

Leicester
City Council

MEETING OF THE ADULT SOCIAL CARE SCRUTINY COMMISSION

DATE: TUESDAY, 6 MAY 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 invited to attend the above meeting to consider the items of business listed overleaf.

For Monitoring Officer

Officer contacts:

Katie Jordan, Governance Services (Governance Services) and Julie Bryant (Governance Services),

Email: governance@leicester.gov.uk

Leicester City Council, Granby Wing, 3 Floor, CityHall, 115 Charles Street, Leicester, LE1 1FZ

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Further information

If you have any queries about any of the above or the business to be discussed, please contact: katie.jordan@leicester.gov.uk or Julie.bryant@leicester.gov.uk of Governance Services. Alternatively, email committees@leicester.gov.uk, or call in at City Hall.

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PUBLIC SESSION

AGENDA

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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 INTERESTS

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

3. MINUTES OF THE PREVIOUS MEETING

Appendix A
(Pages 1 - 8)

The minutes of the meeting of the Adult Social Care Scrutiny Commission held on Thursday 13th March have been circulated and Members will be asked to confirm them as a correct record.

4. CHAIRS 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

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

8. TRANSITIONS FROM CHILDREN'S TO ADULTS

Appendix B
(Pages 9 - 40)

The Strategy Director of Social Care and Education submits a report to update the Commission on 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.

9. EARLY ACTION IN ADULT SOCIAL CARE

Appendix C
(Pages 41 - 56)

The Director of Adult Social Care and Safeguarding will give a presentation on the high-level of work taking place in Adult Social Care (ASC) that enables the department to prevent, delay or reduce the need for statutory ASC services.

10. EXTERNAL WORKFORCE STRATEGY

Appendix D
(Pages 57 - 92)

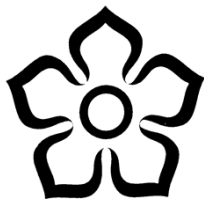
The Strategic Director of Social Care and Education submits a report to summarise the current position for the workforce that supports Adult Social Care in Leicester. In recognition of the importance of a skilled and sufficient workforce to support the current and growing needs of our local population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

11. WORK PROGRAMME

Appendix E
(Pages 93 - 98)

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, 13 MARCH 2025 at 5:30 pm

P R E S E N T:

Councillor March - Chair

Councillor Kaur Saini

Councillor Sahu

Councillor Dawood, Assistant City Mayor, Adult Social Care

* * * * *

105. WELCOME AND APOLOGIES FOR ABSENCE

Apologies were received from Cllrs Cole, O'Neil and Orton and Ruth Lake.

106. DECLARATIONS OF INTEREST

No interests were declared.

107. MINUTES OF THE PREVIOUS MEETING

AGREED:

That the minutes of the meeting of the Adult Social Care Scrutiny Commission held on 9th January 2025 be confirmed as a correct record.

108. CHAIR'S ANNOUNCEMENTS

The Chair Welcomed Cllr Dawood as the new Executive Member for the Commission.

It was noted that the Domestic Violence Consultation would go the first Overview Select Committee Meeting of the new municipal year.

109. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE

The Monitoring Officer reported that none had been received.

110. PETITIONS

The Monitoring Officer reported that none had been received.

111. CQC INSPECTION - VERBAL UPDATE

The Strategic Director for Social Care and Education gave a verbal update to the Commission. It was noted that Leicester City Council had a visit from the CQC in February 2025. They were currently working through the timelines for the draft report and accuracy check. The report was expected to be completed by the end of April 2025.

112. ANNUAL REPORT 2023/24 ADULT SOCIAL CARE (ASC) COMPLAINTS AND COMMENDATIONS

The Assistant City Mayor for Adult Social Care welcomed the report as a means of receiving feedback on Adult Social Care services.

The Head of Business Intelligence Support gave an overview of the report. Key points to note were as follows:

- The report provided covered the full year of 2023/24.
- Contact was received by 200 people, which was not formal complaints had been received during this time period. 80% of those were forwarded to a specific ASC team.
- Contact received usually related to service matters such as lateness of Carers.
- There had been 57 formal complaints, of which 19 were upheld. Reasoning for upheld complaints included lack of communications and challenging practice decisions.
- Most of the complaints received were in relation to individual care and support, Occupational Therapy, and matters concerning safeguarding.
- 6 formal contacts were dealt with by the Local Government and Social Care Ombudsman, 2 of which were upheld regarding the department's actions.
- The Ombudsman reflected that 67% of the City's ASC complaints upheld.
- Positively, there had been a higher number of commendations for staff than the previous year, 244 had been received.
- Complaint management incorporated identification of learning and taking action to prevent future issues by implementing best practise.
- Follow up work included, conducting workshops, audits, reviewing cross-departmental arrangements, feedback and engagement groups and identifying themes and trends. IT solutions would support the latter.

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

- The report reflected strengths and weaknesses.
- One of the cases dealt with by the ombudsman highlighted the importance of future proofing. A balance had to be found between adapting properties to meet needs and the associated expenses.

- There were different routes for complaint investigation, some requiring multi-agency examination and others dealt with by boards, such as the Adult Safeguarding Board.
- Compared with other Local Authorities, Leicester received a relatively low number of complaints. This was accredited to a high success rate of satisfactorily dealing with issues, preventing escalation.
- Complaints were classified between levels 1-13. The Ombudsman would deal with matters exceeding this point.
- Monitoring of external providers was in place, regarding facilities such as care homes.
- Incidents relating to providers, came through the quality referral route.
- Complaints dealt with by the Care Quality Commission would not necessarily be included in reporting due to limitations in transparency.
- Those in receipt of Direct Payments might not raise complaints due to managing their own support.
- Further work on complaints reporting could come to scrutiny.
- Complaints regarding length of call waiting time did not relate to the duty safeguarding phone line.
- Complaint trends concerning ethnicity were monitored annually and tended to be small in number.

