

Minutes of the Meeting of the ADULT SOCIAL CARE SCRUTINY COMMISSION

Held: TUESDAY, 6 MAY 2025 at 5:30 pm

PRESENT:

Councillor March (Chair)
Councillor Cole (Vice Chair)

Councillor Kaur Saini Councillor Orton Councillor Sahu
Councillor Singh Sangha

In Attendance

Councillor Dawood, Assistant City Mayor, Adult Social Care

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117. WELCOME AND APOLOGIES FOR ABSENCE

Apologies for absence were received from Cllrs Joannou and O'Neil.

118. DECLARATIONS OF INTERESTS

The Chair asked members of the commission to declare any interests for which there were none.

119. MINUTES OF THE PREVIOUS MEETING

The Chair highlighted that the minutes from the meeting held on 13 March 2025 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 13 March 2025 were a correct record.

120. CHAIRS ANNOUNCEMENTS

The Chair thanked Commission Members for their work this year.

121. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE

It was noted that none had been received.

122. PETITIONS

It was noted that none had been received.

123. CQC INSPECTION

The Strategic Director of Social Care and Education provided a verbal update on the CQC inspection. The following was noted:

- Due to an embargo, details could not yet be given.
- The team were working to check the factual accuracy of the drafted report.
- There were 10 working days in which to respond.
- The date for publication was awaited and was estimated to come in the summer.

AGREED:

- That the report be noted.
- For the item to remain on the Work Programme.

124. TRANSITIONS FROM CHILDREN'S TO ADULTS

The Strategic Director for Social Care & Education submitted a report on the Transitions from Children's to Adults and set out the achievements of the current Joint Health, Social Care and Education Transitions Strategy which ended in 2024, and the plans for the development of a new strategy going forward.

The Head of Corporate Parenting and the Head of SEND Integrated Service presented the report. It was noted that:

- The transition strategy was developed to support children and young people (CYP) moving into adulthood and to ensure families were better prepared for this change and improving long-term outcomes.
- The original strategy covered 2019–2022, with the current strategy extended to 2022–2024. Planning for the next phase was underway.

- The strategy supported CYP who may require ongoing input from both social care and health services into adulthood, aiming to make transitional services more navigable for families.
- The focus has been on:
 - Earlier identification of CYP needing continued support.
 - Improving collaboration between Children's Services, Adult Social Care (ASC), and health partners.
 - Outlining what support involves and how it will be achieved.
- Progress highlighted in the report included better joint working and earlier transition planning.
- A checklist approach from age 14 onwards across a range of settings to include:
 - Planning from age 14 to give more time to prepare for adulthood
 - Enabled Independent Travel Training (ITT) so schools and colleges can help CYP learn these skills.
 - Joint panels to manage complex cases and shared tools like the Adult Social Care Checklist.
 - Built information guides and improved the Local Offer and Leaving Care Offer websites to give clear and simple information.
 - Created ways to share views so all voices are heard when planning support.
- A pilot employment programme supported 75 young people through partnerships with Leicester College, hospitals, hotels, and the Council. With 16 young people retained employment after the programme and Families reported they wouldn't have achieved this without the programme, praising localised support.
- Collaboration with housing services led to the development of an information pack and clearer transition pathways for young people.
- A joint workshop for families, ASC, education, health and SEND was well received, followed by informal drop-ins for further support.
- Feedback had suggested a need for more specialist workshops for those with complex needs.
- Oakland School proposed adapting the transition approach to support younger children as part of future planning.
- The Council supports 600 CYP, with 124 having an Education, Health and Care Plan (EHCP). Around 100 are of school age with complex needs.
- Emphasis placed on the Council's role as a corporate parent, ensuring ongoing support whether or not CYP meet ASC eligibility.
- Work continued to improve support for adult care leavers, including over 300 aged 18–21 and 100 aged 21+.
- Work was underway to co-produce the next strategy, identifying what had worked and what future priorities should be. Focus areas include:
 - Internal improvement across services.
 - Continued support for care leavers.
 - Meeting the needs of those not eligible for statutory support.

