

Leicester
City Council

MEETING OF THE Adult Social Care Scrutiny Commission

DATE: Thursday, 13 March 2025

TIME: 5:30 pm,

PLACE: Meeting Room G.01, Ground Floor, City Hall, 115 Charles Street,
Leicester, LE1 1FZ

Members of the Committee:

Councillor March (Chair)

Councillor Cole (Vice-Chair)

Councillors Joannou, Kaur Saini, O'Neill, Orton, Sahu and Singh Sangha

Members of the Committee are summoned to attend the above meeting to consider the items of business listed overleaf.

For Monitoring Officer

Officer contact:

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If you have any queries about any of the above or the business to be discussed, please contact: **Katie Jordan, Governance Services and Kirsty Wootton, Governance Services Officer.** Alternatively, email committees@leicester.gov.uk, or call in at City Hall.

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PUBLIC SESSION

AGENDA

FIRE / EMERGENCY EVACUATION

If the emergency alarm sounds, you must evacuate the building immediately by the nearest available fire exit and proceed to the area outside the Ramada Encore Hotel on Charles Street as directed by Governance Services staff. Further instructions will then be given.

1. Welcome and Apologies for Absence

To issue a welcome to those present, and to confirm if there are any apologies for absence.

2. Declarations of Interest

Members will be asked to declare any interests they may have in the business to be discussed.

3. Minutes of the Previous Meeting

(Pages 1 - 8)

The minutes of the meeting of the Adult Social Care Scrutiny Commission held on Thursday 9th January have been circulated and Members will be asked to confirm them as a correct record.

4. Chair's Announcements

The Chair is invited to make any announcements as they see fit.

5. Questions, Representations and Statements of Case

Any questions, representations and statements of case submitted in accordance with the Council's procedures will be reported.

6. Petitions

Any petitions received in accordance with Council procedures will be reported.

7. CQC Inspection - Verbal Update

The Strategic Director of Social Care and Education gives a verbal update on the CQC inspection.

8. Annual Report 2023/24 Adult Social Care (ASC) Complaints and Commendations (Pages 9 - 44)

The Director for Adult Social Care and Commission submits a report providing a copy of the Annual Report 2023/24 produced in relation to Adult Social Care's (ASC) statutory, corporate, Local Government & Social Care Ombudsman complaints and commendations. Information within this report provides a fuller picture of the complaints and commendations received across the Department and accompanying analysis.

9. Adult Social Care Autism and Neurodiversity Delivery Plan 2024-2026 (Pages 45 - 64)

The Director for Adult Social Care and Commissioning submits a report to present, seek feedback and endorsement on the new 'Leicester City Adult Social Care Autism and Neurodiversity Delivery Plan 2024-2026.'

To provide an update on progress since presenting the last Autism report to the Scrutiny Commission in 2024.

To seek approval on the suggested recommendations and proposed next steps.

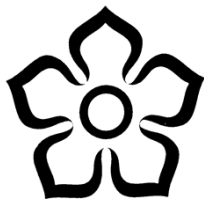
10. Delivering the City's Supported Living and Extra Care strategy (Pages 65 - 86)

The Director of Adult Social Care submits a report to provide the Adult Social Care Scrutiny Commission with an update on progress on the delivery of accommodation for people supported by Adult Social Care, as detailed in the Supported Living and Extra Care Housing Strategy 2021-2031.

11. Work Programme (Pages 87 - 92)

Members of the Commission will be asked to consider the work programme and make suggestions for additional items as it considers necessary.

12. Any Other Urgent Business



Leicester
City Council

Appendix A

Minutes of the Meeting of the
ADULT SOCIAL CARE SCRUTINY COMMISSION

Held: THURSDAY, 9 JANUARY 2025 at 5:30 pm

P R E S E N T :

Councillor March (Chair)
Councillor Cole (Vice Chair)

Councillor Kaur Saini
Councillor O'Neill

Councillor Singh Sangha

Councillor Orton
Councillor Sahu

In Attendance

* * * * *

93. WELCOME AND APOLOGIES FOR ABSENCE

Apologies were received from Councillor Joannou.

94. DECLARATIONS OF INTERESTS

Councillor March declared she had a conflict of interest with the items relating to cuts in Council Tax support.

95. MINUTES OF THE PREVIOUS MEETING

AGREED:

The minutes of the previous meeting held on 14th November 2024 were confirmed as a correct record.

96. CHAIRS ANNOUNCEMENTS

The Chair thanked Councillor Russell for all of her excellent work and support as Executive Member to the Commission.

97. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE

The Monitoring Officer noted that none had been received.

98. PETITIONS

The Monitoring Officer noted than none had been received.

99. DRAFT GENERAL REVENUE BUDGET AND CAPITAL PROGRAMME 2025/26

The Director of Finance submitted a report detailing the proposed Revenue Budget and Capital Programme for 2025/26.

The Head of Finance gave an overview of the report, key points to note were as follows:

- The medium-term financial outlook is the most severe we have ever known. Like many authorities, Leicester City Council faces increasing difficulties in being able to balance our budget. Some authorities had already reached this position and been forced to issue a formal report under section 114 of the Local Government Finance Act 1988.
- Social Care has had to pay its share of cost savings and reducing scope to reduce pressures not currently met by previous years grants. Leicester City Council have been fortunate to have reserve funds to support the gap.
- Following the Chancellors announcement in October there may be additional funds available for the Adult Social Sector.
- The Council had already made substantial cost savings since 2010/11 during the decade of austerity. These actions have helped the Council to balance the budget and remove the worry of Section 114.
- A strategy was developed to implement revised budget projections:
 - Strand One – Releasing one off monies of £110m to buy time.
 - Strand Two – Reductions of £13m in the approved Capital Programme, which will reduce the borrowing required.
 - Strand Three – Embark on an ambitious programme to sell property, with the aim of securing an additional £80m of one off monies.
 - Strand Four – Continue to take steps to constrain growth in those statutory services that are under demand led pressure in Social Care Services and Homelessness.
 - Strand Five – make ongoing savings to the revenue budget of £20m per year.
- If successful, the implementation of the strategy would result in the revised budget projections of, £46.7m in 2025/25 and rises to £90m in 2027/28.
- A Council Tax increase of £2.4m will go to Full Council.
- The next 3 years budget is balanced as shown in the report. With the strategy comes risk, which has been identified under Section 25 of the Local Government Act 2003.

In response to questions and comments from Members, it was noted that:

- The phenomenal work of the Adult Social Care team, moving to a strength based approach through Scrutiny and work together over the last 3 years has stopped the Council facing a significant worse stance.
- Specific details haven't been named yet on which surplus properties that aren't producing any costs will be sold in the Capital Programme Budget.
- The cost increase in Council Tax has already been factored and the report will go to Full Council on 16th January.
- The report didn't included Inequality Impact Assessments for Care Leavers. A line would be added in section 15.3 of the report t included Care Leavers in to the Councils Protected Characteristics.

AGREED:

1. The Commission noted the report.
2. Section 15.3 of the budget report will be updated for Care Leaver to be included in the Councils Protected Characteristics.
3. An update on supported living will be presented at the next meeting.
4. Members to be updated once properties which are determined to be sold under the Capital Programme have been decided.

100. ADULT SOCIAL CARE COST MITIGATION PROGRAMME

The Deputy City Mayor for Social Care, Health and Community Safety introduced the item, highlighting the efforts of both senior and front-line staff and the complexity of the budget. Work was now being undertaken on a new level to meet the needs of people requiring support, whilst addressing the financial challenges.

The Director for Adult Social Care Commissioning submitted a report providing the commission with an overview of the development and progress of the Adult Social Cost Mitigation Programme. Key points noted were:

- The focus of the report was on current project work taking place.
- Adult Social Care had embarked on work with Ernst & Young in the Summer of 2023.
- Considerations on infrastructure and routes to Lead Members had been made.
- A positive response had been received throughout the department.
- An intensive work programme had ensued to support an Early Action and Prevention model.
- There had been an emphasis on reducing cost pressures.
- Initiatives including Leading Better Lives had moved forward.
- A robust methodology had now been developed for Adult Social Care.

- Workstreams were as follows:
 1. To reduce the costs of care, improve efficiency and examine improvement opportunities.
 2. To reduce new entrants and manage demand.
 3. To improve efficiency with Adult Social Care.
 4. To emphasise partnership working.
- The lens was on delivering to people's requirements, maintaining independence and appropriate costing.
- A Transport Sequencing project had gained regional interest.
- The programme had been presented to the City Mayor and the Executive for consideration. This confirmed that the programme was on track concerning commissioning. Recommendations included examination of opportunities for cost mitigation.
- It was noted that Leicester was not an affluent city, yet there remains a statutory duty to provide social care. Key challenges were identified, including the need to address underlying route issues. Programme delivery commenced in November 2023 and it was acknowledged that a completely new way of working had been introduced.
- A delivery group was established, meeting fortnightly to discuss matters concerning deliverance and project progress.
- Outcomes for people requiring support were of key focus with projects being reviewed to ensure the best results.
- The programme enabled consideration of resources, ensuring that these were targeted to make a difference.
- People requiring Adult Social Care support often came with complex needs and individual circumstances.
- Children aging out of SEND care often transitioned into Adult Social Care.
- It was noted that increased life expectancy, combined with people living longer but in ill health had contributed to growing pressures on Social Care Services.,
- There was considerable cross-departmental work, with the mitigation programme running alongside Adult Social Care. A holistic approach had been encouraged.
- The Outcome Support Sequence considered individual capabilities in order to form the appropriate care package.
- The shared care record resulted in quicker access to information.
- Observations had taken place to ensure cost efficiency.
- Positive outcomes had included an upward revision to expected income. This was due to grant income being higher than expected and the joint-funded care package income.
- Forecasting based on the last three years of the Adult Social Care budget have proved useful, allowing for contingency.

Questions and comments were welcomed by the Chair and responses to note were:

- The cost of engaging Ernst & Young was £80k. The work concluded in November 2023.

- Regarding transport sequencing for children, priorities were examined across the social care department, children were included in this. Leicester did not have separate departments for Adult and Children's Social Care, unlike other local authorities. The Strategic Director of Social Care and Education discussed complexities arising with the children's aspect and explained that learning was ongoing.
- Extended life expectancy was cited as a reason for the reduced budget target for care packages. Also, figures showed a better delivery had been achieved than what had been expected. It remained that there was a statutory duty of care meaning that those in need would receive the support required.
- Considerable work had taken place examining care options through family and community where appropriate, rather than automatically offering care packages. A close working relationship with the NHS helped to facilitate this. This in turn allowed for different targets and could lead to annual financial increases.
- It was anticipated that the following three years would see increasing complexity of needs. Levels of support for deprived communities would be a key focus. The emphasis would be on early preventative action.
- Smart spending was expected to pay dividends.
- It would be important to ensure that cross services were aligned.
- The pathway for children coming to Adult Social Care was important.
- Discussions amongst the committee on the use of the phrase 'leavers' and it was agreed that this language could be explored further.
- Regarding the observation work carried out, it was clarified that this had been actioned with sensitivity and had not caused disruption. The focus had generally been on learning disabilities and good relationships had been established with providers. Findings had shown that there could be more effective ways of working. This was being fed back to providers. Digital elements could come into use, but this would not lead to the elimination of personal care.

Agreed:

- 1) That the report be noted.
- 2) That an item on loneliness be added to the Work Programme.
- 3) An item on increasing complexity of needs be added to the Work Programme.
- 4) An item on SEND children transitioning to Adult Social Care be added to the Work Programme.
- 5) Consideration of language to take place, in particular to the use of the phrase 'leavers' when referring to SEND children aging out of the children's social care phase.

101. SUPPORT FOR PEOPLE WHO SELF-FUND THEIR SOCIAL CARE

The Director of Social Care and Safeguarding submitted a report to give the commission an overview on how Adult Social Care provides support for people who self-fund their care.

It was noted that:

- A person with assets of more than £23,250 is regarded as a self-funder of their care and support.
- What constitutes an asset depends on the setting of care required, this could be residential or non-residential. This may include savings, stocks or shares and property. The value of a person's home is not considered an asset where they are receiving community-based support at home.
- Self-funders have the right to request needs assessments and be provided with an assessment report.
- The Local Authority has the power to charge for support at full cost and to charge an arrangement fee, when support is provided and arrangements are made on peoples behalf, and they are self-funders.
- Self-funders have the right to access the universal support a Local Authority provides under the Care Act, including information, advice and guidance, preventative support and support that might promote general wellbeing.
- If a person's assets were to approach the threshold of £23,250, they could approach the Local Authority for an assessment, to determine their eligibility for care and support and a financial assessment to determine what contributions the Local Authority could provide for support arrangements.
- It is difficult to state accurately how many people do self-fund in Leicester City. National Estimates state between 18-23% of people who require Adult Social Care in Leicester may be able to self-fund their care.
- It is in the Council's interests to ensure that people's independence is maximised, as this promotes wellbeing and reduces the need for people to use their assets to pay for care that could have been avoided. Therefore, self-funders have full access to crisis response services and reablement, which are provided at no cost to anyone requiring this support, including people who would self-fund their longer-term care.
- Leicester City Council does not currently charge for support in arranging a person's care, where it is being self-funded.
- The Council is currently making arrangements for 53 self-funding individuals. In which 21 receiving non-residential care and 32 people receiving residential care.
- A person who has self-funded an independently chosen care home is likely to be paying a higher weekly rate that a person placed by a Local Authority.
- The Council may not agree to fund the care that is currently in place for a person on a self-funding basis. Where a person is already living in a care home, this could present a challenge and would require exploring alternative settings, either in the community or in a less expensive care home that adequately meets an individual's needs. This can be

upsetting for individuals and families, who, understandably, do not wish to move from their current home. Each year, the Council will work with a small number of individuals faced with this situation.

- In 2023/24 275 people were newly admitted into Adult Social Care. 20 of these people were new admissions into Council funded care due to their savings dropping below the threshold., but were already in care at the point of approaching the Council.

In response to questions and comments from Members, it was noted that:

- The structure on how assets are reviewed for people self-funding care in the community does not include the house they or their family currently live. The Charging Framework is a national policy and should be followed at a local level.
- When an individual is already in a care placement and they drop below the threshold to receive state funded care, it is reasonable to consider moving them to a lesser costing facility that still meets the required care needs. This would be subject to careful assessment including of any wellbeing impact. People who may move would still have a choice and support in negotiating with providers across the City or wider, to support with their care move. This scenario affects only a very small number of people each year.

AGREED:

1. That Members note the report.
2. Health Watch Leicester to circulate flyer with details of support available for Members and the wider Council.
3. Any further questions be sent over to the Director of Adult Social Care and Safeguarding.

102. CQC ASSESSMENT UPDATE

The Strategic Director of Social Care and Education provided a verbal update on the Care Quality Commission Assessment progress.

There a been a process over last few weeks of submitting evidence to the Care Commission.

Key points noted:

- A detailed presentation had taken place to aid the commission in understanding the key issues for Leicester.
- The commission would be joining in the first week of February 2025.
- There would be a range of activity including, interviews and focus groups.
- Immediate feedback was not expected, gradings and comments would come later.
- This marked the first occasion in which the Care Quality Commission would be involved in such a way.
- The Strategic Director of Social Care and Education welcomed this direction

- and looked to the resulting insights for the future.
- Healthwatch advised that they had been approached for feedback.

Agreed:

- 1) That the report be noted.

103. WORK PROGRAMME

The Chair reminded Members that should there be any items they wish to be considered for the work programme then to share these with her and the senior governance officer.

It was noted that complex needs of young people with SEND entering Adult Social Care.

104. ANY OTHER URGENT BUSINESS

With there being no further business, the meeting closed at 6.41pm.

Appendix B



Annual Report 2023/24 Adult Social Care (ASC) Complaints and Commendations

For consideration by:
Adult Social Care Scrutiny Commission

Date: 13th March 2025

Lead director: Kate Galoppi

Useful information

- Ward(s) affected: All
- Report author: Joanne Tansey
- Author contact details: joanne.tansey@leicester.gov.uk 0116 454 2472

1. Purpose of report

- 1.1 The purpose of this report is to provide the Executive Lead for Adult Social Care and senior officers with a copy of the Annual Report 2023/24 produced in relation to Adult Social Care's (ASC) statutory, corporate, Local Government & Social Care Ombudsman complaints and commendations. Information within this report provides a fuller picture of the complaints and commendations received across the Department and accompanying analysis.

2. Report Summary

- 2.1 Where possible, services in Adult Social Care proactively address and resolve the many and varied informal contacts they receive promptly and directly, outside of the statutory complaint process. Work is continuing within the department to ensure that any themes and trends arising from these broad contacts are usefully captured, to contribute to the department's understanding about the relevance and quality of the services it is providing to the individuals that draw on social care support and their carers.
- 2.3 Aside from the specific complaint information noted in this report, the Adult Social Care complaint team directly received 200 other contacts in 2023/24 which could be addressed with brief involvement: 80% of these contacts went on to be directed to a specific team in ASC for further action, 15% required a redirection to Leicestershire County Council and the remaining 5% were forwarded to another City Council service.
- 2.4 The details in the annual report are specifically in relation to the enquiries, statutory, corporate, Local Government & Social Care Ombudsman complaints considered, as well as commendations received by Adult Social Care during the last year. This information is provided with some further analysis of the types of complaints received, by division and across service areas.
- 2.5 The full version of the annual report is attached for information at Appendix 1.

3. Recommendations

- 3.1 The Adult Social Care Scrutiny Commission are recommended to note the contents of this report and provide any comments as needed.

4. Supporting information

For the purposes of this meeting and of note from 2023/24:

- 2.1 The number of formal statutory complaints concluded during the year was 57.
- 2.2 Nineteen complaints were upheld (33% of total) and 7 (12%) were partially upheld. One of the complaints was found in relation to a care provider's actions directly.
- 2.3 The top reasons for complaints received in 2023/24 were in relation to lack of communication / consultation / information (and equally) challenging practice decision, followed by a delay in receiving a service.
- 2.4 Most complaints received were in relation to aspects of a person's care and support (including financial matters), care assessment, OT involvement and safeguarding matters.
- 2.5 Most complaints upheld or partially upheld related to a lack of communication / consultation / information (and equally) challenging practice decision, followed by a delay in receiving a service.
- 2.6 Six formal contacts proceeded to be concluded by the Local Government & Social Care Ombudsman during 2023/24: two enquiries were upheld regarding the department's actions.
- 2.7 Some of the key complaint themes noted in the Local Government & Social Care Ombudsman's Annual Review of Adult Social Care Complaints 2023-24 were in relation to: assessment and care planning, charging issues, residential care and safeguarding.
- 2.8 According to the Ombudsman's Review, 80% of all ASC complaint investigations undertaken across England in 2023/24 were upheld. The City's upheld rate for ASC complaints was 67%.
- 2.9 Positively, the Department received a higher number of commendations for members of staff compared to last year, reflecting on the good service provided: 244 commendations were received. These commendations have been acknowledged further within the Department and with the members of staff concerned.
- 2.10 A key part of managing complaints involves identifying learning and taking suitable actions to avoid similar issues arising again. Follow-up actions may be implemented on a departmental basis or can just be service-specific. Some of the department's learning and associated actions in response to the

complaints considered in 2023/24 is set out at section 7 of the main report and included such actions as:

- Matters highlighted for awareness at staff forums (service specific action).
- Staff reminders issued in relation to best practice (service and department-wide action)
- Change to practice and related workshop (service specific action).
- Training and procedural guidance issued on specific theme (service specific action).
- Random sample audits conducted to follow-up on practice (service specific action).
- Review of cross-departmental working arrangements (service specific action)
- Changes made to recording processes (service specific action).
- Making documents shared with individuals clearer and information more transparent (service specific action).