Agreed:

1. That the report be noted.
2. For an anonymised addendum to be presented in the next report.

113. ADULT SOCIAL CARE AUTISM AND NEURODIVERSITY DELIVERY PLAN 2024-2026

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

It was noted that:

- The key recommendations from the previous consultation were to write a detailed delivery plan for Leicester City Council and formulate a joint needs assessment.
- Leicester City Council was an active partner in the LLR Learning Disability and Autism (LDA) Collaborative, which had led to focused pieces of work to benchmark the LDA services and support for people with a learning disability and/or autism.
- Leicester City Council were aligning with the national neurodiversity strategies and what was important for people with neurodiversity.
- Detailed engagement had been received from a consultation which formulated 6 key priorities from local residents which were:
 - 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
- The purpose of expanding the Delivery Plan was to achieve better outcomes for both people with neurodiverse conditions and for autistic people, as well as ensuring that the services and support delivered was sensitive to the diverse needs of autistic and neurodivergent people.
- The first step towards achieving the delivery plan was to gain greater understanding of the needs of people who required Adult Social Care support who may also have neurodivergent conditions.
- An equality impact assessment would be completed and run alongside the delivery plan, it would be iterative and live.
- Therefore, work would 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 would work with families and people with lived experience to understand the scale of the work, opportunities, risks and issues and what could be reasonably achieved for the delivery plan.
- The Joint Strategic Needs Assessment (JSNA) was in draft, it was now split into - Learning disabilities, Learning disabilities and autism, and Autism separately so all of those areas are looked at their own merit.
- Funding had been identified for the Monday Club, which offered good support for autistic people up to age 25 and work was taking place to ensure the next year was funded.
- There were now 2 new Job Coaches within the Supported Employment Service that specialised in working with autistic people.
- The Organisational Development Team were working with the Adult Social Care team to deliver corporate training on neurodiversity to support managers and their teams. Webinars and resources would be available on the council's intranet about reasonable adjustments for people that needed them.
- The report was taken to the Lead Executive Member for Adult Social Care and feedback was received and noted. Systemwide work would take place across LLR Health and Social Care. ASC were also working closely with LDA, the County Council and Public Health.
- Although it was a City Delivery Plan, they were working in a wider context and excellent support within the LDA collaborative to be able to do that. Especially with health inequalities work.
- It would be aligned to the National Strategy and a wider LLR plan.
- Alongside the work completed with Lead Executive Member for Adult Social Care, an aspiration for Leicester to be an autism and neurodivergent friendly city.

As part of discussions the Chair invited members to make comments, and it was noted that:

- It was very welcomed that learning disabilities, autism and neurodiversity were separated and looked at individually as not all people had cooccurrences. The plan initially started looking at autistic adults and key strategies such as the Autism Act aligned with that and was only the second piece of legislation that directly talked about disability in the country. Subsequent to that the statutory guidance came which was followed. There wasn't any national legislation or strategy around neurodiversity or ADHD.
- Locally the waiting lists for people to receive an ADHD assessment were far longer than those waiting for an autism assessment. A local charity organisation called ADHD Solutions had recently folded, which has left gaps for people to get support whilst they were on the waiting lists.
- When children turn 18 they were looked after by the Care Act and the rules were very different. Support needed to begin early for people who were looked after, to ensure their transition into Adult Social Care works better than it currently did.
- The notion of trying to think around what would a city that works for people who were neurodivergent. A lot of people did not need access to formalised support services. What they need was to live in a society that was both adaptable and tolerant to their individual needs.
- Commissioning work had taken place jointly between Adult Social Care and the Integrated Care Board (ICB) on ADHD Services following the closure of ADHD Solutions. Solutions had been identified to keep supporting people with ADHD. Such as interim solutions to ensure the support groups continued. A soft market test was due to take place so see what interest was available to be able to reprocur and provide that service using funding left over from ADHD Solutions no longer providing that service.
- The Care Act ignored and disregarded diagnosis. Work was completed on a principle which is called the social model of disability which treats the person as the person. A holistic look at that individual, how they managed to interact with the world and what those challenges were. Some VCSE led services did require a diagnosis as part of their criteria as a small organisation.

AGREED:

1. That the report be noted
2. That Care Leavers and care experienced people would be included in the equality impact assessment.
3. Dementia be added to the work programme.

114. DELIVERING THE CITY'S SUPPORTED LIVING AND EXTRA CARE STRATEGY

The Assistant City Mayor for Adult Social Care introduced the item, noting that this was a ten-year plan, setting out requirements for those with social care needs.

The Director for Adult Social Care and Commissioning provided an overview of the report. Key points to note were:

- The accommodation plan was set out across a ten-year period.
- The strategy target was to provide 551 units of accommodation over 3 phases of delivery.
 - Phase 1 had a predicted delivery of 155 units. This target had not been met, largely due to lack of progress with the Tiling and Hamelin Road sites.
 - Phase 2 would provide 66 units.
 - Phase 3 was expected to provide 289 units.
- 56 units of accommodation had been successfully delivered over 11 sites.
- There was a key focus on bespoke provision.
- An excellent portfolio of support already existed within the city.
- There was a comprehensive range of accommodation with different models of support. Some having communal hubs and others having floating support.
- Schemes were designed to meet different needs, such as mental health, learning ability and physical issues.
- There were 698 units with supported living accommodation. This was spread over 112 schemes.
- A similar methodology to the one underpinning the 2021 strategy was in place and would remain until 2027.
- The successful work of the Operational Placement Team was noted, with positive outcomes in securing the best accommodation for people needs and requirements.
- The total number of supported people across the city currently came to 550.
- 150 older people were living in extra care schemes.
- There was a variety of support schemes, with commission providers and a range of people in receipt of Direct Payments.
- Collaborative work was taking place with colleagues in Neighbourhoods Services and with developers.
- The Shared Lives service had traditionally been seen as a support for those with learning difficulties, but a more expanded offer was to come.
- There was a range of ongoing plans with new developments expected and a continued focus on delivery approach.
- 22 accommodation units had been brought forward by developers, having a confirmed delivery dates across 2025/26.
- Moving forwards, there would be a focus on working collaboratively with Neighbourhoods and City Development on 4 interlinked workstreams.

