



Leicester  
City Council

MINUTES OF THE MEETING OF THE  
ADULT SOCIAL CARE SCRUTINY COMMISSION

Held: THURSDAY, 7 MARCH 2024 at 5.30pm

P R E S E N T :

Councillor March (Chair)  
Councillor Surti (Vice Chair)

Councillor Dave  
Councillor Kaur-Saini  
Councillor Orton

Councillor Singh-Sangha  
Councillor Westley (for Cllr Joannou)

In Attendance

Deputy City Mayor, Councillor Russell – Social Care, Health and Community Safety

Kash Bhayani – Healthwatch

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**45. APOLOGIES FOR ABSENCE**

Apologies for absence were received by Cllr Cole and Cllr Joannou.

**46. DECLARATIONS OF INTEREST**

The Chair asked members of the commission to declare any interests. Cllr Dave declared that he opened the Hastings Road Day Centre.

**47. MINUTES OF THE PREVIOUS MEETING**

The Chair highlighted that the minutes from the meeting held on 25 January 2024 were included in the agenda pack and asked Members to confirm whether they were an accurate record.

**AGREED:**

- It was agreed that the minutes for the meeting on 25 January 2024 were a correct record.

#### **48. PETITIONS**

It was noted that none had been received.

#### **49. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE**

The Chair noted that a statement of case had been received but would take it as part of the Charging Policy item.

#### **50. CHARGING POLICY**

The Chair noted the importance of hearing the voices of people who draw on support and welcomed participation in scrutiny. She invited the member of the public to make the statement.

Mo Peberdy stated:

*I would like to make the following submission on behalf of the people who draw on support in the Making it Real group and the wider community we represent.*

*We note from previous minutes that the Adult Social Care Scrutiny Commission are in the process of discussing the proposal to include peoples enhanced part of PIP in the calculations when assessing charges.*

*We would like to ensure that you are aware we have concerns in the way the consultation took place and the way it was conveyed to the cohort of people it will affect.*

*We know it would have a profound effect on people who draw on support and place a huge additional financial burden on some of the most vulnerable people in our society.*

*We also have huge concerns about the viability of any quality impact assessment. It was noted in your own papers that you have no idea how many people it will affect so how can you assess the impact?*

*We have many concerns about this proposal and we urge you not to support any proposal to increase charges by including the enhanced part of PIP in any calculations.*

The Deputy City Mayor for Social Care, Health and Community Safety thanked Mo for raising concerns on behalf of members who draw on support in the Making it Real Group and noted the important role of co-production in adult social care services noting that the Director for Adult Social Care and Safeguarding spoke with the group and others as part of the consultation process. In response to the statement, it was noted that:

- The Government introduced guidance to allow the higher or enhanced

rate of disability benefits to be treated as income in full and some local authorities do treat it in this way. The charging policy was not taken forward when considered previously but the current financial pressures on the Local Authority's budget has required the policy to be reviewed.

- Consultation is a legal requirement and the service engaged as many people as possible to ensure a fair and open consultation with individuals who may or may not be affected. The Director for Adult Social Care and Safeguarding was thanked for her direct communication with residents as part of the consultation process.
- The number of people in receipt of higher or enhanced rate of disability benefits is not known as the charging policy does not currently treat it as income in full and therefore the Local Authority cannot ask for information that is not required.
- The proposal is to treat higher or enhanced rate of all disability benefits as income in full although not everyone may be charged. A financial assessment will be undertaken for every individual in receipt of care to assess their current needs and determine how they are using their resources to meet their needs.
- The consultation also proposed to apply an administrative charge for the appointeeship service.

The Director for Adult Social Care and Safeguarding further noted if a decision is taken to treat the higher or enhanced rate of disability benefits as income in full then it would not be a blanket policy. Financial assessments would need to be undertaken on an individual basis to determine how resources are used to meet needs and the government's minimum income guarantee would also be considered before applying charges.

The Chair permitted the member of the public to respond in which it was noted that nobody who draws on support in the Making it Real Group uses the appointee service nor have the Group been contacted by anyone and therefore have not commented. Officers were also thanked for involving the Making it Real Group in the consultation and clarifying the minimum income guarantee. In response to additional queries, it was noted that:

- The consultation included direct conversations with individuals and groups which was viewed as important. It is likely that not all people who responded to the consultation will be impacted as individual financial assessments will need to be undertaken.
- A consultation and decision was taken previously to alter the rates of disability related expenditure from the flat rate of £20 for a couple and £15 for an individual to £10 per person. As part of financial assessments where an individual can demonstrate their disability related expenditure is higher than the flat rate then this will be taken into account. If the decision is taken the service would work with the Making It Real Group to try and make disability related expenditure, clear and transparent.
- The Minimum Income Guarantee is a government calculation that varies depending on individual circumstances. If an individual was required to pay a charge and their retained income was less than the minimum income guarantee, then it would be adjusted to ensure the individual's

retained income is equal to or above the minimum income guarantee.

The Commission thanked Mo for presenting the concerns of those who draw on support.