2.11 As noted at paragraph 2.2, further work is continuing to make sure that the Department considers all sources of feedback that it receives holistically (including complaint and commendation information), in conjunction with the work of ASC's Practice Oversight Board. This Board focuses on the links between feedback, learning and making practice improvements.

2.12 Thirty-nine contacts initially forwarded to the ASC Complaint Team were reviewed and proceeded to be actively addressed by services within the department, further to receipt, rather than being dealt with as formal complaints directly (noted as initial enquiries). The issues noted as initial enquiries varied and covered a wide range of topics such as: contact/access issues; waiting times; issues around support and care providers; change in support arrangements; charges/funding; potential safeguarding action and contesting other family members' involvements.

2.13 The ASC Complaints Team continues to work with managers to ensure that efficient, robust, and thorough investigations are undertaken for all incoming complaints. Without compromising the independence of the complaint process, the Complaints Team provides support that helps to avoid additional costs that could be incurred through the engagement of external complaint investigators. The team works to ensure that quality, open and transparent responses are provided to individuals in receipt of support from ASC: making sure that any corrective actions or remedies are identified and addressed as appropriate, with lessons for wider service learning also being taken forwards.

5. Supporting Documents

The full version of the Annual Report 2023/24 Adult Social Care Complaints and Commendations is attached as Appendix 1.

The Adult Social Care complaint process adheres to the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009.

The Regulations' publishing requirements for Local Authorities and complaints highlight that the following details should be made available annually:

- The number of complaints received within a period 1st April – 31st March.
- The number of complaints determined as well-founded.
- The number of complaints referred to the Local Government Ombudsman.
- A summary of the subject matter of complaints received.
- A summary of any matters of general importance arising out of the complaints or the way in which they were handled.
- Any matter where action has been taken or is to be taken to improve services as a consequence of those complaints.
- Ensure that the annual report is available to any person on request.

6. Financial, Legal, and other implications

Financial implications

There are no direct financial implications arising from this report.

Signed: Rohit Rughani

Dated: 14 November 2024

Legal implications

I confirm that there are no specific legal imps on this annual report.

Signed: Susan Holmes

Dated: 29th November 2024

Climate Change Emergency implications

There are no significant climate emergency implications directly associated with this report.

Signed: Aidan Davis, Sustainability Officer, Ext 37 2284

Dated: 14 November 2024

Equalities implications

The Annual Report 2023/24 details information about statutory, corporate, Local Government & Social Care Ombudsman complaints, as well as commendations that have been received by Adult Social Care during the last year. Complaints are a valuable source of information which can help to identify recurring or underlying problems and potential improvements. Having an accessible robust complaints procedure in place ensures fair redress to dissatisfaction experienced and reported by users of services and carers on their behalf.

This process is in keeping with one of the council's equality and diversity strategy priorities areas, to design, commission and deliver services that are, inclusive and responsive to the needs of people and communities in Leicester. Analysis has been undertaken in terms of complainants' profiles, as recorded in the report, to ensure that

the complaint procedure remains accessible and equitable to all. The report provides evidence to inform progress against this outcome. In addition, recording and analysis of complaints received as set out in the report enables the council to consider whether it is meeting the general Public Sector Equality Duty aims of eliminating discrimination and promoting equality of opportunity in its service provision.

Signed: Equalities Officer, Surinder Singh

Dated: 14 November 2024

ANNUAL REPORT 2023/24

ADULT SOCIAL CARE (ASC) COMPLAINTS AND COMMENDATIONS

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APPENDICES

APPENDIX 1

1. Commendations by service area
2. Breakdown of complaint information received across the Department
3. LGSCO complaints received by service

APPENDIX 2

Adult Social Care (ASC) complaint process in brief (chart)

APPENDIX 3

Performance indicators relating to the management of statutory complaints

APPENDIX 4

Outcomes for 2023/24 action plan

APPENDIX 5

2024/25 action plan

1. Executive summary

Early resolution actions

- I. Where possible, services in Adult Social Care (ASC) will be proactive and take early resolution actions to quickly address and resolve the many and varied informal contacts they receive directly, outside of the statutory complaint process. Work is continuing within the department to ensure that any themes and trends arising from such contacts are usefully captured, to help contribute to the department's understanding of the suitability and quality of the services provided to people who draw on support and their carers.
- II. The Adult Social Care complaint team directly received 200 other contacts in 2023/24 that were addressed with brief involvement (such contacts for example included more general requests for response, like a change in care call times, or a request for money from a person drawing on support – ultimately requiring redirection for action by a specific team or worker). Eighty percent of these contacts went on to be directed to a specific team in ASC for further action, 15% required a redirection to Leicestershire County Council and the remaining 5% were forwarded to another City Council service.

More formal contacts recorded

- III. In 2023/24, 39 specific contacts were noted by the ASC complaint team as 'initial enquiries' (pre-complaint matters). These contacts covered a wide range of topics such as: contact/access issues; waiting times; issues around support and care providers; change in support arrangements; charges/funding; potential safeguarding action and contesting other family members' involvements. The complaints team had more in-depth involvement with these contacts and addressed some related matters directly. However, the majority still proceeded to be addressed by the responsible team, without the need for further consideration as a formal complaint.

Complaint contacts

- IV. Complaints, as well as commendations, provide valuable feedback about the services provided by a Council. They provide an indication of the areas that are performing well and highlight where further attention should be focused to improve service delivery and practice.
- V. For those matters that are addressed formally as a complaint, it is a statutory requirement to produce an annual report under the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009.
- VI. The number of formal statutory complaints concluded in 2023/24 was 57: 9 complaints more than the previous year. All 57 complaints progressed to a conclusion under the complaint process, with 19 of these being upheld against the Council (1 against a care provider specifically) and 7 being partially upheld.
- VII. For all contacts that proceed to be formally reviewed under the statutory ASC complaint procedure, investigations at the first stage of the process are based on an allocated response timescale that may be up to 10 working days ('green' complaints), up to 20 working days ('amber' complaints), or up to 65 working days

('red' complaints). Complaints that progress to the second and final stage of the statutory process are considered by the Local Government & Social Care Ombudsman (LGSCO).

- VIII. In 2023/24 one complaint was responded to in conjunction with Health partners, with whom Adult Social Care shares the same complaint procedure. A joint contribution was required for this complaint that related to support at home, post-hospital discharge.
- IX. The highest number of complaints received were in relation to care and support (including financial matters), care assessment, OT involvement and safeguarding matters.
- X. The top three reasons for upholding complaints either partially or fully in 2023/24 were: lack of communication / consultation / information (and equally) challenging practice decision, followed by a delay in receiving a service.
- XI. The average response time for complaints to be addressed during 2023/24 was 23 working days.
- XII. During 2023/24, ASC noted the conclusion of six Local Government & Social Care Ombudsman (LGSCO) enquiries in relation to its services. Two enquiries were upheld regarding the department's actions. No public interest reports were published.
- XIII. Some complaints fall outside the remit of the statutory complaint procedure and are addressed under the Council's corporate procedure: two such complaints were recorded in 2023/24. One was from a member of the public and the other was from a care provider.
- XIV. A breakdown of the complaints received across Adult Social Care by division and service areas is included with Appendix 1 of this report.

Commendations

- XV. There was an increase in the number of commendations received in 2023/24 with 244 recorded, compared to 199 in 2022/23: a positive reflection of the Department's work. The most common message received with commendations is a 'thank you', followed by praise for a worker's/team's involvement.

"we work in partnership with others to make sure that all our services work seamlessly together from the perspective of the person accessing services"



making it real
how to do personalised care and support

2. Accessibility of the complaint procedure

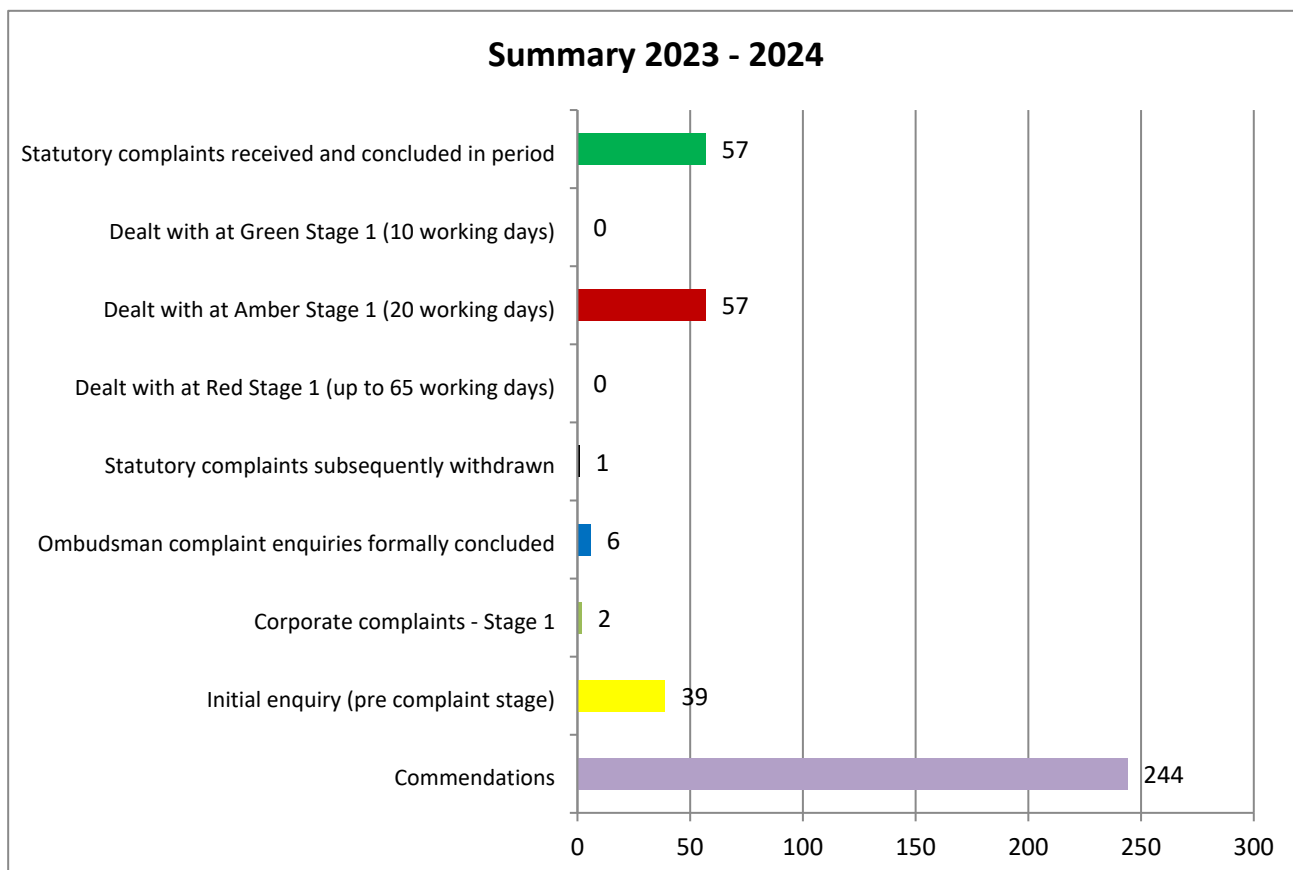
- 2.1 Details relating to the Adult Social Care complaint procedure and how to make a complaint are available on www.leicester.gov.uk (which also incorporates easy read advice and direct access to an online complaint form). Individuals that are new to the service are also advised of the

complaint procedure by care management staff as part of initial discussions, with the assessment process.

- 2.2 Adult Social Care can also take on-board oversight for some matters, where it has been involved with the support arrangements for an individual's care (i.e., for complaints in relation to residential or home care provision).
- 2.3 The majority of complaint contact arises from the Council's website link to making a complaint and also through direct emails to the ASC Complaints Team.
- 2.4 Complaint information signposts individuals to advocacy organisations for support but in practice most individuals, their relatives or carers, make an approach directly. The main sources for complaint contacts in 2023/24 were:
 - relatives - 51%
 - direct contact from individual in receipt of support - 40%
 - advocacy/formal representative – 5%
 - friend/next of kin – 4%
- 2.5 Adult Social Care encourages an open and accessible approach to complaints, which is reflected in the numbers of complaints considered by the Council each year (although the overall number of complaints received Vs those in receipt of service provision remains small in comparison). With each formal complaint that is addressed, the person is advised of their right to go to the Local Government & Social Care Ombudsman and the Department may receive Local Government & Social Care Ombudsman enquiries further to this.
- 2.6 Complaints received concerning ASC services and other partner agencies, such as the NHS, University Hospitals Leicester, Leicestershire Partnership Trust, and Leicestershire County Council are also responded to under the same statutory complaint regulations. A locally agreed process is in place to help the experience run more efficiently and effectively for the person. One complaint was managed under these arrangements during 2023/24. This complaint concerned a relative's discharge from hospital and arrangements for support at home.

3. 2023/24 complaint contacts

- 3.1 All contacts recorded in relation to complaints and commendations received during 2023/24 are highlighted in the following chart:



To explain further:

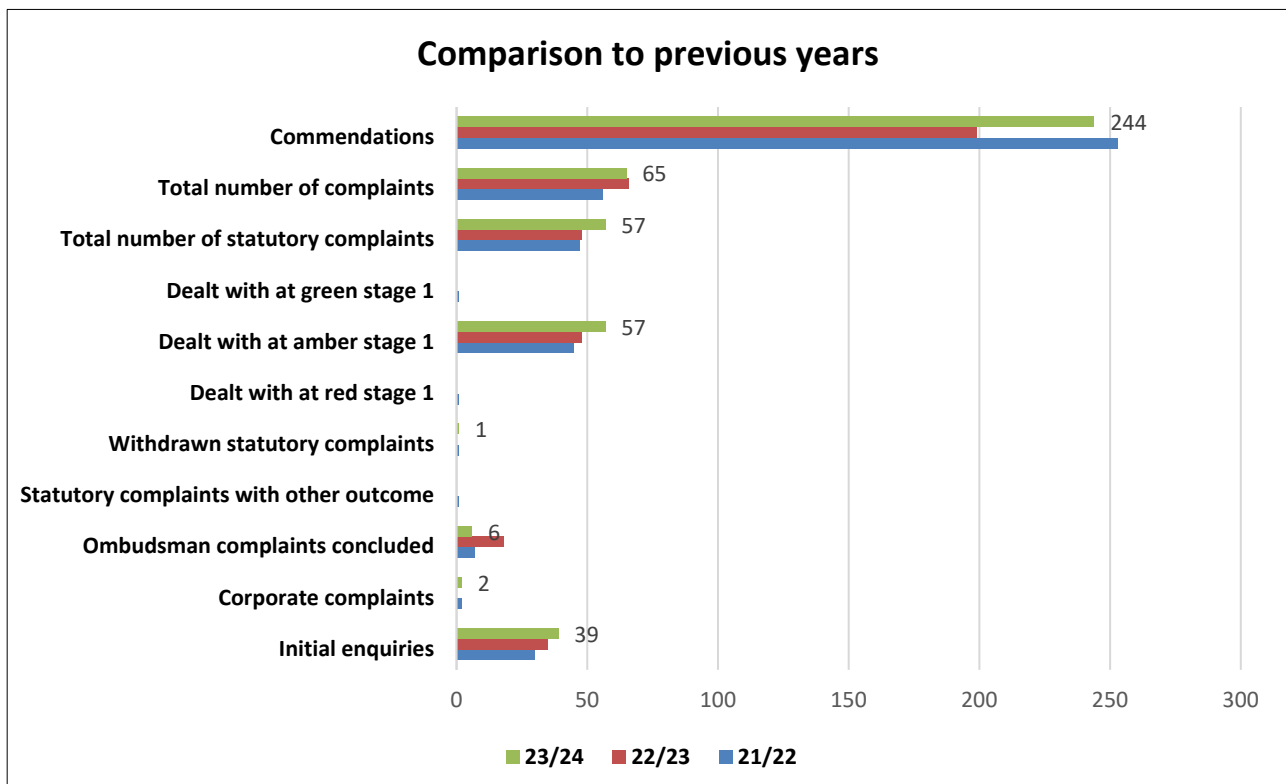
- 3.2 All contacts here were formally recorded during the reporting period, either as an initial enquiryⁱ (39) or as a complaint. Fifty-seven statutory complaints were concluded during 2023/24 and all were allocated up to a 20-working day response timescale (there are other locally agreed timescales applied for complaints that concern other organisations, such as health).
- 3.3 Of the 57 statutory stage 1 complaints that progressed to a formal conclusion, 19 complaints were upheld (33.3% of total) and 7 (12.3%) were partially upheld. One of the upheld complaints was in relation to a care provider's actions, specifically.
- 3.4 Two complaints were logged under the corporate complaint procedure in 2023/24.
- 3.5 During 2023/24, ASC recorded six formal enquiries concluded by the Local Government & Social Care Ombudsman (LGSCO) in relation to services. (Further details about the LGSCO complaints received for ASC are provided at section 9).
- 3.6 Regular contact is maintained with people who raise a complaint and a flexible approach is employed to address the issues being raised. On occasion, open communication between the person raising concerns and the Council encourages resolution earlier on in the complaint process (one contact was withdrawn in 2023/34).

ⁱ An initial enquiry is a contact that falls outside the definition of a statutory complaint as it has been resolved within one working day. Additionally, a concern may be classed as an initial enquiry when clarification is pending as to whether the complaint procedure is the appropriate route for addressing the matter further.

- 3.7 An increase on the previous year, a substantial number of commendations were received in 2023/24, with 244 received compared to 199. Commendations are always welcomed by staff and the importance of sharing positive feedback has continued to be encouraged throughout the year.
- 3.8 Commendations received are highlighted in the Social Care & Education newsletter and any significant feedback is acknowledged further with the member of staff concerned, by the Director. The Complaints Team also flags up the positive feedback received for a service with the respective Heads of Service, for their further attention. (See Section 10 for some examples of the positive comments received).

4. Comparison to previous years

- 4.1 To provide some more general information about the nature of contacts received over the past 3 years by the City Council's Adult Social Care Department, a snapshot of the type of contacts recorded by the Complaints Team are as follows:ⁱ



5. Information in relation to people and complaints in 2023/24

- 5.1 Each complaint received by Adult Social Care is considered on an individual basis and in relation to the specific concerns raised. Any resolution actions for individual complaints are usually addressed at the point of providing a written response to the person.

ⁱ Presently, there is no statutory requirement for local authorities to publish complaint information, and the data that is available from other local authorities does not always offer like for like information for benchmarking purposes. The issues/nature of services that local authorities may include under their statutory complaint process can vary.

5.2 All complaints are subsequently analysed further, to identify any wider lessons, themes or common issues arising. Although the overall number of complaints received represents a small percentage of the people drawing on support from ASC, further analysis has been undertaken in terms of who the complaint is in relation to, as recorded below, to ensure that the complaint procedure remains accessible and equitable to all.

5.3 A total of 1739 individuals were deemed eligible to receive support from ASC following a completed assessment in 2023/24. From available data, 5079 people were noted to be in receipt of long-term support from ASC on 31st March 2024.