Stage 1 of which had already been completed.

- Other opportunities included the asset pipeline with a view to how this could be built upon.
- There was a good prospect to work holistically and strategically.
- Regarding procurement, detailed conversations were required with developers and providers with an emphasis on teamwork.
- It was acknowledged that Leicester tended to be short on opportunity to develop land. Future talks would be necessary with the market to consider possibilities.
- There could be opportunities with local partners, such as Leicestershire County Council and other schemes bordering the city.

In response to questions from the committee, it was noted that:

- The Tiling and Hamelin Road procurement was unsuccessful due to a number of reasons including providers uncertainty over the mixed model. On returning to market, there appeared to be interest but this was not substantiated at procurement.
- There was a £5.9m in budget in Policy Provision for extra care. Models may need to be revised in line with change.
- Positive associations with developers included Right To Buy and Homes England funding. Schemes tended to come with funding and might be investor lead. Mixed financial models were welcomed.
- The commission queried risks on working with multiple developers, Officers highlighted benefits of having a wider pool. Checks and balances were in place. Tenants could choose a different provider if they so wished, without risk to tenancy.

Agreed:

1. That the report be noted.
2. For scrutiny to follow matters of budget and any inconsistencies arising.
3. Concerns were noted on slippage.
4. Numbers of providers to be monitored.
5. Progress would be followed with a planned return to scrutiny.

115. 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.

116. ANY OTHER URGENT BUSINESS

With there being no further business, the meeting closed at 7.15pm.



Joint Health, Social Care and Education Transitions Strategy

Adult Social Care Scrutiny

Date of meeting: 30 April 2025

Lead directors: Laurence Jones

Useful information

- Ward(s) affected: ALL
- Report authors: David Thrussell, Caroline Jolliffe, Sharon Charles-Cockerill
- Author contact details: 37 2315 sukhbinder.basra@leicester.gov.uk
- Report version number: 1.0

1. Purpose of report

1.1 This report sets 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.

2. Summary

2.1 For young people who receive support from children's health and social care services, these services often end when they turn 18 and they become 'adults' (though some services continue until age 25). Some of these young people will then go on to receive support from adult health and social care services, but these are often different to the services young people had received before. Some young people will not receive adult services at all. This period of change as a young person enters adulthood is known as 'transition'.

2.2 The Joint Health, Social Care and Education Transitions Strategy (2019-22) [Leicester Transitions Strategy](#) (appendix 2) was developed to ensure that staff working to support young people as they transition into adulthood were clear about the work needed to make sure young people have a good experience as they leave children's services and become adults.

2.3 The strategy also provided information for young people, their parents/carers and any other people supporting young people (e.g. school staff) to understand what is being done in Leicester City to support young people as they transition into adulthood. The Joint Health, Social Care and Education Transitions Strategy ran from 2019 to 2022, and was refreshed and extended to 2024. [Joint Health, Social Care and Education Transitions Strategy Refresh 2022-2024](#) (appendix 3)

2.4 The priorities for the strategy focussed on streamlining the transitions process for children and families, and earlier identification and preparation of children and families to support informed decision-making and deliver better outcomes. Key deliverables have included the development of multi-agency decision making panels, and a resources pack for children and families.

2.5 Engagement plans are currently being developed to support the Strategy refresh to launch in summer 2025.

3. Recommendations

3.1 To note the progress made on the existing Transitions Strategy, and plan for the strategy development going forward.

4. Report

4.1 To ensure there are appropriate transitions processes in Leicester City, the Joint Health, Social Care and Education Transitions Strategy set out the direction of travel, priorities and actions needed for improvement and to meet our ambition that young people with additional care and support needs are supported to be independent in adult life and achieve positive outcomes.

4.2 The Strategy aims to support three groups of children and young people who are likely to require additional support as they transition to adulthood. This includes some of our children who are looked after by the council and may have more complex needs, some children with special educational needs, and young people who are eligible for support from adult social care.

4.3 In Leicester there is a significant number of young people who will require additional support as they leave children's services and enter adulthood. To put this in perspective, the council currently looks after 591 children and young people of whom 124 have an Education, Health and Care Plan, and of these looked after children 91 are of school age. Most of these children live locally in foster carer family households and attend local schools whilst a smaller number live outside of the local authority area and live in foster homes or residential care.

4.4 The strategy supports the coordination of support for our children looked after to ensure that their education and health care needs are met with coordinated support from the Virtual School and the SEN service whilst identifying those children who are likely to require additional ongoing support as they transition to adulthood.

4.5 A key ambition of the strategy is that young people with additional care and support needs are identified earlier and supported to be as independent as possible in adult life. This enables young people to better achieve positive outcomes in terms of employment; independent living; friends, relationships and community; and promote healthier lifestyles.

4.6 The current strategy has made progress in advancing key objectives:

Earlier Planning: Implemented and embedded the use of an Independence Checklist starting at age 14 to support preparation for adulthood.

Accessing support: Developed more user-friendly materials, including easy-read information guides to enhance accessibility.

Working together: Established multi-agency panels comprising representatives from social care, health, SEND, and education sectors to identify and proactively support young people with more complex needs.

Supportive Initiatives: Introduced programmes such as travel training and supported internships to empower individuals to realise their potential.

Housing Support: Developing a comprehensive Housing Information Pack (HIP) to provide detailed guidance on housing-related transitions.

Pathway Development: Designed a structured Transitions Pathway and alternative support for young people not eligible for support from Adult Social Care.

Joint Collaborative Workshops: regular open workshops for families and carers in community settings that offer advice and information.

Supported internships: 80% of the interns in the last academic year were offered permanent employment.

5. Next Steps

5.1. Delivering our ambition that young people with additional care and support needs are supported to be independent in adult life and achieve positive outcomes in terms of employment; independent living; friends, relationships and community; and good health remains a key priority.

