-BPE18c&t=49s>

Arising from the discussion the following points were made:

- i. Members noted that the service was provided across Leicester, Leicestershire and Rutland and the peripheries promoting the County Council's museums and heritage sites. Two-thirds of the take-up was by primary schools, but more was spent in secondary schools as they were larger. Digital provision had also been used over the Covid-19 pandemic.
- ii. Members questioned what was being done to get other schools to join. The Director reported that initial contact with schools was made to understand what they wanted, noting that they were price sensitive due to budgets. Work continued to improve the website with new information, and events were held in schools which were usually expanded out to others to broaden coverage and share cost.
- iii. Members noted that, as take up of the service in different locations would require more people and resources to deliver, it would not necessarily bring subscription costs down. Members questioned if free trials in schools had been considered, the use of volunteers, or discussions held with school governors. The Director reported that all approaches were considered and to increase uptake time was taken to talk to schools about budget options, in particular primary schools with a lower budget. To help, a pay-as-you-go option had been introduced with the option of topping up subscriptions.

RESOLVED:

That the report on Creative Learning Services be noted.

54. Future of the Transitions Learning Programme.

The Committee considered a report of the Director of Adults and Communities, which sought the views of the Committee on the future of the Transitions Learning Programme (TLP) delivered by the Leicestershire Adult Learning Service (LALS) prior to presentation

of the report at Cabinet for consideration at its meeting on 9 February 2024, and subject to its approval, would be the subject of a formal consultation exercise. A copy of the report marked 'Agenda Item 11' is filed with these minutes.

Arising from discussion the following points were made:

- i. In response to a Member query, the Director reported that new enrolments to the service had paused in order that vulnerable learners avoided disruption should any changes be made to the service following the consultation. Assurance was provided that learners with an Education Health and Care Plan (EHCP) would receive appropriate education and support.
- ii. In response to a Member's query, the Director reported that the service had been last subscribed in the 2022/23 academic year, at which point changes to the service were already being looked at because of financial viability. The service had been run at capacity for a number of years, with staffing having been reduced, and consultation on the management of resources which had required balancing when acquiring the services of specialist staff. It was noted that some staff with contracted hours had been using their skills in supporting other adult learning programmes.
- iii. Members noted that service users' views would be sought during the consultation and that the consultation would expand on options, including access to other commissioned advisers. The Director undertook to circulate to Members the draft consultation document when the report to the Cabinet was published in order for Members to feedback any further comments on this direct to the Cabinet.

RESOLVED:

- a) That the report on the future of the Transitions Learning Programme delivered by the Leicestershire Adult Learning Service be noted.
- b) That Cabinet be advised that the Committee supported the proposal to formally consult on the future of the service.
- c) That the Director of Adults and Communities be requested to circulate the draft consultation document to Members when circulating to Cabinet, and that comments from Members be forwarded to the Director of Adults and Communities, and Cabinet Lead.

55. Community Managed Libraries.

The Committee considered a report of the Director of Adults and Communities, the purpose of which was to provide an overview of Community Managed Libraries (CMLs), the services they offer and the support package made available by the County Council. A copy of the report marked 'Agenda Item 12' is filed with these minutes.

Members applauded the average opening hours of a CML which was 17 hours per week and hoped encouragement and support could be given to those CMLs and volunteers that wanted to grow their hours further.

Members were encouraged by the success of the service, which they believed demonstrated that the more done to get people volunteering, the more communities thrived.

RESOLVED:

That the report on Community Managed Libraries be noted.

56. Date of next meeting.

It was noted that the next meeting of the Committee would be held on 4 March 2024 at 2.00pm.

2.00pm to 3.52pm
22 January 2024

CHAIRMAN



ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
4 MARCH 2024

CQC ASSESSMENT OF LOCAL AUTHORITIES

REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of report

1. This report provides the Committee with a summary of the latest guidance from the Care Quality Commission (CQC) regarding the assessment process and feedback from the pilot inspections which were undertaken during the summer of 2023.
2. The report also refers to the latest versions of the Department's Self-Assessment and Improvement Plan, respectively attached as Appendices A and B to this report.

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), as a standalone report focusing on the assurance Self-Assessment and Improvement Plan in March 2023 and a further report was produced in 4 September 2023 which provided an overview of the Annual Conversation preparation visit by Dr. Carol Tozer.
4. The Committee also reviewed and commented on the first draft of the Self-Assessment produced to support the assessment process at a standalone workshop on 13 February 2023.

Background

5. The CQC piloted a programme of assessing councils' adult social care functions in 2023. A roll out of full assessments commences this month in 10 local authorities (Bracknell Forest Borough Council; Brent London Borough Council; Derby City Council; Derbyshire County Council; Durham County Council; London Borough of Harrow Council; Hertfordshire County Council; London Borough of Hounslow; West Berkshire Council; Windsor and Maidenhead Borough Council).
6. 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.
7. The CQC published its reports and indicative ratings for each of the five councils involved in the pilot inspections in November 2023 resulting in four authorities rated as Good, and one authority rated as Requires Improvement:

8. The CQC found similar themes across all five local authorities. These included:
- Outcomes for people were better where there was good partnership working, including with voluntary and community partners, as well as Health partners.
 - Integrated working to support people's discharge from hospital improves the flow out of hospitals and people's experience.
 - People had to wait for assessments due to the capacity within assessment teams, but councils managed the associated risks.
 - Staff tended to stay with a local authority when they felt valued, had learning and development opportunities, and where there was a positive culture.
 - There were different practices across the five local authorities in how they worked with young people transitioning from children's services to adult services, so young people's experiences were varied.
 - Workforce capacity was being addressed through incentives and innovation in recruitment and retention of staff.
9. The full reports have been considered in detail and the following learning points/considerations for Leicestershire were identified:
- a) Self-awareness is key. The Department needs to be clear what it does well, the areas of concern and plans to address concerns;
 - b) Staff communications and ensuring staff give a consistent, realistic and positive message about working for the County Council is important. The CQC Inspectors cited a number of issues raised by staff in one authority;
 - c) Awareness of and actions to support diverse communities was highlighted in all reports and consideration needs to be given to how this is evidenced;
 - d) Data collection and evidencing how it is used to support service delivery and strategic planning;
 - e) Working with district and borough councils regarding Housing is an area to focus on, as joined up approaches to housing were highlighted in the unitary authorities;
 - f) The [3 Conversations](#) (a way of working which focuses on the person, their strengths, skills, and promoting their independence) work is important as evidence of strengths-based approaches.
10. The CQC also published their assessment guidance in December 2023, including the Assessment Framework, which sets out how the CQC will assess local authorities, what information they will ask councils to provide and timescales for assessment. The evidence categories the CQC will use are:
- People's experience;
 - Feedback from staff and leaders;
 - Feedback from partners;
 - Processes.
11. For each local authority, the CQC will gather evidence in this order:
- Evidence that is publicly available, for example national data collections, insight from regulation of providers;
 - Evidence the CQC will request, for example specific policies and strategies, internal and external survey results, feedback from staff, self-assessment of performance;

- Evidence the CQC will actively collect, for example from case tracking, focus groups, conversations with staff and leaders (only for information the CQC cannot get through other means).
12. The CQC's assessment starts when the notification is sent and ends when the final report and rating is published in line with the following timetable:
- a) The CQC will send a notification of their intent to carry out an assessment and information return request;
 - b) End of week one - deadline to compile, check and send contact details for local voluntary organisations, advocacy organisations and carers organisations;
 - c) End of week three - deadline to compile check and send all other information requested (self-assessment, policy, process, feedback and other documentary evidence);
 - d) The CQC will send a second notification confirming the date of their site visit. The site visit will be six to eight weeks from the date of the notification, and a maximum of six months from the date of the first notification;
 - e) Before the site visit, the CQC Assessors will hold conversations with representatives from the voluntary and community sector, carers groups, and provider organisations;
 - f) The CQC will also meet with the Adult Social Care senior leadership team before the site visit to gain an understanding of the departmental structure and lines of accountability, the services strengths and areas for improvement.
 - g) The CQC are expected to lead timetabling of the meetings and will liaise with relevant departmental officers to plan the visit. Additional information may be requested in the lead up to the site visit;
 - h) The CQC site visit will take place over two to three days to gather additional evidence through interviews, meetings, drop-in sessions with staff, leaders, partners and people who use services;
 - i) After the site visit the CQC assessors will complete their analysis of the evidence they have gathered and draft their report;
 - j) The Director of Adults and Communities will have an opportunity to review the draft report to check factual accuracy and provide feedback. The final report will be published approximately eight weeks after the site visit.
13. The CQC's assessment timetabling will take into account local elections, major local events and any other regulatory activity.

Self-Assessment

14. The Self-Assessment (Appendix A) is updated on a quarterly basis with the latest data available. The narrative is checked and edited to ensure it reflects the latest data. The update also reflects the progress being made towards the Improvement Plan activities. The Self-Assessment is regularly reviewed by an editorial officer group in terms of accuracy and to identify any gaps or areas to develop. The Department's Assurance Working Group (which oversees activity that supports readiness for CQC Assessment, and the improvement of services and outcomes for people) and the Departmental Management Team (DMT) also reviews the Self-Assessment on a quarterly basis.
15. This is the third update of the Self-Assessment since March 2023. The main changes made since the initial version are:

- Changes to the layout, from a report style to the current table layout;
- Publication of the CQC's information return requirement has resulted in the removal of sections such as compliments and complaints, and Better Care Fund where the Self-Assessment narrative adds little to the documentary evidence requested;
- Combining sections that reference similar topics, such as strengths based, person centred practice, Carers, Contract Management and provider quality;
- Added Celebrating the success of Care Professional of the Year awards 2023;
- Refocussed the safeguarding section, additions to our hospital discharge processes and partnership working;
- Shift of focus from corporate governance to departmental governance;
- Additional narrative on equality, diversity and inclusion.

Improvement Plan

16. The Improvement Plan (Appendix B) was developed from the key priorities for improvement identified through the Self-Assessment and annual conversion recommendations. The majority of the improvement activities are reported through dedicated governance channels; the Improvement Plan enables overall progress to be monitored by the Department's DMT. Improvement leads provide quarterly updates on progress and key achievements which is reported to DMT alongside Self-Assessment updates.
17. Key achievements to date include:
 - Improved Information Advice and Guidance: a new Adult Social Care website landing page and a co-produced financial assessment video. Reviewed 44 Adult Social Care web pages for accuracy and updated content as required; and automation of Service Directory updates.
 - Finance Pathway improvements, introducing E-billing , and the financial assessment backlog being addressed.
 - The Engagement Panel, which is made up of people who use our services and their carers, is involved in co-producing Direct Payments fact sheets, Carer information and the recruitment process for a new Assistant Director.
18. A presentation focused on positive messages from the Self-Assessment and including case studies highlighting best practice is updated in line with the Self-Assessment. This has been, and will continue to be used to promote some of the Department's key achievements with staff.
19. Communication with staff and preparing them for the CQC Assessment Visit will be a major element of the Assurance Team's work over the next few months. In addition, as inspection reports are published there will be analysis of the key findings and lessons learned which can be applied in the ongoing preparations for the County Council's visit.
20. A major piece of work looking at evidencing outcomes for diverse communities and building an evidence base on the diversity of those who use the Department's services has been scoped and the Departmental Equalities Group is supporting this work.

Consultation

21. 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 Self-Assessment.
22. Representatives from the Department's Engagement Panel which is made up of people who use our services and their carers and the Learning Disabilities Partnership Board have been engaged in the production of the Self-Assessment and are kept informed on the progress of the Improvement Plan.

Resource Implications

23. There are no resource implications. There is a small Assurance Team under the Assistant Director (Strategic Commissioning) leading on the co-ordination of the assurance process work supported by the Lead Practitioners.
24. The Director of Corporate Resources and the Director of Law and Governance have been consulted on the content of this report.

Timetable for decisions

25. As the CQC may request a visit at any time in the future, the self-assessment document will be regularly updated to ensure it remains relevant and reflective of the way the Council carries out its statutory duties.

Circulation under the Local Issues Alert Procedure

26. None.

Equality Implications

27. 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.
28. 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 Assessments.

Human Rights Implications

29. 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 - Self-Assessment.
- Appendix B - Improvement Plan

Background papers

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

<https://democracy.leics.gov.uk/ieListDocuments.aspx?MId=6840> – item 12

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

<https://democracy.leics.gov.uk/ieListDocuments.aspx?MId=6841> – item 25

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

<https://democracy.leics.gov.uk/ieListDocuments.aspx?MId=6842> – item 39

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

<https://democracy.leics.gov.uk/ieListDocuments.aspx?MId=7107> – item 65

Report to the Adults and Communities Overview and Scrutiny Committee: 4 September 2023 – Assurance of Adult Social Care

<https://democracy.leics.gov.uk/ieListDocuments.aspx?MId=7109> – item 29

[Local authority assessments – implementing our new approach](#)

[Local Authority assessment reports](#)

[Evaluation of CQC's local authority pilot assessments](#)

Officer(s) to Contact

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 Director of Adults and Communities
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Inderjit Lahel, Assistant Director (Strategic Commissioning)
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Adult Social Care Self-Assessment January 2024



We are delighted to present Leicestershire County Council's Adult Social Care Self-Assessment. Despite the Council's challenging financial position and the on-going impacts of the Covid-19 pandemic, we have continued to deliver high-quality and sustainable adult social care services to the people of Leicestershire.

We are ambitious in our vision to deliver wellbeing and opportunity in Leicestershire and ensure that all adults living in Leicestershire, lead active, independent, and fulfilling lives. Implementation of The Operating Model (TOM) in 2019 led to significant improvements in demand and capacity management as well as cultural and process changes, which have improved outcomes for people by taking an independence first approach and placing people at the heart of all decision-making.

Our focus on wellbeing and prevention is reflected in how we plan and deliver flexible and responsive adult social care and community wellbeing services. We endeavour to deliver person-centred and strength-based care, including through our excellent reablement services. We also have a strong commitment to equalities, diversity, and inclusion and strive to improve outcomes for people who are likely to experience inequalities.

Partnership-working is integral to the delivery of our adult social care priorities and as such we collaborate with all partner agencies, including to jointly-commission services where this improves outcomes for people. We regularly communicate with and support providers to identify and mitigate any risks, assure the sufficiency of the care market, and continuously improve the quality of care.

Safeguarding is embedded in service delivery at all levels, with regular training and clear guidance and support for staff. We have well-established governance arrangements in place through the Leicestershire and Rutland Safeguarding Adults Board (LRSAB) and a strong track record in working with partners to deliver safeguarding priorities.

We recognise that there are areas which we need to improve. Feedback from people who use our services suggests that people may not find it easy enough to access information and advice about adult social care, and that care experiences could be better. To find out more about the reasons for this and how services could improve, we are adopting new ways to engage with people who use our services, including carers. We are also delivering a programme of work to improve how we provide information and advice about our services and are encouraged to see an improvement in performance in this area in the latest ASCOF survey results.

Co-production is imperative to ensuring that our services reflect and address local care and support needs, and we are keen to embed it as an integral part of our service design and delivery. We are making progress in this area through expanding and embedding our Engagement Panel which consists of people with lived experience, who advise us on how to engage others and improve services.

Several major programmes of work are underway which are key to ensure we continue to deliver a sustainable and effective service, making the best use of resources, technology and innovative ways of working. Our Transforming Commissioning Programme will help us to achieve a more sustainable adult social care market. We are looking to implement an innovative commissioning agenda, developing and shaping the external provider market to increase the choice and availability of high-quality, cost-effective support services to people. The Demand Management programme is a data-led programme to improve the efficiency and effectiveness of our processes and service offer, working with our partners such as Health to better manage system flow, and ensure an outcome focused, strengths-based approach to supporting those people who need adult social care support services.

The Financial Pathway Improvement programme, aims to make better use of technology, simplify, and improve our processes for financial assessments and billing alongside strengthening performance monitoring.

As leaders, we continue to champion adult social care in Leicestershire and ensure that services support optimal outcomes for people.

Jon Wilson
Director of Adults and Communities

DRAFT

Councillor Christine Radford
Cabinet Member for Adults and Communities

1A. Working with people: Assessing needs

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1.1.	<p>People can access our adult social care services through multiple channels, including our Customer Services Centre (CSC) phone lines, online self-referral, and professional referral routes. Telephone calls to our Customer Service Centre is the most used contact channel, however we are aware that people experience delays in speaking to an advisor.</p> <p>Our care and support assessment webpage provides people with information about the purpose of the assessment, eligibility, and how to apply. It includes our Online Self-Assessment which people can use to find out if they may be eligible for support. It also links to our advocacy webpage which explains how an advocate can support an individual and provides contact details for our jointly commissioned advocacy service.</p> <p>If a person is not eligible for Council support, we provide advice and information, and suggest appropriate agencies such as First Contact Plus, a Local Area Co-ordinator (LAC), or community groups that provide suitable support.</p>	<p>Our Customer Portal includes a Carers Assessment, through which carers can identify their eligibility for support. Use of the on-line Carers Assessment is increasing, with 639 assessments submitted during quarters 1-3 of 2023/24, compared to 584 submitted in 2022/23.</p> <p>Our on-line Financial Assessment gives people an indication of how much they may need to pay towards their services. In the first three quarters of 2023/24, 182 financial assessments were submitted, exceeding 138 assessments submitted during 2022/23.</p> <p>To the end of quarter 3 2023/24 the number of Contacts made to ASC were 17% higher compared to the same period in the previous financial year.</p> <p>Year-to-date comparison shows a 39% increase in contacts via telephone (15,042 in 2023/24 compared to 10,837 in 2022/23). Contacts via on-line self-assessment were up 30% (7,016 in 2023/24 compared to 5,417 in 2022/23).</p>	<p>Several initiatives are underway to improve people's experience at their initial point of contact with us.</p> <p>Change to our customer service centre operating model and implementation of the 3 Conversations approach are expected to increase capacity and responsiveness, providing people with a better experience when contacting us through the CSC.</p> <p>We are working to improve the ease-of-use of our website and on-line self-assessments. Feedback and recommendations from people with experience of accessing adult social care, is helping us to develop more user-friendly information on our web pages and video content. Carers information on our website is the next area we shall focus on.</p> <p>A review of the effectiveness of the LLR Advocacy Service has commenced with a view to a new model being procured by April 2024.</p>
1.2.	<p>We strive to ensure that our assessment and support planning is person-centred, and strengths based. This approach is the heart of our operating model (TOM) implemented in 2019. The model puts people at the centre of assessment and decision making and supports</p>	<p>IR 5 and IR 6 contains our assessment processes and pathways, and eligibility guidance.</p> <p>The Operating Model Brochure^[R 1.1] outlines the improvements made to our processes through TOM, and our Practice Framework^[R 1.2] outlines</p>	<p>We continue to put people at the centre of our practice, through embedding the Practice Assurance Framework^[R 1.2] and building on TOM through the 3 Conversations approach.</p> <p>Our next step with 3 Conversations is a locality wide roll out across Blaby Oadby and Wigston</p>