Complaints in relation to ethnicity

5.4 A detailed breakdown of the ethnicity of those individuals at the heart of complaints received in 2022/23 and 2023/24 is as follows:

Ethnicity of individual in receipt of support	2022/23 Number / percentage of people raising a complaint	2023/24 Number / percentage of people raising a complaint	Overall Number/ percentage of ASC individuals in long term support as of 31st March 2024
Asian or Asian British – Indian	17 (35.4%)	12 (21%)	1519 (29.9%)
Asian or Asian British – Pakistani	-	-	93 (1.8%)
Asian/Asian British – Bangladeshi	1 (2%)	-	18 (0.4%)
Asian/Asian British – Other	1 (2%)	2 (3.5%)	166 (3.3%)
Chinese	-	-	10 (0.2%)
Arab/Arab British	-	-	4 (0.1%)
Black or Black British – Caribbean	2 (4.1%)	4 (7%)	155 (3.1%)
Black or Black British - African	1 (2%)	2 (3.5%)	143 (2.8%)
Black or Black British – Other	1 (2%)	1 (1.8%)	36 (0.7%)
Dual Heritage	3 (6.2%)	1 (1.8%)	92 (1.8%)
White – British	16 (33.3%)	26 (45.6%)	2476 (48.7%)
White - Irish	2 (4.1%)	1 (1.8%)	53 (1.0%)
White – European	-	-	-
White – Other	-	1 (1.8%)	147 (2.9%)
Other	1 (2%)	-	40 (0.8%)
Not known	3 (6.2%)	7 (12.3%)	127 (2.5%)

5.5 In 2023/24: 49.2% of people raising a complaint identified as White; 24.5% identified as Asian, 12.3% as Black and 1.8% identified as individuals of dual heritage (ethnicity for 12.3% was unknown). The sample size of people making a complaint is relatively small to draw any significant conclusions from, but based on ethnicity, people complaining in 2023/24 are generally reflective (when compared proportionately) of the breakdown by ethnicity for those individuals in receipt of long-term support from Adult Social Care.^[1]

5.6 The following complaint outcomes were noted as follows:

Outcome	Black, Asian, other minority ethnic	White	Dual Heritage / Not known / Other	Totals (for complaints concluded)
Not Upheld	15	13	3	31
Partially Upheld	2	4	1	7
Upheld	4	11	3	18
Upheld – Not related to Council Actions	0	0	1	1
Total	21	28	8	57

5.7 The top complaint reason for either partially upheld or upheld complaints from individuals that identified as Black, Asian or Minority Ethnic was split between challenging practice decision and lack of communication/information/consultation.

5.8 The top complaint reason identified for partially upheld/upheld complaints from White individuals was shared between lack of communication/information/consultation and challenging practice decision.

5.9 The top primary service reason for individuals from Black, Asian and Minority Ethnic groups was equally split between mental illness and physical disability, whereas for White groups it was physically frail/temporary ill.

^[1]The breakdown of ethnicity across the City as per the March 2021 census for those aged 18+ was: 43.6% - White; Asian – 43.1%; Black – 7.2%; Mixed/multiple ethnic – 2.4%; Other ethnic – 3.7% (data source - www.ukcensusdata.com)

5.10 Given the small number of complaints received, the information under consideration here is not statistically significant, which makes it difficult to draw any firm conclusions in relation to information concerning ethnicity, complaints and any potential impacts arising from this. The ASC complaint process operates to robust standards which are designed to be person-focused, open, fair, and accountable for all individuals that access it: continuous learning from complaints, whether at an individual, themed or departmental level also remains an active part of the process.

Profile information according to age

5.11 The highest number of statutory complaints received against a specific age group was for the 75-84 years age range (14 complaints were received).ⁱ The top primary service reason recorded for this age group was physically frail/temporary ill.

5.12 For those people making a complaint in the age range of 51-64, the prevailing primary service reason was learning disability.

5.13 The complaint outcomes determined by age groups for 2023/24 were as follows:

Outcome	18-24	25-50	51-64	65-74	75-84	85-94
Not Upheld	3	7	9	4	6	2
Partially Upheld	0	1	0	1	4	1
Upheld	0	1	4	1	4	7
Upheld – Not related to Council Actions	0	1	0	0	0	0
Total & %*	3 (5.5%)	10 (17.8%)	13 (23.2%)	6 (10.7%)	14 (25%)	10 (17.8%)

*56 complaints were recorded with the person's age

According to gender

5.14 In 2023/24 29 statutory complaints (51%) were made in relation to females, and 28 (49%) in relation to males.ⁱⁱ

ⁱ March 2021 Census data for Leicester City - the average age of Leicester's population in 2021 was 33 years.

ⁱⁱ March 2021 Census data for Leicester City - 50.6% females, 49.4% males

- 5.15 The leading primary service type relating to females who raised a complaint was equally split between physically frail/temporary illness and learning disability/learning disability autistic spectrum disorder. For males it was physically frail/temporary illness (where details are recorded).

Repeat complaints

- 5.16 The complaint process remains open to individuals wishing to raise concerns and there may be some occasions when individuals find it necessary to raise more than one complaint during the year, as interactions between individuals and ASC progress. However, some individuals do opt to revisit the complaint process on a more routine basis, turning to this as the first port of call for a concern. On occasion, and as appropriate on receipt of such contact, the Complaints Team will attempt to redirect concerns to the relevant service to be followed up and addressed outside of the complaint process.
- 5.17 According to the merits of the situation, the Department sometimes considers the resources being called upon to keep addressing an individual's contact. There are times when the Department feels that it is necessary to consider special measures for addressing complaints that have been ongoing, or if it appears that contacts have become inappropriately persistent or vexatious in nature: this may also include occasions when officers have been presented with abusive or threatening behaviour. The Department's response to such situations addresses the circumstances at hand but may include a review of the individual's contact with the Department for a specific period or advising that the Department will not keep responding to the same issues it considers have been reasonably addressed already.

6. Complaint reasons

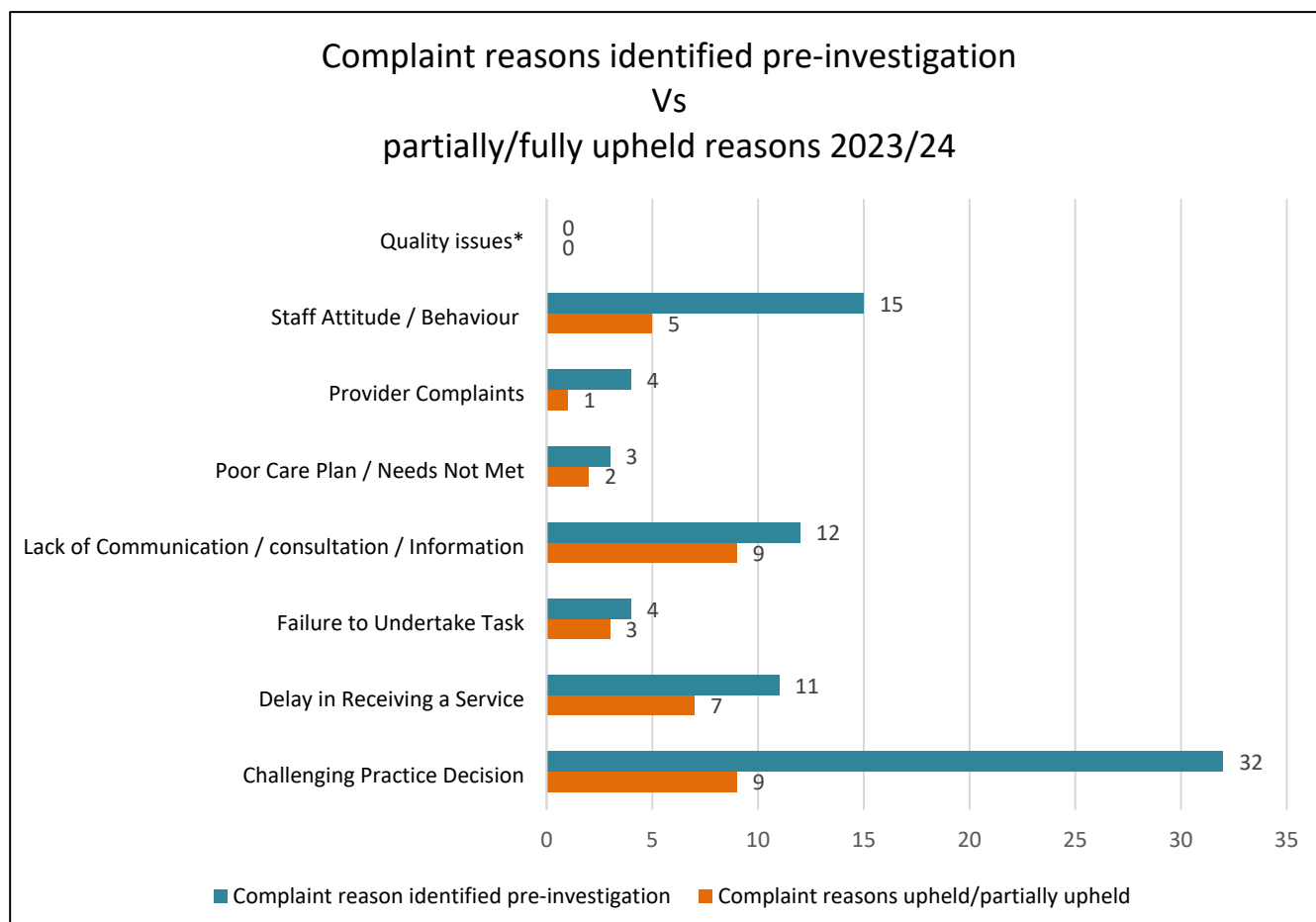
- 6.1 Some of the more common themes for making a complaint concerned the following in 2023/24:

- Waiting times (particularly in relation to OT/care assessments)
- OT adaptation fulfilment – waiting times
- Telephone waiting times
- Quality of communication (particularly during waiting periods)
- Delay in worker being allocated
- Delay in concerns being addressed (for instance – response to a contact, an assessment or allocation)
- Carer's assessment not conducted in a timely way
- Disagreement with proposed adaptations
- Specific interaction with worker that did not go well
- ASC not providing support the person considers they need
- The management and safeguarding of a person's financial arrangements.
- Disagreement with assessment outcome
- Financial assessment related e.g. disagreement with contribution

- 6.2 Adult Social Care's statutory complaint database currently notes 8 specific reasons for raising a complaint: more than one reason per complaint may be identified. The principle reasons behind any complaint are recorded at the point of receipt by the Complaints Team and full consideration is given to all points raised, whether a major or more incidental part of the

complaint.ⁱ The complaint points noted at the start of the process are then reconsidered on completion of the investigation to establish whether the initial reasons for complaint were upheld or not.

6.3 The following chart shows a more detailed breakdown of the complaint reasons identified on receipt (i.e., pre-investigation) during the last year, together with a picture of those complaint reasons that then went on to be partially or fully upheld after investigation.



**Quality issues include those complaints that highlight matters such as issues with timeliness, poor recording.*

- 6.4 As a further fail-safe, where particularly high numbers of the same complaint reason arise, action is taken to explore why such concerns may be arising and to see if there are any underlying issues to address as part of a trend or theme. During the latter part of the year, the Complaints Team reviewed those complaints that noted a higher number of similar concerns being raised, to try and get a better understanding of the trigger for such complaints and to see if there were any common issues at the root of these matters.
- 6.5 Some of the highlighted reasons noted – for instance ‘challenging practice decision’, (i.e., disagreement with an action or a decision), or ‘failure to undertake task’ have a clearer rationale for being raised, as well as the reasons why they then proceed to be upheld or not. The reasons noted under this category cover a wide range of actions and decisions made by different services.
- 6.6 Several complaints were noted with issues in relation to communication, consultation and information sharing. Some of these complaints highlighted the importance of:

ⁱ Adopting an approach to encompass all reasons can drive-up the numbers recorded against a specific complaint at the start of the process.

- Providing relevant and timely information to people to ensure that they remain actively involved, know what to expect and when, and are able to make informed decisions, with a full and clear understanding of a situation – particularly at times of crisis, change or when waiting for further actions.
 - Making sure that essential information is recorded.
- 6.7 Complaints that fall under the umbrella of ‘staff attitude/behaviour’ often cover a broad range of issues and this year included matters such as; the supported person not feeling listened to/communicated with well by the worker, a member of staff perceived as rude in conversation or during a specific interaction and specific points relating to individual worker’s practice.
- 6.8 Complaints arising from specific exchanges in communication can be much more difficult to investigate in retrospect, compared to those more self-evident issues, like a delay or a failure in service of some sort. However, with any complaint concerning a specific member of staff’s actions, the issues raised are always explored further and considered directly between the member of staff involved and a manager.

7. Learning and actions identified from complaints received in 2023/24

- 7.1 At the point that a complaint is addressed, immediate actions are taken to remedy any issues that may have arisen through fault. Such actions usually include an apology, together with a more detailed explanation of events that arose. Other common actions include a further assessment or review being undertaken, or a change in allocated worker.
- 7.2 Most complaints upheld in 2023/24 had actions that included an apology and an explanation of the circumstances, in response. Some other, specific actions, also involved a financial assessment being carried out in retrospect and a revision to the start date when care costs were applied.
- 7.3 The following are further examples of specific actions taken to help implement the learning identified from complaints received and upheld during 2023/24 (presented to Adult Social Care’s Leadership Management Team and Lead Member during the year) and some broader themes that are currently being considered further in the context of ‘8’ below.
- I. Concerns discussed with staff member as a learning point/reflected on in supervision (individual action).
 - II. Matters highlighted for awareness at staff forums (service specific action).
 - III. Staff reminders issued in relation to best practice (service and department-wide action)
 - IV. Change to practice and related workshop (service specific action).
 - V. Training and procedural guidance issued on specific theme (service specific action).
 - VI. Random sample audits conducted to follow-up on practice (service specific action).
 - VII. Review of cross-departmental working arrangements (service specific action)
 - VIII. Adjustment made to care package in place (individual action).
 - IX. Repayment plan/instalment plan agreed to help the person pay for their recent stay in residential home (individual action).
 - X. Changes made to recording processes (service specific action).

XI. Making documents shared with individuals clearer and information more transparent (service specific action).

XII. Outcome of safeguarding investigation provided (individual action).

- 7.4 Further work continues to make sure that the Department considers all sources of feedback received holistically (including complaint and commendation information), in conjunction with the work of ASC's Practice Oversight Board. This Board focuses on the links between the many sources of feedback that are received, learning and making practice improvements. A specific feedback and engagement working group has also recently been set up to consider how best all feedback received across the department can be drawn together and managed better.

Repeat complaint themes identified between 2022/23 & 2023/24

- 7.5 In relation to the overall number of people that draw on Adult Social Care's support, the number of complaints received in 2023/24 remains relatively low. Whilst there is limited information to draw common themes from, any complaint issues that have arisen on a more regular basis have been considered.
- 7.6 Aspects of communication continues to remain one of the key reasons for complaining. Other, repeated, reasons include:
- I. Timeliness of actions
 - II. Waiting times (adaptations)
 - III. Delays in receiving a service/support
 - IV. Support in place not being sufficient/suitable
 - V. Carers assessment not being offered/completed
 - VI. Assessment not accounting for needs fully

The details above are reported within the department, as described in more detail at section 8.

8. Putting learning from complaints into further action

- 8.1 As noted, it is expected that appropriate actions are undertaken 'locally', at the point where a matter first arises in a timely way, to remedy individual concerns as part of the complaint process. Generally, the investigating Head of Service is responsible for identifying and overseeing such action.
- 8.2 Further to a complaint investigation that highlights specific findings of failure or error, the Head of Service is also asked to consider and provide an update on the actions that may have been taken within their service area or more widely across the Department; demonstrating how any changes have been implemented following complaint feedback. This information is then also discussed with Heads of Service, with further reporting on any actions to ASC's Leadership Team and Lead Member.
- 8.3 All complaints received are also reviewed by the Complaints Team, to establish whether there are any common trends or issues emerging across the Department and to see if any previously identified themes continue to be repeated (see 7 above). This wholesale review of complaints is intended to provide the Department with a broader awareness of the issues that arise

concerning its services and to further identify the impact that our actions have on individuals, to help identify any wider improvements that may need to be taken.

8.4 Wider changes for the department, relating to learning activity identified from complaints, may be in relation to the following (not an exhaustive list):

- new policy introduced or change made to existing policy
- new practice introduced or change made to existing practice
- creation of new staff guidance or revision to existing staff guidance
- staff briefing/information on specific matter shared
- review/revision of publicly available information (website pages etc)
- targeted learning event/workshop
- staff training

8.5 In practice, most learning points from complaints received in 2023/24 resulted in discussions with a staff member as part of reflective practice or supervision or further staff/team training and staff reminders being issued.

8.6 The correlation between learning and any follow-up actions, as well as the impact of such actions, are explored further in conjunction with the work of the Practice Oversight Board with the aim of establishing how, as a department, we are clearly demonstrating the way in which key feedback is translating into practical and tangible service improvements or actions. This is an area that remains under development currently. (See 7.4 above)

8.7 Key feedback identified from complaints, as well as commendations, is also considered alongside other sources of departmental feedback, to establish any other evident shared themes. Progression of these issues are managed through other departmental improvement mechanisms such as the Practice Oversight Board, Operational Leads meetings or the First Line Supervisor's Forum. The Complaints Team also provides feedback to the wider department managers and staff, as part of ongoing activity in relation to complaints.

9. Contact with the Local Government & Social Care Ombudsman (LGSCO)

9.1 The LGSCO receives contacts in relation to all Council services and although reported with their own statistics, not all contacts are directed to the Local Authority for further attention. Consequently, there is usually a slight difference in the data sets published by the LGSCO and the City Council for that year.

9.2 Adult Social Care made up approximately 11% of the total number of Ombudsman complaints decided in relation to the **entire** City Councilⁱ in 2023/24. The City Council had an upheld rate of 86%: for ASC complaints specifically, the upheld rate was 67%. (The upheld rate for ASC complaints across England was 80%.)

9.3 From ASC's records, **six** complaints were formally determined against the Department by the LGSCO during 2023/24.

The enquiries in relation to ASC's actions in 2023/24 were concluded with the following outcomes:

ⁱ Source - Local Government & Social Care Ombudsman's website www.lgo.org.uk – figures here exclude LGSCO enquiries that were classed as incomplete, where advice was given or those matters that were referred to the authority to investigate in the first instance.

Upheld; fault and injustice	2
Not upheld, no fault	1
Closed after initial enquiries; no further action	2
Closed after initial enquiries; outside of jurisdiction	1

- 9.4 The two complaints upheld against ASC required formal recommendations to be agreed and met, with associated actions confirmed to the Ombudsman's office on completion. A summary of these individual complaints and the recommendations - since met - are as follows:

i. Complaint ref: 23 001 484 (Adult Social Care and Housing)

Outcome - Upheld: fault and injustice

A complaint was raised in relation to a step lift installed at the property and ongoing issues caused in relation to its functionality, breakdowns and repairs – the person living in the property could not be fully independent as they continued to require support getting in and out of the house.

The Council was asked to apologise to the person and to pay £3,750 in recognition of the distress and the difficulties experienced due to the failings in the Council's service.