5.2. We are committed to building on the successes of the Transitions strategy and focusing continued efforts on areas that require further work and commitment to embed our approach.

5.3. To deliver our commitments a strategy refresh is in progress supported with an engagement plan to coproduce the 2025–27 strategy, ensuring young people and their families/carers inform the future direction.

5.4. The refreshed /relaunched strategy will be implemented during 2025 supported by planned activities to promote awareness. A robust governance arrangement will be in place to ensure accountability and maintain a cycle of continuous improvement by evaluating and enhancing information, pathways, and services for young people.

6. Financial, legal and other implications

6.1. Financial implications

This report notes the progress of the Transitions Strategy and as such there are no direct financial implications arising. Identifying care and support needs for young people in order for them to be as independent as possible in adult life will reduce demand for adult social care services and this will have a financial benefit – the value of which will depend on individual circumstances. It is recognised though that early intervention most likely avoids greater costs later on.

Mohammed Irfan, Head of Finance
16 April 2025

6.2 Legal implications

There are no direct legal implications arising out of this report which is to note progress of this strategy. This strategy is welcomed and will ensure that the authority identifies need and meets its statutory duties towards children and adults who require support and services.

Susan Holmes, Head of Law

6.3 Climate Change and Carbon Reduction implications

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

Duncan Bell, Change Manager (Climate Emergency). Ext. 37 2249 8th April 2025

6.4 Equalities Implications

The paper provides an update on the progress made on the existing Transitions Strategy, and plan for the strategy development going forward. There are no direct equality implications arising from this report. However, it is important that equality considerations continue as part of the work going forward. Any consultation and or engagement should be accessible and relevant to key stakeholders. Initiatives that aim to ensure a smooth and supported transition into Adulthood with clear plans with a person centred approach that enable young people to reach their potential should have positive impacts across many protected characteristics. The most relevant being age and disability.

Equalities Officer, Surinder Singh, Ext 37 4148 17 April 2025

7. Background information and other papers:

8. Summary of appendices:

Appendix 1 – Slides

Appendix 2 – Leicester Transitions Strategy 2019-22

Appendix 3 - Joint Health, Social Care and Education Transitions Strategy
Refresh 2022-24

Joint Health, Social Care and Education Transitions Strategy 2019-2022

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About the strategy

This Joint Health, Social Care and Education Transitions Strategy has been written to help ensure that the staff working to support young people as they transition into adulthood are clear about the work which needs to be done to make sure young people have a good experience as they leave children's services and become adults. The strategy also provides information for young people, their parents/carers and any other people supporting young people (e.g. school staff) to understand what is being done in Leicester City to support young people as they transition into adulthood. Alongside the full strategy document, summaries targeted at a 'non-professional audience' are available.

The Joint Health, Social Care and Education Transitions Strategy outlines what our ambitions and aims are for making improvements to our support during the period of transition, details what we know about the young people who might need support when they transition and provides an overview of actions which need to be taken in order to improve the lives of young people and their families as they undergo transition to adulthood. The strategy will help make sure that all the important teams which support young people work well together. This is a working document and will adapt and change over its lifespan to reflect improvements and changes which have been made and any changes in the national and local picture. The strategy will be reviewed and updated by the Transitions Board on an annual basis.



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Summaries:

[Easy read summary](#)

[Overall summary](#)

Cohort specific summaries:

[Looked After Children summary](#)

[Young people with SEND summary](#)

[Adult services summary](#)

Introduction

For young people who receive support from children's health and social care services these services often end when they turn 18 and they become 'adults' (though some services continue until age 25). Some of these young people will then go on to receive support from adult health and social care services, but these are often different to the services young people had received before. Some young people will not receive adult services at all. This period of change as a young person enters adulthood is known as '**transition**'.

During the period of '**transition**' a young person will begin to get ready for leaving children's services and becoming an adult. There are four key areas which a young person should prepare for, these are:

- Education and/or employment
- Independent living
- Friends, relationships and community
- Good health

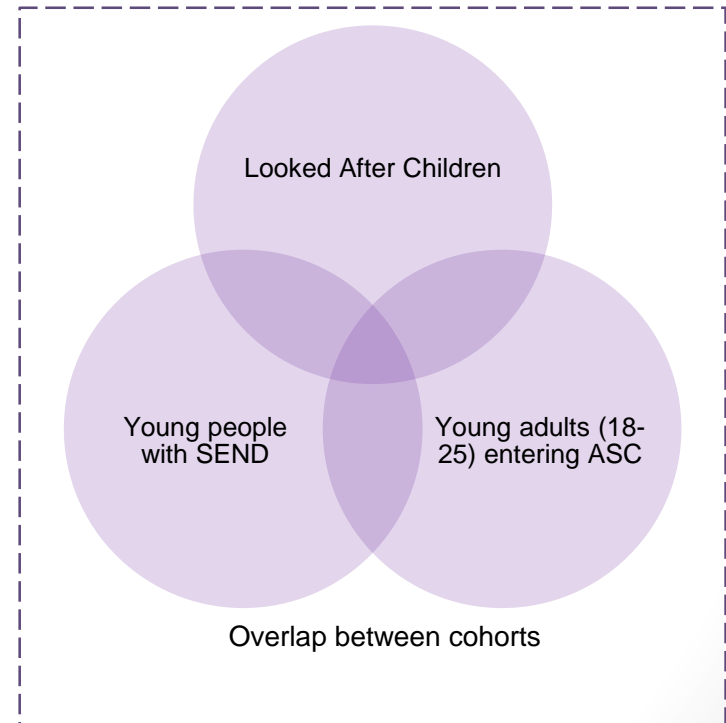
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Health and care professionals in Leicester agree that it is important to support young people with additional needs as they 'transition' into adulthood. Three cohorts of young people have been identified as particularly likely to need support.