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	<p>workers to ensure people can live as independently as possible.</p> <p>TOM introduced new processes to support practice such as,</p> <ul style="list-style-type: none"> • weekly group supervision meetings • regular case progression supervisions • consistent and structured case recording approach • specialist administrative function • strengthened quality assurance mechanisms (Practice Development Cycle case audits) <p>Running through our Practice Assurance Framework, processes and guidance are the core principles of developing 'a full picture of the person, their strengths, likes or dislikes and who and what matters to them' and considering how a person's needs can be met by building on their own strengths or support from family, friends or their communities.</p> <p>To further enhance our person centred and strengths-based practice, we are piloting the 3 Conversations approach, feedback from people who use our services and practitioners indicates that the approach has enhanced person-centred, strengths-based practice and levels of satisfaction.</p> <p>To support and enable staff to carry out their duties effectively and improve the quality of</p>	<p>how we quality assure care and support assessment and support planning processes.</p> <p>Results from our Adults and Communities staff survey ^[IR4] from November 2022-January 2023, show that 70% agreed that assessment and care planning arrangements are person-centred and strengths-based. 77% of respondents agreed that 'the wellbeing principle is embedded throughout the Council's care and support system and is clearly promoted in care and support'. During workshops, staff indicated that the person-centred approach had been strengthened by the introduction of TOM.</p> <p>Our recent survey of people receiving services^[IR1], piloted from April-June through the annual review process, suggested that 65% of people feel in control of their care and support, and 57% felt they were listened to (34% were not sure and 0 said they weren't listened to).</p> <p>Feedback from people who have worked with the Mental Health 3C's team include;</p> <p><i>"I trust her completely. She showed empathy towards my situation. Always did what she said she would do and more."</i></p> <p><i>"I honestly cannot thank you enough for your help and support. There needs to be more services like Three conversations."</i></p>	<p>and Market Harborough including Home First, C&PD, and Domiciliary Review teams. Revised Care and Support Assessment and Support Plans are being designed to be a more proportionate record of the assessment conversations and be more representative of the persons views about their life and what they want to achieve. The roll out will consider the processes, case recording and performance reporting required to fully support the 3Cs model. Evaluation of the locality rollout is underway, a decision on the recommendations for the future roll-out of the model across the rest of the care pathway will be made in April 2024.</p> <p>The Mental Health 3 Conversations project is being expanded into other areas of Leicester city and Rutland, and in the county to Lutterworth, Melton and surrounding areas.</p> <p>Through our Practice Development Cycles (PDCs) we will continue to quality assure our care and support assessment and planning processes and identify and address any staff training needs.</p> <p>We have implemented a Managers Toolkit for Training^[IR 36] which aims to encourage all care pathway staff to undertake training which supports their confidence and capability in carrying out their role. The effectiveness of the</p>

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	<p>practice, our Adult Social Care Training Offer^[R1.3] and Delivery Plan^[IR 36] set out our training priorities and developments, plus the mandatory and non-mandatory training for ASC staff (including specialist training).</p>	<p>As of July 2023, 62% of staff in the care pathway had completed care act duties training covering assessments and support planning, 82% had completed Care Technology Referrer training, 81% had completed the Mental Capacity Act core module and 74% completed the Carer e-learning module.</p>	<p>toolkit will be assessed through monitoring training completion rates.</p> <p>As outlined in the Adults and Communities Learning and Development Delivery Plan (2023/24)^[IR 36], we will provide significant training support for our staff and external care providers across a wide range of areas related to care and support assessment and planning. New training programmes for 2023/24 include anti-racist practice, note-taking, analytical writing, and supervision.</p>
1.3.	<p>We aim to complete assessments within 28 days of allocation, although like many authorities, people may wait longer for allocation and assessment.</p> <p>In spring 2023 we implemented a new Planned Wait operational policy and guidance^[IR 5] to support triage referrals to manage delays and associated risks. Unallocated cases are reviewed and prioritised on a weekly basis and people are contacted while they are waiting for assessment.</p> <p>We have been successful in reducing people's waiting times for assessment and reviews, recent data shows that waiting times for assessments have reduced over the past 12 months. We have also maintained</p>	<p>IR 5 includes our data on waiting lists for care assessments and reviews.</p> <p>In January 2024 the average wait for allocation was 51 days compared to 64 days in Jan 2023. The number of people waiting has fallen to 853 in January 2024 from 1,514 in January 2023. The number of people waiting over 28 days for allocation has fallen to 54% from 68% over the past 12 months.</p> <p>Of people in receipt of services for 12 months or more at the end of March 2023, 76% had received their annual review within 12 months of their previous review; considerably higher than the national average of 57%. This strong performance has continued into 2023-24 and at</p>	<p>We will continue to address the levels of unallocated cases and duration of waits and ensure we maintain contact with people while they are waiting for assessment.</p> <p>We are also working with regional colleagues and the University of Birmingham to deliver an IMPACT demonstrator to explore how waiting times can be reduced and how we can improve people's experience of accessing care.</p> <p>We will continue to identify and respond to immediate risk to peoples' wellbeing through our management of waiting lists and Crisis Response, Out-of-Hours Emergency Duty and 'see and solve' services as well as the Dynamic Support Pathway.</p>

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	<p>improvements in the delivery of annual reviews for people in receipt of long-term care.</p> <p>To respond to immediate risks to peoples' wellbeing while they await assessment, all teams operate an urgent function. Our out of hours Emergency duty team and Crisis Response and urgent 'see and solve' services, also respond to people with urgent needs.</p> <p>Additionally, Leicestershire Partnership Trust's Dynamic Support Pathway provides timely, multi-agency support for people with learning disabilities and/or autism whose health and wellbeing is deteriorating.</p>	<p>the end of the third quarter 73% had been reviewed in the past 12 months.</p> <p>From 1st April 22 – 31st March 23 the Crisis Response Service received 3,706 out-of-hours referrals. From 1st April 2023 to 31st December 2023 the service received 2,660 referrals.</p> <p>A case study by the Crisis Response Service^[R1.4] demonstrates how the service responded quickly to an urgent referral, providing support which enabled the person to remain at home, respecting his wishes, while longer term services were put in place.</p>	
1.4.	<p>Financial assessments are conducted in accordance with the local charging policy and staff apply this consistently. We currently have a backlog of financial assessments, resulting in delays to assessment timescales, with average completion times of 65 days for the outcome of assessment. We are making progress to reduce the current backlogs and waiting times.</p> <p>People are billed for their assessed contribution on a 4 weekly cycle and can pay by direct debit or manually via the council's payment tools. Billing is an area that generates considerable manual processing and query handling. Improvements in this area are a key priority.</p>	<p>The total number of assessments undertaken in 2022/23 was 10,580 (excluding global uplift assessments); 34% were first assessments (new services) and 66% were re-assessments (annual reviews or respite assessments). These breakdown as follows, 31% nil cost, 58% variable cost, and 11% full cost.</p> <p>To the end of December 2023, the total number of assessments undertaken was 9,802 (excluding global uplift assessments); 28% were first assessments (new services) and 72% were re-assessments (annual reviews or respite assessments). These breakdown as follows, 26% nil cost, 62% variable cost, and 12% full cost.</p>	<p>We are prioritising actions to address the current delays with completion of financial assessments through allocation of additional resources to continue to clear our backlog.</p> <p>A programme to review the financial pathway is underway aiming to make significant improvements to assessment and billing processes, making better use of technology, and strengthening performance monitoring. This will provide a better experience for people who use services.</p>

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1.5.	<p>We aim to ensure that everyone in receipt of long-term community care receives a personal budget, ideally as a direct payment. The percentage of individuals in receipt of self-directed support and direct payments is higher in Leicestershire than amongst comparators.</p> <p>We endeavour to ensure Direct Payments are used appropriately, enabling people to choose support that works for them.</p>	<p>IR 7 Includes our documents outlining arrangements to offer and support people using direct payments.</p> <p>ASCOF 2022/23, shows the percentage of people in receipt of self-directed support in Leicestershire was 93%, at the end of December this had risen to 96%. However, the percentage of people in receipt of a direct payment was 36%, significantly higher than the average of 26% for England.</p> <p>For carers, during 2021/22 and 2022/23, 100% were in receipt of self-directed support. 99.7% received Direct payments in 2022/23, above the national averages of 89% and 78%.</p> <p>Our survey (May-June 2023) asked people 'Is there anything which would help you to feel more in control of your care and support?' 65% of respondents said 'no' and 31% said 'yes'. Suggestions for improvement include increasing the flexibility and accessibility of services.</p>	<p>In response to feedback from staff and people with lived experience we are reviewing our direct payments processes and guidance, to simplify them where possible. A task and finish group (including people with experience of our services) has reviewed and updated the guidance and agreements, which are due to be approved for use early in 2024.</p> <p>To support people to choose how to spend their direct payment on support that works for them, we aim to diversify the direct payments market by increasing access to personal assistants (PAs), through developing a comprehensive PA register, restructure PA salary rates, and establishment of a team to support people using DPs and recruiting PAs.</p>

1B. Working with People: Supporting people to live healthier lives

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1.6.	<p>Prevention is a core element of our strategy. Alongside the Public Health prevention services,</p>	<p>83% of respondents to the staff survey from November 2022-January 2023 agreed that the</p>	<p>We will continue to identify opportunities to innovate and develop our prevention offer. A</p>

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	<p>we offer a range of services and measures that support people to be as independent as possible and reduce their need for formal support. These services are detailed in IR 8.</p> <p>Examples of recent developments in our prevention services include the launch of the new Care Technology Service in April 2022, our Care co-ordination service and digitalisation initiatives such as online self-assessments. TOM embedded an 'Independence First' approach across adult social care, it also helped us to increase the capacity of our Homecare Assessment and Reablement Team (HART) so that more people are able to benefit from reablement.</p> <p>Our locality Mental Health reablement workers achieve positive outcomes for people they work with. Commissioned Mental Health and Wellbeing Recovery Services also effectively support people with mental health conditions aiming to improve their wellbeing and prevent deterioration in their condition.</p>	<p>Council promotes innovative approaches to prevention activity, with comments highlighting the Care Technology Service, the 3 Conversations Pilot, Local Area Coordinators,.</p> <p>TOM increased the capacity of HART^[R1.1]. The number of people supported has been on an upward trend since October 2021, with 3,491 people supported in 2022/23, exceeding the target of 3,203. In the period April to end December 2023, HART supported 3,329 people, indicating the service will exceed the annual target of 4,200.</p> <p>From April to end December 2023, the Care Co-ordination team completed 6,096 referrals. 60% were signposted, or given advice and guidance, 10% were referred to Care Tec or adaptations 1% were referred for reablement and 3% resulted in a commissioned service. Case studies from the team demonstrate how they reach people who otherwise may hit a crisis and provide support or appropriate referrals to help maintain their independence ^[R1.5, R1.6].</p> <p>Mental Health and Wellbeing Recovery Service, Case studies ^[R1.7-R1.9] show the positive outcomes achieved.</p>	<p>review of the Council's prevention services aims to ensure we focus on providing the most effective types of prevention services.</p> <p>The Care Technology service will introduce technology in supported living settings that can increase a person's independence. Future developments include use of care technology in home care, extra care and supporting people with dementia and their families.</p> <p>Five care homes in Leicestershire are taking part in the 'Whazan' telehealth pilot. This exchanges information about residents' health between the home and clinicians. Action can be taken to address early signs of deterioration and avoid unnecessary hospital admission.</p> <p>We are also working with the Integrated Care Board to encourage providers to sign up to the Data Security and Protection Toolkit and introduce more care technology as part of Digitising Social Care (DiSC).</p> <p>We are working to ensure our Mental Health and Wellbeing Recovery Service is fully utilised, also work with partners in the Mental Health Collaborative, aims to improve the wellbeing and independence of people who are in contact with secondary Mental Health services.</p>

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1.7.	<p>We are committed to providing people with high quality information and advice about services, in a variety of formats, which enables people to find the most appropriate support for their needs. Financial information and advice is available in multiple formats and at various points within the adult social care customer journey. However, feedback from people who use our services indicates that it may not be straightforward for people to find out about support services. We are beginning to see improvement in this area, recent data indicates more people who contact our services are provided with information and advice, and we are seeing improved performance reflected in feedback received.</p> <p>Data also suggests that we have not been providing people with signposting, advice and guidance when they make contact with us, again this is something we are improving and is shown in recent data.</p>	<p>Our Adult Social care and Health web page is the starting point to find the information we have available. Our paying for care web page provides information about paying for support services, independent financial advice, benefits, direct payments and how to manage someone's financial affairs.</p> <p>The Council remains in the lowest quartile of authorities for the percentage of service users who found it easy to find information about services, however the latest ASCOF results show a significant improvement, rising from 57% in 2021/22 to 62% in 2022/23.</p> <p>Of the 48 survey respondents (May-June 2023) who answered the question 'Is there anything that could change to make it easier for you to get clear, accurate and up-to date information and advice about adult social care services?', 54% answered 'no', and only 25% answered 'yes' (the remaining 21% stated 'don't know'). Suggestions for improvements include having digital access to care plans and ensuring that Customer Service Centre advisors answer calls more quickly and have better knowledge about adult social care and community-based services.</p> <p>Our signposting data indicates an improving situation, from April-December 2023, 25% of contacts to adult social care services were signposted to universal services and/or provided</p>	<p>We are reviewing how we provide information and advice, with improvements being informed by members of our Engagement Panel.</p> <p>A mystery shopping exercise undertaken in August 23 demonstrated a need to regularly review our website content to ensure the information provided is accurate and relevant. Therefore, we are reviewing all our webpages to ensure content is accurate and up to date. A new a service overview and a popular topics landing page helps direct people to the relevant content. Feedback from people with experience of accessing adult social care is helping us to develop our web pages and new video content to ensure it is accessible and easy to understand.</p> <p>We are refreshing our printed information and advice about services. This includes a hospital discharge pack for carers plus leaflets, factsheets, and other materials to be shared with people via frontline workers and LACs.</p> <p>As part of a wider piece of work to review the finance pathway, our customer facing financial information is being updated with input from our engagement panel members to ensure the guidance is accessible for all.</p> <p>We are also working to improve the information and advice resources available to our Customer Service Centre (CSC) advisors. Developing our</p>

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1.8.	<p>People have access to equipment and minor home adaptations through our Care Technology (CT) and Occupational Therapy (OT) services. OT's and CT assessors work with people to ensure the adaptation, equipment or technology provided meets the needs of each person. Documents outlining these services are included in IR9.</p> <p>The OT single handed care team has successfully identified support packages which, with the appropriate training and equipment can be delivered by one carer, creating a better, more personal experience of care. The OTs in the Lightbulb team work with district councils in planning the installation of major adaptations.</p> <p>The Lightbulb Service is a partnership arrangement which delivers adaptations, falls prevention, and supports transition from hospital to home. It has led to reductions in completion times for DFGs and reduced length of stay in hospital.</p>	<p>with information and advice, compared to 13% in the same period in 2022.</p> <p>As of December 2023, the Care Technology Service supports 1,373 individuals and is achieving 58% of its target installations per week</p> <p>In 2022/23, the Occupational Therapy Team processed 3,664 referrals for minor adaptations and 1,019 referrals for major adaptations (from internal sources). The team also processed 1,708 referrals from external sources, including 98 Handyperson Applications, 1,463 minor adaptations requests from the NHS and 147 from the Red Cross/VISTA.</p> <p>Referrals to December 2023 are up on the previous year, with 3,242 minor adaptation referrals and 849 referrals for major adaptations.</p> <p>A recent case study^[R1.10] shows how an OT assessment identified equipment and adaptations which have made a huge difference to an individual and his family <i>“My bathroom is now done and I've used the toilet & boy that is life changing... I've also took my first shower this morning & again I'm over the moon with it. I have to pinch myself to make me think is this really true... I will never ever forget what you have done for me.”</i></p>	<p>Information and Support Directory, which lists local organisations and community groups offering support for a range of needs, the primary signposting resource for our CSC advisors.</p> <p>We will continue to provide effective Care Technology and adaptations services and monitor their impact. We will address the waiting times for referrals for both care technology and minor adaptations.</p> <p>A care champions network of 30 staff support colleagues to learn more about the assistive technology available. Care Technology Referrer Training is available to staff across the care pathway with highly positive feedback received from participants.</p> <p>We will work with partners to develop a five-year vision for the Lightbulb service from 2024 to 2029, the Lightbulb business case was presented to our Adults and Communities Oversight and Scrutiny committee for consideration, prior to finalisation and consideration by all partners in the service.</p>

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		<p>Our pilot survey of people (April to June 2023) indicated that respondents were satisfied with their Care Technology and Adaptations services.</p> <p>The Lightbulb Service produces regular performance data and annual plans and reports showing the effectiveness of the services it provides. Completion times for Disabled Facilities Grant (DFG) applications have reduced from 30 to 18 weeks average across the County.</p>	
1.9.	<p>Our Homecare Assessment and Reablement Team (HART) provide highly effective support for people to regain optimal independence. HART works closely with system partners, through integrated multi-disciplinary (MDT) meetings and HART team leaders working on wards at University Hospitals Leicester to triage and support reablement discharges. HART consistently achieves excellent outcomes.</p>	<p>In 2022/23, 88% of people who received reablement had no ongoing services in place, putting Leicestershire in the top quartile for this measure. At the end of December 2023 this had risen to 90%.</p> <p>Following discharge from hospital to reablement between October and December 2023, 89% of people were living at home 91 days later; performance which again places Leicestershire in the top 25% of councils.</p> <p>Despite an increasing number of people benefiting from the reablement service during 2023-24, the high standard of outcomes noted above have been maintained; 90% needing no ongoing services, and 87% living at home 91 days post discharge.</p>	<p>Together with NHS partners we are developing an intake model to increase the number of people who benefit from intermediate care and reablement services when discharged from hospital. We aim to increase the number of people supported at home on discharge and reduce reliance on temporary beds. Recommendations to develop the intake model have been agreed and recruitment of staff is underway. A review of HART and the Crisis Response Service is underway to ensure the teams are aligned to the new model.</p>