The Council was also asked to apologise to the family member raising the complaint and to pay £500 for distress and experience and the unnecessary time and trouble they had been put to as a result of the Council's failings.

ii. Complaint Ref: 23 007 177

Outcome - Upheld: fault and injustice

A complaint was raised in relation to the delay in allocation to a new social worker - the person considered this unnecessarily delayed their review. The person complained about poor/lack of communication and response to their telephone calls & emails when following this up.

A payment of £150 was made for the distress and frustration caused by the delays identified, and a reminder to staff was made, to adhere to the Care and Support Statutory Guidance, specifically regarding the undertaking of care and support plan reviews at least every 12 months.

- 9.5 Some of the Ombudsman's most common areas of complaint upheld against ASC services in England in 2023/24 related to assessment and care planning, charging issues, residential care and safeguarding. Leicester City's ASC complaint themes in 2023/24 were particularly around care and support (including financial matters), care assessment, OT involvement and safeguarding matters.
- 9.6 The Ombudsman's office publishes most decision statements recorded in an anonymised format on their website. These can be searched for by local authority, subject matter or reference number. They also provide a regular public summary bulletin that notes all decisions found, by authority.
- 9.7 The ASC Complaints Team has continued to take on a proactive role with the preparation of responses to all LGSCO enquiries. It is considered that this action has been of benefit to the Department, providing additional support to service areas that would otherwise be involved in addressing time-consuming enquiries. This action also allows for a further 'independent'

overview of complaint issues to take place, prior to any response being returned to the LGSCO, as well as supporting timely responses.

10. The good things people drawing on our support tell us

- 10.1 Another side to the Complaints Team's work involves capturing the positive feedback and commendations that come in across the Department, for further acknowledgment and for sharing. In those situations where staff have clearly gone above and beyond their duty, the individual's good work is shared and acknowledged further in writing by the Director.
- 10.2 Details of those individuals that have received commendations acknowledging the value of their work on behalf of the Department have been reported in the Department's newsletter. Heads of Service are provided with the positive reports received for their respective areas, to help determine how to share good news stories more widely within their own service.
- 10.3 Many more comments, often personal to the individual or the family's experience, have been received within the Department - confirming the importance and the value of ASC's work within the City. Commendations normally reflect the good people skills demonstrated by staff, notably:
- good and clear communication
 - empathetic and caring nature
 - humility
 - the ability to reassure or put the person at ease
 - politeness
- They also reflect those instances that have resulted in a positive difference to an individual's life and the receipt of useful equipment or guidance, is often mentioned.
- 10.4 Positive feedback is recorded and analysed further and reported via the Practice Oversight Board. Regular reports in relation to commendations (as well as complaints) help to add a further perspective for all the comments that the department receives and considers about its staff and services.
- 10.5 Positive comments received in 2023/24 have also been considered in relation to I Statements noted as part of the work of Think Local, Act Personal and the ethos of 'making it real' - a key driver behind Adult Social Care's approach to working and supporting people as well as possible, in partnership. I statements reflect what people drawing on the support of social care wish to see happen in relation to their life and supportⁱ: I statements set the bar in terms of the best outcome that personalised care can achieve.

ⁱIndividual I statements are set out under six main themes [Six themes of Making it Real - About - Making it Real - Think Local Act Personal](#)

Most commendations received during the year can be aligned to the following theme:

Workforce – The people who support me

The statement most identified with, within this theme was:

- I have considerate support delivered by competent people
- Followed by:
- I am supported by people who see me as a unique person with strengths, abilities and aspirations.

10.6 Some of the positive experiences that we have been told about and that link to some of the I statements and themes noted as part of Think Local, Act Personal are specifically:

When things need to change

Staying in control

- **I am supported to plan ahead for important changes in life that I can anticipate.**

"Your communication with myself personally has made it very reassuring that the best interests have been taken for my mum in this stage of her life. This can not only be daunting for her, but for us as a family too, and having someone like yourself helping and guiding us along is priceless.

From our initial meeting to our telephone conversations, we have had your kindness and your professionalism has been great!

Mum is now moving on to what we hope and believe is the right place for her, and for us as a family too."

Workforce

The people who support me

- **I have considerate support delivered by competent people.**

"She has been an invaluable source of support for both of us, and has been diligent, organised and exhibited so much care & compassion for myself and my father. It has given me extra help and respite to care and a slice of life for my father."

Flexible and Integrated Care and Support

My support, my own way

- **I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and personal goals.**

"Thank you ever so much for all your help through all of this it has been very much appreciated & I don't know what we would have done or how we would have managed to cope .. without your support.

X is most definitely in the right place to suit his needs borne out by the improvement in his general health & obvious weight gain. Despite his Alzheimer's he is more engaging than he was at home & he has more involvement with family, we're also able to take him out for weekly visits into the local town..."

Workforce

The people who support me

- **I am supported by people who see me as a unique person with strengths, abilities and aspirations.**

"...I was at an all-time low I felt like I had no purpose and I was really struggling ... however since (Worker) has been working with me she helped me overcome that and so many other things and see things in a completely different light before she started working with me I hadn't left the house for years not even to go to the shop but she helped me get a bus pass and I now am so more independent and have been on many many buses since!

.... She made such a huge positive impact to my life and honestly changed my life so so much and I wish I could explain my gratitude and how much she helped me but the truth is there is no words to explain how much she truly helped me deep down."

11. Report contacts

For more information relating to this report please contact:

Joanne Tansey, Customer Feedback & Complaints Manager

or

Kane Dickinson, Complaints Officer (ASC)

Social Care & Education

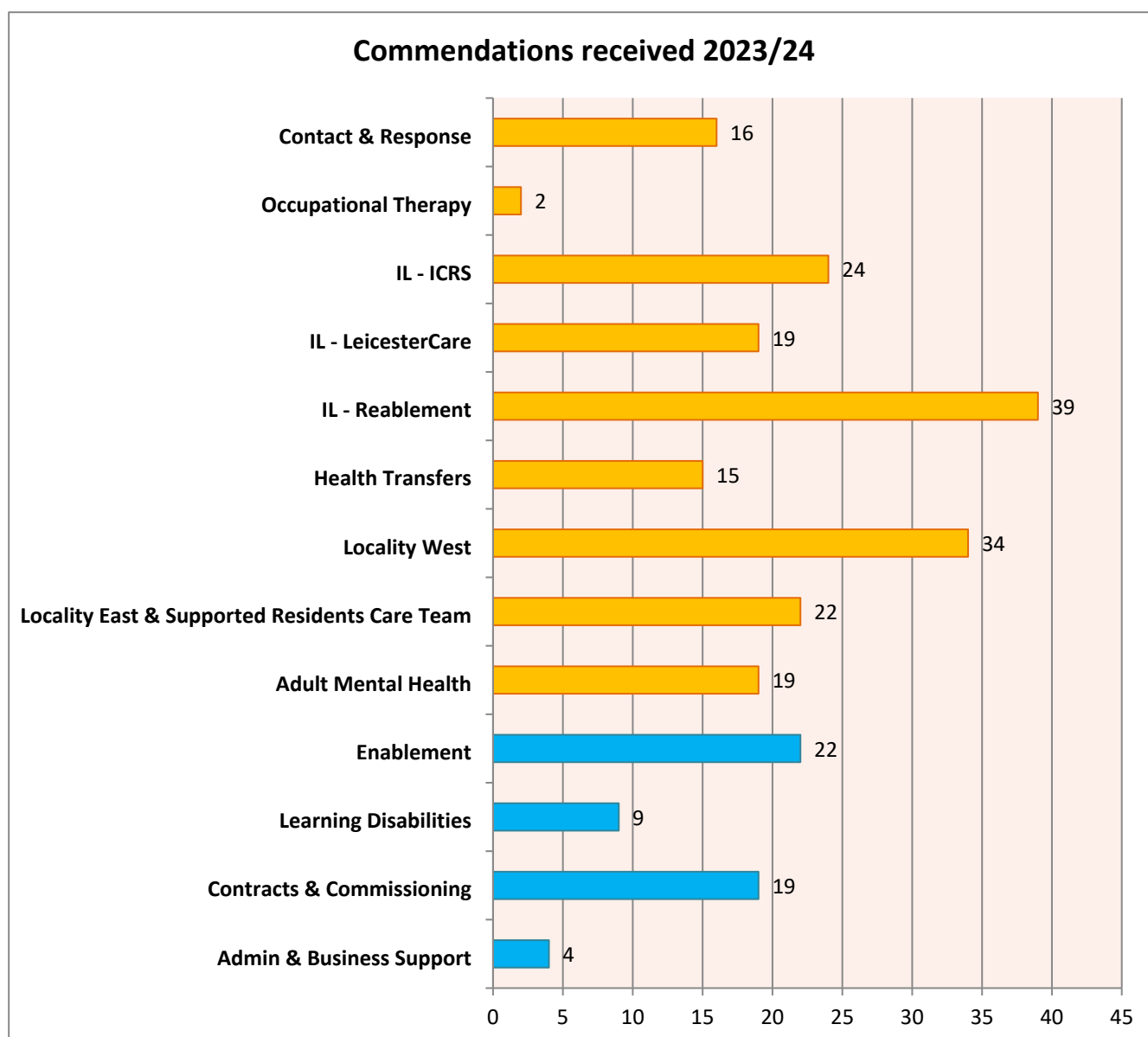
Email: Adultsocialcare-complaints@leicester.gov.uk

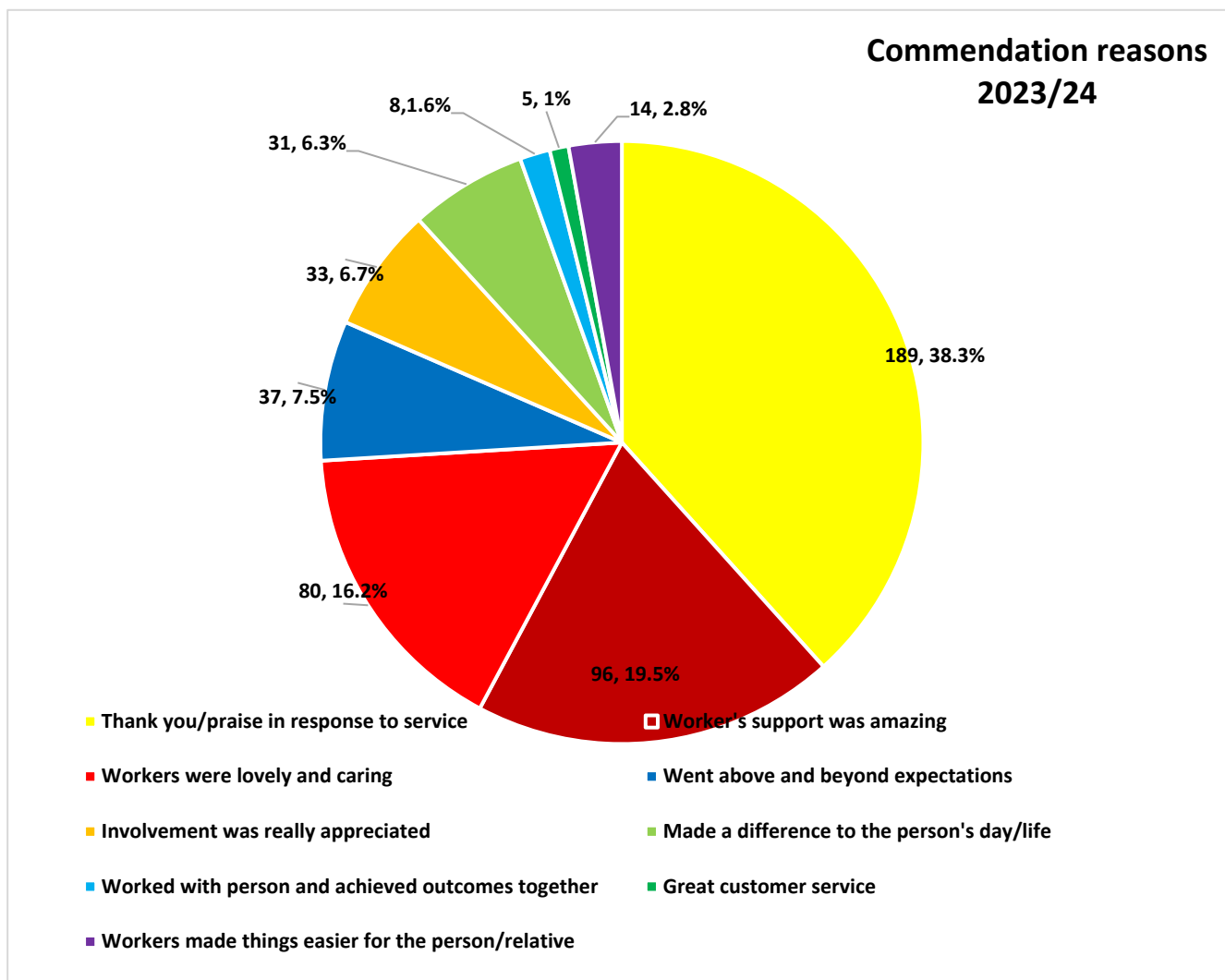
Tel: 0116 454 2470

APPENDICES

APPENDIX 1

1. Commendations by service area

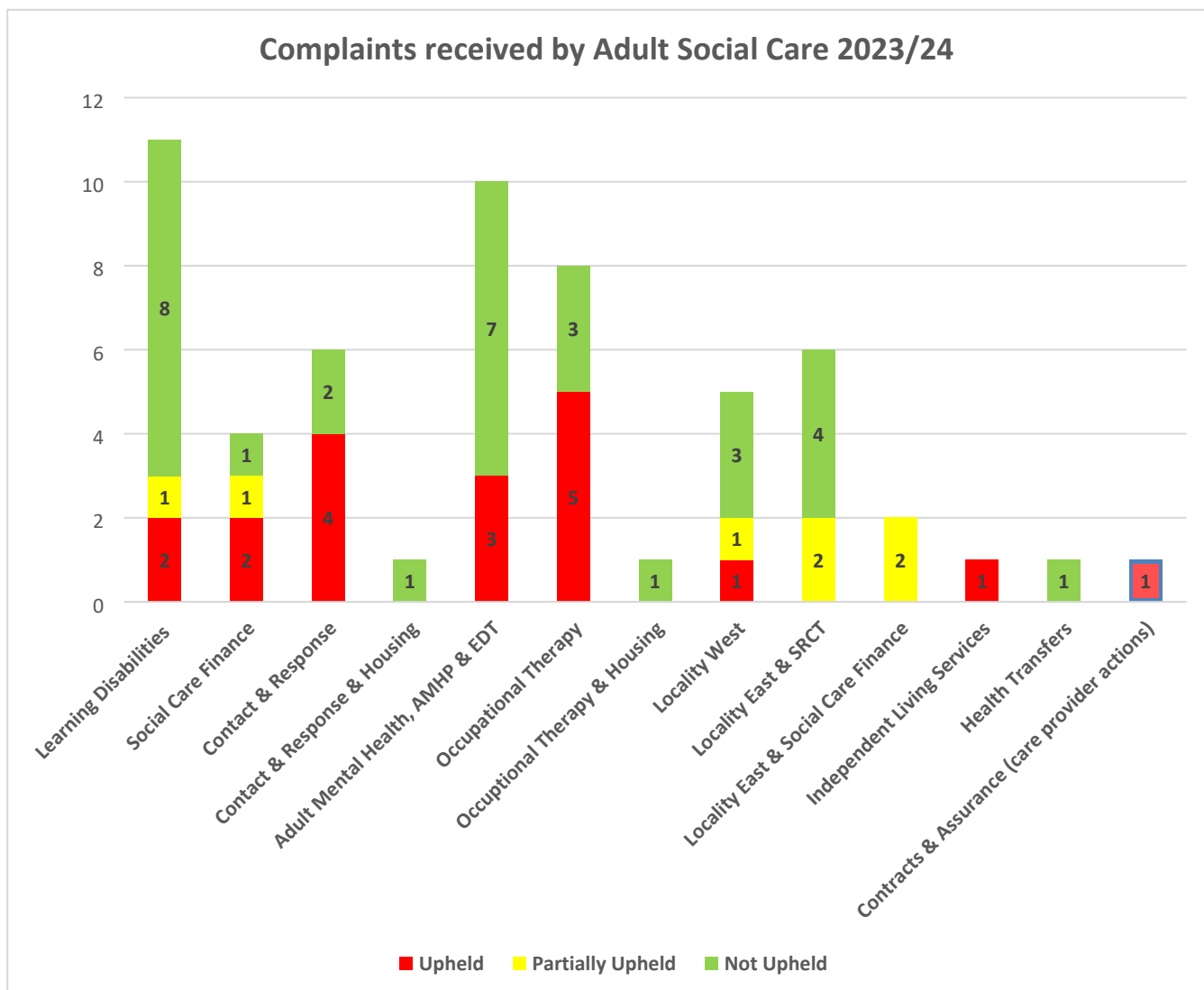




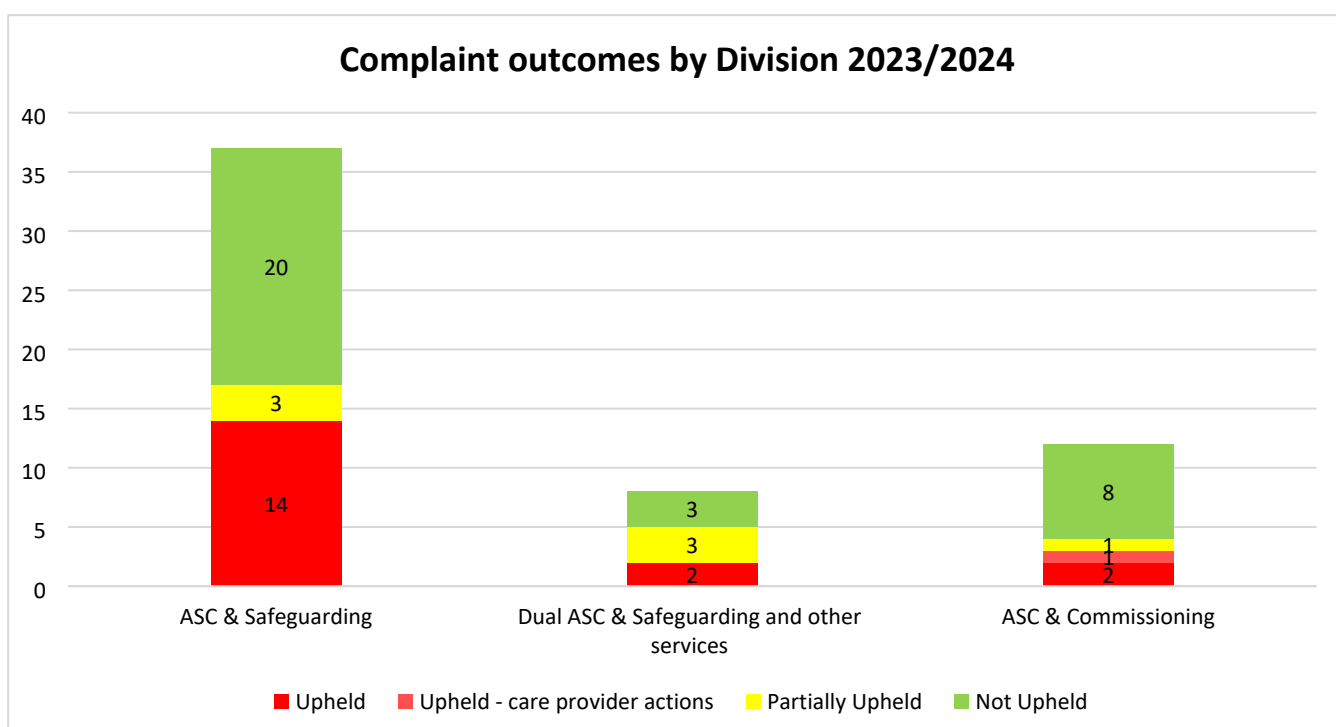
Commendations may include more than one message.