These cohorts are:

- Young people who are looked after by the council
- Young people with Special Educational Needs and/or Disabilities (SEND)
- Young adults (18-25) with care needs who will receive support from Adult Social Care

Though three clear cohorts have been identified, it is recognised that there are overlaps between these groups (see diagram), for example a young person might be looked after and have a disability, and work will be mindful of this.



Ambition and aims

To support the ambition that 'young people with additional care and support needs are supported to be independent in adult life and achieve positive outcomes in terms of employment; independent living; friends, relationships & community; and good health' three key aims have been identified:

Integrated service

Young people with additional needs are supported by key agencies working in partnership. A robust framework for partnership working and information sharing ensures that relevant care and health partners understand their roles in the transition process and effectively use joint planning.

Effective planning

Young people with additional needs are at the centre of a transition planning process which starts at age 14 at the latest and allows for effective forward planning. This allows for services and budgets to be planned for the projected support needs of young people moving into adulthood.

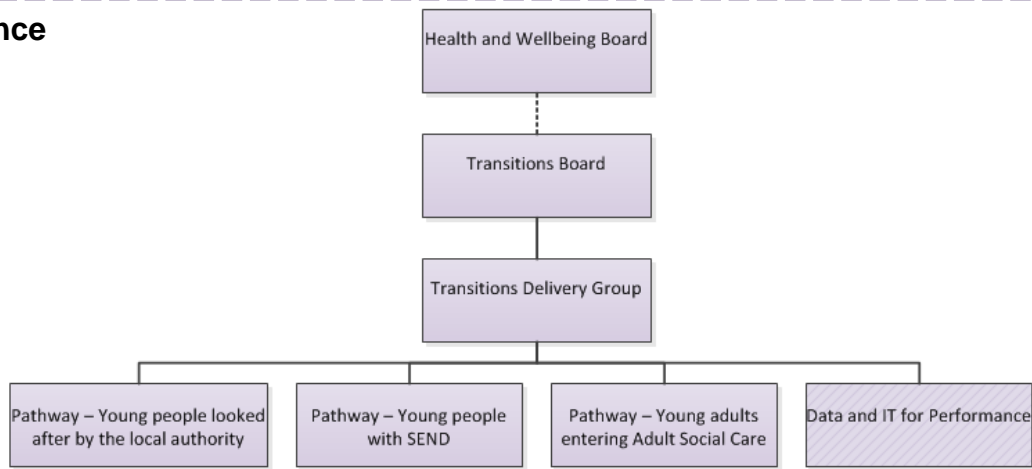
Informed choices

Young people with additional needs are given the support, encouragement and tools to make choices and take control of their lives. Their families and support networks have access to information and advice to ensure that all decision making is informed.

Note that in this context 'young people' can refer to people up to age 25 (who consider themselves to be and are considered to be adults)

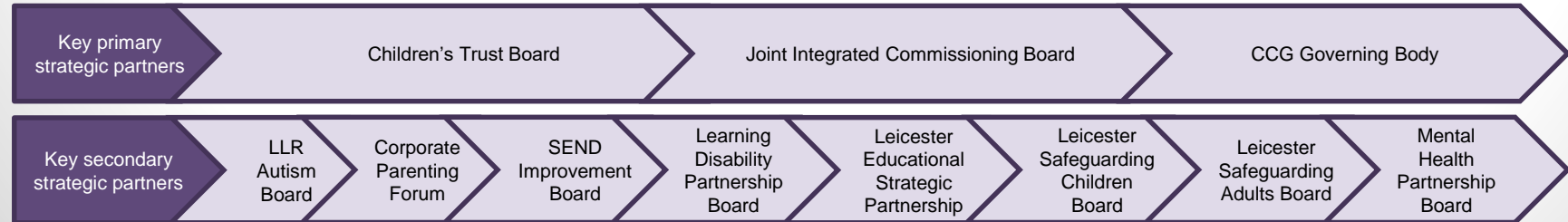
Governance

Transitions Governance



To support the delivery of actions outlined in the Joint Health, Social Care and Education Transitions Strategy and the underpinning delivery plan, three working groups will bring together relevant partners to address aspects of the transitions pathway relevant to each of the three identified cohorts. Additionally, a further working group will develop processes and procedures in the use of information and IT to a) support the transition of children and young people to adult services, and b) establish a performance framework that enables monitoring and quality assurance of the processes and supports the understanding of the impact of services individually and collectively to improve outcomes for service users. These work streams will be overseen by the Transitions Delivery Group, which brings together representatives from social care, education and health, and has responsibility for ensuring that work between the working groups is joined up and for monitoring risks and issues. The Transitions Delivery Group is accountable to the Transitions Board, the role of which is to provide scrutiny and challenge to the Transitions Delivery Group and offer assurance, while also ensuring that service user experience is the driver for improvements. The Transitions Board is to be accountable to the Health and Wellbeing Board. Additionally, the Transitions Board has a number of strategic partners across Leicester and more widely and will report in as appropriate.