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		<p>A case study shows how HART and Community Therapy services^[R1.11] worked with an individual to achieve their goals to regain their mobility with no ongoing support needs.</p>	
1.10.	<p>Our Learning Disability and Autism Service community enablement workers are effective in supporting people with learning disabilities to achieve independence goals. A larger proportion of people with LD are in settled accommodation and in employment which enhances their quality of life.</p>	<p>In 2022/23, 9.1% of adults aged 18-64 with learning disabilities were in paid employment; significantly higher than the national average of 4.8%. The Council also performs well in the proportion of adults with learning disabilities who are living in settled accommodation; at 85.6% in 2022/23, above the national average of 80.5%.</p>	<p>Our Learning Disability and Autism Service will continue its work to support people with learning disabilities to live their best life and maintain independence in the community.</p>
1.11.	<p>Our commitment to supporting unpaid carers is reflected in the LLR Carers Strategy (2022-25)^[R33] which aims to support carers to manage their caring role and maintain their wellbeing. We have in place a Carer's Passport Scheme, and are working to develop carer-friendly communities, and ensure carers are well-informed about wellbeing, care, and support. We identify carers through a range of channels including the Hospital Discharge Grant for Carers (HDGfC) scheme, our care and support assessment process and through our Care Co-ordination service referral pathways.</p> <p>We commission a Carers Support Service from Voluntary Action South Leicestershire (VASL) which provides information, advice and support for carers and a befriending service.</p>	<p>As of January 2024, 1,194 carers were in receipt of support from adult social care services with 1,179 in receipt of a weekly direct payment and 3 in receipt of community respite.</p> <p>During 2023/24 Care Co-ordinators identified 70 carers for assessments, they now receive one-off or weekly budget. The team also signposted carers to VASL and the HDGfC scheme.</p> <p>The number of Carer's passports issued between 1st January 2023 to 31st December 2023 was 1,327, up 382 on the previous year.</p> <p>Between 1st August and 12th January 2024 the HDGfC scheme processed 151 applications for payment, each carer received an average of £372. The main reasons for the grant were for domestic services and help with transport costs.</p>	<p>We will continue to develop and deliver services which support carers as set out in the LLR Carer strategy, ensuring that carers are recognised and supported with their caring responsibilities. Our priorities continue to be to ensure our staff are able to identify carers and knowledgeable about the support available. We are working to improve the information available, which supports self-identification and access to support. Groups of carers are being invited to review the councils Carer's web pages to make sure the information is up to date, relevant and useful for our carers.</p> <p>We will continue to promote the HDGfC scheme, through social media and other channels with the aim to identify and support more carers across the county and reach more diverse communities.</p>

1B. Working with People: Supporting people to live healthier lives

We support people to manage their health and wellbeing so they can maximise their independence, choice, and control, live healthier lives and where possible, reduce future needs for care and support

Ref. Code	What do we know about the quality and impact of social care practice?	How do we know it?	Our plans for the next 12 months to maintain or improve practice
	<p>Voluntary Action South Leicestershire (VASL) are supporting us with the Hospital Discharge Grant for Carers (HDGfC) scheme. VASL administer the scheme and process payments. The scheme has been publicised on our social media platforms and at public events including, the Learning Disabilities Conference, (Sept 2023), Festival of Practice (Oct 2023) and also at the Carers Rights Day (Nov 2023).</p> <p>There is a wide range of information for carers on the Council's website on topics such as health and wellbeing, rights and benefits, local activities and how to access respite. The Council signed-up to the 'Carefree for Carers' in 2020 and there is guidance for staff on how to support carers to access respite through this scheme.</p> <p>Council webpages offer information about support, such as Looking after Someone and Breaks for Carers. There is also a range of guidance and resources for staff to embed consistency in carer assessment and care planning processes. VASLs Support for carers website is an additional source of information and resources.</p>	<p>The scheme has identified 121 new carers, (80% of processed applications) all of whom wish to receive further support from VASL.</p> <p>Feedback shows how the scheme has benefitted carers, <i>"Thank you, because I work F/T I can't seem to get any help! Thank you for bring amazing and the grant will really help"</i></p> <p><i>"Did not realise there was this amount of help and support available, I am very happy with all we've been able to help with in such a short period of time."</i></p> <p><i>"My husband and I are so grateful for everything; we are both over the moon with the service that is provided. It's all about knowing what is available to you as a carer."</i></p> <p>Carers responding to our recent survey, piloted between April-June, indicated that they were generally satisfied with the services they receive, with 82% of respondents stating that they were either very (64%) or fairly (18%) satisfied.</p> <p>The latest available ASCOF survey results for 2021/22, showed the percentage of carers satisfied with their support was above the national average, however it also indicated that carers sought more social contact and easier access to information and advice.</p>	<p>We will undertake further engagement with carers to find out more about their experiences and how services could improve. We will use this feedback to explore how to better support carers to have the levels of social contact they would like and enhance carers' access to respite. Additionally, we aim to increase the level of signposting to VCSE sector organisations and community based services and improve how the Department collaborates with and supports the VCSE sector.</p> <p>We have been awarded Accelerating Reform Funds (ARF), to support the following projects,</p> <ul style="list-style-type: none"> • Continuation of Hospital discharge grant for carers • Carers assessment including carer identification, contingency planning • Shared lives <p>If successful, these projects will commence in March 2024.</p>

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1.12.	<p>In the 2022/23 Adult Social Care Outcomes Framework (ASCOF) survey, the Council received poor feedback about people's experience of support services and quality of life. People's control over their daily life is similar to national and regional averages. These suggest we need to continue to work with our commissioned providers to ensure services are high quality and responsive to people's needs.</p> <p>Responses to our survey, April-June 2023, through the annual review process, indicated high levels of satisfaction with care and support but also provided some useful initial insights into how services improve peoples' care experiences.</p>	<p>The ASCOF survey 2022/23, shows the proportion of respondents who felt that they had control over their daily life is 78% (up from 76% in 2021/22 and just above the national average of 77%).</p> <p>The proportion of service users who reported they had as much social contact as they would like was 39%, a slight improvement from 37% in 2021/22, but below the national average of 44%.</p> <p>The proportion of service users satisfied with their care and support in 2022/23 was 60.3% (down from 63.4% in 2021/22), lower than the national average of 64.4%.</p> <p>Social care related quality of life increased slightly from 18.3 in 2021/22 to 18.5 but remains below the national and regional averages. While the Adjusted social care related quality of life - impact of ASC services, improved in 2022/23 to 0.413 (from 0.408 in 2021/22), above the national average of 0.411.</p> <p>Suggestions made through our review process survey, April-June 2023 included:</p> <ul style="list-style-type: none"> • Ensure carer visit timings are consistent so people know when to expect their carer • Provide a regular newsletter to highlight 'what's on' in the local community 	<p>All our plans to improve, outlined throughout this Self-Assessment, set out how we intend to enhance peoples' experiences.</p> <p>We are piloting other methods to seek regular, feedback from people who use our services to learn from a wider range of experiences and views on how services could improve - using their feedback to shape our plans.</p> <p>Feedback obtained by our customer experience team, from people who use commissioned services, informs our contract management and quality assurance processes to help and support commissioned providers improve their service delivery.</p>

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		<ul style="list-style-type: none"> • Ensure PA services are flexible and easily accessible in the evenings 	

1C. Working with People: Equity in experience and outcomes

We actively seek out and listen to information about people who are most likely to experience inequality in experience or outcomes. We tailor the care, support, and treatment in response to this

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1.13.	<p>We undertake engagement with residents, and people who use our services to ensure that our services are tailored to local needs. We have signed up to Think Local Act Personal's 'Making it Real' Framework and commissioned 'Ideas Alliance' to review our co-production practices and support us to co-produce two projects (an information pack and embedding co-production in strategic planning of mental health services).</p> <p>We have an active Engagement Panel comprised of people with lived experiences of adult social care, who advise us on how to improve services and contribute to decision making. Panel meetings are chaired by the Department's Assistant Director for Strategic Commissioning. The Panel review our engagement plans to ensure we are being accessible and inclusive.</p> <p>Our Engagement Forward Plan sets out the current and upcoming engagement activity. The</p>	<p>Re-procurement of Extra Care services involved considerable engagement of Extra Care tenants and their families, through two rounds of engagement in 2021 and 2022. Findings from the Extra Care Engagement is included in this Cabinet report^[R1.12].</p> <p>Examples of the Engagement Panel's work in recent months include:</p> <ul style="list-style-type: none"> • Guidance and 'top tips' on Engagement Methods • Improvement to engagement with Carers • Advising on engagement to inform commissioning of Supported Living • Better inclusion of young people with disabilities in Home Care commissioning • Advised on a Glossary of Terms for elected members, and the general public • Suggested possible topics for future learning and development of staff 	<p>Recent Engagement panel recruitment has increased membership to 25 people. Future recruitment to the Panel aims to increase representation from under-represented groups, such as people with lived experience of dementia, sensory impairments and mental ill-health and ethnic minority communities.</p> <p>We are piloting different ways to engage people who use our services on an ongoing basis, outside of formal and specific consultations. This is intended to gather more qualitative feedback from people's experiences across all our services, to help us understand how well our services work for people and how they could improve.</p> <p>The Strategy and Planning Team will continue to oversee the Department's Engagement Process and Forward Plan, working with the Engagement Panel to ensure that our engagement activities</p>

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	<p>supporting Engagement Process helps staff develop and implement engagement activity, encouraging staff to seek the Engagement Panel's input. The engagement process includes principles which were co-produced with Engagement Panel members.</p>	<p>Our Engagement Forward Plan, the supporting Engagement Process and an example of an engagement plan are included in IR 35.</p>	<p>are as accessible and inclusive as possible across our diverse communities.</p> <p>We will also review the recommendations from Ideas Alliance and identify lessons from the co-production pilots, to take forward to improve our co-production practice.</p>
1.14.	<p>In line with the Council's commitment to eliminating discrimination and advancing equality of opportunity, we undertake Equality Impact Assessments (EIAs) on any decisions about changes to policy or services. Our Department Equalities Group scrutinises EIAs to ensure that possible impacts on groups with protected characteristics are identified and mitigated.</p> <p>The communities we serve are increasingly diverse and we recognise the need for our staff to understand and be confident when having conversations with people from different minority groups. We have in place policies, guidance, and training to improve awareness and knowledge about the experiences of people likely to have poorer access and experiences. We need to ensure that the guidance and training is reflected in practice so that people feel their needs are understood, they have a good experience and achieve positive outcomes.</p> <p>Our Leicestershire Learning Disability Partnership Board and 6 locality groups works</p>	<p>Examples of recent EIAs are included in IR 12.</p> <p>In 2020, the Adults and Communities Department recognised that whilst the Council had an internal Trans equality policy to support trans staff, it did not have a customer-focussed policy. Departmental working group met with trans advocates to co-produce a trans and intersex inclusion action plan, one achievement was the co-production of a Policy and Guidance on working with Trans and non-binary people.</p> <p>The Learning Disability Partnership Board is contributing to making the LD and Autism voices heard and included by the council. The group discussed their public transport experiences and issues with bus companies to bring about changes in transport. The group have also worked to improve the availability of accessible changing places.</p> <p>The group have worked with Leicestershire police to raise awareness and contribute to staff training and are working with the Community</p>	<p>We have developed our Adults and Communities Equalities Action Plan for 2023/24. This sets out our key equalities' priorities with a focus on anti-racism, mental health, disabilities, and LGBTQ+ and how they will be delivered including through events to raise awareness and consider equalities issues and opportunities. We will develop and Anti-racism strategy and work with corporate colleagues to adopt the LGA equality framework.</p> <p>We are also embarking on work to gain a better understanding of the impact of our policies and training on how our services are provided and the outcomes for people from different communities.</p>

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	together to improve things for people with learning disabilities and their carers, sharing information about services and things to do in local areas. Started in 2001 the Board includes people with learning disabilities, their carers and people from organisations in Leicestershire.	safety team regarding Keep safe places for vulnerable people.	

2A. Providing Support: Care provision, integration, and continuity

We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.

Ref. Code	What do we know about the quality and impact of social work practice?	How do we know it?	Our plans for the next 12 months to maintain or improve practice
2.1.	We have a strong understanding of local care needs and the sufficiency, opportunities, and risks within the care market. This is supported by analysis of a range of evidence sources and through engagement with residents, people who use services and providers on specific areas of strategy development and service design. Our understanding of the care market is underpinned by regular engagement with care providers through a series of provider forums.	<p>We use a range of sources to understand needs including population estimates and projections from POPPI and PANSI and local sources such as the Joint Strategic Needs Assessment (JSNA) ^[IR 14], Housing and Economic Development Needs Assessment (HEDNA), and dashboards developed using census data and demographics of people who use our services.</p> <p>Our understanding of the care market is reflected in our Market Position Statement and Market Sustainability Plan which set out information about sufficiency and diversity of supply, quality of provision, fee rate coverage, workforce, and commissioning priorities.</p>	<p>We will continue to use the information available to us to understand the needs of our communities and the local social care market.</p> <p>We aim to increase the extent to which we co-produce our commissioning plans with key stakeholders including residents, people who use our services, partners, and providers.</p>

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2.2.	<p>We encourage regular two-way dialogue between our service and care providers to share information and identify and address key risks and issues. Our Provider bulletins and forums as well as contract management and other forums provide formal and formal opportunities for discussion. We also engage with providers when reviewing services to ensure that their feedback is taken into consideration.</p>	<p>We host monthly provider forums, each focused on a particular type of care provision, and publish fortnightly provider bulletins, to keep providers up to date with the latest information which supports their services.</p> <p>An example of effective engagement of providers to inform service design is the review of the Extra Care services contract^[R1.12]. Engagement with care providers in February 2023, provided positive feedback about how we communicate with them, including that we have regular, transparent conversations and that the monthly forums are considered useful.</p>	<p>We will continue to communicate with providers through these channels to share information and identify and address any key risks affecting the care market and therefore peoples' safety and wellbeing. We will continue to engage providers when reviewing and recommissioning services as part of our wider drive to increase co-production.</p>
2.3.	<p>Robust processes for provider contract management and quality assurance are followed to support and address concerns with the quality of service delivered by commissioned providers. Our quality and contracts team build strong working relationships with our providers. Through our procurement processes and contract management we ensure that providers meet minimum safeguarding standards and ensure that their staff receive appropriate training.</p> <p>Quality assurance and contract monitoring guidance support the team to carry out their role consistently, providing assurance that services are safe and person-centred. Feedback from</p>	<p>IR 18 sets out the processes and tools we use to monitor quality of commissioned services.</p> <p>Provider engagement in February 2023 indicated that providers value the support provided by the quality and contracts team through open and transparent dialogue and their involvement when things go off-track.</p> <p>Leicestershire has a higher percentage of care homes with nursing which are rated either 'good' or 'outstanding' than both the regional and national rates; at 81% in Leicestershire in October compared to 71% East Midlands and 76% for England.</p> <p>79% of all residential care homes in Leicestershire were rated either 'good' or</p>	<p>We will continue to improve the quality of commissioned services through effective and strategic contracts management and targeted quality improvement activity. We will maintain and build strong working relationships with providers encouraging open and honest dialogue.</p> <p>We aim to further embed the feedback obtained from quality experience officers to drive on-going improvement to commissioned services to improve people's experience of care.</p>

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	<p>people receiving care is routinely used to inform contract management discussions.</p> <p>Our Provider support and Positive Behaviour Teams offer direct support to providers at to drive improvement in service delivery and improve outcomes for people in receipt of care.</p> <p>In terms of the quality of provision among service providers, Leicestershire compares favourably with the East Midlands region and England.</p>	<p>‘outstanding’ by the Care Quality Commission and above the East Midlands rate (74%).</p> <p>Similarly, a higher percentage of home care providers were rated ‘good’ or ‘outstanding’ (63%) than regionally (58%), and in line with the national average (63%).</p>	
2.4.	<p>In Leicestershire we support more people to maintain greater independence through community based support, with a smaller proportion of people in residential placements compared to similar authorities.</p> <p>Leicestershire’s residential care market is smaller per head of population than the national average. Although there is a strong self-funder market in Leicestershire and registered bed capacity in older adult care homes has been growing, Leicestershire has fewer nursing care homes than similar areas, resulting in fewer options for commissioning nursing placements. This is in part due to the low levels of NHS-Funded Nursing Care (FNC) and Continuing Healthcare (CHC) determinations by local health partners.</p> <p>Leicestershire has a diverse and growing home care sector which enables more people to have</p>	<p>In March 2021, Leicestershire had fewer residential care home beds and nursing care home beds per head of population aged 75+ than the regional and national averages. A detailed overview of Leicestershire’s care market is outlined in our Market Sustainability Plan.</p> <p>In 2022/23, the rate of permanent admissions to care homes for people aged 18-64 was 12.1 per 100,000 population, lower than the national average. The rate of permanent placements for people aged 65+ has fallen to 552.8, below the national average.</p> <p>Looking more widely at the use of permanent residential or nursing care during 2022/23, there were 71 people aged 18-64 per 100,000 population supported this way compared to an average of peer group authorities of 117 per 100,000 population. The equivalent figure in</p>	<p>We are engaging with Health partners to explore why Leicestershire has comparatively low rates of people with FNC and CHC determinations.</p> <p>The Integrated Care Board and City Council are working with us to align commissioning practice and support market sustainability. A CHC Training package is being delivered jointly with City and Health.</p> <p>Our Accommodation Review Team are reviewing people in residential care to identify if FNC would be appropriate.</p> <p>Our short-term plans aim to increase use of Extra Care, while longer term investment in Extra Care capacity is underway.</p> <p>Through our Transforming Commissioning programme, we have introduced a nursing fee rate and develop the nursing market.</p>

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	their needs met in their own home. At the end of January 2024, we commissioned homecare for over 2,700 people, an increase of 32% in 2 years; whilst having only 7 people awaiting provision.	Leicestershire for people aged 65 or over was 1,667 per 100,000 compared to a higher peer group average of 1,762 per 100,000.	
2.5.	We acknowledge the challenges providers face with recruitment and retention of staff particularly in rural areas of the county. Our 'Inspired to Care' (ITC) service has achieved success in improving recruitment and retention among the providers it works with. Inspired to Care promotes information, advice, and guidance to help providers improve their recruitment and retention practices. The service delivered an international recruitment conference for home care providers and shared an overseas recruitment toolkit. It hosted a conference on how to use social media for recruitment and provides resources on supporting staff wellbeing. The success of the annual Care Professionals of the Year awards 2023, which celebrates the work of individuals in the sector, indicates the positive impact ITC is having on the provider market. The service also has been successful in promoting caring as a career option through schools and job centres. ITC also provides training resources and job search resources to providers and individuals considering the sector.	<p>Although in 2021/22 (the latest data available), the vacancy rate across the adult social care workforce was lower in Leicestershire than the national average (at 7.5% locally compared to 10.7% in England), Leicestershire had a higher turnover rate (at 34.1% locally compared to 29% nationally). Workforce pressures are set out in detail in the Council's Market Position Statement.</p> <p>The Inspired to Care website provides access to the resources available. The Workforce Board highlight report^[R 19] sets out its achievements to date for the year.</p> <p>The Care Professionals of the Year awards recognise the outstanding work being done in the social care sector throughout Leicester and Leicestershire. In 2023, 610 nominations were received for the awards, a significant increase from the 155 nominations in 2022. The award ceremony was attended by over 270 people and watched by another 451 on Facebook live. A brief summary and photos of the event are on the Inspired to Care awards gallery, Short video available on Youtube and News article on Skills to Care website as well as articles from two local newspapers^[R2.1, R2.2].</p>	<p>We will continue to develop the Inspired to Care offer and work with providers to support the workforce. An initiative is underway with Job Centres aiming to recruit those looking for other jobs into social care roles.</p> <p>We are also working with partners to implement a system-wide induction programme across health and social care to support retention, as well as an LLR People Hub which will support enhanced career pathways between health and care.</p> <p>The Council is working with LLR partners across health and social care to scope workforce development initiatives across the system for care workers specifically focussing on career progression opportunities.</p>

2B. Providing Support: Partnerships and community

We understand our duty to collaborate and work in partnership, so our services work seamlessly for people. We share information and learning with partners and collaborate for improvement