2. Breakdown of complaint information received across the Department

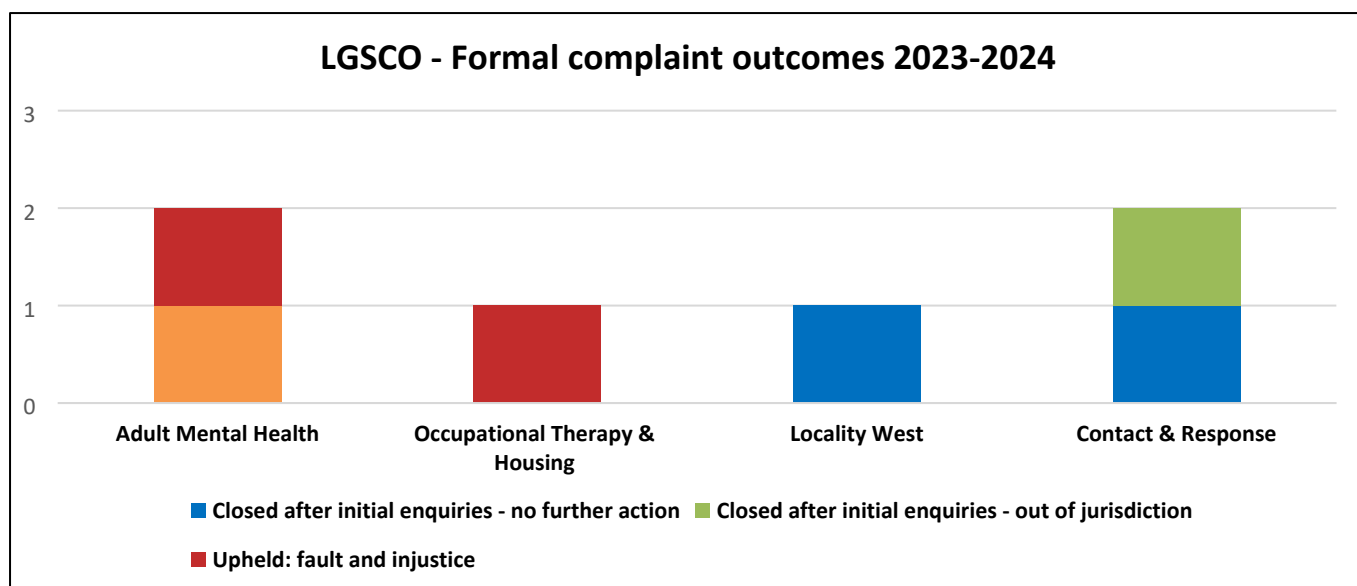
- 2.1 It is perhaps worth noting that teams receiving a higher number of complaints are not necessarily ones providing a poorer service than others. Higher numbers of complaints may indicate that staff are aware of their responsibilities in terms of recording and formally reporting matters, helping to ensure that the complaint procedure remains open and accessible to all. A clearer picture of the Department's 'health' rests with issues that go on to be upheld and where common patterns of concern arise.
- 2.2 The ratio of complaints received to individuals in receipt of ASC services remains relatively small.
- 2.3 The distribution of Stage 1 complaints received in 2023/24 across ASC was as follows:



2.4 Complaint outcomes determined by division are as follows:



3. LGSCO complaints received by serviceⁱ



3.1 Comparison information in relation to some of Leicester City Council's statistically nearest neighbours – LGSCO outcomes for ASC in 2023/24:

Authority	Total complaint enquiries decided ⁱⁱ	Initial investigation – Closed after initial enquiries	Initial investigation – Not upheld	Initial Investigation – Upheld	Upheld rate ⁱⁱⁱ
Leicester City Council	9	3	1	2	67%
Coventry City Council	9	3	0	2	100%
Derby City Council	15	3	2	3	60%
Nottingham City Council	8	2	0	1	100%
Sandwell Metropolitan Borough Council	21	5	1	8	89%
Kingston Upon Hull City Council	10	3	1	2	67%
Rochdale Metropolitan Borough Council	7	0	0	3	100%

ⁱ Details of the individual complaints upheld are noted at section 9 of the main report.

ⁱⁱ Information published by the LGSCO – 2023/24. Not all complaints reach the initial investigation stage and are often subject to other outcomes, for example 'Advice given' or 'incomplete'. The number here reflects those enquiries that were subject to formal decisions.

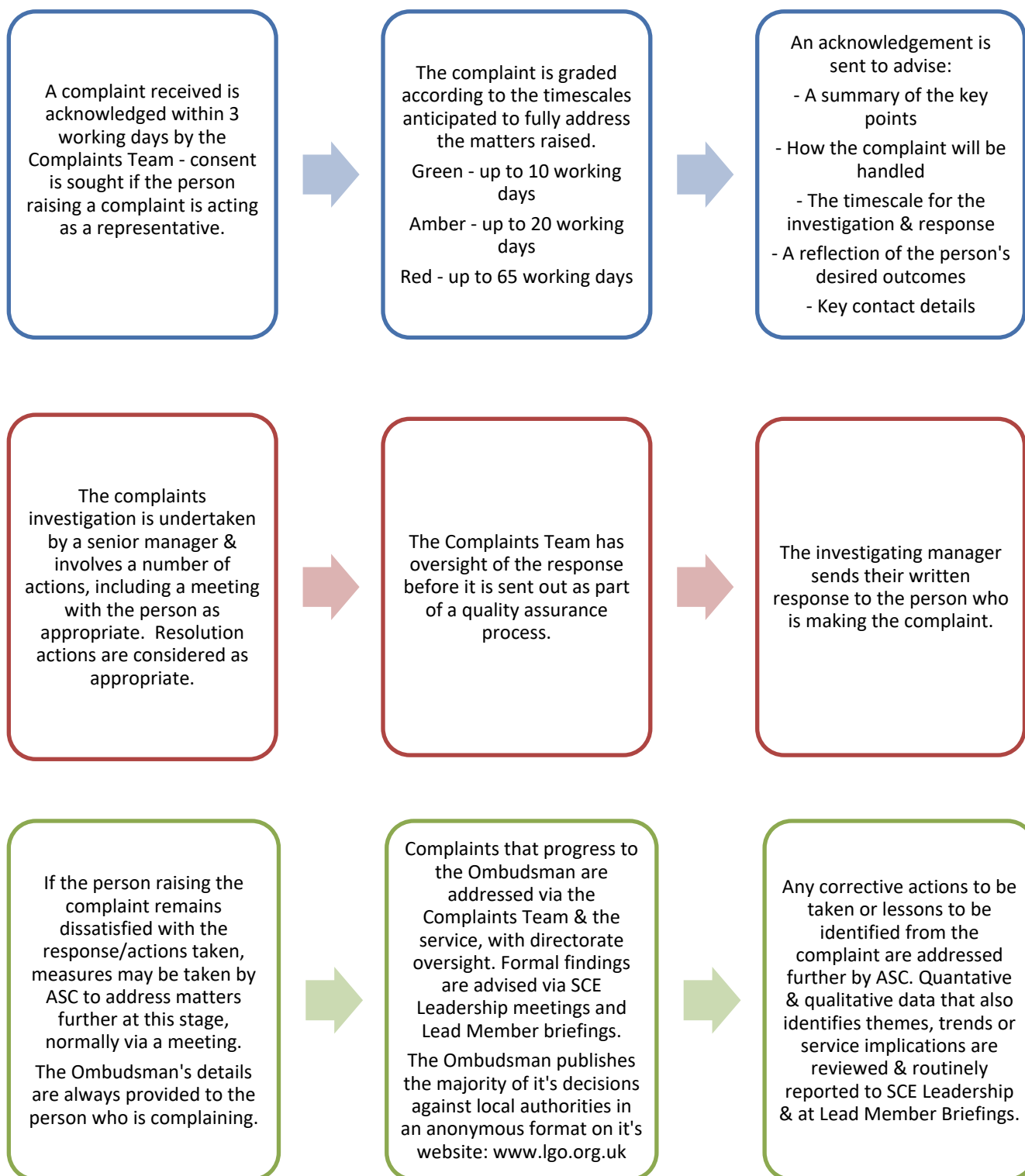
ⁱⁱⁱ Upheld rate = this is based on the % of upheld complaints from the sum of 'not upheld + upheld' (does not take into account other complaint findings)

- 3.2 Given the small number of complaints under consideration against each local authority, minor changes in numbers significantly impact the upheld rate. (Last year's upheld rate for ASC was 79% when 11 complaints were upheld and 3 were not upheld).
- 3.3 Some of the key complaint themes noted in the Local Government & Social Care Ombudsman's Annual Review of Adult Social Care Complaints 2023 - 24 were in relation to:
- Assessment and care planning (80% upheld rate)
 - Charging (82% upheld rate)
 - Safeguarding (63% upheld rate)
 - Residential care (86% upheld rate)
 - Home care (89% upheld rate)
- 3.4 According to the Ombudsman's Annual Review, it upheld 80% of all ASC complaint investigations undertaken across England in 2023/24. The city's upheld rate for ASC complaints considered in 2023/24 was 67%.
- 3.5 Some of the Ombudsman's most common areas for upheld complaints against ASC services in England are noted at 5.3 above. Leicester City's ASC complaints also reflect these same themes, but in 2023/24 these particularly concerned the provision of care support, assessments (including financial matters), OT involvement and safeguarding.
- 3.6 From ASC's records, **six** complaints were formally determined against the Department by the LGSCO during 2023/24. The enquiries in relation to ASC's actions in 2023/24 were concluded with the following outcomes:
- | | |
|---|---|
| Upheld; fault and injustice | 2 |
| Closed after initial enquiries; no further action | 2 |
| Closed after initial enquiries; outside of jurisdiction | 1 |
| Not upheld, no fault | 1 |

APPENDIX 2

Adult Social Care (ASC) complaint process in brief (chart)

Verbal complaints that are resolved to the person's satisfaction within one working day fall outside the complaint procedure.



APPENDIX 3

Performance indicators relating to the management of statutory complaints

INDICATOR	2022/23	2023/24	Target for 2024/25
% Acknowledge Stage 1 complaints (combined) within 3 working days	93%	98% ⁱ	100%
Green % Completion of Stage 1 complaints within 10 working days	N/A	N/A	100%
Amber % Stage 1 complaints completed within initial timescale of 20 working days ⁱⁱ	64%	65%	75%
% Stage 1 complaints completed between 21-25 working days ⁱⁱⁱ	20%	10%	-
% Stage 1 complaints completed between 26-30 working days	7%	5%	-
% Stage 1 complaints completed at 30+ working days or over	9%	20%	-
Average complaint response time	19.5 working days	23 working days	N/A

ⁱ A delay in acknowledgement arose when further clarification was sought about progression.

ⁱⁱ Excludes complaints that were responded to jointly with other organisations as different timescales apply.

ⁱⁱⁱ Complaint responses that exceed the initial timescale advised are usually acknowledged with the person raising the concerns.

APPENDIX 4 Outcomes for 2023/24 action plan

Action identified	Outcome
Ensure business continuity and performance in meeting core tasks and targets. Focus on complaint response times.	Performance continued to be measured throughout the year with reports to the Practice Oversight Board and quarterly reports for Social Care & Education's Leadership Team. Meeting target response times remains a competing priority.
Encouraging better communication with people raising a complaint.	With each complaint allocated for investigation the responding manager was encouraged to ensure that they made initial contact with people making a complaint and maintained communication throughout the complaint process.
To encourage direct resolution actions.	Each complaint was considered on its merits and at the point of concluding an investigation, responding managers were asked to consider any potential actions for resolution – outside of a written response – to address those situations where a difference of view was still held, to try and bring about an agreeable resolution if possible.
Build on current report produced for Practice Oversight Board concerning feedback received across the department and messages highlighted when this information is brought together.	<p>Several activities continue to take place that continue how best to include the learning from complaints.</p> <p>Complaints received are reviewed on a quarterly basis and discussions take place with Operational Leads to consider whether any further, service wide actions are required (for example, a policy change, revision to practices, issuing of guidance/briefing for staff).</p> <p>As part of the ongoing relationship with the Practice Oversight Board, details relating to complaint and commendation feedback are presented on a regular basis and aligned with other sources of feedback and improvement activities that are being undertaken across the department. This is an area under active development. A feedback and engagement working group has been established to review aspects of managing feedback further to help find a more systematic way of recording and utilising information, for departmental improvement.</p> <p>Repeated complaint themes are reviewed year on year.</p>

APPENDIX 5 2024/25 Action Plan

Action identified	Action required	Anticipated outcome	Timescale
Ensure business continuity and performance in meeting core tasks and targets. Focus on complaint response times.	Continuous performance monitoring against timescales to take place: proactive approach employed to ensure responding managers are aware of requirements and timescales and prompted to meet these.	Measurable actions are addressed within specified timescales.	Specific detail of the targets worked to is outlined in the table at Appendix 3.
Encouraging better communication with people raising a complaint.	Heads of Service to ensure contact with individuals at the start of the investigation process to discuss concerns being raised directly and to ensure open communication is maintained throughout the process.	That further direct engagement with the person making a complaint encourages a more satisfactory resolution and better outcome for all parties.	Required on a continuous basis – but to be considered further with each quarterly review of complaints.
To encourage direct resolution actions.	When it is apparent that matters remain unresolved/disputed for people who are making a complaint, Heads of Service to be reminded of options open to attempt further resolution.	Alternate dispute resolution actions can influence a more positive outcome for complaints and prevent further escalation.	Alternate dispute resolution actions to be considered with each complaint.

<p>Participate and contribute to the work of the newly created Feedback and Engagement Working Group that is introducing a departmental system for collating and managing feedback well.</p>	<p>To continue developing a system for all feedback that is gathered so that it can be drawn together in a helpful way and allow for further analysis that will inform the department's actions/activities.</p>	<p>Provides a further perspective on what people think about the support they receive and how well this is working for them (or not). Link this feedback to direct services/practice to inform any further actions.</p>	<p>A project schedule is in place for this work.</p>
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Adult Social Care Autism and Neurodiversity Delivery Plan 2024-2026

For Consideration by:
Adult Social Care Scrutiny Commission

Date: 13 March 2025

Lead director: Kate Galoppi

Useful information

- Ward(s) affected: All
- Report author: Ester Vickers and Leanne Karczewski
- Author contact details: Ester.Vickers@leicester.gov.uk and Leanne.Karczewski@leicester.gov.uk
- Report version number plus Code No from Report Tracking Database: 1

1. Purpose of report

- 1.1 To present, seek feedback and endorsement on the new 'Leicester City Adult Social Care Autism and Neurodiversity Delivery Plan 2024-2026.'
- 1.2 To provide an update on progress since presenting the last Autism report to the Scrutiny Commission in 2024.
- 1.3 To seek approval on the suggested recommendations and proposed next steps.

2. Summary

- 1.1. This report follows on from a detailed report brought to LMB and the Scrutiny Commission last year entitled, 'Understanding the growing needs of autistic adults being diagnosed and the possible impact on Leicester City Council's Adult Care (ASC) team.'
- 1.2. A wide range of work has taken place to look at how we respond locally to the refreshed all-age national autism strategy, as a city council as well as across the system.
- 1.3. Leicester City Council is an active partner in the LLR Learning Disability and Autism (LDA) Collaborative, which has led to focused pieces of work to benchmark our LDA services and support for people with a learning disability and/or autism.
- 1.4. Further autism-specific engagement and consultation with key stakeholders took place in November 2024, to prioritise and sense-check themes identified.
- 1.5. This report is now to present a 'Leicester City Adult Social Care, Autism and Neurodiversity Delivery Plan 2024-2026.'
- 1.6. The Delivery Plan currently has six overarching workstreams as follows:

- **Improving knowledge and understanding of autism and neurodiversity in Leicester city**
- **Improving the quality and access to information, advice and support related to autism and neurodiversity**
- **Improving opportunities for autistic and neurodivergent people to gain and maintain meaningful employment and other activities**
- **Supporting public places to be more accessible and autism/neurodiversity friendly**
- **Working with partners to reduce health inequalities – keeping mentally and physically healthy**
- **Working with partners to make local public transport more accessible for autistic and neurodivergent people**

1.7. The purpose of expanding this Delivery Plan is to achieve better outcomes for both people with neurodiverse conditions and for autistic people, as well as ensuring that the services and support we deliver are sensitive to the diverse needs of autistic and neurodivergent people.

1.8. The first step towards achieving this is greater understanding of the needs of people who require ASC support who may also have neurodivergent conditions. Therefore, work will be undertaken on data collection to develop a needs assessment as well as benchmarking work with other Local Authorities and partners to inform our decision making. Commissioners will work with families and people with lived experience to understand the scale of the work, opportunities, risks and issues and what can be reasonably achieved in this delivery plan.

3. Recommendations

The Scrutiny Commission is asked to note and/or approve the following:

- 1.9. To seek feedback and endorsement on the 'Adult Autism and Neurodiversity Delivery Plan 2024-2026' and the six associated workstreams.
- 1.10. For work to continue in the six priority areas, working with colleagues and people with lived experience across health and social care to achieve the desired outcomes.

- 1.11. Note the intention to expand the scope of the Delivery Plan to include achievable outcomes for people who have other neurodiverse conditions such as ADHD.
- 1.12. To note that the Autism/ND Delivery Plan will be shared at LLR Autism Partnership Board, Leicester City's Learning Disability Partnership Board, the Mental Health Partnership Board, the LLR LDA Collaborative Delivery and Transformation Group.

2. Report/Supporting information including options considered:

Background to the autism-focused work and previous reports:

- 2.1. A report was written and presented to LMB and our ASC Scrutiny Commission following a request to understand the impact on ASC in Leicester of the growing numbers of autistic adults (18+) being diagnosed.
- 2.2. This report summarised and analysed the available evidence around both prevalence and actual diagnostic rates of autistic adults (18+) in Leicester City, alongside our own ASC data in relation to those in receipt of support.
- 2.3. The report addressed how the impact is being felt, and the potential implications for social care and autistic people. It highlighted opportunities to further strengthen our work with partners around the current and prospective work taking place in relation to autistic adults.
- 2.4. The report included a series of recommendations which could help address some of the impact to adult social care.
- 2.5. One such recommendation was to formulate a 'Leicester City Adult Social Care Adult Autism Delivery Plan.'

Summary of previous consultation, engagement and co-production:

- 2.6. A range of consultation, engagement, and coproduction activity has taken place in Leicester City, some in collaboration with other partners across LLR, which has looked to understand and address the needs of local autistic people, their parents/carers and family members. A summary of key activity is provided below.
- 2.7. In collaboration with Leicestershire County Council, a short-term health-funded project called 'Every Voice Counts' sought to understand the autism post-diagnostic support being offered to adults across Leicester City and Leicestershire. People taking part in this project were self-selecting by responding to a wide range of publicity materials, including mainstream media outlets.