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

The key priorities for the Cohort in the 2019-2022 strategy were all met and

progress was made in all areas.

AGREED:

- The Commission noted the report.
- The new strategy would come to a future commission meeting.

125. EARLY ACTION IN ADULT SOCIAL CARE

The Director of Adult Social Care and Safeguarding presented the report on the work taking place in Adult Social Care. Key points to note were as follows:

- Early Action Work was defined as interventional support work, preventing escalations.
- Support was available on different levels, some of which was targeted.
 Further work to those already supported, promoted independence and prevented deterioration.
- Primary or universal action provided opportunities for the whole population and included advice, information and guidance. This resolved around 70% of the contacts.
- Equipment and adaptions were available.
- Significant work had gone into the Leading Better Lives programme and there was a continued link with Public Health.
- Demand for support continued to grow, with just over 20,000 contacts received and over 14,000 of these resulting in requests for support.
- Early action was key, and the aim was to resolve as much as possible at first contact.
- Early contact had led to a reduction in numbers of people requiring a longer-term offer.
- Moving forwards, areas for focus included the online offer, work with voluntary and community organisations and drop-in sessions with the Enablement Team.
- Digital inclusion was a challenge due to both skills and costing. Those
 using the service were enabled to do things for themselves which freed
 capacity to help those unable to access digitally.
- There was ongoing work to address the waiting times for low level equipment assessments.
- The four key priorities identified would continue to be a focus under the Leading Better Lives programme.
- Early Action work included those with emerging issues who might initially require a lower level of support.
- Holistic approaches were taken with care navigators linked to primary care
- The crises response service also provided an essential early care service.
- Outcomes were positive for integrated crises response figures, with 1% of users going on to need long-term support.
- Financial targets fared well despite increasing demand.

- Areas of focus for targeted support were to further expand the reablement offer via community hubs, and an occupational therapy hub.
- Supplementary action included strength base practice and major adaptions to people's homes.
- Double-handed carer support equipment reduced the need for the two carers to be in attendance.
- In terms of impact, around 88% of service users stated that the service had made a difference.
- Intervention reduced the numbers of those going into residential settings and nursing.

Members were invited to ask questions and make comment. Key points to note were as follows:

- Specific cases raised by members were more related to the Housing Team and could be addressed there.
- Further information on Care Navigators and the local area coordinators would be circulated.

AGREED:

- That the report be noted.
- Specific cases raised by members could be flagged with the Assistant City Mayor for Adult Social Care.
- Further information would be circulated on Care Navigators and local area coordinators.

126. EXTERNAL WORKFORCE STRATEGY

The Director for Social Care and Education submitted a report to summarise the current position for the workforce that supports. Adult Social Care in Leicester. In recognition of the importance of a skilled and sufficient workforce to support the current and growing needs of our local population a commitment to have a local strategy in place has previously been agreed.

Cllr Dawood introduced the item, noting the ongoing consultation for 2024 and highlighting the role of employment hubs in supporting the care workforce. Concerns were raised around retention, particularly among those under 25 and over 60. The need to overcome challenges in attracting people to the sector and responding to increasing demand was emphasised.

The lead Commissioner for Adult Social Care presented the report. It was noted that:

- A consultation on a draft strategy had taken place in May 2024. The
 results of the consultation had been considered and were reflected
 where appropriate in the final strategy.
- In July 2024, further to local planning, a workforce strategy for Adult Social Care in England was launched.