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2.6.	<p>We are committed to working together with our partners to develop and improve our services. We collaborate effectively with partners across LLR to address risks to the market and jointly-commission services where possible.</p> <p>We work with partners from health and other local authorities to deliver joint initiatives such as the Learning Disability and Autism (LDA) Collaborative, which aims increase the number of people with a learning disability and/or autism living in a community setting rather than an inpatient setting.</p> <p>We regularly share intelligence on risk factors with other agencies such as through 'information-sharing meetings' with quality, safeguarding, and continuing care teams from the Integrated Care Board (ICB) and representatives of the three local Healthwatch organisations to review and consider a collective response to risks affecting the market. Our strong working relationship with the Care Quality Commission (CQC), are supported by regular operational meetings and CQC participation in multi-disciplinary meetings relating to providers in escalation.</p>	<p>The Agreement on Sharing Information on Regulated Social Care Organisations provides an overview of the regular information-sharing meetings.</p> <p style="font-size: 48px; opacity: 0.3; font-weight: normal;">DRAFT</p>	<p>We will continue to work with partners to deliver the LDA Collaborative Programme, including for example work to ensure all people in LLR with a learning disability receive an annual health check.</p> <p>We will explore opportunities for the Council's adult social care services to work more closely with, and make better use of, the universal services provided by its Public Health Department and local VCSE sector organisations.</p>
2.7.	<p>One of our key partnerships is our Home First Services. The service works closely with NHS partners to respond to people in crisis and prevent hospital admission, to support hospital discharge, and help people regain</p>	<p>An overview of the Home First Service is included in IR 8.</p> <p>Row 1.9 above, show the effectiveness of the HART service in delivering excellent outcomes for</p>	<p>Development of the Intake model will strengthen the partnership working arrangements and enable more people to be supported to regain their independence and achieve positive outcomes.</p>

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	independence. The service comprises the Discharge hub which works closely with Leicester's hospitals to triage and co-ordinate discharge arrangements. HART works with NHS rehabilitation and recovery services to support people's recovery and to regain independence.	people through the Home First partnership structure.	
2.8.	Joint-commissioning across LLR is facilitated by established infrastructure including system-wide partnership forums such as; Home First, Mental Health, and LD and Autism collaboratives and strategic partnerships such as Health and Wellbeing Board and Integration Executive. A Joint Commissioning Group (JCG) provides a strategic lead for our programme of joint commissioning between the Council and ICB. The Council jointly commissions services across LLR with partners in Leicester City, Rutland and the ICB, including carers services, dementia services and mental health and wellbeing services.	<p>The Health and Wellbeing Board, committee details its purpose and membership. The Joint Commissioning Group (JCG), terms of reference and workplan^[IR 22] outlines the group remit and commissioning activity it oversees.</p> <p>The LLR Living Well with Dementia Strategy 2019-2022 sets out the ambition across LLR to support people to live well with dementia, and the LLR Carers Strategy (2022-25) sets out shared priorities to recognise, value, and support carers.</p> <p>The LLR Mental Health Wellbeing and Recovery Support Service will invest £1m per year over the next 5 years to provide advice and support for people's emotional and mental health.</p>	We will continue our efforts to develop stronger joint working arrangements and relationships at all levels of the organisation, from the senior strategic level through to our operational teams. We recognise this an on-going process with some aspects of partnership working being more mature than others. Our recent staff survey indicated that staff felt collaboration with partners could improve through more regular communication and MDT meetings, joint-training and by more clearly defining and raising awareness of each partner agency's roles.

3A. Ensuring Safety: Safe systems, pathways, and transitions

We work with people and our partners to establish and maintain safe systems of care, in which safety is managed, monitored, and assured. We ensure continuity of care, including when people move between different services

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3.1.	<p>Our Young Adult Disabilities (YAD) team works effectively in partnership with Children's services to support young people with eligible needs as they move into adult services. We work with children's teams to identify young people early and start the planning and preparation needed to ensure a smooth experience for young people as they transition to adult's services. Our aim is to start supporting young people as they turn 17, to make choices to achieve the best possible outcomes for more independent living as an adult.</p>	<p>IR 24 includes our Preparing for Adulthood strategy and pathways/processes.</p> <p>As of December 2023, the average age at allocation was 17.48, (target 17), young people wait 12 weeks from allocation to assessment, (target 8 weeks).</p> <p>A recent case story^[R3.1] demonstrates how the team successfully worked with a young person with a diagnosis of autism, ADHD, and dyslexia to prepare them for starting university.</p>	<p>Working with our colleagues in Children and Family Services and others we will review our systems and processes and people's experiences. We will consider how we can work together to support early planning and preparation which will improve outcomes for young people and ensure best value for the Council. This includes ensuring that assessments, and joint reviews of ECHPs, are undertaken in a timely manner.</p>
3.2.	<p>Our Home First service works closely with health services to provide seamless support to people when they are discharged from hospital. We take an MDT approach to assess referrals from the main Leicester hospitals, community and acute out of county hospitals. We identify and co-ordinate the person's support, prioritising independence through appropriate reablement and rehabilitation. Our Brokerage team ensure the right care is in place when required, sourcing care packages from contracted providers or other specialist services. Arrangements are in place for the Council to commission D2A and home care services on behalf of health.</p> <p>Our Crisis Response Service refers older people with mental health conditions or probable dementia to the Unscheduled Care Hub, where they are seen by an appropriate team to address</p>	<p>At the end of December 2023; 55% of people discharged received reablement, 8% received short-term residential (DTA) services, while 16% received home care or other community services, 3% residential and 17% received no services.</p> <p>Seven requests for home care were awaiting a PoC start date, the average duration for a request to be fulfilled was 4 days.</p> <p>In 2022, the Shared Care Panel reviewed 90 cases. From January to December 2023, the Panel has reviewed 184 Cases, indicating that more cases require escalation of the funding decision.</p>	<p>Our Home First Discharge Hub will continue to support peoples discharge from hospital, working with our colleagues in health to co-ordinate services which facilitate a seamless transfer.</p> <p>We recognise that too many people are discharged on Pathway 2 (D2A) and we are working with our health partners to ensure more people are discharged to their own home with appropriate support. We are embedding a new Discharge to Assess 7-day review approach across Home First services and enhancing our brokerage offer to support timely discharge. As outlined under Quality Statement 1B, we are working with NHS partners to develop an intake model to increase the number of people who receive intermediate care and reablement services on discharge from hospital.</p>

3A. Ensuring Safety: Safe systems, pathways, and transitions

We work with people and our partners to establish and maintain safe systems of care, in which safety is managed, monitored, and assured. We ensure continuity of care, including when people move between different services

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	<p>their needs. This helps to support people in the community and avoid admission to hospital.</p> <p>With local authority and health partners across LLR, we developed and implemented a LLR Framework for Integrated Personalised Care (LLR FIPC). This supports delivery of person-centred care by enabling appropriately trained social care staff to undertake delegated health care tasks and vice versa. It builds on best practice and takes an MDT approach to support planning. Where an MDT cannot reach a consensus, cases are escalated to a Shared Care Panel, with interim support provided for the person.</p>	<p>DRAFT</p>	
3.3.	<p>We effectively manage the risk of provider failure through our robust contract management, quality assurance and provider failure processes. Our Quality and Contracts team build good working relationships with our providers supporting early identification of the risk of failure. Providers are required to have business continuity plans in place and support is provided to ensure they are robust.</p> <p>Information about risks associated with providers is shared with appropriate partners including the CQC.</p> <p>We effectively manage provider failure to minimise the impact on peoples' safety. We</p>	<p>IR 25 contains processes procedures and tools we use to manage provider failure and disruptions to services</p> <p>Established processes and reporting are in place to manage provider failures and ensure the impact on individuals receiving these services is well managed and their safety is maintained. A recent Case Study^[R3.2] shows how we effectively responded to a provider failure and identified lessons to inform future practice.</p> <p>During engagement from November 2022-January 2023, 81% of staff agreed that we respond to unplanned events and emergencies (e.g. provider closure) to minimise risks to</p>	<p>We will continue to promote an 'open door' policy to encourage providers who are experiencing financial instability to approach the Council for a confidential exploration of their circumstances, with appropriate support provided where necessary.</p> <p>We will continue to follow established processes to manage provider instability and failure to ensure we provide a consistent and efficient response. We will ensure that each occurrence triggers a 'lessons learned' exercise and that this is used to iterate our procedures.</p> <p>In 2024 we will undertake an emergency planning business continuity exercise to test our</p>

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	<p>communicate with the provider as early as possible to develop plans to manage the risks to individuals receiving care and care workers. Communication with people using the service and their families is also undertaken to ensure they understand what we are doing to ensure their care services will continue. Lessons Learned exercises are used to develop and refine our approach to provider failure. As well as commissioned services, we also manage instability and failure relating to direct payment or self-funder services.</p>	<p>peoples' safety and wellbeing. Similarly, provider engagement in February 2023 suggested that providers value the open and transparent dialogue with the Council, support from its compliance officers, and its involvement when things go off-track.</p>	<p>resilience to a large scale / multiple provider failure</p>
3.4.	<p>We are committed to ensuring Deprivation of Liberty Safeguards are completed in a timely way, effectively managing our referrals to reduce waiting times for assessment. Our Deprivation of Liberty Safeguards Service's best interest assessors work with people whose liberty is restricted, to recommend changes to their care enabling the person to have as much freedom as possible while staying safe. We received a significantly larger number of applications in 2022/23 than the England average, however we are making significant progress to complete applications and reduce the waiting list.</p>	<p>In 2022/23, we received 6,150 DoLS applications, 69% of which were urgent. We completed 6,460 applications, of which 43% were granted.</p> <p>Leicestershire received 1,003 applications per 100,000 adults, compared to the England average of 664. We completed 1,052 applications per 100,000 adults, compared to the England average of 638 achieving a higher completion rate than peers and regional authorities.</p> <p>At the end of 2022/23, 860 applications were not complete, a significant improvement on previous years and better than peers and regional LAs.</p> <p>Our 2023/24 Quarter 3 LIN report^[R3.3] shows 2,240 live DoLS in place. 5,065 referrals received, and 5,089 referrals signed off, we have 743 referrals waiting allocation.</p>	<p>We are continuing to address the waiting list for the service to ensure people's freedom and safety are maintained in their care setting.</p>

3B. Ensuring Safety: Safeguarding

We work with people to understand what being safe means to them and work with our partners to develop the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm, and neglect. We make sure we share concerns quickly and appropriately.

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3.5.	<p>In Leicestershire we are committed to keeping people safe from abuse and neglect, taking the approach that Safeguarding is everyone's responsibility and support our staff to recognise and report any concerns.</p> <p>To support staff to effectively investigate and respond to concerns about people's safety, staff use the LRSAB policies and procedures, alongside internal policies.</p> <p>Our learning and development courses also provide staff with knowledge and guidance to effectively report and investigate safeguarding concerns.</p> <p>Systems are in place to alert our Contracts and Quality team of safeguarding concerns involving managed provider services. Concerns are assessed to determine proportionate and appropriate action.</p>	<p>IR 28 includes the processes and guidance we use to manage safeguarding concerns and enquiries, along with our quality assurance processes.</p> <p>The Council's Safeguarding Adult Assurance Framework (SAAF) Audit 2023 ^[IR28] provides an assessment of the effectiveness of safeguarding governance and practice.</p> <p>As of 31st December 2023, completion rates for the staff who require safeguarding training are: Safeguarding Adults Digital Core Learning; 20%. Safeguarding Core Webinar; 47%, VARM training; 53%.</p> <p>Our survey indicated that 78% of staff agreed that the Council has a positive culture which focuses on learning and promotes opportunities to improve understanding of safeguarding.</p>	<p>We will continue to monitor and audit our safeguarding practice and undertake actions as necessary to ensure we maintain and improve the quality of our safeguarding practice</p> <p>We are taking steps to ensure more staff complete our safeguarding training courses to and ensure they are equipped to carry out their role effectively. One way we do this is through our Manager's Training Toolkit^[IR 36] which supports managers to ensure individual staff complete the learning required for their roles.</p> <p>Through our quality assurance processes we will continue to identify any training requirements and address these by working with the Council's Learning and Development Service to develop the training offer.</p> <p>To support staff, we are piloting MCA assessment group training and discussion sessions with teams. If successful, this approach will be used for other training where appropriate.</p>
3.6.	<p>Across Leicester, Leicestershire and Rutland (LLR) we benefit from strong, well-established partnership governance arrangements which oversee a multi-agency approach to safeguarding. The two Safeguarding Adults Boards in LLR (Leicester City (LSAB) and</p>	<p>IR 26 contains links to the LRSAB's strategic plan and annual report.</p> <p>The LRSAB's priorities for safeguarding, outlined in its Joint Strategic Plan (2020-25), align with the Council's priorities for adult social care</p>	<p>We will continue to work with partners on the LRSAB to address the key priorities in its Joint Strategic Plan (2020-25) and Business Plan for 2023-25 which focusses on raising awareness of self-neglect, improved guidance and access to resources that enable practitioners to support</p>

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	<p>Leicestershire and Rutland (LRSAB)), meet jointly, which strengthens collaboration and oversight of safeguarding adults across LLR. All partners are committed to the SAB and regularly attend meetings. The LRSAB works closely with Leicestershire's Community Safety Partnerships (SCPs) and the Leicestershire Safer Communities Strategy Board which coordinates delivery of safer communities' objectives in the county. Joint meetings with the Safeguarding Children Partnerships (SCPs) consider cross cutting issues such as Transitional Safeguarding.</p> <p>The Adults and Communities Safeguarding Adults Governance Group sets its strategic priorities in relation to safeguarding practices and processes within LCC. Robust links between the SAB and the Safeguarding Adults Governance Group ensure that safeguarding policies and procedures are consistent with LRSAB priorities.</p>	<p>including, strengthening engagement with people, understanding and identifying the barriers faced by diverse communities, ensuring effective joint-working to safeguard adults, and supporting prevention of harm and abuse.</p> <p>Our Safeguarding Governance group action plan^[IR 39] outlines the actions currently underway to improve our safeguarding practice.</p> <p style="text-align: center; font-size: 48px; opacity: 0.5;">DRAFT</p>	<p>people who self-neglect. Improve awareness and use of the Mental Capacity Act and assessment to safeguard people, and review how agencies work together to identify and respond to domestic abuse in older people and develop plans to address any issues that are identified.</p>
3.7.	<p>Learning from Safeguarding Adults Reviews (SARs) is used effectively along with the findings from regular case audits and thematic audits to develop safeguarding policies, procedures, training, and guidance.</p> <p>Learning from SARs is promoted through channels including the LLR SAB website, Safeguarding Matters Newsletter, 7-minute briefings and Safeguarding Matters Live</p>	<p>IR 27 includes the SARs, learning and action plans covering the past 24 months. There are currently five SARs in progress and two completed, awaiting publication.</p> <p>SARs and audits have led to development of training courses such as 'having difficult conversations' and 'professional curiosity.'</p>	<p>We will continue to learn from SARs, and annual and thematic audits, taking action to improve safeguarding practice.</p>

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	sessions. Our care pathway newsletters and lead practitioner briefings also include learning from SARs to improve safeguarding practice.	Feedback from our staff is highly positive, with 80% of staff survey respondents agreeing that the Council uses SARs to identify failings, learn lessons and take action to drive best practice.	
3.8.	Whilst we strive to ensure that all people who use our services feel safe and are protected from harm and abuse, the national ASC survey, shows Leicestershire performs below comparators in terms of the percentages of people who reported feeling safe. However, the ASC survey and our pilot survey suggest majority of people feel our services make them feel safe.	65% of people responding to the 2022-23 ASC survey stated they feel safe. 85% people stated that services have helped them to feel safe and secure, which is in line with the national average. Over 90% of people responding to our pilot survey stated that our services made them feel safe.	Many factors influence how safe people feel in their communities, some of which are not influenced by social care services, however we will undertake further engagement with people who use our services to understand why they may not feel safe and identify how our services could help them feel safer. We will continue to support the council's strategic safe and well outcomes to ensure that people are safe and protected from harm,
3.9.	We work closely with people to ensure they participate as much as they wish to in Safeguarding enquiries, using the Making Safeguarding Personal (MSP) approach. Clear guidance is in place to support use of the MSP principles, with regular training, advice, and support provided through lead practitioner briefings. Managers use the 'Signs of Safety' approach (a strengths-based and collaborative approach to managing risk) during safeguarding meetings, which supports the MSP approach.	During 2021/22, 68% of people in Leicestershire were asked for and expressed their desired outcomes. During the same period, 93% of people in Leicestershire who expressed their desired outcome(s) stated that their outcomes were fully or partially achieved. As of December 2023, the percentage of people asked their desired outcomes had increased to 73%, a trend of improvement over the past year. The percentage who achieved their desired outcomes remained high at 95%.	To further embed a consistent, person-centred approach throughout safeguarding practices, the Department will provide further training and support on the MSP principles and continuously review the extent to which a person-centred approach is being applied and identify opportunities to enhance this.