- 2.8. Following the publication of the [national strategy](#) for autistic children, young people and adults in July 2021, an internal self-assessment exercise was completed by each of the LLR Local Authorities and NHS Leicestershire Partnership Trust.
- 2.9. Leicester City Council Adult Social Care engaged with the LDA Collaborative's LLR Autism Champion to speak to people with lived experience living within the city, about their experience of receiving support from adult social care.
- 2.10. An autism-specific small charity called The Monday Club was cited by people with lived experience as a valued local service. This is a service that runs social activities for autistic adults who live in Leicester city and county. Feedback was sought from club members and their family members to understand from their perspective why they attended and what they valued about the club.
- 2.11. Further engagement and consultation took place in November 2024, to sense check emerging themes identified through previous consultation and engagement exercises, identify any further gaps and to assist in prioritising the feedback gathered.
- 2.12. An initial workshop was attended by representatives from the ASC Learning Disability and Adult Mental Health Social Work Teams and the manager of the Enablement Team / Supported Employment Service. Detailed feedback was also gathered from a representative of Leicester City Council's 'Making it Real' Coproduction Group.
- 2.13. The second involved visiting The Monday Club to seek the perspectives of people with lived experience, in a familiar comfortable environment.
- 2.14. The workshops utilised methodology used by Social Care Futures for the Leicester City Council 'Leading Better Lives' to collate, evaluate and prioritise the feedback collected. All information gathered has been anonymised.
- 2.15. This has enabled us to identify six key areas for the 'Adult Autism/ Neurodiversity Delivery Plan 2024-2026' on which to focus initially. The plan is for each of these six areas to form separate workstreams for the commissioning team to co-ordinate and oversee.
- 2.16. The Leicester City Participation Service and the newly formed Leicester Voices Together, as well as the LLR Autism Partnership Board will provide effective mechanisms to provide feedback and insight from people with lived experience on the delivery plan and its progress.

- 2.17. Strong links have been forged with neighbourhoods and local communities across the city through the 'Leading Better Lives Project.' Colleagues from across the city council housing, transport and neighbourhood teams are committed to reaching as many people in Leicester as possible and there are four action plans in development to achieve this.
- 2.18. The Autism/ND project delivery group will partner up with and work closely with the 'Leading Better Lives' working group to ensure efficient use of resources and reaching those communities that need support the most.

Understanding our neurodivergent citizens:

- 2.19. To improve our strategic data collation and analysis to further understand the needs of neurodivergent and autistic adults, a revised Joint Strategic Needs Assessment was requested. The commissioning team have worked in partnership to support the work of our public health colleagues to lead on this work. The LDA Collaborative Health Inequity group have been the steering group, which has enabled health colleagues to share key information to be included within the new JSNA Chapter, such as health screening and vaccinations.
- 2.20. A new draft JSNA Chapter has been written which focuses on Learning Disability and/or autism, defining these new chapters through the lens of health Inequity. A final report is expected in April 2025.
- 2.21. Once published, the new JSNA chapter on Learning Disabilities and/or Autism will provide the intelligence needed to accurately identify these priority groups, with it having a Health Inequity focus.
- 2.22. The recent closure of ADHD Solutions at the end of December 2024, has left a gap in support and services to children, adults and families across LLR. ADHD Solutions CIC was a very highly regarded service supporting children and adults across Leicester City, Leicestershire and Rutland.
- 2.23. In the absence of a dedicated replacement service the City Council Commissioners are working at pace with partners in the ICB, County, Rutland and Leicestershire Partnership Trust's assessment diagnostic and treatment service to identify a suitable solution which will fill the gap left by ADHD solutions. This work has now been incorporated into the Delivery Plan so that it can be reported on, developed and scrutinised as part of this workstream. It is hoped that this will also be a creative and innovative opportunity in how we support people with ADHD to have a greater impact by working directly with the ADHD community in the region.

Outcomes achieved so far:

- 2.24. Raising the profile of The Monday Club by inviting the manager to speak at the LDA Collaborative, highlighted the continued need by its members and parents/carers. This led to the ICB part funding the club for this current financial year 2024-25.
- 2.25. Figures to date for Leicester City Council's Adult Social Care team attending the Oliver McGowan Learning Disability and Autism Mandatory Training are as follows - 56% of staff have attended Tier 1 training and 72% of staff have attended Tier 2 training.
- 2.26. The LDA Supported Employment Team have received extra funding, which has enabled them to recruit two additional members of staff.
- 2.27. The LLR Suicide Prevention Strategy has been refreshed to align with the new national strategy and went out to consultation, ending in December 2024. Autism is now highlighted as a priority group within this newly refreshed local strategy.

Proposed next steps:

- 2.28. An Equality Impact Assessment is being developed to guide and reinforce the direction of the Autism /ND Delivery Plan, to ensure that we are addressing the needs of autistic and neurodivergent people across all communities in the city.
- 2.29. Separate delivery groups will be set up for each of the workstreams in the plan, coordinated by the commissioning team to track progress, identify any issues/risks/gaps. There is a commitment for this work to be undertaken with stakeholders, partners, people with lived experience and their families and carers.
- 2.30. It has been agreed that as a system, LLR will adapt the [national strategy](#) for autistic children, young people and adults in July 2021 and all partners are developing their own delivery plans.
- 2.31. Colleagues from the LDA Collaborative plan to co-design an autism focused survey to understand the wider perspectives and experiences of autistic people, family members/unpaid carers and local professionals. Leicester City commissioners are active partners in co-designing this survey.
- 2.32. The survey will be co-produced with people with Lived Experience and distributed through local networks including the LLR Autism Partnership Board, Leicester City Council's commissioned 'Participation Groups,' the LDA

Collaborative's Engagement and Coproduction Group, the Leicestershire Autistic Society and other VCSE organisations, Parent/Carer Groups and participants from previous engagement and consultation exercises.

- 2.33. The survey will be designed to enable feedback received to be divided by demographics, including geographical location.
- 2.34. This source of valuable insight from local people will feed into the 'Adult Autism/Neurodiversity Delivery Plan 2024-2026'
- 2.35. The LLR Autism survey questions will be brought to LMB for their feedback and to seek their approval before it is circulated.
- 2.36. Commissioners will also explore the opportunity to build on the workstream: **Supporting public places to be more accessible and autism/neurodiversity friendly**, and work with internal and external partners to take forward the aspiration of Leicester City working towards becoming an 'Autism and Neurodivergent Friendly City' following feedback from the Lead Member and Strategic Director when presenting this report to LMB. This will initially involve benchmarking against other cities in the UK to understand possible approaches and resources involved.

5. Financial, legal and other implications

5.1 Financial implications

There are no direct financial implications arising from this report. If plans are made in future to commit expenditure then due process will have to be followed to identify funding first.

Mohammed Irfan, Head of Finance. 28/02/2025

5.2 Legal implications

I can confirm that there are no direct legal implications arising from this report.

Susan Holmes, Head of Law, Social Care & Safeguarding. 7/02/2025

5.3 Climate Change and Carbon Reduction implications

There is no significant climate emergency implications associated with this report.

Duncan Bell, Change Manager (Climate Emergency). Ext. 37 2249.

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5.4 Equalities Implications

Under the Equality Act 2010, public authorities have a Public-Sector Equality Duty (PSED) which means that, in carrying out their functions, they have a statutory duty to pay due regard to the need to eliminate unlawful discrimination, harassment and victimisation, to advance equality of opportunity between people who share a protected characteristic and those who don't and to foster good relations between people who share a protected characteristic and those who don't.

Protected Characteristics under the Equality Act 2010 are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation.

The report seeks endorsement on the 'Adult Autism/ND Delivery Plan 2024-2026' and the six associated workstreams. Autism is a lifelong developmental condition which affects how people communicate and interact with the world. Autism affects people of all ages, ethnicities and genders. It is important to recognise that not all autistic people see themselves as disabled. Inequalities experienced because of autism may interact with discrimination and barriers based on other protected characteristics. Reduction in health inequalities and improved health access can lead to improved quality of life for people and communities from across all protected characteristics.

An Equality Impact Assessment will be written to run alongside the Autism Delivery Plan, to ensure that we are addressing the needs of autistic people across all wards, with a focus on reaching areas of deprivation. It is important that any consultation and engagement is accessible.

Equalities Officer, Surinder Singh, Ext 374148

5.5 Other Implications (You will need to have considered other implications in preparing this report. Please indicate which ones apply?)

N/A

6. Background information and other papers:

7. Summary of appendices:

- Appendix 1 - Adult Autism/ND Delivery Plan 2024-2026

8. Is this a private report (If so, please indicated the reasons and state why it is not in the public interest to be dealt with publicly)?

No

9. Is this a “key decision”?

No

10. If a key decision please explain reason

In determining whether it is a key decision you will need consider if it is likely:

- to result in the Council incurring expenditure which is, or the making of savings which are, significant having regard to the Council’s budget for the service or function to which the decision relates.
- to be significant in terms of its effects on communities living or working *in two or more wards in the City*.

Expenditure or savings will be regarded as significant if:

- (a) In the case of additional recurrent revenue expenditure, it is not included in the approved revenue budget, and would cost in excess of £0.5m p.a.;
- (b) In the case of reductions in recurrent revenue expenditure, the provision is not included in the approved revenue budget, and savings of over £0.5m p.a. would be achieved;
- (c) In the case of one off or capital expenditure, spending of over £1m is to be committed on a scheme that has not been specifically authorised by Council.

In deciding whether a decision is significant you need to take into account:

- Whether the decision may incur a significant social, economic or environmental risk.
- The likely extent of the impact of the decision both within and outside of the City.
- The extent to which the decision is likely to result in substantial public interest
- The existence of significant communities of interest that cannot be defined spatially.

Appendix 1 - Leicester City Council, Adult Social Care Autism and Neurodiversity Delivery Plan 2024 -2026

	Workstream	Key milestones	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
1	Improving autism and neurodiversity understanding and knowledge in Leicester City.	Roll out of OMMT began in August 2023										
2	Looking for autism and ND related information, advice and support	Autism Space launched Nov 2022, with limited content/age range										
3	Gaining and maintaining meaningful employment and other activities in the daytime	Supported Employment Team began Feb 2023 Team expanded two new roles Sept 24										
4	Community accessibility – supporting places to be accessible and ‘autism and ND friendly’	MH Neighbourhood café data collection -autumn 2024										
5	Health Inequity: Keeping mentally and physically health: 5.0 - Refreshed JSNA Chapter on Learning Disability and/or Autism	Request for new JSNA accepted autumn 2023 First draft written 09/24										
	5.1 – Healthy Weight Working Group											
	5.3 – LLR Suicide Prevention Strategy Refresh	LLR Strategy Consultation ended Dec 2024										

		Delivery subgroups Feb 25 -vulnerable groups includes autism											
6	Using public transport locally, especially buses	Initial meetings with LCC team and Participation groups winter 2024											

What we will do (objective)	How we will do this (task)	Who	Goal / target		
			Short term – 6 months	Medium Term – 12 months	Long term – 1-2 years
1. Improving autism understanding and knowledge within Leicester City.					
Lived experience perspective: Autistic people felt that knowledge across a wide range of people needing improving. They included health and social care professionals, colleagues, educational staff, shop workers, friends and family. Autistic adults in receipt of support from adult social care, via Adult Mental Health Teams felt that autism knowledge was limited.					
1a. Oliver McGowan LDA Mandatory Training across Health and Social Care – started in LLR August 2023	-Attend fortnightly steering group meetings -Promote co-trainer EBE opportunities and put forward people who are interested in delivering Tier 1 +2 training -Advertise to city council providers, when possible, via contracts team.	-L+D Lead with support from OMMT Co-Ordinator, Contracts and commissioning team.	-KPI set by NHSE 10% NHS staff to complete Tier 1 or 2 training by March 2024 -KPI set by NHSE 30% NHS staff to complete Tier 1 or 2 training by March 2025		
1b. Autism Space webpages to contain information relevant to professionals in health and social care supporting autistic adults.	-Share information pertaining to LCC and Adult Social Care with LPT Digital Team to include on Autism Space -Support the secondment of an LCC staff member to develop webpages to include LA information.	-LPT Digital Team -LCC HR -Commissioning Team	-Information shared to be included on Autism Space webpages - ongoing -Funding identified for LCC part-time role		

1c. LLR Autism Partnership Board share people with lived experience personal experiences	-Leicester City Council Participation Contract employs an autistic local leader to co-chair the autism board and present the perspectives from the Autism Advocacy Group -Expert by Experience presents at every autism board meeting	-LLR Autism Partnership Board Planning Group members -LCC Commissioning Team	-LLR Autism Partnership Board is co-chaired by an autistic person, who co-ordinates the Autism Advocacy Group -Participation Contract extended and being reviewed		
What we will do (Objective)	How we will do this (Task)	Who	Goal / target		
			Short term – 6 months	Medium Term – 12 months	Long term – 1-2 years
2. Looking for reliable, consistent autism and neurodiversity related information, advice and support.					
Lived experience perspective: Autism Space webpages has reliable, local information in one place and is very popular. Some people got advice from staff at the places they visited (for example, college and The Monday Club staff) Some autistic people need non-web based information and support and wanted to talk to a real person. A wide range of communication methods is required.					
2a. Promotion of Autism Space webpages across citizens in Leicester City.	-Promotional plan to target key audiences and best method. -Include autistic people. internal and external staff, parents/carers, frontline SW Teams, city council customer facing offices - Support LPT colleagues to share LCC information on Autism Space webpages -Support LPT to employ a council worker to develop information on Adult Social Care.	-Commissioning Team -Public Health -City Council	-Promotional plan written and key audiences have been targeted Inc Contact and Response Team Jan 25.		

2b. Autism specific peer-to-peer support group enabled to continue to share information advice and support to club members. The Monday Club requires support and long-term sustainable funding source.	-Complete an engagement exercise to understand the benefits and outcomes achieved by club members and parent/carers. Include data analysis re demand, referral rate, attendance -Share findings with LDA Collaborative and seek support/funding	-LDA Collaborative -Commissioning Team -LCC Public Health	-ICB currently funds The Monday Club until March 2025		
2c. Development of a short- and medium-term replacement service for ADHD Solutions CIC					
What we will do (Objective)	How we will do this (Task)	Who	Goal / target		
58			Short term – 6 months	Medium Term – 12 months	Long term – 1-2 years
3. Supporting more autistic adults to gain and maintain meaningful employment and other activities in the daytime					
Lived experience perspective: All autistic people who were consulted, who were in receipt of support from adult social care via Adult Mental Health Teams were seeking advice and support to access meaningful daytime activity including volunteering and employment. The Autism Advocacy Participation Group raise this as a priority at the LLR Autism Partnership Board.					
3a. Support the promotion of the LCC Supported Employment (SE) Team. Started Feb 2023, manager recruited April 2023.	- Promotion at the LLR Autism Partnership Board - Promotion on Autism Space webpages - Recruitment of an EBE to support job fayres, training to employers, role model to employees	-LCC Supported Employment Manager -Employment Hub -DWP -Support from commissioning team	-KPI 68 people signed up to SE by May 2024 - 30% gain employment by March 2025. -Increased number of Disability Confident Employers -Increased scores on annual audit completed	-2 additional job coaches in role 08/24 and 09/24	

	-Support with recruitment of two additional Job Coach roles.		by British Association of Supported Employment (BASE) -Collaboration with OMMT co-trainers for employment opportunities		
59	3b. Increased use of assistive technology including Brain-in-Hand application (BiH) and NHS Joy App. - Gather data and research about BiH preventative offer for neurodiverse individuals including those who are autistic. Provide data from LCC. -Put forward as a pilot to the ASC City Council Savings Team. -Identify ASC Teams to support roll-out of pilot and direct support to individuals -Decide number of transferable licenses to be purchased -Identify ND/autistic individuals. -Reported use of BiH -Increased independence -Reduction of Job Coach hours being required -Maintain employment	LCC Supported Employment Manager with support from commissioning team. LCC Projects Team.	-Accepted by LCC Savings Team as Pilot 07/24 -BiH Demo shared with teams 10/24 -Teams identified to put forward individuals 11/24		
What we will do (Objective)		How we will do this (Task)	Who	Goal / target	
				Short term – 6 months	Medium Term – 12 months
					Long term – 1-2 years
4. Community accessibility – supporting places to be accessible and ‘autism friendly’					
Lived experience perspective: Many autistic people described feeling isolated and lonely. They found places inaccessible and overloaded their senses. LGBTQ+ organisations/spaces often not available or accommodating for autistic people. Examples of good practice where people were able to participate and felt included were peer-led or peer-to-peer led social groups.					

4a. Increase the number of organisations signing up to be a Mental Health Friendly Place (MHFP) – launched in LLR October 2023	-Autistic people recommending organisations to sign up to MHFP who are autism-friendly -Promotion of MHFP to autistic people -Support and training on Autism/ND to be offered to MHFP organisations	-Public Health with support from commissioning team	-110 organisations signed up to MHFP (Jan 2025) -Review training required of organisations. Autism/ND highlighted.		
4b. Improve the accessibility of the Neighbourhood Mental Health Café to neurodivergent people.	-Data collection to understand current visitor demographics -Provide resources to staff including sensory items -Offer autism training to providers -Visit cafes with an Expert by Experience to audit experience -Focus groups planned April 25 to receive feedback from people using/not using cafes. -Implement changes to make cafes more accessible to neurodivergent people	-MH Neighbourhood Lead, LPT with support from Expert by Experience and Commissioning Team	-Data collected on numbers of neurodiverse people visiting cafés starting April 2024 -Data on ND sub-divided into ND categories Dec 2024 -All cafes to include how to get to location to reduce barriers		
4c. Raise awareness of Sunflower Lanyards, Safe places and Autism Alert Cards.	-Promotion through Autism Webpages -Promotion through LLR Autism Partnership Board and wider organisations	-LPT Digital Team -LLR Autism Partnership Board Planning Group members Monday Club staff			
4d. More LGBTQ+ organisations/spaces to be available, accessible and welcoming to neurodivergent/autistic people.	-Identified local gap for autistic/ND adults -Contact Trade Sexual Health to discuss need	-Trade Sexual Health -Public Health	-New NeuroQueer monthly peer-led social and support group started. 30 ppl on mailing list. -Promote through Autism Space, Autism Partnership Board,		

			Monday Club and other networks		
What we will do (Objective)	How we will do this (Task)	Who	Goal / Target		
			Short term – 6 months	Medium Term – 12 months	Long term – 1-2 years
5. Understanding and improving health inequalities for autistic and neurodivergent people in Leicester					
Lived experience perspective: Autistic people shared their negative experiences with health professionals and healthcare settings. People had mixed experiences with GPs. Some people experienced long waiting lists for autism assessment and diagnosis.					
5.1- LLR Social Care Healthy Weight working group 5.1- Request a refreshed JSNA Chapter to focus on Learning Disabilities, LD and Autism and Autism with no LD.	-Last JSNA to focus on LD and LD and Autism was in 2016 -We need to separate out autistic people with no LD to understand this cohort of people -Request for refreshed JSNA submitted by commissioning team autumn 2023 -P/H staff identified to proceed	-Leicester City Public Health -LDA Collaborative Health Inequity -LLR LPT and ICB -LCC commissioning Team	-Draft JSNA written 09/24 -Final report due 04/25		
5.1- LLR Social Care Healthy Weight working group	-Support an ASC Healthy Weight Training Needs Analysis -Support the development of a strength-based language toolkit -Consider opportunities to embed messages into OMMT for professionals working with people with LDA -Promote good practice and training to neighbourhood lead -Ensure people with LDA are considered in aspects of this work	-Leicester City Public Health -LPT Dietician -Commissioning Teams	-Sharing ASC strength language guide -Including under-weight in project focus -Designed and circulated Training Needs Analysis		

5.2 -LLR Suicide Prevention Strategy Refresh– Autism is an identified priority group within refreshed national strategy	-Reflect the national strategy locally and include autism as a priority group in the LLR strategy	-Public Health -LLR health and social care steering group -LCC commissioning Team	-Provided advice re strength-based terminology used re autism in strategy -Provided advice re ND definitions and terminology -Ensure strategy consultation is circulated to autism groups and update provided to Autism partnership board Dec 24. -Links made with LeDeR team re Autism notifications		
What we will do (Objective)	How we will do this (Task)	Who	Goal / Target		
			Short term – 6 months	Medium Term – 12 months	Long term – 1-2 years
6. Making local public transport accessible for autistic and neurodivergent people, focusing on local bus services					
Lived experience perspective: Some autistic people were not able to drive for a number of reasons and solely relied on public transport. Many people reported not being able to get a bus pass, whilst others felt that the bus drivers didn't understand autism and needed more knowledge. Some taxi drivers would not allow assistance dogs to be in the vehicle.					
6a. Transport staff to understand challenges faced by autistic people when using buses in Leicester City.	-Identify leads within LCC Transport Dept. -Raise awareness of national autism guidance and issues experienced by autistic people. -Link to Autism Experts by Experience regional and	-Commissioning team, LLR Autism PB, EBE with autism and transport expertise.	-LCC Transport Dept to meet Autism EBE and commissioner to raise awareness of issues experienced locally. -LCC Transport Team to complete OMMT e-		

	national examples of good practice.		Learning and Tier 1 training		
6b.	-Project plan to focus on accessibility of Leicester city bus service for autistic people.	-Commissioning team, LLR Autism PB, EBE with autism and transport expertise.	-Good practice regionally and nationally identified		

Appendix D



Delivering the City's Supported Living and Extra Care strategy

For consideration by:
Adult Social Care Scrutiny Commission

Date: 13th March 2025

Lead director: Kate Galoppi

Useful information

- Ward(s) All
- Report author: Michelle Larke – supporting comments from Lauren Tyrell, Head of Development Projects
- Author contact details: michelle.larke@leicester.gov.uk

1. Purpose of report

- 1.1 To provide the Adult Social Care Scrutiny Commission an update on progress on the delivery of accommodation for people supported by Adult Social Care, as detailed in the Supported Living and Extra Care Housing Strategy 2021-2031.