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

- The potential income is estimated up to approximately £1.86m but should be considered with caution as data is not held on individuals in receipt of the enhanced or higher rate of disability benefits and discretion would need to be applied by undertaking individual financial assessments in accordance with the Care Act 2014.
- The budget is complex and consideration must be given to costs such as annual uplifts, trajectory of the number of people in receipt of care, size of care packages and costs to deliver and offsetting costs with income generation such as the charging policy.
- Around 4,000 individuals are in receipt of non-residential care that require an annual financial assessment to be undertaken. If the proposal was to proceed, then individuals would be required to declare enhanced or higher rate disability benefits as part of their income when their financial assessment is due to enable a managed and phased process.

Members of the Commission queried if the proposed income generation had been taken into account in the budget approved by full Council and expressed concerns in relation to the timing. It was requested clarity on where the underspend from previous year's budget was absorbed.

The Chair noted there was a helpful briefing prior to discussing the draft budget at the January meeting and recommended that the Commission should receive a separate briefing to further discuss the budget in the new financial year.

The Chair invited the Healthwatch representative to comment in which it was noted in response that officers will continue to work with the Making it Real Group to provide clarity on disability related expenditure to be taken into account during individual financial assessments.

The Commission noted the recommended proposal in relation to the administrative charge for the appointee service, but concerns were raised regarding the proposal for the recommended proposal for treating the higher or enhanced rate of disability benefits as income in full. The Chair recommended the proposal be noted which was seconded by Cllr Kaur-Saini and following a vote was carried. It was further recommended that the service should co-produce letters with individuals who use the appointeeship service about changes; foster closer working relationships with the Making it Real Group and other people who draw on support around future communications; supports the importance of ensuring people can afford any proposed charges and be proactive to include a list for individuals to consider what may be considered to declare as disability related expenditure.

The Chair welcomed the new Strategic Director for Social Care and Education, thanking him for his contributions and noted the Commission look forward to

working with him.

AGREED:

- The Commission noted the report and proposed recommendations.
- A briefing session to be arranged for the Commission to discuss the budget in the new financial year.
- Information to be shared with the Commission in relation to the underspend.
- The service to co-produce letters with individuals who use the appointeeship service about changes and foster closer working relationships with the Making it Real Group and other people who draw on support around future communication of consultations.
- The service to ensure people can afford any proposed charges and be proactive to include a list for individuals to consider what may be considered to declare as disability related expenditure.

## **51. REABLEMENT SERVICE OVERVIEW**

The Director for Adult Social Care & Safeguarding introduced the report noting the service is critical to enabling people to leave hospital and receive support at home or where an incident has occurred at home and support is required to prevent hospital admission. It was highlighted that the service has changed over time in terms of growth and is free at the point of delivery for residents.

The Commission thanked officers for their excellent work. In response to questions and comments from Members, it was noted that:

- There has been an increase in readmissions to hospital and work to manage and identify possible causes is being reviewed across the wider system. Hospitals are under acute pressure and patients are being discharged when clinically ready as opposed to previously when they may have stayed in hospital a little bit longer.
- The Rehabilitation, Reablement and Recovery Service is available to anyone with an identified care need, with the exception of where an alternative pathway is more suitable or where an individual requires double-handed support. Individuals requiring double-handed care are likely to be supported by domiciliary care when leaving hospital but will be assessed on a case-by-case basis.
- The Reablement Service is an intermediate arrangement and free for up to six weeks. If domiciliary care is required, this is chargeable, and a financial assessment would therefore be required to determine the charge to the individual.
- The local model and integration of health and social care services is significantly different to services offered in other areas. Funding for the service is provided by the Local Authority but the ICB has supported additional growth with £433k from the Integrated Care Board.
- The service is supported by an experienced team who have developed as the workforce is valued and job evaluation to ensure roles are fit for

purpose. There are few vacancies although there is an aging workforce to be monitored.

AGREED:

- The Commission noted the report.

## **52. GROWING NEEDS OF AUTISM**

The Director for Adult Social Care & Commissioning introduced the item highlighting the report had been produced following a request from the Commission recognising the growing needs and the impact this may have on services. It was noted that the report sets out what is known on the prevalence and the ambition to understand more in which Public Health have been commissioned to update the Joint Strategic Needs Assessment.

The Deputy City Mayor for Social Care, Health and Community Safety noted more people are being diagnosed with autism and particularly neurodiverse conditions but that does not necessitate support from social care. Further work is required, and data collection is needed to better understand autism and neurodiversity to take a strength-based approach and raise awareness and encourage employers to be supportive and utilise individuals' skills.

The Head of Commissioning highlighted that various workstreams are underway to identify how to best support individuals with autism or neurodiverse conditions who may not meet the social care threshold but benefit from preventative support to live well. It was noted that whilst challenges exist there is also plenty of opportunities including joint working with public health and health partners, ensuring there is a collective understanding by speaking directly with those who draw on support and their families, supporting carers and raising awareness with employers. The Commission were informed that a placed based plan is being developed and would be shared at a future meeting.