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3.10.	<p>Safeguarding alerts are investigated promptly with actions taken to address immediate risks within agreed timescales. Alerts meeting the safeguarding threshold are sent immediately to the appropriate worker for an enquiry to be opened. If the threshold is not met, the concern may be routed through the Vulnerable Adults Risk Management (VARM) or case management process as appropriate. An audit carried out to ensure thresholds are applied appropriately has resulted in a change to staff guidance to ensure S42 enquiries are started as needed.</p> <p>Our conversion rate has been considerably lower than the national average, this was due to a change in 2018, which counted concerns for welfare as safeguarding alerts, resulting in an increase in the number of alerts but no corresponding increase in the number of S42 enquiries. This has been addressed in our systems and now concerns for welfare and safeguarding are recorded separately.</p>	<p>During the first three quarters of 2023-24 LCC received 1,273 safeguarding alerts and started 543 safeguarding enquiries, a conversion rate of 43%, higher than the latest known national rate (2022-23) of 32%.</p> <p>Risks to the individual were removed in 30% of enquiries while risks were reduced in a further 52% of enquiries.</p> <p>Current reporting shows, 43% of alerts had been open for up to 4 weeks (with 27% open for up to 2-4 weeks) and 24% had been open for over 3 months. 31% of enquiries had been open for less than 6 weeks, with 37% open for up to 3 months, 10% for 6-12 months and 10% open for over 12 months.</p>	<p>We will continue to investigate safeguarding concerns promptly and consistently. We will check that our updated our processes are followed to ensure concerns are investigated and recorded appropriately, through Safeguarding, VARM or other appropriate pathways. Cases will be monitored to ensure thresholds are applied and processes followed correctly.</p> <p>TOM quality and performance reporting now includes measures to support timely closure of safeguarding enquiries, this will provide us with greater oversight and improve our understanding of why enquiries may be open for longer periods of time.</p>

4A. Leadership: Governance, management and sustainability

We have clear responsibilities, roles, systems of accountability and good governance to manage and deliver good quality, sustainable care, treatment, and support. We act on the best information about risk, performance and outcomes, and we share this securely with others when appropriate

Ref. code	What do we know about the quality and impact of social work practice	How do we know it?	Our plans for the next 12 months to maintain or improve practice
4.1.	<p>Adult Social Care sits within the Adults and Communities Department alongside Adult Learning services, and Library and Heritage services, all playing key roles in supporting people's wellbeing across Leicestershire.</p> <p>The current management structure was implemented in 2022 following an establishment review, with experienced leaders continuing in senior roles. The leadership team are supported by experienced heads of service and strategic service managers. Our corporate and political leadership structures are well established with stable leadership in place, creating a sound basis for clear strategic and operational management and decision making.</p> <p>Regular communication between senior management and staff ensures information is shared through a variety of channels and gives staff an opportunity to ask questions and provide feedback.</p>	<p>Our organisational structure charts and information about our teams are in IR 37.</p> <p>Examples of our communications channels include:</p> <ul style="list-style-type: none"> • Care Pathway Update newsletter • Staff Briefings (virtual & in person) • A&C Staff News Intranet Page • Service and Team level meetings <p style="text-align: center; font-size: 2em; opacity: 0.5;">DRAFT</p>	<p>We expect to maintain stability within the current senior leadership team, any change will be managed within the wider context of stability within the departmental and council leadership team.</p> <p>In response to staff feedback, we are developing our internal communications to better meet the needs of staff, ensuring they are well informed and have opportunities to provide feedback. We will also address staff perceptions suggesting the visibility of senior leaders could improve. Our Director and Assistant Directors will continue to meet with staff through a variety of forums, including our DMT Roadshow and our Assistant Directors will continue to attend service meetings and lead staff briefings.</p>
4.2.	<p>Adult Social care leaders have a clear vision to deliver care and support for people in Leicestershire. Our adult social care strategy 'Delivering Wellbeing and Opportunity in Leicestershire' defines our approach to deliver social care, focussed on our model to prevent, delay, reduce and meet needs. Our key aims are to ensure people receive appropriate support and remain independent in their lives.</p>	<p>A link to our Delivering Wellbeing and Opportunity in Leicestershire strategy, and current business plans are included in IR 30. The business plans detail how each service supports delivery of our social care strategy and the outcomes within the Council's Strategic Plan (2022-26).</p>	<p>Our adult social care strategy will be refreshed for 2025-2029 to ensure services continue to meet the needs of people in Leicestershire building on our person centred and strengths-based approach. The refreshed strategy will also align with and contribute to achieving the Councils priorities for Leicestershire.</p>

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	Department and Service business plans are refreshed annually to support delivery of services outlined in the strategy while responding to new opportunities.		Delivery of our department and service plans is monitored through departmental governance channels and reported to the councils Outcomes Boards on a regular basis.
4.3.	<p>Robust financial governance supports management of the financial challenges facing the service, from reduced budgets and increased cost and demand for services. The Council's Medium-Term Financial Strategy (MTFS) is refreshed annually setting out our 4-year financial plans.</p> <p>We work closely with our corporate finance business partner team to forecast budgets, based on growth predictions and inflationary pressures. Regular financial reporting is considered by DMT and presented to corporate and political governance groups.</p> <p>A Fair Outcomes Panel has been introduced to ensure costs of new and increased care packages achieve best value for the council, while ensuring peoples can achieve the most independent outcomes.</p> <p>Potential opportunities to deliver services more efficiently are identified both within the department and corporately. Implementation of larger or cross-cutting initiatives is carried out with the change expertise of our corporate transformation team.</p>	<p>The Council's Medium-Term Financial Strategy 2023/24 - 2026/27 shows its overall spend on adult social care has risen from 36% to 39% of net budget.</p> <p>The Councils 'Fair Funding' Webpage highlights that LCC is the lowest-funded county council in the UK and our call for change.</p> <p>Our staff survey provided positive feedback about financial management; 73% agreed that the Council has effective budget oversight, accountability and governance and assesses the impact of any budget reductions on statutory duties.</p>	<p>We will continue to adopt prudent financial management and controls to ensure that we manage our extremely challenging financial position while delivering statutory duties and our strategic priorities.</p> <p>We shall continue to work within the department and with corporate colleagues to identify and deliver initiatives that support more efficient ways to deliver adult social care services.</p>

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4.4.	<p>Well-established arrangements are in place to monitor the performance and quality and risks to service delivery.</p> <p>The department management team (DMT) meets weekly to consider strategic and operational matters including, performance, budgets, and risk. Reports are considered at quarterly Adults and Communities Overview and Scrutiny Committee meetings, which has oversight of adult social care duties and functions.</p> <p>The Adult Social Care risk register^[IR 32] is reviewed regularly by the DMT. Risks which meet the corporate threshold are included in the Corporate Risk Register and reviewed by the Corporate Governance Committee.</p> <p>Our Corporate Business intelligence service support performance reporting through development of a suite of Tableau dashboards, and regular performance reports. DMT and overview and scrutiny committee review performance reports on a regular basis. Operational dashboards introduced through TOM support continuous service improvement. Performance data and outcome measures are reviewed by heads of service each week any emerging challenges are identified and action is taken to address concerns.</p>	<p>DMT meetings, held each week, focussing on Finance & Performance, Transformation, strategic decision making, plus a Senior leadership team meeting. The purpose of each meeting is outlined in A&C Management and communications structure ^[IR 31].</p> <p>Adults and Communities O&S Committee Meetings and YouTube Channel. Recent reports to the committee include an update on Implementation of the LLR Carers strategy, Joint living well with dementia strategy, Market sustainability and improvement fund, the LLR SAB annual report, and Managing Demand in Adult Social Care.</p> <p>The Corporate Governance Committee meets every two months, the most recent papers are available on our website: Risk Management Update Nov 2023 and Corporate Risk Register Nov 2023.</p> <p>An Annual Delivery Report sets out overall performance each year.</p> <p>Use of the Adults and Communities operational and performance Tableau dashboards remains high with over 400 individual staff members making around 9,500 views per month on average during 2023.</p>	<p>We will continue DMT and SLT meetings to monitor performance and risks, maintaining strong links and regular and open communication with the Lead member and Scrutiny Committee, ensuring full oversight of delivery of adult social care services.</p> <p>We shall continue to monitor and update and review our risk register in line with our corporate risk management process. We will learn from and share good practice through the corporate 'risk champions' network.</p> <p>We will continue to embed a data driven approach to monitoring and managing service performance, ensuring staff at all levels understand the need for accurate and consistent recording to improve evidence-based decision making. We will work with our business intelligence team to refine and develop our Tableau performance reports. We shall continue to make effective use of data and insights from services through our Improvement Cycle processes to inform continuous service improvement.</p>

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4.5.	<p>The Council has a strong commitment to eliminating discrimination, advancing equality of opportunity, and fostering positive relations in its communities. The Equalities Strategy supports this commitments and includes priority actions, such as working with partners to increase community cohesion, tackle hate crime and ensuring that services are accessible and inclusive.</p> <p>Adults and Communities has its own Equalities Group (DEG) which develops and delivers our action plan. The DEG also reviews Equality Impact Assessments to ensure any impacts of service developments are identified and mitigated.</p> <p>Staff worker groups (Disabled Workers Group, LGBT+ Staff Network, Diversity Champions Network, and the Black, Asian and Multi-Ethnic Network) provide opportunities for officers who share protected characteristics to discuss issues, promote development, and offer moral support and guidance.</p> <p>There is a strong learning and development offer for staff around EDI, with high training completion rates in the Department.</p>	<p>IR 12 contains documents that outline the council's commitment to Equality, Diversity and Inclusion.</p> <p>The Leicestershire Communities Webpage 'Leicestershire Equalities Challenge Group': Includes terms of reference, meeting documents and newsletters. Examples of staff guidance and tools in place to support equalities, diversity, and inclusion include:</p> <ul style="list-style-type: none"> • Equality Impact Assessments^[IR 12] • Support with Hate Crime and Incidents^[R4.1] • Menopause Support^[R4.2] <p>Council Webpage An Inclusive Workplace summarises the Council's equalities commitments and accreditations.</p> <ul style="list-style-type: none"> • Stonewall Top 100 Employers Index • Disability Confident Employer • British Sign Language Charter • Race at Work Charter • An LGA Case Study How Leicestershire County Council is becoming menopause friendly (October 2022): Sets out how the Council won the Best Trained Workplace award and was a finalist in the Menopause Friendly Employer of the Year award and Best Trained Workforce. <p>The training available to staff includes 'Promoting Fairness & Respect' (86% completion rate in the</p>	<p>A revised LCC Equalities Strategy and plan will be developed, led by the Corporate policy team.</p> <p>Our Department Equalities Group (DEG) will continue to develop and deliver our departmental Equalities Action Plan^[IR 12], identifying actions to further equality and diversity in our workforce and our services. This includes a focus on raising staff awareness about the DEG, equalities priorities and providing resources to support consideration of equalities issues at service and team level.</p> <p>We are developing a Race strategy, and delivering anti-racism training to staff.</p> <p>We shall also work with our corporate colleagues to adopt the LGA Equality Framework for Local Government</p> <p>Considering how we can use data to develop robust reporting to show change in equality of experience and outcomes for people.</p> <p>We will also increase uptake of training in areas of 'Managing Disabled Staff,' and 'Menopause Awareness' which only 1/3 staff have completed.</p> <p>Guidance has been created for Care Pathway Managers to support them to ensure their teams complete mandatory training on a rolling basis, to</p>

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		<p>Department, increasing from 71% in January 2023), Managing Diversity, Equality and Respect' module (remains at 76%) and 'Unconscious Bias' training, which is completed by all ASC managers.</p> <p>75% of our staff survey respondents agreed that equalities and diversity are embedded throughout the Council and the Department. This is considered a strong area by staff, although workshop comments suggest that greater awareness and engagement with the work of the Departmental Equalities Group would help to embed the principles more consistently.</p> <p>Staff Survey results indicate that disabled staff are less satisfied than average and feel less able to speak up and challenge.</p>	<p>be monitored in supervision sessions. Departmental dashboards have been developed to assist managers to track completion of training within their teams.</p> <p>The Council's Disability Task and Finish Group has developed an action plan to improve disabled staff representation and development.</p>

4B. Leadership: Learning, improvement, and innovation

We focus on continuous learning, innovation and improvement across our organisation and the system. We encourage creative ways of delivering equality of experience, outcome, and quality of life for people. We actively contribute to safe, effective practice and research

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4.6.	Adults and Communities has a strong focus on continuous professional development which supports our workforce and delivery of high-quality services. Working with our corporate	Engagement of Community Support Workers led to a revised model, whereby new CSWs commence as trainees on Grade 8, progressing to Grade 9 following completion of a diploma in Social Care. A Grade 10 Senior CSW role was introduced to reflect the responsibilities and case	We will continue to embed our quality assurance processes, including by raising staff awareness about them, to identify and act on any opportunities for improvement. We will continue to explore opportunities to enhance the personal development of our staff to ensure that they are

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We focus on continuous learning, innovation and improvement across our organisation and the system. We encourage creative ways of delivering equality of experience, outcome, and quality of life for people. We actively contribute to safe, effective practice and research

Ref. code	What do we know about the quality and impact of social work practice?	How do we know it?	Our plans for the next 12 months to maintain or improve practice
	<p>Learning and Development team, we offer a wide range of training and development opportunities.</p> <p>We offer several schemes which provide development opportunities:</p> <ul style="list-style-type: none"> • Step up into social work, a degree apprenticeship for existing staff • ASYE (Assessed and supported year in employment) programme, for newly qualified social workers • Best Interest Assessor and Approved Mental Health Professional training, for level 2 qualified social workers. • Trainee Community Support worker programme provides mentoring to support learning and developing into the CSW role. <p>Managers also follow the corporate Annual Performance Review (APR) process and Supervision Policy to support and develop staff, with guidance available for managers to support performance management^[R36].</p>	<p>complexity managed by senior CSWs, and their role in inducting, mentoring, and overseeing trainees. 47 CSW trainees are currently being supported to undertake the diploma in social care</p> <p>Two cohorts have graduated the social work apprenticeship scheme, 15 of our CSW's are now registered with social work England.</p> <p>Learning and Development Adults and Communities Delivery Plan 2023-24^[R 36].</p> <p>The overall completion rate for mandatory training^[R4.3] increased from 55% in January 2023 to 81% at the end of December 2023.</p>	<p>able to develop further competencies and fulfil their aspirations. Introduction of a new Transfer policy^[R4.4] will enable workers to apply for equivalent roles in other teams, through a shortened selection process giving them an opportunity to broaden their experience.</p>
4.7.	<p>We seek to innovate and develop new ways of working, learning from others to deliver service improvement. This is demonstrated through service transformations such as implementation of TOM in partnership with Newton Europe, digitalisation of services and increased deployment of assistive technology in partnership with Hampshire County Council, and</p>	<p>75% of the Department's staff agreed in response to the staff survey from November 2022-January 2023 that 'innovation and new ways of working are encouraged', 72% agreed that 'there is a strong focus on continuous learning and improvement', and 68% agreed that the Council participates in sector-led improvement.</p>	<p>We continue to work with partners to deliver change such as the Regional and national work to improve waiting (IMPACT).</p> <p>Priority actions identified through recent Peer Reviews and the Annual conversation are being delivered through our service plans and other initiatives.</p>

4B. Leadership: Learning, improvement, and innovation

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Ref. code	What do we know about the quality and impact of social work practice?	How do we know it?	Our plans for the next 12 months to maintain or improve practice
	<p>the 3 Conversations approach with Partners4Change.</p> <p>Sector-led improvement plays a role in our learning and innovation. We work with partners through East Midlands Association of Directors of Adult Social Services (EM ADASS) forums. We also participate in peer review processes including the EM ADASS Annual Conversation.</p> <p>Our peer review in 2022 examined how effectively our information advice and guidance provision contributed to our aims to promote wellbeing and independence. The findings and associated action plan were reported to Overview and Scrutiny Committee.</p> <p>The Annual Conversation 2023, supported preparations for CQC assessment. Findings from the Annual conversation were incorporated in our Improvement plan and reported to the Overview and Scrutiny committee.</p>	<p>TOM Brochure^[R 1.1] outlines the achievements delivered through implementation.</p> <p>This LGA Case Study outlines the Council's digitalisation partnership with Hampshire County Council.</p> <p>The Council leads and chairs several regional development forums including the regional IMPACT project, the CHC network, and the care markets network.</p> <p>The Department Improvement Plan^[R30] includes projects that are currently in delivery. Progress with these projects is reported through the appropriate governance route, while overall progress with the Improvement Plan is monitored and reported to DMT and Scrutiny committee on a regular basis.</p>	<p>We will continue to participate in the EM ADASS SLI process to learn from good practice and drive improvement activity.</p>
4.8.	<p>We have taken steps to increase the extent to which we engage with people and learn from people's experience of services through surveys, specific engagement activity and complaints. We are also developing our co-production activity, involving members of our engagement panel and seeking external support to enhance our capability to co-produce effectively.</p>	<p>In addition to the annual Adult Social Care Survey (ASCS) and the biennial Survey of Carers in England (SACE), we also use the following methods to seek feedback from people; Our Engagement Panel, Continuous Satisfaction Monitoring survey, and pilot Survey of people who use services through our annual reviews, as well as feedback from the 3 Conversations pilots.</p>	<p>We intend to test different methods to obtain people's feedback to ensure the quality and quantity of feedback provides strong evidence to inform planning and decision making. We will further develop our processes to critically assess the feedback received and use the learning in service planning to deliver improvements to our services.</p>

4B. Leadership: Learning, improvement, and innovation

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Ref. code	What do we know about the quality and impact of social work practice?	How do we know it?	Our plans for the next 12 months to maintain or improve practice
		<p>We are testing a new telephone survey carried out during practice development cycles.</p> <p>An example of recent engagement and consultation for a specific piece of work is our engagement for Dementia Strategy^[R30 and R4.5].</p>	
4.9.	<p>We are committed to supporting the wellbeing and resilience of our staff, through a range of resources available and manager support. As a Mindful Employer, the Council provides and promotes wellbeing support information, resources and training for staff and managers. Our Learning and Development team provides Mental Health First Aid training to develop a network of Mental Health First Aiders (MHFAs) who can support colleagues' wellbeing.</p> <p>The Council also provides in-house counselling with trained wellbeing advisors, these are available to all staff, including managers and MHFAs who have a concern about a staff member's wellbeing.</p> <p>The Council also offers tailored support to employees with caring responsibilities, including flexible working, 'carers in employment charter' and emergency unplanned leave arrangements and informal support via the Working Carers Group.</p>	<p>The Council's Mindful Employer Charter Review Form (June 2022)^[R4.6] demonstrates our commitment to the Charter and our plans to improve further.</p> <p>In the 2023 Staff Survey, 57% of Adults and Communities staff stated that they feel stress does not affect their performance (lower than the Council average of 61%). The proportion of Adults and Communities staff who stated that they felt their work-life balance was right, was 77% compared to 80% across the Council.</p> <p>The Council Employee Wellbeing Service provides a range of services which support wellbeing. Services are promoted through regular wellbeing bulletins and 'Support with Mental Health'^[R4.7] intranet pages.</p> <p>The 2023 Staff survey indicates 94% of Adults and Communities staff know how to access the wellbeing services. For A&C staff in 2022/23, 50 new referrals were made to the staff counselling service, and 541 counselling sessions were</p>	<p>The Department will seek to improve staff wellbeing by promoting the wellbeing support available and encouraging managers to maintain frequent communication with their teams. Development of trauma informed practice will further support staff to manage their wellbeing.</p> <p>The Corporate Wellbeing Plan for 2023/24 is being finalised and A&C leads are being identified to support promotion and engagement in delivering the Plan.</p>

4B. Leadership: Learning, improvement, and innovation

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Ref. code	What do we know about the quality and impact of social work practice?	How do we know it?	Our plans for the next 12 months to maintain or improve practice
		<p>delivered. Data for 2023/24 Q1 shows an increase in new referrals (18 compared to 10 in 22/23) which suggests promotion of the service may be increasing uptake.</p> <p>From 2013 to the end of September 2023, 152 A&C staff have attended the MHFA 2-day course, with 19 staff completing the course in 2023. Between 2016 and the end of September 2023 the MHFA Awareness course was attended by 106 A&C staff, with 11 staff completing the course in 2023.</p>	

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ASC Department Improvement Plan 2023-24
Updated: 29 January 2024

CQC theme(s)	Actions	Lead(s) & (Governance)	Due Date	Progress Rating	Progress and comments
Working with People	Access to Information, Advice, and Support Website: Review and simplify layout and content Printed Information Pack Service Directory ASC Intranet: Review and development	Steve Pugh (ASC front door project board / Demand Management)	Mar-24	Green	Website: 5 new videos drafted, to be finalised with input from Engagement panel. Comms led audit 44 pages updated, 38 remaining, usage stats will inform changes. Information pack: Ideas Alliance presented feedback, further development work on the new pack starting Feb to finalise content. Service directory: Automation of maintenance in final development stages Intranet: 22 pages reviewed, 9 in progress, 8 to do.
Working with People	CSC Review CSC operating model 3 Conversations approach Signposting resources	Steve Pugh (ASC front door project board / Demand Management)	Mar-24	Green	Focus on implementing technology to direct people who have allocated workers to a search facility to get the allocated worker details/text people with the details - 35-40% of CSC calls are because they need to contact their worker... i.e CSC is just message taking/passing
Working with People Ensuring Safety Leadership	Finance Pathway Improvement programme Performance and process improvement Digitisation of the pathway Client billing improvements.	Steve Pugh Renata Chantrill (FPIP Board)	Mar-24	Amber	7 workstreams. FPIP workshop to take place to re-baseline deliverables and priorities at end Jan. DMT agreed recommendation to move A&D customers to individual accounts. Recovery - focus on backlog reduction, new process guidance, TOM model. E-billing pilot to BAU. Handover - tasks identified. Long outstanding appeals now being processed.
Working with People, Providing Support	Transforming Commissioning Programme Direct Payments (PA) Nursing Care Beds Extra Care provision	Kate Revell Scott Gunn (TComm Board)	Mar-24	Amber	Direct Payments & PAs: Revised DP Factsheets complete, DP Agreements approved. Options for DP staffing structure developed - for approval in Feb 2024. On-line PA register contract, specification and pricing completed, pending legal services review and approval. Nursing Care: New Fee structure and Nursing Band implemented, banded placements are increasing. Options for block beds being explored. Extra Care: 2 New Extra Care providers in place, mitigations being explored for higher risk/complex individuals to support placements. Work is ongoing via SCIP to increase overall capacity.
Working with People Ensuring Safety Leadership	Engagement and Co-production Engagement Panel Obtaining feedback from service users and carers 'Ideas Alliance', co-production pilots (information/advice pack, and MH Transformation Model)	Christine Collingwood, Jane Simpson Mandy Ewart, Natalie Smith (TBC)	Jan-24	Green	Engagement panel recruitment has been very successful, now has 25 members, recruitment is currently focusing on people from under-represented groups, recent enquiries evidence that information is reaching the target audience. Members of the group have co-produced Direct Payment Factsheets, and are due to look at the information for carers on the LCC web site. Engagement Panel and LD Partnership Board members recently participated in the Assistant Director interview process. Exploring options for a virtual engagement panel and forming focus groups to broaden engagement. Co-production pilots are progressing, the information pack is expected to be finalised January 2024. Following successful workshop the Leicestershire Mental Health Group will consider the recommendations for further sessions and developing stronger partnership working.