Strategic Partners



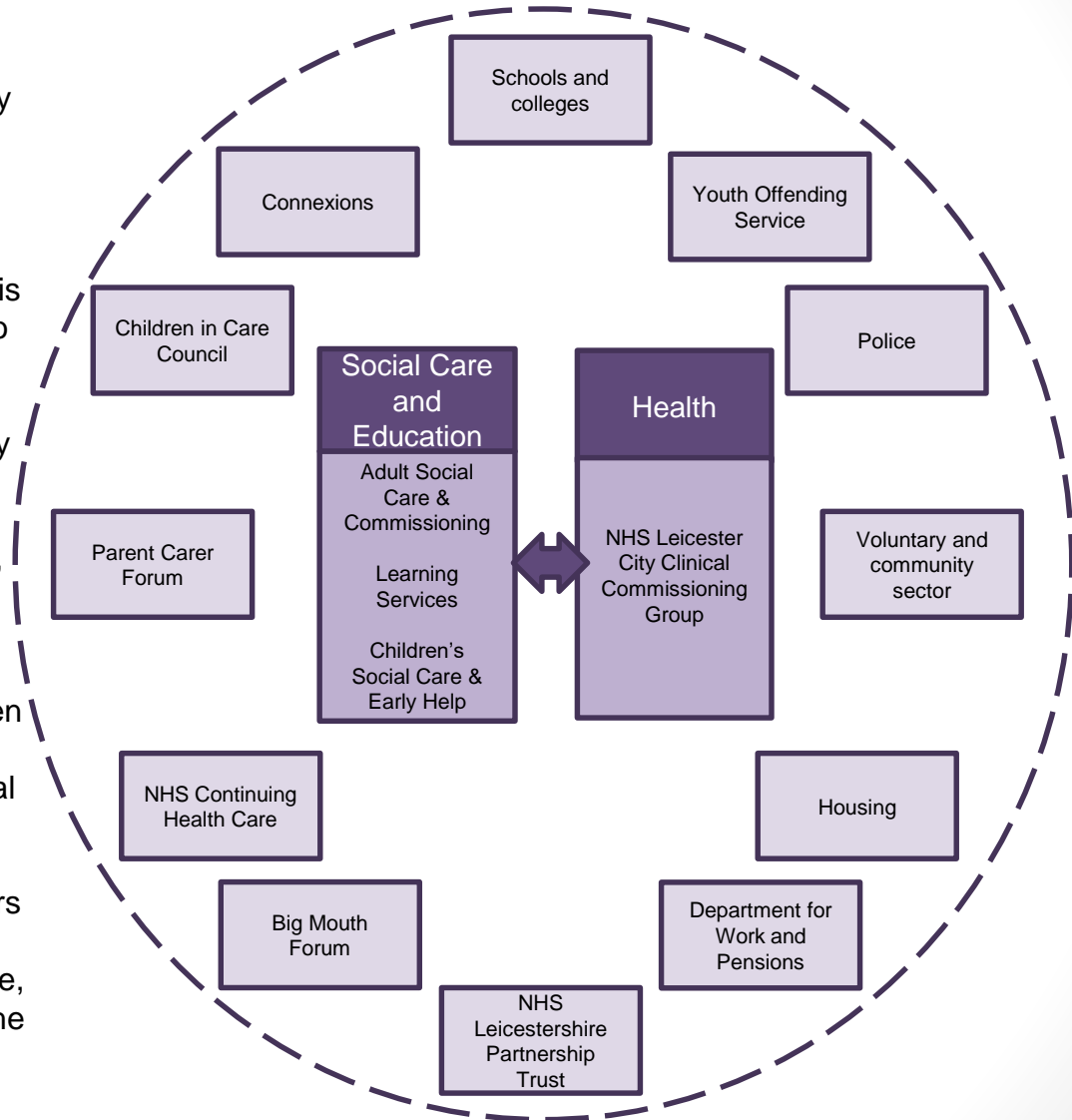
Partners

The governance and oversight of Leicester's Joint Health, Social Care and Education Transitions Strategy recognises that the delivery of our offer is not the responsibility of a single agency but is owned by all partners that work with children, young people and families.

To support the ambitions and aims laid out in this strategy a number of partners will be required to work in partnership. We ask that partners:

- Contribute towards achieving the aims,
- Accept challenges to their own service delivery practice by taking into consideration wider partnership needs,
- Work with mutual trust and combine expertise,
- Instil culture and practice of joint working.

While it is imperative that focus is given to the development of an effective relationship between the Social Care and Education department at Leicester City Council and Leicester City Clinical Commissioning Group, there are a number of other partners who will need to engage with the work in order to enable success. These partners include, but are not limited to, schools and colleges, the Youth Offending Service, the police, the voluntary and community sector, housing, the Department for Work and Pensions, the Big Mouth Forum, Leicestershire Partnership Trust (NHS), Continuing Health Care (NHS), the Parent Carer Forum, the Children in Care Council and Connexions.



Cohort 1: Looked After Children

Statutory responsibilities

Every 16 or 17 year old who has been looked after by a local authority for a period of 13 weeks or more since the age of 14 becomes entitled to leaving care provision and the local authority must make this support available until a care leaver turns 25. The support provided should focus on preparing the young person for life, ensuring they have the skills to support themselves and ultimately thrive. From age 16 looked after children should have a 'Pathway Plan' which outlines the services and support to be provided to help them reach their goals and achieve independence. The Pathway Plan should also ensure that arrangements are in place to enable children leaving care to continue to obtain the healthcare they need. To support this, the planning process should include a health perspective; the LAC Nursing Service should attend the pathway planning meetings and provide a summary of the child's health information which is obtained during regular review health assessments.

The local authority must also ensure that care leavers can access a personal advisor until they turn 25. The personal advisor is responsible for ensuring the young person is provided with the correct level of support. The personal advisor should provide advice, coordinate the provision of services and keep in touch with the young person.

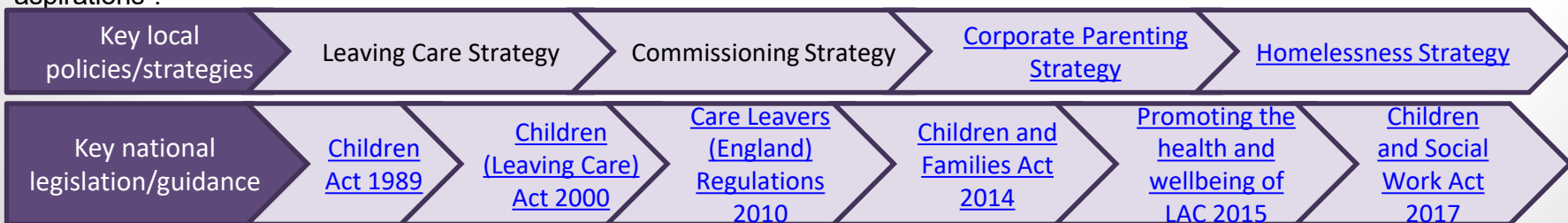
Local picture

In Leicester there is an upward trend in the number of looked after children and this is rising more rapidly than comparable authorities. At the end of May 2018 there were 689 looked after children. The most prevalent reason for children being taken into care is neglect and abuse. Ofsted have recognised the complexity of the looked after children cohort, citing complexities such as mental health needs, risk of sexual exploitation, being in custody and recently becoming parents.