2. Report Summary

- 2.1 The city council launched its [ten-year strategy for supported living and extra care](#) in 2021, since then we have worked to try and achieve key developments in line with the strategy but COVID and other restraints (in relation to capacity and potentially how the strategy is owned), means progress has been slow. 56 units have so far been achieved against a planned target of 262 by 2026.
- 2.2 In line with the commitments in the strategy, a refreshed demand has been completed so rethinking our approach to delivery is both necessary and timely in relation to that.
- 2.3 Given our demand and issues securing an appropriate delivery partner able to bring forward key developments at the Tilling and Hamelin Road sites, this report sets out the next steps for revisiting those developments and a range of other opportunities that could secure necessary housing for Adult Social Care. This includes:
 - 2.3.1 Smaller non-strategic sites available via the Local Plan which Adult Social Care has expressed an interest in pursuing.
 - 2.3.2 Planned developments being led by our colleagues in housing development, and those being brought forward by the market. This includes the sites at Tilling and Hamelin Road and our progress to date for revisiting those opportunities.
 - 2.3.3 The opportunities to secure appropriate accommodation through the asset review process
 - 2.3.4 The opportunities being pursued through the Accelerated Reform Fund to increase and diversify our shared lives services.

2.3.5 and opportunities for nominations in new developments in the County.

2.4 Alongside all of this, consideration of the best procurement solutions needed which could provide us with a mechanism to deliver on the aims of the strategy.

3. Recommendations

3.1 ASC Scrutiny to:

- 3.1.1 Note the need for an estimated 467 units of accommodation over the next 7 years (to the end of the current strategy) to support a range of people accessing social care.
- 3.1.2 Note that the accommodation required is best met through a range of opportunities, including existing sites and a confirmed pipeline that is anticipated to deliver good quality accommodation.
- 3.1.3 Note that officers will explore the development of individual schemes as outlined in the strategy and to submit further reports to the City Mayor/Executive for approval.
- 3.1.4 Note the range of activities described which will see us engage with our housing provider market around the anticipated accommodation requirement and Homes England. Noting that this will also require access to ASC policy provision to support delivery of the proposed workstreams.
- 3.1.5 Note the number of schemes that have been successfully delivered, those that are in the pipeline for delivery, and those where early identification / discussion is underway.
- 3.1.6 Approve a revision to the strategy (Ten Year Plan) currently published to refresh the delivery targets and the accommodation required to support delivery over the next seven years.

4. Supporting information

4.1 The importance of supporting people to live as independently as possible, for as long as possible, is a guiding principle of the Care Act 2014. The 'suitability of living accommodation' is also one of the nine areas of wellbeing that local authorities must pay attention to when looking at the needs of an individual.

- 4.2 Currently adult social care has access to a range of supported living accommodation across the city. Most of these schemes provide support to those with mental ill health and learning disabilities. This model of housing and support can help people retain or regain skills and confidence and prevent needs or delay their deterioration wherever possible. Our supported living services therefore can offer a way of achieving the vision as expressed in the Care Act for preventing and delaying the care and support needs of adults in the city.
- 4.3 Supported living and extra care is housing with support. The properties are generally self-contained flats for rent. Schemes incorporate appropriate design features, additional security, and communal lounges/café. In supported living, the type and frequency of support will vary; some people may need a few hours a week, whilst others might require 24-hour support. The key factor that differentiates extra care from sheltered housing or other forms of retirement living is the presence of care staff onsite.
- 4.4 The Council has access to 698 units of supported living accommodation which is used to support people with statutory care needs. These units are spread across 112 schemes. These schemes are either owned by the council, private landlords or are provided by registered social landlords. Appendix 1 shows the distribution of schemes across the city.
- 4.5 Despite the strategy proposing a more systemic approach across a ten-year timeframe to achieve key specialist builds; to date, 56 units of accommodation have been delivered against a requirement of 262 units which is the target to be achieved by 2026. At the point of publication, the strategy indicated that we required a total of 551 units of accommodation over the life of the strategy as follows:
- Phase 1 (up to 2022) 196 units.
 - Phase 2 (2022-2026) 66 units.
 - Phase 3 (2026 to 2030) 289 units (of which 70 are identified at this stage).
- 4.6 The phased delivery plan was in large part designed with the expectation that Tiling Road and Hamelin would be delivered in phase 1, which would have delivered 155 units. With the challenge of successful delivery at that site, delivery has inevitably fallen short of the target.
- 4.7 Despite the lack of progress against the Tiling and Hamelin Road developments, 56 units of accommodation have been successfully delivered across the city over 11 separate sites. This has provided a range of different accommodation, supporting a range of needs, including a bespoke specialist accommodation for complex needs, through to a development of 17 units of supported living accommodation.

- 4.8 In addition to those already delivered, several developments are in progress, and are at different stages of delivery:
- A single site development of 14 units is in development and should be ready for occupation June 2025.
 - 75 units of accommodation are under development and will be ready for delivery in 2026/27.
 - Procurement is planned for a further site of 21 units, designed in a core and cluster arrangement.
- 4.9 As per our commitment in the 10-year strategy, we continue to engage with the market to shape opportunities brought forward by developers. Currently we have 22 units of accommodation via this route that have confirmed delivery dates across 2025 and 2026; with discussions regarding a further 173 units of accommodation where we are actively working with developers to influence building specifications to support the needs required, against which 132 units we have reasonable confidence will deliver.
- 4.10 Shared Lives support provides accommodation-based support for adults in a family home, rather than a residential care setting, and supports people to achieve greater independence. Given the challenge of housing / built accommodation, expansion of shared lives presents an opportunity to meet the targets set out in the 10-year accommodation plan.
- 4.11 Our current shared lives offer has 53 shared lives carers across 36 caring households, supporting 31 individuals. The outcomes for the people supported in these settings are positive. We are now progressing plans to diversify and increase the offer through funds that we have through the Accelerated Reform Fund.
- 4.12 **Demand Forecast**
- 4.13 To ensure that the forecast for accommodation remained valid throughout the lifespan of the strategy it was agreed that it would require regular review. Work has been completed to refresh the demand analysis of the Supported Living and Extra Care Housing Strategy (2021-2031). This is now close to being finalised having undergone various check and challenge sessions. An independent review and validation process is planned which will further ensure that the refresh is a credible representation of our anticipated demand and the accommodation solutions that would help meet it, over the remaining seven years of the strategy.
- 4.14 The data suggests that the demand for accommodation has adjusted from the original target of 551 units between 2021-31, to 467 units of accommodation between 2024-31.

- 4.15 The demand refresh has followed a similar methodology to the one that underpinned the strategy developed and launched in 2021. It uses our ‘as is’ position, sense checked against our likely population growth in the city using ONS estimated future population figures. Our demand areas include:
- people waiting for supported living accommodation (our waiting list),
 - those in residential care who would benefit from independent living
 - our young people in transition,
 - those more complex needing resettlement into community placements after a stay in an inpatient treatment and assessment unit,
 - people in temporary accommodation, and.
 - people (55+) in band 3 and waiting for a sheltered care placement.
- 4.16 **Next steps:** Adult Social Care is now partnering with City Development and Neighbourhoods. This collaborative approach will help drive four interlinked workstreams that need to be progressed:
- Validation of our demand forecast and data
 - Market engagement with Registered Providers, developers, contractors, funders
 - Review of site suitability – existing and new sites
 - Outline delivery plan
- 4.17 Scoping of this staged commission to deliver on these workstreams has started with a provisional budget allocated. This will provide the basis to ensure key procurements are undertaken this year – the approach described above will ensure that these procurements are well designed and are aligned with the market’s requirement, which will help ensure successful outcomes are seen with the next tendering process.
- 4.18 In line with this, officers intend to redesign a procurement opportunity to achieve appropriate developments at the Tilling and Hamelin Road sites. We anticipate that the requirement of units will be substantially reduced given our preference now for smaller schemes in line with CQC’s building the right support.
- 4.19 To support this, officers are revisiting the two opportunities, ensuring the models of accommodation and build type align with our need but also the ambitions of our registered providers and housing developers to ensure a successful procurement is achieved.
- 4.20 A revised procurement will be supported by the lessons we have learned following a critical review of the issues around the last procurement and why we failed to attract responses from our registered provider market. This identified potential issues with the timescales, the specific requirements and tendering both sites together. The discussions with RPs

planned will ensure we design a revised procurement that achieves appropriate builds on these two sites.

4.21 **Scheme financing.** ASC currently has policy provision funding allocated to support the Extra Care schemes at Tilling and Hamelin Road. An Executive Decision report will be brought forward setting out our intentions to access this funding to support the developments at Tilling and Hamelin Road in due course.

4.22 Discussions as noted in section three of this report have been had with Homes England who are keen to support the development of the two sites which they have confirmed they will continue to do – specifically asking strategic partners which tend to be the larger RPs, to include Tilling and Hamelin Road in their plans. Grant funding through Homes England is our preference for funding these schemes.

4.23 **The case for investing in supported living and extra care.** As the population in the city grows older and the complexity of people supported increases, the case for developing good quality accommodation is persuasive. The right combination of accommodation and support can mean individuals remain independent for longer. This can reduce the need for residential care and can also have the additional benefit of freeing up scarce local family housing.

4.24 Whilst residential care will remain the most suitable option for some people based on their needs, the Council, in line with the Care Act 2014 needs to ensure and move towards a position where it is not the only or predominant choice.

4.25 The strategy addresses that by proposing a development programme that will achieve bespoke accommodation-based services which at present either constitute a gap or is in high demand and of limited availability in our portfolio.

4.26 Finally, and worth noting in relation to other connected work the ASC department is undertaking, that the ambitions of our ten-year accommodation strategy is very much in line with our strength-based ways of working and our focus on early action which recognises that:

“We all want to live in a place we call home with the people and things we love, in communities where we look out for one another, doing the things that matter most.”

5. Supporting Documents

5.1 Appendix 1 – Location of Supported Living Schemes across the city.

6. Financial, Legal, and other implications

6.1 Financial implications

6.1.1	The report is primarily seeking agreement to explore the development of Hamelin and Tiling Road, which will go towards bridging the gap in the current market.
6.1.2	Currently there is £5.9m in the Policy Provision for Extra Care. A report will need to be approved by mayoral decision to release the above, if this progresses further as per paragraph 4.14 above.
6.1.3	Note, this initiative also relies on grant funding from Homes England.
6.1.4	Detailed financial implications will need to be revisited once the costing and funding sources become clearer.
Signed: Rohit Rughani, Principal Accountant, ASC Finance Darren Stell, Capital Accountant.	
Date: 13 th February 2025	

6.2 Legal implications

6.2.1 **Contract, Commercial and Procurement**

The report does not raise any issues that have immediate and direct legal implications, but the proposed strategy will include consideration of the following in the longer term:

6.2.2 **Grant Funding**

It is anticipated that Homes England (or other funders) will be involved in meeting the desired outcomes. The legal team will be able to assist in identifying any risks arising from the relevant grant funding agreements and in preparing appropriate documentation where funding it to be allocated to registered providers, developers and/or support providers.

6.2.3 **Procurement**

The report refers to “*consideration of the best procurement solutions needed*” in order to implement the strategy. As roll out will continue after the Procurement Act 2023 (“**PA**”) comes into force, it is noted that this legislation provides greater flexibilities that may be complementary to achieving such outcomes. Where outcomes are to be realised through a procurement route, both the procurement and legal teams should be contacted in the normal way to provide advice and support in relation to those arrangements and ensure compliance with both relevant legislation and the Council’s own internal Contract Procedure Rules.

6.2.4 **Property**

The legal team will also be able to provide ongoing support with any disposals or appropriations of land or other property interests as required. The team will also be able to advise in relation to development arrangements that are contemplated by the report.

Signed: Emma Young, Qualified Lawyer, Legal Services

Date: 18th February 2025

6.3 Climate Change Emergency implications

- 6.3.1 Housing is responsible for a third of Leicester's overall carbon emissions. Following the city council's declaration of a Climate Emergency its aim to achieve net zero carbon emissions for the city and council addressing these emissions is vital to meeting our ambition, particularly through the council's own housing, including supported accommodation, where it has the highest level of influence and control.
- 6.2.2 Where new accommodation is developed, opportunities should be taken to make the properties as energy efficient and low carbon as possible. This should be considered from the earliest stages of the projects, including through tendering processes and engagement with potential providers. Measures should include fitting high levels of insulation, low carbon heating and lighting, renewable energy sources and sustainable construction methods. Energy efficiency should also be considered as part of any refurbishment of newly purchased buildings. Alongside minimising carbon emissions, these measures would also significantly reduce energy costs for accommodation and should increase comfort levels for occupants.
- 6.2.3 Any development will nonetheless be required to follow policy CS2 of the Adopted Leicester Core Strategy and relevant building regulations. A toolkit is also being piloted within the council to support the achievement of reduced carbon emissions in capital construction and renovation projects.

Signed: Duncan Bell, Change Manager Climate Emergency

Date: 17th February 2025

6.4 Equalities implications

- 6.4.1 Under the Equality Act 2010, public authorities have a Public Sector Equality Duty (PSED) which means that, in carrying out their functions, they have a statutory duty to pay due regard to the need to eliminate unlawful discrimination, harassment and victimisation, to advance equality of opportunity between people who share a protected characteristic and those who don't and to foster good relations between people who share a protected characteristic and those who don't. Due regard to the Public Sector Equality Duty should be paid before and at the time a decision is taken, in such a way that it can influence the final decision.
- 6.4.2 Protected Characteristics under the Equality Act 2010 are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
- 6.4.3 Good housing and support are central to a person's health and wellbeing, to their ability to contribute in community life, and participate in education and employment. The increase in the number of supported accommodation units to meet the needs of people accessing social care who also have a housing requirement would lead to positive outcomes for people from across a range of protected characteristics and help towards achieving key developments outlined in the strategy. It would help individuals to live independently in the community by taking a person-

centred approach and meet our obligations under the Care Act. We need to ensure equality considerations are embedded in the development of this work and any consultation/engagement is fair, accessible and proportionate.

Signed: Surinder Singh

Date: 18th February 2025

Appendix 1

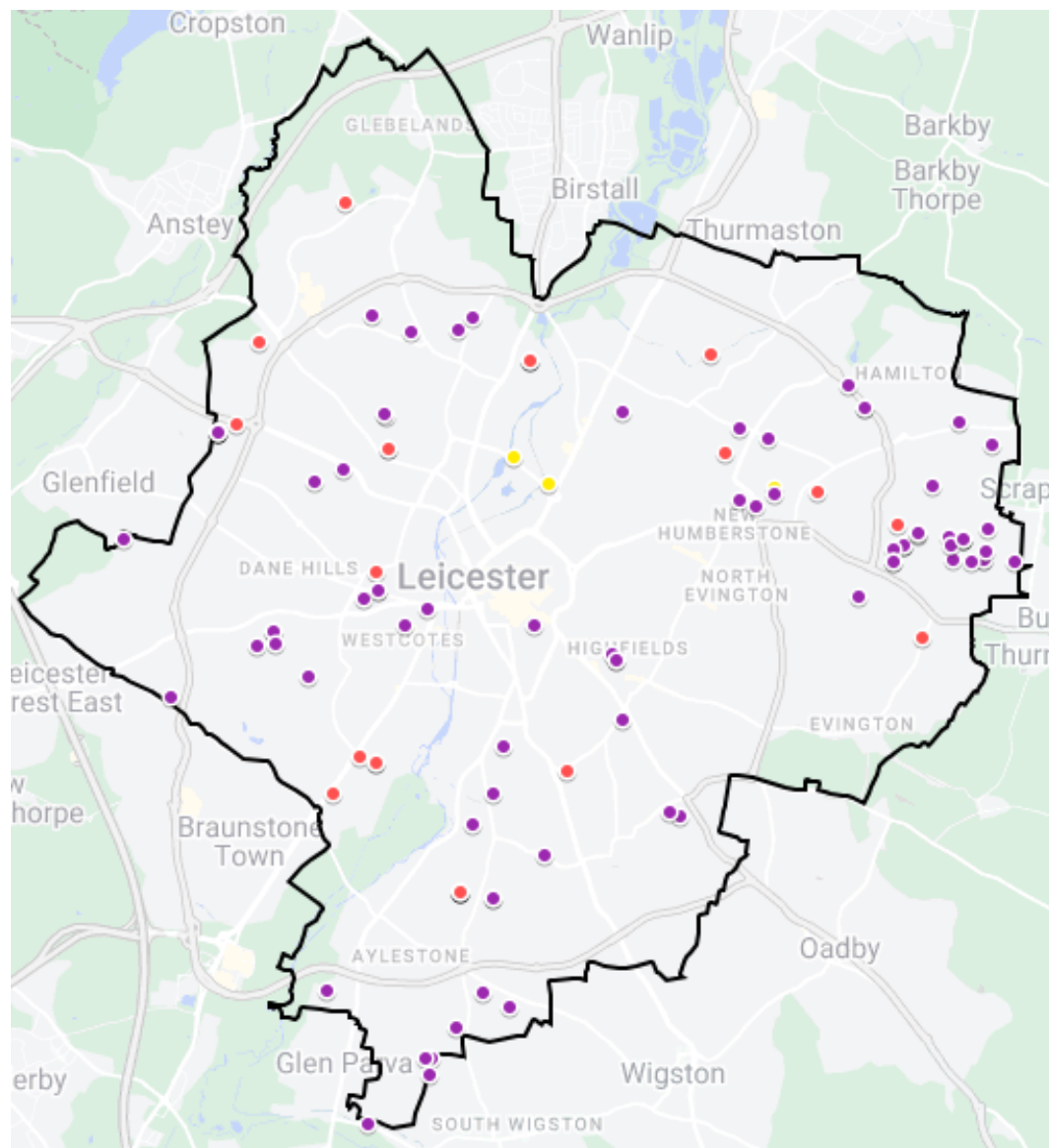
Existing Supported Living Provision

Extra Care: 170 units

Shared House: 147 units (103 units within city, 44 units outside city)

Supported Living: 381 units (349 units within city, 32 units outside city)

Total Units: 698 units (622 units within city, 76 units outside city)



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Delivery of the Ten-Year
accommodation plan.