CQC theme(s)	Actions	Lead(s) & (Governance)	Due Date	Progress Rating	Progress and comments
Working with People	Intermediate Care and Reablement With NHS partners develop an intake model for reablement increase the number of people supported at home upon hospital discharge	Tracy Ward, Lisa Carter, Claire Jones (DTDB)	Apr-24	Amber	HART and CRS merger to increase resource capacity progressing, action Plan consultation commenced 8th Jan, on track to be implemented April 2024 Operational processes to be consulted upon with HART managers and other senior staff. Increase in reablement starts being delivered.
Leadership	Internal Communication Staff briefings Senior leaders meet with managers and staff in person Development of staff comms and social media strategies and plans	Sally Brighty (Comms)	Mar-24	Green	Communications workshop held with SLT, and Staff focus groups held in November. Feedback and recommendations from staff focus groups presented to DMT in December, further session with SLT planned for 24 Jan to take forward recommendations. Senior leaders meeting with staff to maintain & increase visibility: JW visited several teams, and will continue visits throughout the year. AD's regularly attend meetings with teams and managers across their services. Dates for monthly 2024 staff briefings have been set and invitations circulated to staff.
Working with People, Ensuring Safety, Leadership	Learning and Development Encourage managers and staff across the Care Pathway to complete mandatory and essential training modules.	Prisca Odunmbaku, Madeleine McNeil	Ongoing	Green	Care Pathway Managers Training toolkit launched May 2023 to support and monitor staff completion of mandatory and work related training. Corporate mandatory training rates increased from 65% in May 2023 to 81% in January 2024. MCA training approach has improved completion rates, evaluation is underway and new training will be commissioned from 2024 to meet identified need. Departmental training completion dashboards are being finalised to support managers to monitor their teams training, launch is planned early 2024.
Working with People	Improving Mental Health Outcomes Working with Partners in the Mental Health Collaborative, and to ensure Mental Health Floating Support and MHWS are fully utilised to improve independence and wellbeing of people in contact with Mental Health services	Griff Jones, Ben Smith	Dec-24	Green	Successful Co-production event held on the 18th September supported by Ideas Alliance. Learning and next steps presented at the Leicestershire Mental Health Group in December. Mental Health Collaborative is currently a shadow collaborative, plan in progress to move towards a formal collaborative. Decision by DMT not to extend the commissioning of Floating Support has necessitated discussions to identify alternative provision through consideration for strengthening the PA market and considering spot commissioning
Working with People	Waiting well Work with regional colleagues to deliver an IMPACT demonstrator to explore how waiting times can be reduced and we can improve people's experience of accessing care	Mandy Ewart	Aug-24	Green	IMPACT surveys for staff and people who drawn on care and support, closed 8th Nov. Teams meetings with staff and people have been held, with focus groups for LLR people who draw on services taking place February 2024, across the ICS footprint. A Steering Group is established to take the work forward. Reports and delivery of change expected summer 2024 - interim information will be provided. LCC is managing waits well compared to regional LAs, PDC now asks people about their wait, this is providing ideas for improvement, such as consistent communication, which will be added to team action plans.

CQC theme(s)	Actions	Lead(s) & (Governance)	Due Date	Progress Rating	Progress and comments
Providing Support	Partnership-working and Joint-commissioning; CHC and FNC Determinations Improve access to CHC funding for residents. To include dispute resolution, CHC training offer, Disputes Policy to include joint-funded cases. Explore and address low rates of FNC determinations	Heather Pick, Katy Griffith	Apr-24	Green	CHC Training package now being delivered jointly with City and MLSCU. The internal review report done by the MLSCU consultant was not accepted and legal action being considered by City/County and Rutland, independent advice has been obtained from suitably experienced legal counsel. Meanwhile, there has been an increase in awards of CHC, rate improved by 5% in last quarter. Accommodation review team continue to look at SNAs and LAAFS for people in ResCare to see if FNC would be appropriate
Working with People, Providing Support	Working with the Voluntary Sector Map and establish regular, open dialogue with VCSE services which support adults' wellbeing and independence. Support VCSE services to understand A&C's commissioning intentions and bid effectively for contracts.	Rachel Cheney, Kate Revell	Mar-24	Green	Carers Discharge Grant Scheme is in place, managed by VASL . Personal Assistant Register being commissioned with Possability People. Lead Pracs plan to hold Info Sharing & relationship building events with Voluntary Sector organisations in future (Care Pathway Improvement Plan)
Ensuring Safety	Safeguarding Embed the MSP principles in practice via Safeguarding Training Address low safeguarding alert conversion rates Strengthen assurance around timeliness of safeguarding enquiry closure L&R SAB set up Communication and engagement group and extend membership of the Board to social care provider representatives	Prisca Odunmbaku, Griff Jones (Safeguarding Governance Group)	Nov-23	Green	Actions are in the Safeguarding Governance Group Action plan 2023/24, and are being monitored by the group. MSP - data to end of Dec shows increase in people being asked to express their desired outcomes and people who achieve their outcomes (Dec 80%). CSC are improving categorisation of incoming referrals. Ensuring staff follow correct process to open S42 enquiries for all referrals meeting the safeguarding thresholds. Performance data for locality teams safeguarding enquiries has been added to TOM reporting pack for improved performance monitoring.
Providing Support Ensuring Safety	Pathway to Adulthood Corporate review of the Pathway to Adulthood to improve young people's transition to Adults Services and ensure good outcomes and best value for the Council	Claire McWilliams, Rachel Marsh (TBC)	TBC	Green	Data collected to support baselining and diagnostic. Initial workshop held week commencing 8th Jan, governance will be put in place end January. Change Manager expected to start 1st February.
Working with People	Equalities Diversity and Inclusion Ensure people with a BAME heritage, and other groups likely to experience inequalities, enjoy equal access to care and support. Ensure performance reporting enables impact and outcomes for these groups to be monitored	Inderjit Lahel / DEG	Mar-24	Not Started	Initial scoping carried out with the DEG and Corporate colleagues. Detailed scoping required to determine most effective actions to prioritise.
All	Customer Feedback Strengthen mechanisms to obtain routine and informal feedback from people. In-depth lessons log and analysis of Corporate complaints Develop mechanisms to analyse and use the information provided to identify opportunities to change and improve services	Debbie Moore Lead Practitioners (TBC)	Mar-24	Amber	Existing feedback mechanisms mapped. Assessment of the Continuous Satisfaction monitoring form and what it tells us, suggestions for change identified for consideration.2 Proposals being developed to build on existing feedback mechanisms - formal and informal.
All	Better Data Use Consider how data is used at different levels across the dept and if an how this can be improved Including how data is shared with staff to demonstrate changes and their impacts.	TBC	TBC	Not Started	New Item - scope need to be determined

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ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
4 MARCH 2024

REVIEW OF THE SOCIAL CARE INVESTMENT PROGRAMME (SCIP)

REPORT OF THE DIRECTOR OF ADULT SOCIAL SERVICES

Purpose of report

- 1 The purpose of this report is to invite the Committee to comment on the findings and recommendations following a recent review of the Council's Social Care Investment Programme (SCIP). The report sets out how the outcome of the review will impact on the focus of the Programme going forward.

Policy Framework and Previous Decisions

- 2 On 16 October 2018, the Cabinet noted the development of a capital investment plan for adult social care accommodation-based support services and approved the publication of the Prior Intention Notice (PIN) to initiate engagement with the adult social care and investment market.
- 3 On 6 November 2018, the Committee was provided with an overview of the work being undertaken to develop a capital investment plan for adult social care accommodation-based support services and the potential implications.
- 4 On 11 March 2019, the Committee received an update on the findings of market engagement and on 10 June 2019 was provided with a detailed needs analysis to inform the Social Care Accommodation Development Plan and Investment Prospectus 2019-2037. This was approved by the Cabinet at its meeting on 25 June 2019.
- 5 On 22 October 2019, the Cabinet considered the 2019/2020 capital programme for SCIP:

The recommendations relevant to the contents of this report which were made at the meeting are:

- a) *That with regard to the purchase of assets to fulfil social care accommodation needs identified in the Social Care Accommodation Development Plan:*
 - i) *the process will be subject to the governance arrangements outlined in the report;*
 - ii) *the Director of Corporate Resources, in exercising his existing delegated powers to purchase property assets for operational purposes, will first consult with the relevant Chief Officer and Cabinet Lead Member(s);*
- 6 The SCIP aligns with the Ambitions and Strategy for the Adults and Communities Department 2020-2024, 'Delivering Wellbeing and Opportunity in Leicestershire'.

- 7 The SCIP contributes to the delivery of a number of outcomes in the Council's Strategic Plan 2022-2026. In particular, Safe and Well; Improved Opportunities; and Strong Economy, Infrastructure and Transport.

Background

The development of SCIP

- 8 The SCIP was established to support the implementation of the Social Care Accommodation Development Plan and Investment Prospectus 2019-2037 to increase the range of accommodation across the County for individuals receiving support from adult social care.
- 9 The SCIP aimed to facilitate capital investment in Leicestershire over the next 20 years into accommodation-based support, options including:
- Extra care, primarily for older people;
 - Supported living, primarily for working age adults with additional support needs, for example learning disability, mental health support or physical disability including acquired brain injury;
 - Residential care for older adults;
 - Residential care for working age adults with complex needs.
- 10 A Programme Board was established, jointly chaired by the Directors of Adults and Communities and Corporate Resources, and includes representatives from Adults and Communities, Corporate Finance, Property Services and the Growth Team.
- 11 A Strategic Landlord, Nottingham Community Housing Association (NHCA), was commissioned to help manage the nine developments delivered by SCIP, five in Charnwood, one in North West Leicestershire, one in Harborough and two in Hinckley and Bosworth. Seven of the nine developments were funded by the County Council at a total cost of £7m.
- 12 During the Covid-19 pandemic, there were a number of factors which impacted the SCIP's delivery of new build accommodation, primarily around the issues within the construction industry (materials/costs) and availability of properties.
- 13 Rising inflation and significantly increased costs for construction impacted on the SCIP's ability to deliver some of its flagship developments. The initial estimates to build a Specialist Dementia Facility increased from £5.5m when it was proposed in 2019, to approaching £9.5m when a full design was costed in 2022.
- 14 Due to this changing economic environment, the SCIP Board reviewed how the Programme had performed in its first three years and the best approach for its future direction.

Initial review of SCIP

- 15 In October 2022, the SCIP Board commissioned a light touch initial review of the Programme. This was undertaken by Council's Growth Team and focused on:
- The Programme aims and objectives;

- Progress in meeting the original aims;
 - How the Programme has been managed.
- 16 The key findings of the initial review were reported to the SCIP Board in February 2023 as follows:
- a) The level of demand has increased and a programme such as SCIP is still required to address the growing costs of providing accommodation;
 - b) The SCIP was intended to be focused on a whole system approach to addressing the challenge but has focused only on the Council's role;
 - c) The Business Case and Prospectus no longer reflect current conditions (market, increased costs) and underlying financial assumptions require review;
 - d) Lack of clarity on the purpose, objectives and outcomes of the programme exist across the Council;
 - e) The level of original ambition is not reflected in progress and delivery;
 - f) The Board management and governance requires reviewing in relation to roles and responsibilities.
 - g) A stronger assurance of SCIP is required to ensure it accurately reflects the Council's wider social care provision strategy.
- 17 Building on this initial analysis a full review of the SCIP was agreed by the SCIP Board in February 2023 and the Council's Transformation Unit was tasked with delivering this. In May 2023, the findings of the more detailed review were presented to the Board.

Findings from the full review

- 18 The full evaluation of SCIP considered the findings of the initial review and used these to frame the detailed review based around the following key themes:
- The SCIP's core focus and objectives;
 - The Prospectus and information given to providers;
 - Staffing and resources;
 - Strategic focus within Adults and Communities;
 - Programme Governance;
 - Partnership working.
- 19 The key recommendation of the review was that, with changes in the wider economic environment, leading to increasing capital costs to build developments and the pressures on the Council's capital budget, the focus was best placed in shifting the overall programme from direct capital investment in schemes to market shaping and 'inward investment'/development, with providers taking the lead in creating the infrastructure for new schemes.
- 20 Other recommendations in the report included:
- a) A renewed programme vision be established to reflect the focus on market shaping and following this, a review of the team structure to ensure that it is fit for purpose and meets the refocus of the programme.
 - b) The SCIP Board governance be updated to reflect the renewed focus.
 - c) An accommodation provision plan for the Department be developed to support the SCIP's workplan and activity.

- d) That a best practice review of capital investment in adult social care schemes, as undertaken by other County Councils, be commissioned from an external consultant.
- e) Improved programme management be implemented, and documentation finalised for sign off by the Board.
- f) Development of performance metrics be progressed to show the impact of the SCIP, in particular against the Programme's revised objectives, a clear set of deliverables and the Department's revenue budgets.

21 The review also noted the achievements of the SCIP to date, which included:

- The delivery of nine schemes supporting 78 individual placements (April 2023).
- Savings of over £480,000 per annum in care packages.
- Working with providers at an early stage to influence the design of their properties.
- The investment prospectus, when launched, was well regarded by providers and stakeholders.
- Mandatory training for Care Pathway staff developed to help them understand the advantages of supported living and extra care as alternatives to more restrictive options.
- Better outcomes and quality of life for those accessing the new placements.
- Relationships built with district and borough councils to increase their understanding of the work of the SCIP and how local plans can support this.

22 The SCIP Board agreed with the recommendations of the full review.

External review and final recommendations

- 23 Following the review a confirmation, challenge and identification of examples of best practice consultancy work was undertaken by a former Executive Director of Health, Housing, and Adult Social Care, Neil Revely, who has extensive experience in Housing, being the Chair of the Association of Directors of Adult Social Services (ADASS) Housing Policy Network and ADASS Housing Lead.
- 24 Neil Revely presented his review and final recommendations to the SCIP Board in October 2023, attached as an Appendix to this report. He agreed with the findings and recommendations of the full review, particularly regarding the future focus of the SCIP. He felt that focus on a strategic commissioning/market shaping/inward investment approach was in keeping with best practice, and consistent with upper tier local authorities who are successfully delivering extensive extra care and supported housing programmes. Neil stated that *"the purpose of SCIP moving forward should be to deliver on the vision to see the development of the required housing options to cater for the range of needs of older and disabled citizens in Leicestershire"*.
- 25 From his analysis of best practice from elsewhere, a greater emphasis was placed in Neil's report on the need for strategic ownership of the work of the SCIP by the leadership of the Council. He emphasised that senior Elected Members and the Corporate Management Team should be in agreement with, and support the aspirations of the SCIP. He also felt that despite the proposed national Housing Transformation Fund not being funded, more formal mechanisms to involve and further engage with districts and boroughs councils should be put in place, with the SCIP building up its work with local partners to have a more formal link and influence

into the development of Local Plans. The report uses, as an example of good practice, the partnership which Essex County Council has established with local partners to provide senior leadership to drive a holistic approach to independent living and supported housing.

- 26 The majority of the statements in the prospectus very much align with a 'strategic commissioning' (or inward investment) approach and in Neil's opinion, in relation to the Extra Care ambitions, additional provision could only be achieved using that approach. He also stated as found in the initial review in his report that the SCIP was intended to be focused on a whole system approach to addressing the challenge, but more recently has focused only on the Council's direct role, whereas the Council's role ought to be seen as stimulating the wider whole system approach. Neil commented that progress has been made on the supported housing element of the Programme which is of great importance (and complex in its own right), but this work has likely used all available resources in the team, detracting from the area that would have had the biggest impact, that of older peoples' independent living and Extra Care Housing.
- 27 Neil considered that the underlying principle/premise of the business case for the SCIP remains as, whilst build costs have increased, so has the cost of residential care placements, therefore the principle of invest to save still stands. Neil commented that 'pay back' periods could be longer to make investments more financially viable and linked to Housing Provider practice.
- 28 Other key recommendations from the report were:
- The need to support capital investment/land asset values for developers' capital investment (this can take the form of land provision);
 - The business cases to support capital investment undertaken by other councils have consistently demonstrated good returns on investment by virtue of significant revenue efficiencies (both predicted and realised);
 - The proposed purpose and focus of the SCIP Board moving forward should be to provide leadership for the vision/ambition, set and agree the strategic programme for the SCIP and support, drive, and monitor its delivery;
 - That, via the case studies, to emphasise how leadership, partnerships and relationships were key to a successful programme.

Next steps

- 29 At the November 2023 SCIP Board, the Transformation Unit presented the final report regarding the SCIP review. The report set out the vision, objectives and purpose of the SCIP going forward.
- 30 The Board formally approved that the revised focus of the SCIP should be on inward investment/market shaping rather than directly funding and building developments. The Board also agreed that based upon the external evaluation, the purpose of the SCIP moving forward should be:
- To deliver on the vision to see the development of the required housing options, to meet the range of needs of older and disabled people in Leicestershire;
 - The managing and shaping of the accommodation market and securing investment by providers and developers in housing that meets the needs of older

and disabled people in Leicestershire, To work with district and borough councils, to support and influence Housing and Planning Strategies;

- The management of an online prospectus, and ensuring that developers have the detail required to help influence investment decisions, understanding key client areas and need, such as ensuring Extra Care caters for those with more complex needs);
- Developing business cases (with Housing Partners) when land/capital is required.