The LAC Nursing Service (NHS Leicestershire Partnership Trust) provides support to looked after children in Leicester until age 18. The service has identified a number of specific vulnerable groups including: young people at risk of child sexual exploitation, those in semi-supported living, unaccompanied asylum seeker children and high risk young people (including those misusing drugs and alcohol and those who are pregnant).

Key drivers

[Ofsted \(2017\)](#): "Joint transition planning to adult services between the 16-plus team, the disabled children's service and the transition team requires improvement. Managers across teams acknowledge that the process starts too late for some care leavers, often in their mid-17th year, giving them little time to prepare for and explore options about their future needs and aspirations".



Cohort 2: Young people with SEND

Statutory responsibilities

The local area has to identify and assess the special educational needs of children and young people. If a young person is assessed as requiring more support than their school can give them then a local authority must give them an Education, Health and Care (EHC) plan. This plan should identify the young person's educational, health and social needs and set out the additional support needed to meet their needs. A local area may continue to maintain an EHC plan until the end of the school year during which a young person turns 25 and must not stop an EHCP just because a young person is aged 19 or over.

Local picture

Young people with SEND may need extra support and adjustments to meet a particular need. 14.8% of the school population in Leicester has specialist education need and there are currently approximately 1800 young people aged 0-25 with EHC plans. Of those young people with statutory plans (EHC plans) approximately 50% are educated in specialist provision. In recent years there are increasing numbers of young people with a primary need of Autistic Spectrum Disorder; Social, Emotional & Mental Health; or Speech, Language and Communication Needs.

Key drivers

Ofsted (2017): Preparation into adulthood for some care leavers and disabled children is not happening early enough, so they cannot prepare for their future learning or employment opportunities until very late. There is a need to ensure that the transition arrangements from children's social care to adult services for young disabled children who have additional needs are both timely and effective.

Ofsted (2018): There is a lack of joint commissioning of services to support young peoples' health needs post-19. As a result, there are delays in the identification of young people's needs when they reach adulthood.

ASCOF (2017): Compared to other local authorities, Leicester City has a very low number of young people with learning disabilities in paid employment.

Peer review of SEND services: Reviewers commented that special schools report concerns over the local area's ability to effectively prepare young people with SEND for adulthood.

Self-Evaluation Framework: Leicester City Council's Self Evaluation recognises the need to improve transition arrangements between children and adult services as a key area for development.



Cohort 3: Adult services

Statutory responsibilities

If a child is likely to have social care needs when they turn 18 the local authority should complete an assessment of their needs. On the basis of this assessment, local authorities must suggest whether the young person is likely to have eligible needs for support from adult social care and advise on what can be done to meet eligible needs/what can be done to prevent or delay the development of additional needs. The local authority must continue to provide a young person with children's services until they reach a conclusion about their situation as an adult so that there is no gap in provision.

There are clear criteria set out in the Care Act (2014) which determine whether a young person is eligible for adult social care. Just because a young person has received support from children's services this does not mean they will be eligible for adult social care. A person is deemed to have eligible needs if they meet all of the following: i) they have care and support needs as a result of a physical or a mental condition, ii) because of those needs they cannot achieve two or more of the outcomes specified, iii) as a result there is a significant impact on their wellbeing.

People with complex primary health needs may be eligible for Continuing Care funding where needs cannot be met by specialist or universal services alone. Continuing Care is organised differently for children and young people than for adults so upon turning 18 young people have to be reassessed under the adult framework. This can impact the amount of funding that health will contribute, which in turn impacts the level of support families can expect from Adult Social Care.

Local picture

On average the transitions team currently assesses just over 40 young people per year, of whom approximately 80% are found to be eligible for support. The majority of young people who access adult social care through the transitions team have a primary support reason of learning disability. Not all young adults (18-30) make contact with adult social care through the transitions team; approximately 375 young people receive assessments from adult social care per year. Of these people just over 75% are found to be eligible for support. While learning disability remains the primary support reason for the majority of cases, mental health support and physical support are much more prevalent for young people who do not access the transitions team and are later referred to adult social care.

Key drivers

Making improvements to transitions is referred to explicitly in the [Adult Social Care strategic priorities](#), noting that "We [Adult Social Care] will continue the work with children's social care, education (SEN) and health partners to improve our support for young people and their families in transition into adulthood".

Key local
policies/strategies

Accommodation
Strategy

[Learning Disability
Strategy](#)

[Mental Health
Strategy](#)

[Autism
Strategy](#)

Carers Strategy

Key national
legislation/guidance

[Care Act 2014](#)

[NICE Guidelines](#)

[Transforming
Care](#)

[Mental Health
Act 1983](#)

[Mental Capacity Act
2005](#)

Key priorities (Page 1 of 3)

On the basis of what we know about each cohort, a number of key priorities have been identified which will help achieve the ambition and aims outlined in the strategy, these priorities are outlined in summary below and continued on pages 10 and 11. In order to demonstrate the relevance and significance of each action in the context of the strategy, the high level outline explicitly links each action with the aims it supports. This high level summary is underpinned by a detailed delivery plan which breaks down each priority into the supporting actions and identifies the person responsible, the deadline, necessary resources, critical messages and a quality measure for each action.