- The previous headlines for strategy had made it easier to engage with national partners.
- Social care was not only a vital form of support for people and their carers, but also a significant contributor to the economy, contributing annually an estimated £60 billion to the National economy
- Whilst Leicester may perform slightly better in attracting and retaining staff, the vacancy and turnover rates were still not where we need them to be.
- Several other challenges were noted, including those associated with the make-up of the workforce. In 23-2024 the majority (77%) of the workforce in Leicester were female, and the average age was 41.3 years old.
- Workers aged under 25 made up just 10% of the workforce and workers aged 55 and above represented 19%. Given this age profile approximately 2,500 posts will be reaching retirement age in the next 10 years. The total number of posts in Leicester was around 15,450 in 2023/24.
- The local workstreams were aligned to the strategy's objectives and included contributions from the Workforce Oversight Group, Skills for Care, Inspire for Care, and the East Midlands Care Alliance. Although the oversight group had been active, it was noted there had not previously been a formal strategy underpinning its work.
- The Leicester Social Care Development Group and the Employment Hub were referenced as key partners supporting the workforce.
- Two delivery plans covering both internal and external workforces were in place, with common themes identified to enable better alignment and shared benefits.
- A programme of international recruitment was underway, supported by additional funding. It was acknowledged that some overseas workers faced challenges when employment did not go as planned. Support services had been developed to assist displaced workers with alternative employment, housing, and benefits.
- A case was highlighted where a displaced international worker had passed away due to COVID-19, and support was offered to the family. It was confirmed that work was ongoing to monitor providers and prevent exploitation, and this was described as a strong and positive initiative.

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

- Members asked for further detail about Inspire to Care, including whether there was a cost and what the commissioned support for providers looks like. It was noted that a post was funded within the team at an on-cost of approximately £80,000.
- There was a strong call for clarity on career progression, with members noting that the "pipeline, pathway, and progression" (PPP) elements were not clearly evidenced in the report. It was suggested that future reports should show how career pathways are being developed and implemented.
- Members highlighted that engagement with independent and private

providers is often more complex due to the competitive nature of the market, but that greater collaboration on shared career pathways including apprenticeships and leadership development would be beneficial across the sector.

- Careers education in social care should begin earlier, at school age (14– 15 years), so young people are aware of the full range of roles in the sector, not just what they see in family care settings. Universities have a role, but early awareness and entry-level opportunities were seen as key to long-term attraction.
- The Social Care Academy was welcomed as a positive initiative.
 Members suggested it be added to the Commission's future work programme for ongoing updates as the initiative develops.
- It was emphasised that Personal Assistants (PAs) employed via direct payments are often left out of workforce strategies. Members stressed the importance of recognising PAs as a core part of the care workforce and ensuring career development opportunities and access to resources such as Skills for Care are extended to them. Officers responded by acknowledging the gap and confirming that work had begun on creating a PA database. There was a commitment to improve oversight of the PA market and ensure their inclusion in delivery plans
- Concern was raised about the continued prevalence of zero-hours contracts in the adult social care sector. Members noted this model does not meet the needs of younger workers and called for a shift towards annualised or standardised hours to improve job security while maintaining flexibility. It was noted that forthcoming government legislation to abolish zero-hours contracts may force change.
- Members expressed alarm that 63% of the adult social care workforce (approx. 10,000 out of 15,500) do not currently hold a qualification in social care. This represents a significant decline from previous figures and raised concerns about workforce readiness, quality, and the capacity to meet increasing demand.
- The lack of direct input from frontline care workers was seen as a serious issue. Only 38 staff had responded to a recent consultation, which undermined the ability to understand their experiences, job satisfaction, and reasons for leaving.
- While it was acknowledged that the local authority engages with providers through forums, contract management, and MCARE, members called for improved mechanisms to hear from staff directly such as exit interviews, satisfaction surveys, and feedback via quality assurance processes.

AGREED:

- The Commission noted the report.
- A future update to the Commission on how efforts to consult directly with the workforce and providers are progressing.
- The Social Care Academy be added to the work programme.

127. WORK PROGRAMME

The Chair noted items to be added to the work programme.

128. ANY OTHER URGENT BUSINESS

There being no further business, the meeting closed at 18.40.