31 The report also set out the operational next steps for the SCIP, which are currently being implemented, and suggested that in order to better focus the work of the SCIP Team, three workstreams are established to take forward the findings from the review and recommendations:

- Activity to support the SCIP delivery/Programme Management;
- Managing the market and scheme onboarding;
- Developing a partnership approach to Housing and Care.

32 Improved reporting to the SCIP Board and monitoring of programmes will be delivered through this workstream approach.

33 Separately, a review of the leadership and structure will be progressed to deliver the Programme's new focus and more robust programme management by the Departmental Management Team.

34 The SCIP Team is developing a programme plan to set out how it will deliver the revised vision of the SCIP and the re-focus of the Programme to market shaping.

35 It should be noted that the work of the SCIP Team continues to deliver placements in supported living and extra care developments, and to ensure that the properties which have already been developed are maintained and occupied. The team also works to ensure that supported living is accessible to those eligible by utilising the wider provider market.

36 There are nine schemes in the pipeline to be completed by end of 2025 with the aim to deliver a total of 70 units in 2024 and 25 units in 2025.

Resource Implications

37 The current SCIP Team consists of 4.2 FTE posts and has staffing budget of £276k including oncosts.

38 The SCIP has a capital allocation of £2.8m remaining, which is purposed to purchase and develop properties to meet the needs identified within the Social Care Accommodation Development Plan, which was approved by the Cabinet on 25 June 2019, and which are subject to business cases.

39 The Director of Corporate Resources and the Director of Law and Governance have been consulted on the content of this report.

Conclusions

- 40 The SCIP has achieved some positive outcomes over the past three years providing nine new schemes and places for 78 individuals. Changes in the wider economic environment, the financial position of the Council and learning from best practice elsewhere has led to the conclusion that the SCIP should focus less on the direct provision of accommodation to more of a strategic commissioning/inward investment role, particularly for extra care provision.
- 41 The key recommendation from the review is that the SCIP should re-focus its work from looking at working with a Strategic Landlord to directly fund and develop properties in order to provide more stock of supported accommodation, and to taking a more strategic commissioning approach to encourage more care providers to invest themselves in provision within Leicestershire.

Recommendation

- 42 The Committee is invited to comment on the findings of the review of the programme and the future focus of SCIP.

Background papers

Report to the Cabinet: 16 October 2018 – Capital Investment into Adult Social Care Accommodation Based Support Services

<https://democracy.leics.gov.uk/ieListDocuments.aspx?MId=5184>

Report to the Adults and Communities Overview and Scrutiny Committee: 6 November 2018 - Capital Investment into the Adult Social Care Accommodation Based Support Services

<https://democracy.leics.gov.uk/ieListDocuments.aspx?MId=5358>

Report to the Adults and Communities Overview and Scrutiny Committee: 11 March 2019 - Capital Investment into the Adult Social Care Accommodation Based Support Services

<https://democracy.leics.gov.uk/ieListDocuments.aspx?MId=5687>

Report to the Adults and Communities Overview and Scrutiny Committee: 10 June 2019 – Capital Investment into the Adult Social Care Accommodation Based Support Services

<https://democracy.leics.gov.uk/ieListDocuments.aspx?MId=5688>

Report to the Cabinet: 25 June 2019 - Capital Investment into Social Care Accommodation Based Support Services

<https://democracy.leics.gov.uk/ieListDocuments.aspx?MId=5604>

Report to the Cabinet: 22 October 2019 – Request for an Addition to the 2019/20 Capital Programme for the Social Care Accommodation Development Plan

<https://democracy.leics.gov.uk/ieListDocuments.aspx?MId=5606>

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>

Circulation under the Local Issues Alert Procedure

43 None.

Equality Implications

44 As this report focuses on how the SCIP will operate going forward and does not impact on the quality of services provided, there are no equality implications arising from the recommendations in this report.

Human Rights Implications

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

Environmental Implications

46 The environmental and sustainability requirements for housing developments are contained within the 2022 Building Regulations, these will be replaced by the Future Homes Standard in 2025.

Appendix

SCIP Vision, Structure and Headline Short Term Plan – November 2023

Officer(s) to Contact

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SCIP Vision, structure and Headline Short Term Plan

November 2023

Background

- Initial Review undertaken in April /May 2023
- External consultant brought in to confirm/challenge this review and to provide examples of best practice from elsewhere
- Findings were presented to Board in September
- Workshops held with the SCIP team



Vision

To increase the range and volume of housing with care options in Leicestershire

Objectives

- Engaging with providers and developers & Influencing Inward Investment for provision such as Extra Care and the development of lifetime homes within the general housing stock
- Improve service user outcomes by promoting independence and avoiding long term institutional care by having a range of alternative accommodation options.
- Create independent living options that prevent the need for institutional care and deliver a cost efficiency
- Influence the supply and location of supported housing to meet local need
- Influencing the development of Extra Care and other housing options to prevent/reduce the need for care services and prevention of individuals going into residential care



Purpose of SCIP

Neil Revely, external consultant, recommended that the purpose of SCIP moving forward should be:

- Deliver on the vision to see the development of the required housing options to cater for the range of needs of older and disabled citizens in Leicestershire
- Managing / shaping the accommodation market and securing investment by providers and developers in housing that meets the needs of older and disabled people in Leicestershire, Relationship Management and 'Marketing' – Housing Providers, Developers, Homes England etc
- Work with District and Borough Councils – Supporting/Influencing Housing and Planning Strategies
- Management of online prospectus and ensuring developers have intelligence to help influence investment decision. Recognising/Reflecting demand/need in the prospectus (understanding key client areas and need, such as ensuring Extra Care caters for those with more complex needs)
- Developing Business Cases (with Housing Partners) when land/capital is required



Governance

- Political & Corporate oversight – Produce update reports for A&C Overview and Scrutiny Board and Cabinet. Briefings for Lead Members and CMT.
- Role of the Board & linkages to Growth Board – Revise Board meeting structure, focus & paperwork. Paper for Growth Board on rationale for SCIP and governance relationship
- Working with partners –Comms Plan for engaging the market, update online ‘prospectus’. Options appraisal to consider viability of establishing a partnership focused Strategic Housing Group



Programme Focus

- Focus on market shaping and Inward Investment/Strategic Commissioning
- Evidence from other County Council's suggest that there are clear benefits from the market shaping model
- There will be a requirement for a level of capital/land investment, particularly for Extra Care
- Development of a business case model for capital investment can draw on examples from elsewhere.
- Evidence from elsewhere shows the benefits of a strategic plan with room for pragmatism take quick wins whilst establishing the broader framework (local plans, s106 etc)
- Work programme of SCIP for 24/25 – Should focus on establishing the relationships both internally & externally, building the programme evidence base and short term delivery (success)

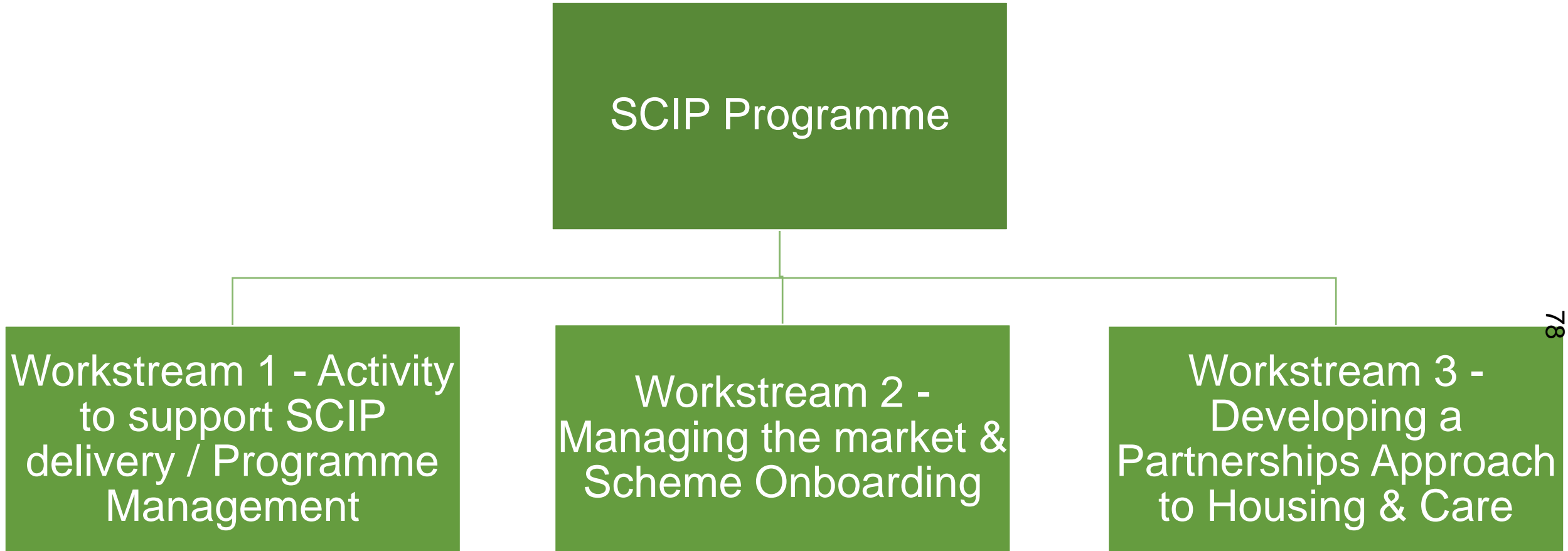


Staffing Structure

- Under consideration and options being developed by A&C.



Workstreams



WORKSTREAM 1 – ACTIVITY TO SUPPORT SCIP DELIVERY / PROGRAMME MANAGEMENT

To ensure that the SCIP programme runs efficiently and provides evidence of delivery of Outcomes

KEY DELIVERABLES

- | | |
|---|---|
| <ul style="list-style-type: none"> • Asset management • Strategic Landlord contract management • Engagement internal / public • Quality assurance of SCIP activities • Building the evidence - Metrics and reporting | <ul style="list-style-type: none"> • Updating process maps • Learning and development tools for A&C staff • Risk & Issues Management |
|---|---|

GOVERNANCE & REPORTING

- Working group established to look at development of KPI's and dashboards

KEY STAKEHOLDERS

- Programme Manager
- Lead Commissioner
- BI Business Partner



WORKSTREAM 2 - MANAGING THE MARKET AND SCHEME ONBOARDING

To engage with providers and developers & Influencing Inward Investment for provision such as Extra Care and the development of lifetime homes within the general housing stock

KEY DELIVERABLES

- | | |
|---|---|
| <ul style="list-style-type: none"> • Working with providers to oversee new supply • Understanding the local market • Supporting provider quality • Understanding and managing demand and capacity • Updating the 'prospectus'/investment portfolio | <ul style="list-style-type: none"> • Void management • Online resources - Web pages and FAQ's • Engagement with the Market • List of schemes in place & onstream • Risks and issues for each scheme • Timelines and progress towards delivery • Extra care investment business case / programme plan |
|---|---|

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GOVERNANCE & REPORTING

- SCIP Board
- Growth Board

KEY STAKEHOLDERS

- Assistant Director
- Programme Manager
- Commissioning Team representative
- Lead Commissioner



WORKSTREAM 3 – DEVELOPING A PARTNERSHIPS APPROACH TO HOUSING & CARE

To further develop effective working relationships with partners to work in a joined up approach to increase the range and volume of housing with care options in Leicestershire

KEY DELIVERABLES

- | | |
|---|--|
| <ul style="list-style-type: none"> • Growth Board Reporting • Potential establishment of Strategic Housing Group inc. Districts & Boroughs Supported Housing Bill implications / collaborative working • Engagement – Partners | <ul style="list-style-type: none"> • Chief Housing Officer Group • Influence local plans |
|---|--|

GOVERNANCE & REPORTING

- Growth Board
- Potential Strategic Housing Group

KEY STAKEHOLDERS

- SRO
- Assistant Director
- Programme Manager
- Commissioning Team representative
- Lead Commissioner
- Growth Board
- Partner representatives



High Level Work plan to end of March 2024

		Dec	Jan	Feb	March
Activity to support SCIP delivery / Programme Management	Revise Board Agenda and standing items				
	Finalise RAIDL				
	Sign off TOR				
	Finalise Comms Plan				
	Update process maps for Supported living				
	Hold team workshop to start building KPI's and performance metrics				
	Develop Initial set of KPI's for Board discussion				
	Update and develop training / comms materials for internal staff				
Managing the market and onboarding Schemes	Review 'prospectus' / online resource				
	Review web & intranet pages				
	Soft re-launch of SCIP with providers				
Developing a partnership approach to Housing and Care	Update report on the refocus of SCIP to A&C Overview and Scrutiny & Cabinet				
	Briefing report to CMT				
	Formal linkages made to Growth Board				
	Options appraisal for potential future partnership Housing Group				





ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
4 MARCH 2024

NURSING CARE PROVISION IN LEICESTERSHIRE

REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of report

1. The purpose of this report is to update the Committee on the current position of nursing care provision in Leicestershire.
2. The report also provides an update on the work with the Leicester, Leicestershire and Rutland (LLR) Integrated Care Board (ICB) on funding levels in Leicestershire for people with complex care needs.

Policy Framework and Previous Decisions

3. The 'People at the Heart of Care' White Paper, published in December 2021, sets out the Government's 10-year vision of how it proposes to transform support and care in England. The vision revolves around three objectives:
 - People have choice, control, and support to live independent lives;
 - People can access outstanding quality and tailored care and support;
 - People can find social care in a fair and accessible way.
4. In November 2022, the Government's Autumn Budget Statement delayed for two years the implementation of the 'care cap', which will place a limit on the costs that people will need to spend to meet their eligible care and support needs, and other charging reforms, including changes to the social care means test, and a proposal to enable self-funders to access the same social care fees as those negotiated with providers by local authorities.
5. The Committee in previous meetings has reviewed the Fair Cost of Care analyses and funding together with the Market Sustainability Plans published and submitted to the Department of Health and Social Care.
6. At its meeting on 5 June 2023, the Committee received a report in relation to policy development and the allocation of the Market Sustainability and Improvement Fund.
7. In October 2023 the County Council received a letter from the Minister for Social Care confirming that the County Council's budgeted expenditure for adult social care, including grant funding, and additional income (including precept) is in line with government expectations and meets all government requirements. The letter also stated that the government does not believe there to be capacity gaps or market sustainability issues which need to be addressed in Leicestershire.

Background

8. In Leicestershire there are 154 active and independent registered care homes (residential and nursing) supporting adults who require an accommodation based service where their care and support needs are too high for them to remain in their own home or in independent living.
9. Of these care homes there are 27 nursing care homes in the County where people are supported with more complex needs and where there are specific health requirements that require a qualified nurse to provide support.
10. Across the Leicestershire nursing care market there are circa 1,400 beds available of which the County Council funds 202 residents who require nursing care. Each of these people with a nursing need receive Funded Nursing Care (FNC) which is paid by the ICB directly to the care home.
11. Across the available nursing homes over half also support people with residential care level needs (dual registered homes).
12. The ICB also fund people directly due to their ongoing and complex health needs. This is known as Continuing Health Care (CHC) funding and is non-chargeable to individuals (free health care).
13. There is a strong self-funder market across care homes which makes up circa 50% of all care home placements.
14. Compared to other Councils there is a small nursing care market in Leicestershire (and across Leicester City). This is compounded by high fee levels and may in part be caused by a disproportionately low number of ICB funded people (either FNC/CHC and joint funded) in this type of provision.
15. Regional benchmarking analysis by Care Analytics states that the LLR ICB has the fewest number of people eligible for FNC per head of GP population in England at only 28 people per 50,000 of population. This has also been the case for some time.
16. The report goes on to say that LLR ICB markedly reduced the number of people eligible for CHC between 2017 and roughly the end of 2019, before per capita numbers became stable (albeit at one of the lowest levels in the country). Unless there are other compensatory factors (which are far from obvious) the councils of Leicester, Leicestershire, and Rutland have good cause to believe that the ICB has not taken responsibility for significant costs which fall within the remit of the NHS.
17. The County Council has a number of people placed in nursing homes within Leicester City (and vice-versa) which gives additional available capacity. However, across Leicestershire and Leicester City despite this additional capacity, the nursing home capacity overall is considered to be verging on insufficient to meet demand for both Councils (and the ICB).

Care Quality Commission position

18. All nursing care homes are registered with and regulated by the Care Quality Commission (CQC). Of the 27 nursing care homes in Leicestershire there are varying CQC ratings. The below table summarises the current position:

CQC Rating	Number of Nursing Homes
Outstanding	1
Good	20
Requires Improvement	5
Inadequate	0
Not yet rated by CQC	1

19. The percentage of providers who are rated good or excellent compares favourably with other Council areas both regionally and nationally.
20. Within the Department there is an established quality assurance approach which monitors providers on a regular basis against the expected care standards within the Care Homes contract. The County Council and City Council have reciprocal quality monitoring arrangements in place.

Provider exits

21. The number of nursing beds has been reducing over the last 10 years, although in the past 12 months there have not been any nursing home closures or market exits. However, a significant market exit occurred in Leicester City where the County Council had a number of placements. This has further reduced nursing home capacity accessible for residents of Leicestershire and Leicester. The reasons for market exits or provider instability are often complex and linked, but can include financial instability, occupancy levels, quality concerns, workforce, leadership, and strategic business decisions.
23. New provider entrants into the market (most recently January 2024) are targeting self-funders as opposed to local authority funded people due to the fee levels payable by self-funders, which could be in excess of £1,300 per week.

Short term nursing home capacity

24. The ICB contracts directly with nursing care home providers to support hospital discharges for people with nursing needs. These placements are for a short period of time to enable a person to maximise their independence and make long term decisions around their care arrangements. This may be facilitated by either the Council or ICB depending on their eligibility status (i.e. if the person is CHC eligible then the ICB will support any long term arrangements).

Funding in care homes

25. As part of the Council's Market Sustainability Plan (reported to this Committee on 6 March 2023) a nursing care fee banding was introduced which created a higher level of funding to support people with more complex needs. This rate was introduced in October 2023 and is set at £900 per week (plus FNC contribution at £219 per week).