Background and Summary

- The Supported Living and Extra Care Housing Strategy has a target to deliver 551 units of accommodation over the course of the 10- year plan (2021-31)
- Delivery targets were broken down into 3 phases: 196 units up to 2022; 66 units 2022-26; and 289 units 2026-31.
- The first phase delivery target was based on the planned development at Tilling and Hamelin Road, which would have delivered 155 units. This has not delivered due to several challenges, including procurement, and therefore the target has not been met.
- However, there are a range of actions that are in place that mitigate the risk of delayed delivery, and that are having a positive impact and delivering good outcomes.
- This presentation sets out the work of the Supported living team; the commissioned framework of supported living; the accommodation plans in delivery / pipeline; and the shared lives service.

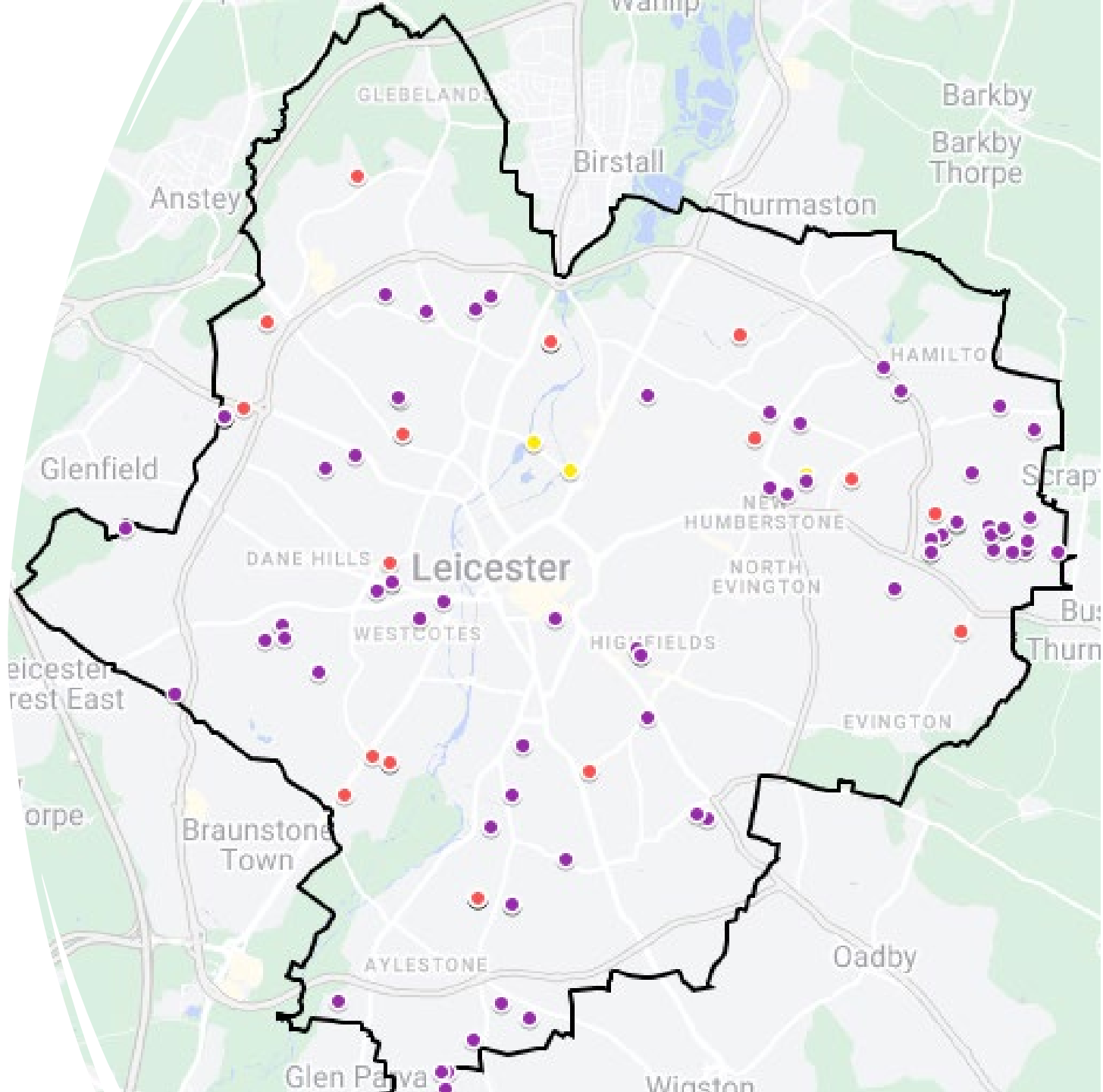
Existing Supported Living Provision in Leicester City.

Extra Care: 170 units

Shared Housing: 147 units (103 units within city, 44 units outside city)

Supported Living: 381 units (349 units within city, 32 units outside city)

Total Units: 698 units (622 units within city, 76 units outside city)



Our Commissioned support for supported Living

Our commissioned offer for supported living care and support services is comprehensive and can provide a range of support from those requiring just enough support to those requiring enhanced services supporting transition from hospital to a community setting. This can be delivered across all tenures, and includes floating support / outreach, as well as scheme-based support. This was codesigned alongside the ten-year plan to ensure alignment.

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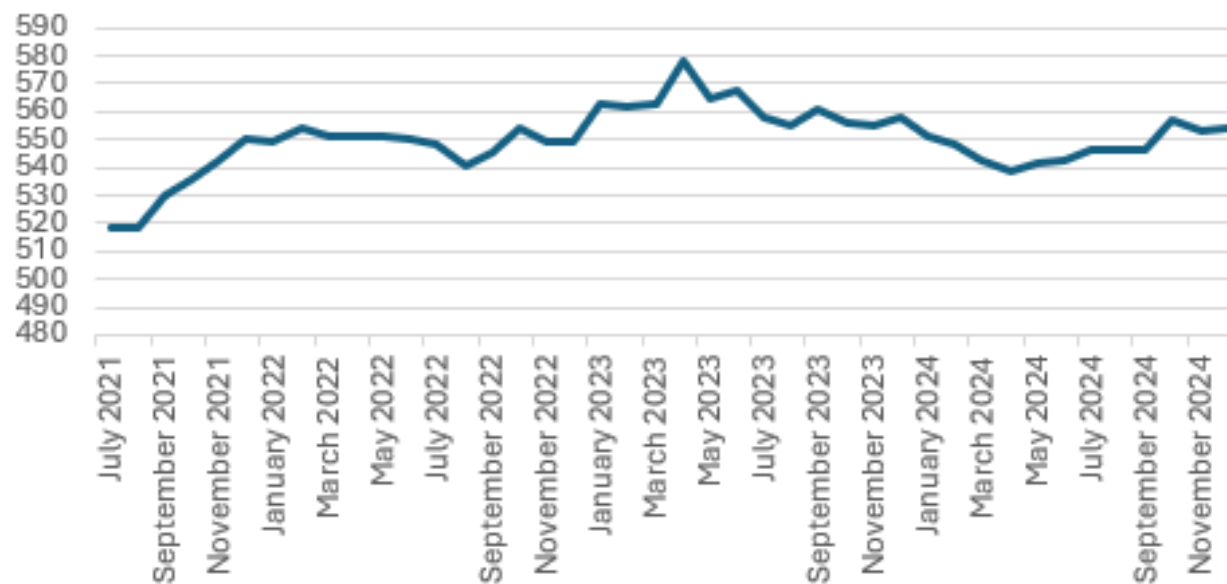
ENABLEMENT		LIVING WELL		SPECIALIST	RECOVERY
Lot 1	Lot 2	Lot 3	Lot 4	Lot 5	
Mental Health and Learning Disability scheme-based services and outreach Up to 15 providers	Older people and dementia scheme-based services and outreach Up to 5 providers	Physical and sensory disability scheme-based services and outreach Up to 10 providers	Specialist services: mainly outreach Complex Learning Disability and Autism including Ministry of Justice cases Those preparing for adulthood. Profound & Multiple learning disability Up to 5 providers	Adult Mental Health recovery accommodation-based service/s People discharged from the local Mental Health inpatient hospital and treatment and assessment units. Those with a dual diagnosis of MH and substance misuse One provider	
Standard day/waking			Enhanced day	Block contract	

The Supported Living Team

- Supported living is about long term lifetime homes and a lot of work goes into finding the 'right property'. Our dedicated supported living team works with people to support them into the right property. During this process people are never left without support or in situations deemed unsafe. When properties are not immediately available the team will work with the MDT to:
 - Commission supported living support through our floating support / outreach offer to support people in their own homes (see next slide for the commissioned model)
 - Ensure that Carers assessments are undertaken where necessary to help families continue to keep loved ones at home
 - Explore other temporary solutions e.g. shared lives.
 - Identify general needs accommodation through our housing colleagues - this has supported a requisitions process to buy suitable properties for people with more bespoke requirements.
 - Continue to build on relationships with registered housing providers who specialise in supported and extra care which ensures we continue to realise opportunities for people.
 - Support the use of Direct Payments which provide access to accommodation in the wider market.
 - In 24/25 The supported living team took on an additional 101 people in the first 9 months. (April-Dec).

Impact and Outcomes

Supported Living - Total Persons Supported by Month



- Our supported living Services are very stable. We currently support, on average 550 people
- The rest (circa ~ 150 people) mainly those who live in our Extra Care schemes tend to use homecare.
- The supported living service supported an additional 101 people over the first 9 months of 24/25
- Most recent outcomes data demonstrates on average 94.5% of people receiving supported living support are achieving a positive gain because of the support provided and demonstrated through an evidence-based tool.
- The ratio of people supported via a commissioned service, or a direct payment is 65:35 illustrating our ability to seek accommodation outside of our portfolio, a further risk mitigation to delivery of the 10yr plan
- We have large and comprehensive portfolio giving us access to accommodation via nominations agreements that work well (see slide 3)
- Through our market shaping work commissioners are:
 - Working with trusted developers and providers (we term these our 'windfall' sites) to bring forward schemes
 - Securing nomination rights in county schemes on our borders
 - Expanding and growing shared lives services using the accelerated reform funding.



Shared Lives

- Alternative flexible accommodation and or support
 - Long term
 - Short Term
 - Day Care Provision
 - Respite
- Impact:
 - 53 Shared Lives Carers
 - 36 caring households,
 - 31 people drawing on support

Outcomes

I've also been caring for a younger girl temporarily for the last few months. When she came to me she covered her face up all the time and wouldn't do very much for herself. Now she's out at college, going to meet friends and she'll help out around the house. She'll be living independently soon in her own home.

One member of our family, a man of 58, had lived in a residential home for 19 years. He only went out as part of a group or taken to his voluntary work place by the owner of the home. After just 2 weeks support on a bus accompanied by my husband he now catches the bus to work on his own. He goes into town on his own on a Saturday with money in his pocket and has lunch at a place of his choice, something he could not do previously.

- Q3 data from the commissioned supported living framework shows on average 94.5% of people in supported living are achieving a positive gain because of the support provided and demonstrated through an evidence-based tool.
- 45% strongly agreed, and 45% agreed, 10% neither agreed or disagreed that they have more choice and control of their life further to the support of the supported living team

"I am getting a part of my life back which I've not had for a long time. I'm gaining my independence and confidence to live by myself."

"Everything was perfect, I'm glad to be moved here. I feel it is just right here for me."

"I am so grateful to my SLDO. She has been a wonderful person in supporting me and is exceptional at her job. I wouldn't have been able get through the moves without her."

Ongoing Plans

We know that the accommodation required is best met through a range of opportunities, including existing sites and a confirmed pipeline that is anticipated to deliver good quality accommodation. This is driving a programme of work which includes the following opportunities and workstreams.

1. There are a range of smaller non-strategic sites available via the Local Plan which Adult Social Care has expressed an interest in pursuing.
2. There are several planned developments being led by our colleagues in housing development and those being brought forward by the market which will deliver this year and next, including
 - Core and Cluster development in the Northwest of Leicester which will deliver 21 units of accommodation.
 - Supported Living scheme in the Belgrave ward which will deliver 14 units of accommodation in 2025.
 - Extra Care development which will deliver 75 units of accommodation in 2026.
 - Three 'windfall' sites anticipated to deliver which will see 22 units delivered in 2025/6.
- These are just the confirmed sites with dates for delivery. Officers are in discussions regarding a further 173 units of accommodation where through the planning process we are actively working with developers to influence building specifications to support the needs required.
- The target as per the strategy by 2026 was 262 units, the majority of which were units within the Tilling and Hamelin Rd schemes (155 units). Whilst there is a shortfall against this target (units we are confident will deliver: $262 - 132 = 130$ unit shortfall), if the other schemes do deliver, then targets could be met.
- The sites at Tilling and Hamelin Road will be revisited this year, ensuring the models of accommodation and build type align with our need but also the ambitions of our registered providers and housing developers. We anticipate that the requirement of units will be substantially reduced given our preference now for smaller schemes in line with CQC's building the right support.
- Other opportunities include exploring Leicester City Council owned estate, the opportunities being pursued through the Accelerated Reform Fund to increase our shared lives services and opportunities for nominations in new developments in the County.

Proposed workstreams to deliver on the strategy

Engaging local partners to understand how they can support the Council: -

- Working with the county council
- Work with other depts i.e. children's, PH and housing to improve health outcomes to limit future demand
- Work with the NHS which may include NHSE capital funding applications

Partners could include Local Community Groups and NHS providers

Engage with the private sector developer market, using revised needs assessment and pipeline, to create a sense of excitement, engagement and future procurement of a developer partner to deliver care units



Demand Assessment

Undertaking a revised Demand Assessment of the likely demand, including geography, of ASC for the next 5 to 10 years. This would entail analysing historic and future data to give an estimated annual demand across differing need types



Developing an asset pipeline



Developer Partner Procurement

Review the Council's assets that are coming forward (e.g. vacant office buildings) and available land, assessing their potential as future ASC units through feasibility studies. This would then inform future planning and engagement with Developer Partners.

This workstream would include discussing housing pipeline / sites in development by other Council Directorates.

Local Partner Engagement

Adult Social Care Scrutiny Committee

Work Programme 2024 – 2025

Meeting Date	Item	Recommendations / Actions	Progress
8 July 2024	Adult Social Care Overview	The Commission noted the report.	
	Adult Social Care Reviews	A previous report on the strength-based approach be circulated to Members.	Report circulated to Members.
	CQC Assessment of Adult Social Care - Readiness and Learning	The Commission to be kept updated on the CQC assessment.	Added to the forward plan.
29 August 2024	Early Action – Leading Better Lives Project	Information to be provided on prevention budget.	Information provided to Members.
		Information to be provided on cost of Ernst & Young Consultants and identified savings.	Information provided to Members.
		Item to remain on work programme for Commission to receive updates on progress.	Added to the forward plan.
	SCE Procurement Plan 2024-25	Consideration to be given to how social value could be added to contracts through procurement, particularly care leavers as a corporate parent.	Information provided to Members.
		Item to be added to the work programme on supported living.	Updated on the forward plan.

Meeting Date	Item	Recommendations / Actions	Progress
14 November 2024	Leicester Safeguarding Adults Board Annual Report	Self-neglect to be added to the work programme.	Added to the forward plan.
	Understanding Equity in ASC (A Deep Dive into Race Equity)	Equity data on care leavers to be shared.	
	Support for Carers		

Meeting Date	Item	Recommendations / Actions	Progress
9 January 2025	<p>Draft General Revenue Budget and Capital Programme 2025/26</p> <p>ASC Savings Delivery Programme</p> <p>Support for Self-Funders</p>	<p>Section 15.3 of the budget report will be updated for Care Leaver to be included in the Councils Protected Characteristics.</p> <p>An update on supported living will be presented at the next meeting.</p> <p>Members to be updated once properties which are determined to be sold under the Capital Programme have been decided.</p> <p>That an item on loneliness be added to the Work Programme.</p> <p>An item on increasing complexity of needs be added to the Work Programme.</p> <p>An item on SEND children transitioning to Adult Social Care be added to the Work Programme.</p> <p>Consideration of language to take place, in particular to the use of the phrase 'leavers' when referring to SEND children aging out of the children's social care phase.</p> <p>Health Watch Leicester to circulate flyer with details of support available for Members and the wider Council.</p> <p>Any further questions be sent over to the Director of Adult Social Care and Safeguarding.</p>	

Meeting Date	Item	Recommendations / Actions	Progress
	CQC Assessment Update - Verbal		
13 March 2025	CQC Inspection – Verbal The Annual Complaints and Commendation Report Autism Place Based Delivery Plan		
24 April 2025	<i>Suggested items:</i> <i>CQC Inspection – Verbal/written</i> <i>Young Carers</i> <i>Supported Housing?</i> <i>Transitions from Childrens to Adults</i> <i>Prevention Update</i> External Workforce Strategy		

Forward Plan Items (suggested)

Topic	Detail	Proposed Date
ASC funding	The Commission requested at the meeting on 29 August 2024 that an item be added to the work programme to discuss funding for care, particularly self-funding and deferred payment scheme.	9 January 2025

Supported Living	Commission requested at the meeting on 29 August 2024 that an update be provided on supported living. Consideration to be given to a joint discussion with the Housing Scrutiny Commission.	13 March 2025
Community Prevention / Early Action	Commission also requested preventative services be discussed at meeting on 8 July 2024.	29 August 2024 24 April 2025
Death by Suicide	For joint discussion with public health.	
Workforce	For joint discussion with public health.	
ASC Budget Monitoring		
Winter Planning	Joint Adult Social Care & Public Health and Health Integration Scrutiny Commission – 10 September 2024.	10 September 2024
ASC quarterly performance report		
Adult Social Care CQC Assessment	Update on learning from assessments at other authorities and readiness 8 July 2024. Commission requested to be kept updated on the CQC assessment.	
Self-neglect	The Commission requested that an item on Self-Neglect be added to the work programme.	14 November 2024
Loneliness	The Commission requested that an item on Loneliness be added to the work programme to discuss.	14 November 2024