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

- Adult social care support is provided to individuals diagnosed with autism and a learning disability primarily by the learning disability team and individuals with autism only by the mental health team.
- The National strategy for autistic children, young people and adults is the first time all age groups were incorporated. Work continues to be undertaken by different services, but the Local Authority and health services continue to identify collaborative working to ensure all individuals and families are supported at the right time by the right service including through the transition from Childrens to adults.

The Deputy City Mayor for Social Care, Health and Community Safety highlighted challenges for health partners, noting Leicestershire Partnership Trust are not allowed to use additional mental health funding to address the backlog of diagnosing individuals for autism and ADHD. Assurance was provided that partnership work will continue to promote employment support

and identify collaborative ways of working noting an event taking place in Cardiff as a neurodiverse friendly city.

The Vice Chair highlighted that Oliver McGowan online training was mandatory for workers in health and social care and that she had undertaken Tier 2 which included presentations from individuals with lived experience.

The Commission noted the complexities surrounding the issue and thanked officers for the report and ongoing work. It was recommended that the item be added to the work programme to the relevant Committee or Board to enable collaborative partnership discussions and working.

AGREED:

- The Commission noted the report.
- Autism Placed Based Delivery Plan to be added to the work programme.
- Item to be added to the work programme for the appropriate Board/Committee.

### **53. DRAFT EXTERNAL WORKFORCE STRATEGY**

The Director for Adult Social Care & Commissioning noted that workforce issues had been discussed at the joint meeting of the adult social care and public health and health integration scrutiny commission and highlighted the draft external workforce strategy demonstrated the commitment to improving this area of work.

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

- The level of zero-hour contracts is above the ideal rate in the city. The service has undertaken engagement with the market and Inspired to Care which found that some individuals prefer the flexibility, and they can increase capacity for home care but there continues to be a commitment to reduce the number of zero-hour contracts.
- The average hourly pay meets the legal requirement of the minimum wage and includes travel costs, but budget pressures do not allow for the real living wage to be met. The Local Authority promotes training and networking for staff and providers where available.
- Vacancies in adult social care are promoted through the Department for Work and Pensions where individuals may be unemployed and seeking work. Careers are also promoted through local colleges and Skills for Care to illustrate the range of services and roles in the sector.
- The Home Care contract incorporates a 5% profit margin for external providers.
- The intention is to consult on the draft workforce strategy that will gather views from the workforce.

The Deputy City Mayor for Social Care, Health and Community Safety highlighted that the important work across the adult social care sector should be better recognised but are constrained by financial pressures. It was noted the

government permitted social care precept for council tax rises equated to around a quarter of the wage increase following the increase in the national living wage which had a significant impact on the budget.

AGREED:

- The Commission noted the report.
- Item to remain on the work programme.

#### **54. CARER SUPPORT SERVICE UPDATE**

The Director for Adult Social Care & Commissioning noted that updates are regularly provided to the Commission given its keen interest in the important role of carers in supporting the service with managing the amount of care it provides and associated costs. It was highlighted that the report set out the work for the current tender for new services and arrangements for how the carer support service operates as well as projects delivered for carers.

The Commission thanked officers for the informative report.

The Chair expressed thanks to the Lead Commissioner for her work and dedication particularly regarding carers and the dementia strategy and congratulated her on retirement.

AGREED:

- The Commission noted the report.

#### **55. HASTING ROAD DAY CENTRE UPDATE**

The Head of Commissioning provided an update to the Commission noting that due care and attention had been provided to ensure individuals and their families were supported throughout the transition to alternative services and will continue to be supported to ensure the new arrangements are working.

The Chair noted the Commission's recognition to the sensitive approach in managing the closure of the Day Centre and expressed thanks to the continued dedication of officers for their work during the process. It was requested that the Commission be provided a final update when all transitions were complete.

The Deputy City Member for Social Care, Health and Community Safety also thanked officers for their sensitivity and understanding to show emotional intelligence and honesty during difficult circumstances and changes for individuals and their families.

AGREED:

- The Commission noted the report.
- Confirmation to be provided to the Commission that all transitions are complete.



## **56. WORK PROGRAMME**

The Chair noted it had been a busy year discussing important topics on the work programme and reflected on some highlights of the Commission's work including:

- Successfully recommending a change in domiciliary care contract for the tender be amended from providers requiring a minimum CQC inspection of 'Requires Improvement' with 'Good' in the 'well led' section, to overall inspection being 'Good'.
- Improvements to the Inspired to Care website, particularly the apprenticeships pages.
- A detailed look at direct payments for first time at scrutiny.
- Monitoring the progress and sensitive approach in the closure of the Hastings Road Day Centre.
- Two joint meetings with health colleagues looking at winter planning, workforce, mental health and drug and alcohol services.

The Chair thanked Members for their input in ensuring the role of scrutiny as a critical friend has been effective and officers for their continued good work.

## **57. ANY OTHER URGENT BUSINESS**

There being no further business, the meeting closed at 19.19.