26. All existing placements were changed to this level and all new placements were set at this band. The Council believes that this rate is a sustainable rate for the market.
27. The current annual spend by the Council on in-county nursing care placements amounts to circa £7m with an average of £1,010 per placement per week. This is above the £900 banding level, but will have factors such as additional needs or market supplements to ensure the placement is secured.
28. Both the County Council and Leicester City Council formally approached the ICB in 2022 and 2023 regarding the low levels of FNC awards and CHC and joint funded care packages across both councils.
29. The approach was based on nationally published NHS information which stated that in both areas FNC and CHC was amongst the lowest in the country.
30. Recent information from Care Analytics who have conducted both national and regional work on the costs of care across all markets concluded that:
 - At a council level, Leicestershire is an outlier in the East Midlands, with one of the smallest older adult nursing markets in the country. Ignoring a few London Boroughs with very small markets, only Barnsley and Kingston Upon Hull have fewer beds in older adult nursing homes on mainland England (the Isles of Scilly is an extreme outlier).
 - Leicestershire also has the second smallest older adult care home market (nursing and residential combined) per head of elderly population among all the shire counties in England (only Dorset has fewer beds per capita). The combined Leicestershire and Leicester market is also comparatively small with only 65.5 beds per 1,000 of population aged 75+.
31. The regional pattern of a falling bed capacity in older adult nursing homes is common to most councils in the East Midlands, although there are different drivers in terms of the turnover of stock (closures and openings) and former nursing homes that have stayed open but deregistered their nursing status.
32. Leicester and Leicestershire have large losses in nursing capacity from comparatively low baselines – and with overlapping markets.
33. Falls in beds in nursing homes in Leicestershire (-16%) and Leicester (-31%) have left the two areas with the lowest per capita nursing capacity in the region, as this came from low baselines.
34. The LLR ICB has the fewest number of people eligible for FNC per head of GP population in England at only 28 people per 50,000 of population. This has also been the case for some time.
35. LLR ICB markedly reduced the number of people eligible for CHC between 2017 and the end of 2019, before per capita numbers became stable (albeit at one of the lowest levels in the country). Unless there are other compensatory factors (which are far from obvious), the three Councils have good cause to believe that the ICB has not taken responsibility for significant costs which fall within the remit of the NHS.

36. A review was commissioned by the ICB, with local authority involvement, led by a consultant from Midlands and Lancashire Commissioning Support Unit (MLCSU). The focus of the review surrounded:

- Processes for applying for health funding (checklists and assessments);
- Knowledge of processes and pathways;
- Dip sampling cases provided by the Councils to ascertain decisions on Health funding.

37. The three Councils have formally stated their dissatisfaction with the findings and are now considering what further response to make to the ICB.

Recent placement/funding activity

38. Over the past 12 months there have been positive outcomes for the County Council (and service users) on successfully securing health funding for placements.

39. The overall Health funding towards support has shown an increase from 8.4% (626/7,414 people) in January 2022 to 11.2% (836/7,457) January 2024.

Breakdown of funding

40. A breakdown of the funding is provided below:

- People aged 18 -64 shows an increase from 12.1% to 15.1%;
- People age 64+ shows an increase of 6.1% to 8.8%;
- Residential and Nursing care placements show an increase of 11.1% to 12.7%;
- Home care Maintenance shows an increase of 5.3% 120/2,259 to 7.4% 202/2,712;
- Community Life Choices shows a decrease of 6.2% 39/632 to 6.0% 39/646.

41. Whilst this increase is acknowledged the overall health contribution to individual support packages remains considerably lower than other Health systems.

42. The following tables demonstrate how LLR ICB benchmarks against other Health systems. The tables also demonstrate that whilst there has been some increase in CHC determinations, the level of FNC awards have further reduced over the period:

NHS CHC cumulative activity year to date from 1 April 2021 to end Q3	CHC per 50k population			NHS FNC	
	Standard	Fast track	Total	Number	Per 50K
ENGLAND	44.96	87.90	132.86	70,181	71.39
MIDLANDS	46.57	104.60	151.17	13,366	73.93
LEICESTER, LEICESTERSHIRE, AND RUTLAND STP*	31.83	39.61	71.44	773	41.21
LINCOLNSHIRE STP	56.34	157.32	213.66	1,108	84.13
NOTTINGHAM AND NOTTINGHAMSHIRE HEALTH AND CARE STP	55.86	125.89	181.74	1,611	89.54
JOINED UP CARE DERBYSHIRE STP	53.45	156.60	210.06	1,887	109.04
NORTHAMPTONSHIRE STP	36.04	90.22	126.26	1,199	95.39
COVENTRY AND WARWICKSHIRE STP	54.59	95.37	149.97	1,417	84.36
THE BLACK COUNTRY AND WEST BIRMINGHAM STP	35.20	77.41	112.61	2,330	100.26

Source: Statistics » NHS Continuing Healthcare and NHS-funded Nursing Care (england.nhs.uk)

*STP – Sustainability and Transformation Plans Footprint

NHS CHC cumulative activity year to date from 1 April 2023 to end Q3	CHC per 50k population			NHS FNC	
	Standard	Fast track	Total	Number	Per 50K
ENGLAND	44.10	91.40	135.50	107,832	107.54
MIDLANDS	46.31	103.03	149.34	22,132	118.19
LEICESTER, LEICESTERSHIRE, AND RUTLAND STP	40.56	49.74	90.29	687	35.63
LINCOLNSHIRE STP	54.88	182.09	236.97	936	70.37
NOTTINGHAM AND NOTTINGHAMSHIRE HEALTH AND CARE STP	62.72	132.15	194.87	1,974	97.19
JOINED UP CARE DERBYSHIRE STP	49.33	139.50	188.84	2,010	110.92
NORTHAMPTONSHIRE STP	35.09	92.94	128.03	1,386	106.19
COVENTRY AND WARWICKSHIRE STP	39.71	77.92	117.64	1,822	105.17
THE BLACK COUNTRY AND WEST BIRMINGHAM STP	23.44	95.19	118.62	3,230	159.05

Source: Statistics » NHS Continuing Healthcare and NHS-funded Nursing Care (england.nhs.uk)

Resource Implications

43. The Council funds 202 nursing care placements, at an average cost of £998 per week, which equates to an annual total cost of circa £10.5m.
44. Of these 202 placements, 174 (86%) people are placed in County homes, 13 in City homes and 15 out of county homes.
45. The Director of Corporate Resources and Director of Law and Governance have been consulted on the content of this report.

Conclusions

46. The Council considers the current practice and processes for securing Health funding as requiring further investigation. There are potentially a number of placements across all care provision and ages where the ICB responsibilities are being funded and delivered by the Council. These will be explored further and ongoing dialogue with the ICB continues on this issue and will be progressed over the coming six months.
47. The Council will continue to work with developers and providers to stimulate growth in the nursing care home market.

Recommendation

49. The Committee are asked to note the contents of the report and comment on the Nursing Care market position and in particular the funding issues with ICB.

Background papers

People at the Heart of Care: adult social care reform white paper -

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

Market Sustainability and improvement Fund -

<https://www.gov.uk/government/publications/market-sustainability-and-improvement-fund-2023-to-2024/market-sustainability-and-improvement-fund-2023-to-2024>

Market Sustainability and Fair Cost of Care Fund 2022 to 2023: guidance -
<https://www.gov.uk/government/publications/market-sustainability-and-fair-cost-of-care-fund-2022-to-2023-guidance/market-sustainability-and-fair-cost-of-care-fund-2022-to-2023-guidance>

Leicestershire Cost of Care Reports and Market Sustainability Plan -
<https://resources.leicestershire.gov.uk/adult-social-care-and-health/communication-and-engagement/fair-cost-of-care-and-market-sustainability-plan>

Report to the Adults and Communities Overview and Scrutiny Committee: 5 June 2023 –
 Market Sustainability and Improvement Fund
<https://democracy.leics.gov.uk/ieListDocuments.aspx?MId=7108>

Circulation under the Local Issues Alert Procedure

50. None.

Equality Implications

51. There are no equality implications arising from the recommendations in this report. However, following the conclusion of the work with partners it is envisaged that any further work strands will present (and seek to address) their own equality implications.

Human Rights Implications

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

Partnership working

53. The Council is working with Leicester City Council and the ICB to seek to address the issues highlighted in the report in respect of market development and overall funding.

Officer(s) to Contact

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ADULTS AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
4 MARCH 2024

UPDATE ON THE ARCHIVES, COLLECTIONS AND LEARNING CENTRE

REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of report

1. The purpose of this report is to provide an update on developments and seek the views of the Committee on options relating to the Archives, Collections and Learning (ACL) Centre.

Policy Framework and Previous Decisions

2. This ACL Centre supports a number of outcomes within the County Council's Strategic Plan 2022-2026. In particular, 'Great Communities', by helping to ensure that cultural and historical heritage and the natural environment are enjoyed and conserved. 'Clean and Green', by reducing energy consumption, increasing the use of renewable energy, and reducing carbon emissions. It also supports 'Improving Opportunities' by enabling the Council to continue to provide high quality and targeted cultural and historic resources to schools and young people which will be facilitated through the Centre.
3. The ACL Centre supports the Council's Strategic Property Energy Strategy 2020-2030 and is designed to help contribute towards achieving the amended climate emergency declaration to become a net zero Council by 2035.
4. The ACL Centre supports the Adults and Communities Directorate'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".
5. The statutory basis of the Archive Service is derived from the Local Government Act 1972, Sections 224-229. Section 224 imposes a duty on principal authorities (which includes the County Council) to make 'proper arrangements' for the safekeeping of their records and records in their custody.
6. A statutory Code of Practice issued under the Freedom of Information Act 2000 states that 'authorities must have in place appropriate governance, organisational capability and technical measures to ensure that they manage information in accordance with the Code'.
7. On 12 June 2018, the Cabinet agreed to develop proposals for an ACL Hub (now referred to as the ACL Centre).

8. The Committee received a report on this matter on 6 November 2023 and suggested that Leicester City and Rutland Councils be approached for an early response as to whether they would be involved and contribute towards the proposed new centre.

Background

9. The ACL Centre brings together in one building the County Council's Museum Collections, Creative Learning Service (CLS) resources and the Archive Collections of the Record Office for Leicestershire, Leicester, and Rutland (ROLLR), with conservation and technical facilities, public access spaces including the ROLLR search rooms, and flexible space to enable a wide variety of public activities. The Museum Service and the ROLLR are Accredited Services, recognised by Arts Council England and The National Archives (TNA) respectively. Alongside its core function, the CLS delivers the learning offer for Museum Collections and ROLLR which is a requirement of Accreditation for both services.
10. The Cabinet decision in 2018 to develop proposals for an ACL Hub was considered the most efficient way to address the multiple challenges faced in terms of collection care, storage and public access alongside the lack of suitability of current buildings and capacity for growth. This work was paused in March 2020 due to the Covid-19 pandemic but restarted in 2022, following an internal review.
11. The next phase of work led to the development of a Royal Institute of British Architects (RIBA) Stage 1 design, which was shared with this Committee in November 2023. This estimated the ACL Centre to have an upper cost of £38m, assuming a construction start date of September 2025.
12. The design proposal demonstrated the ability to consolidate and reduce the current space allocated to the elements that would be accommodated within the ACL Centre and reduce from seven sites to one. The proposal addressed the TNA requirement for an additional 25 years of expansion for the Record Office strong room and accommodated the Registration Office requirement. It did not provide expansion for Museum Collections.
13. Following the report shared with this Committee on 6 November 2023, the County Council has updated its financial position, and the Cabinet considered the provisional Medium Term Financial Strategy (MTFS) on 9 February 2024. This demonstrates the challenging financial position facing the County Council and the need for the Authority to re-enforce its existing financial control measures in order to address the budgets gaps and ensure a balanced budget.
14. Recent discussions with partner authorities show they are facing similar financial challenges and none are able to make the necessary capital commitment required to progress the ACL Centre at this time.
15. As a result, it is necessary for the County Council to separate out elements of the ACL Centre, so that it can address those services that are delivered in partnership (i.e. the ROLLR) separately from those that relate to areas of County Council interest only (i.e. Museum Collections, CLS).

Record Office

16. Senior officers from the three partner authorities have met to discuss options to address the issues relating to the Record Office and an options appraisal is being undertaken to help determine a shared approach and quantify the cost implications of any agreed measures in the short and medium term.
17. There are a limited number of options available. These are unlikely to provide the comprehensive, long-term solution offered by the ACL Centre, but will need to ensure that the core statutory responsibilities of each authority are met.
18. Following discussion with partners and the TNA, options under consideration are:
 - a) procure off site archive standard storage for collections currently in non-compliant storage;
 - b) procure off site archive standard storage for collections currently in non-compliant storage, with restricted public access to minimise retrieval costs;
 - c) build new additional archive standard storage only at County Hall;
 - d) dissolve the partnership. This would require a detailed review of all archive collections held by the ROLLR to determine ownership and enable Leicester City Council and Rutland Councils to remove collections relating to their area and make their own provision. The County Council's archives could then be accommodated within the existing provision at Wigston, which is owned by the County Council. This option is not considered practical or desirable.
19. Options a) and b) require additional revenue to be allocated to prepare and fully catalogue collections prior to removal to offsite storage. This is essential to ensure collections can be accounted for and retrieved at a later date. Option c) requires additional revenue to develop a costed design proposal for, and subsequent capital costs to fund, the build. Option d) requires additional revenue to fund the detailed collections assessment and the review needed to inform the disaggregation of ROLLR collection. As stated above, this option is not considered practical or desirable.
20. All the above proposals assume the ongoing use of the current Record Office in Wigston and necessitate previously delayed maintenance works to be taken forward as a priority. The schedule of works identified as needing to be addressed within the next two years has a total cost of £1,770,863. For options a)–c) the costs would be shared between the partnership. For option d) the sharing of costs would be informed by when the review process could be completed.

Museum Collections

21. In terms of Museum Collections, which is a County Council issue only, a scaled back proposal to reduce the number of storage facilities and consolidate some Museum Collections within the Eastern Annex remains an option. This would create the opportunity to release one County Council building for sale and two County Council rental properties back for commercial lease, generating a capital receipt and revenue growth opportunity through the Investing in Leicestershire Programme.
22. This proposal would incur one-off costs to prepare and transport collections and provide appropriate storage equipment and facilities within the Eastern Annex. Such

costs could be offset against the presumed capital receipt. This would relieve some of the significant pressure on the service to manage the seven current storage locations, by reducing them to four locations. This proposal is due to be considered by the Corporate Property Steering Group (CPSG) in March 2024, an officer group responsible for overseeing the development and delivery of the Council's Corporate Asset Management Plan and all other asset management strategies

23. The current storage locations (and the proposal regarding those that will be retained, and those to be released) are:
- Collections Resources Centre, Barrow upon Soar (retain);
 - Record Office, Wigston (retain);
 - Eastern Annex, Glenfield (retain);
 - Various buildings on Snibston colliery site, Coalville (retain);
 - Unit 1, Coalville (release);
 - Sherrier Centre, Lutterworth (release);
 - Unit at Riverside Court, Measham (release).
24. The three properties to be released are all currently owned by the County Council. It is intended that the Sherrier Centre will be sold and Unit 1, Coalville and the Unit at Riverside Court in Measham, which already form part of the Council's Investing in Leicestershire Programme, will be let to generate a future revenue return for the Council.

Accreditation

25. The Record Office submitted its accreditation return in November 2023 and received a validation visit from the TNA on 5 February 2024. A decision on the Record Office's accreditation status is expected at the end of March 2024. The possible decision outcomes are: Accredited (current status); Provisional Accreditation; Accreditation removed.
26. The Record Office strong rooms have exceeded capacity and the current temporary overflow storage does not meet required standards for archive collections. This means the Record Office is currently unable to meet all aspects of the standard.
27. The Museum Service is required to meet the Arts Council England accreditation standard and is currently waiting to be advised on its timetable for re-assessment.

Risk Assessment

28. As previously reported failure to resolve the current storage situation is likely to jeopardise the accreditation status of the Archive and Museum Services. The Record Office expects to be notified of the outcome of its accreditation application at the end of March 2024.
29. Whilst the County Council and Record Office partners are not in a position to make a significant capital commitment at this time, it is clear that additional revenue and/or capital spend will be incurred. The scale of these costs and how they would be apportioned across the partnership is yet to be determined.

Consultation

30. Record Office partners are currently being engaged on the proposals as outlined at paragraph 18 above.

Resource Implications

31. There is no budget in the latest approved MTFS 2023-2027 for the proposed ACL Centre, but it has been identified as a scheme potentially requiring funding, as a future development within the Capital Programme.
32. It is expected that all options to address the lack of archival compliant storage for the Record Office will see increased revenue and potential capital costs for the partnership. Work to agree the preferred approach and develop costed proposals is underway.
33. The consolidation of elements of museum storage into the Eastern Annex from the three sites, currently costing in the region of £63,000 per annum, would enable the Sherrier Centre to be sold and Unit 1, Coalville and Unit at Riverside Court, Measham, which form part of the Investing in Leicestershire Programme, to be leased out to generate income of £17,000 per annum.

Legal Issues

34. The existing partnership arrangements for the ROLLR set out the basis for cost sharing as a result of any increased costs incurred to deliver the service. Partners have expressed their ongoing commitment to the ROLLR partnership and once agreement on a way forward has been reached, updated revenue, and potentially capital, contributions will be discussed and agreed.
35. The Director of Corporate Resources and the Director of Law and Governance have been consulted on the content of this report.

Timetable for Decisions

36. Following the TNA visit on 5 February 2024, the Council is awaiting the outcome of the Accreditation Assessment. On the basis of the assessment further discussions with partners are required to determine a recommended option for the future of the Record Office. It is hoped to conclude discussions by the Autumn.

Conclusions

37. The financial challenge facing the County Council and the ROLLR partners means a decision to progress the ACL Centre and the associated major capital commitment is not possible at this time. This necessitates the work currently underway to develop alternative options to address the known issues around collections care, preservation and access for the Archive and Museum Collections for the short and medium term.

Recommendation

38. The Committee is asked to comment on the proposals as outlined in paragraph 18 to help inform and shape its development.

Background papers

Leicestershire County Council Strategic Plan 2022-26

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

Strategic Property Energy Strategy 2020-30

<https://democracy.leics.gov.uk/documents/s160429/Appendix%20-%20Strategic%20Property%20Energy%20Strategy%202020-2030.pdf>

Delivering Wellbeing and opportunity in Leicestershire – Adults and Communities Department Ambitions and Strategy for 2020-2024

<https://resources.leicestershire.gov.uk/sites/resource/files/field/pdf/2020/9/30/Vision-and-Strategy-for-Adults-and-Communities-Department-2020-2024.pdf>

Local Government Act 1972 Sections 224-229 -

<https://cdn.nationalarchives.gov.uk/documents/information-management/local-government-act1972.pdf>

Report to the Cabinet: 12 June 2018 – Archives, Heritage and Learning Collections Hub

[http://cexmodgov01/documents/s138163/6_June_Heritage%20Mus%20and%20Records%20Collections%20Hub%20final.pdf?\\$LO\\$=1](http://cexmodgov01/documents/s138163/6_June_Heritage%20Mus%20and%20Records%20Collections%20Hub%20final.pdf?LO=1)

Report to Adults and Communities, Overview and Scrutiny Committee: 6 November 2023 – Update on the Archives, Collections and Learning Centre

<https://democracy.leics.gov.uk/ieListDocuments.aspx?MId=7110>

Investing in Leicestershire Programme – Portfolio Management Strategy 2023/2027

<https://www.leicestershire.gov.uk/sites/default/files/2023-09/MTFS23-Appendix-H-IILP-Strategic-Report.pdf>

Circulation under the Local Issues Alert Procedure

39. None.

Equality Implications

40. There are no equality implications arising from the recommendations in this report, as the proposal will improve the access arrangement for Archive, Museum and Learning Collections. If a decision is taken to proceed the Equality Improvement Assessment will be reviewed and updated.

Human Rights Implications

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

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