Aims		Integrated service	Effective planning	Informed choices
Cohort	Action	Link to aims		
Young people looked after by the local authority	1. Publish an accessible and comprehensive care leaver offer for children looked after and care leavers signposting young people and their support networks to key resources and information sources which will enable them to prepare for adulthood and independent living.			✓
	2. Provide a programme of training and development for staff working with looked after children and care leavers to ensure that there is a reciprocal understanding of policy and practice in the Looked After Children and Transitions service areas.	✓	✓	✓
	3. Determine a 'roadmap' which clearly outlines the key processes in the period of transition from age 14, identifies the ages and stages at which these happen and notes the key roles and responsibilities for all those supporting the process.	✓	✓	
	4. Review the pathway planning process to support earlier identification of young people at risk of poor outcomes in adulthood.		✓	
	5. Collate and use data about looked after children and care leavers in order to effectively inform future commissioning.		✓	

Quick win (1-3 months)	Next steps (3-9 months)	Longer term (9-24 months)
1. Publish the care leaver offer		
	2. Provide programme of training	
	3. Determine transitions roadmap	4. Amend process for earlier identification
		5. Data informed commissioning

Key priorities (Page 2 of 3)

Aims		Integrated service	Effective planning	Informed choices
Cohort	Action	Link to aims		
Young people with SEND	6. Determine a set of clear and concise definitions relating to need, eligibility and other key elements of the transitions process in order to underpin a common understanding of transitions processes and support planning between social care, education and health for young people with SEND.	✓	✓	
	7. Delineate the transitions process as it is at the moment for young people with SEND to ensure there is clarity on the existing process and to shape a baseline on which improvements can be made.		✓	✓
	8. Establish a regular programme of meetings between all professionals supporting young people with SEND (aged 14-25) to encourage information and intelligence sharing and facilitate discussion of cases in order to develop knowledge and understanding between relevant service areas.	✓	✓	✓
	9. Develop a system to inform the Transitions team of young people with SEND who they should be aware of and are likely to need involvement with in the future in order to inform planning and commissioning of adult social care.	✓	✓	
	10. Create individual 'road maps' centred on a young person's particular needs which outline all possible routes/outcomes for a young person from age 14, with reference to the probability of following each route so that young people and their support networks understand what the future might look like.		✓	✓

Quick win (1-3 months)	Next steps (3-9 months)	Longer term (9-24 months)
6. Determine set of definitions	7. Outline transitions process 'as is'	9. Gather intelligence for commissioning
	8. Information sharing and case discussions	10. Create individualised road maps

Key priorities (Page 3 of 3)

Aims	Integrated service	Effective planning	Informed choices
------	--------------------	--------------------	------------------

Cohort	Action	Link to aims		
Young adults entering adult services	11. Engage with schools, colleges, parents, carers and young people in a timely and appropriate manner to ensure they have realistic expectations for independence and adulthood (relating particularly to finance and relationships).		✓	✓
	12. Communicate the legal landscape changes which occur once a young person turns 18 to schools, colleges, parents, carers and young people and make clear the implications this might have for young people's care.		✓	✓
	13. Complete an in-depth analysis of a sample of transitions case studies to identify good practice and any improvements required during the transitions process.		✓	
	14. Map and publicise a pathway which outlines access for young people to Adult Social Care support services and makes clear what is available from each service.		✓	✓
	15. Support effective joint working between Adult Social Care, Children's Services, health practitioners and staff in education settings.	✓	✓	
	16. Support young carers in line with the carers strategy as appropriate.			
	17. Outline a clear pathway for the transitions referral process set against a timeline.	✓	✓	✓
	18. Streamline IT systems to support the better use of data to inform future commissioning and the work of the Transitions team.		✓	

Quick win (1-3 months)	Next steps (3-9 months)	Longer term (9-24 months)
11. Engagement – independence and adulthood		
12. Engagement – legal changes		17. Improved pathway for transitions referrals
13. Analysis to identify good practice and improvements required		18. Streamline IT
	14. Outline support services	
	15. Support effective joint working	
	16. Support the carers strategy	

Useful links

National legislation and guidance

- [Care Act 2014](#)
- [Children \(Leaving Care\) Act 2000](#)
- [Children Act 1989](#)
- [Children and Families Act 2014](#)
- [Children and Social Work Act 2017](#)
- [Equality Act 2010](#)
- [Heath and Social Care Act 2012](#)
- [Homelessness Act 2002](#)
- [Homelessness Reduction Act 2017](#)
- [Mental Capacity Act 2005](#)
- [Mental Health Act 1983](#)
- [National Health Service Act 2006](#)
- [NICE Guidelines: Transition from children's to adults' services](#)
- [SEND code of practice: 0 to 25 years](#)
- [The Care Leavers \(England\) Regulations 2010](#)
- [Transforming Care for people with learning disabilities](#)

Local strategies and policies

- [Autism Strategy 2014 - 2019](#)
- [Corporate Parenting Strategy 2014 - 2016](#)
- [Homelessness Strategy 2018-2023](#)
- [Learning Disabilities Strategy 2015 - 2019](#)
- [Leicester City Council Adult Social Care strategic purposes and priorities](#)
- [Leicester's strategy for supporting children and young people with Special Educational Needs and Disabilities \(SEND\) 2017-2022](#)
- [Mental Health Strategy 2015 - 2019](#)
- [SEND Self Evaluation April 2018](#)

Ofsted feedback

- [Ofsted report – Inspection of services for children in need of help and protection, children looked after and care leavers July 2017](#)
- [Ofsted report – LA SEND inspection report April 2018](#)

Transitions Plan 2025-27

Helping You Move into Adulthood with Confidence

Introduction

- We want to co-produce the new strategy with you!
- As the 2022–24 strategy has concluded, it's time to shape our 2025–27 strategy together.
- Our focus remains on ensuring smooth transitions into adulthood, helping you feel prepared, confident, and in control.



Who is this plan for?

☞ This plan focuses on supporting young people with additional needs, including:

- Young people in care (Children Looked After).
- Young people with special educational needs or disabilities (SEND).
- Young people who need help from adult social care when they turn 18.



Our Goals for 2025–2027

We have set three big goals to work together with you to make your experience better:

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Our Goals	What this means for you
Joining Up Services	This means that all the staff supporting you as you become adults work together and know what other people are doing to help you.
Better Planning	You will have a clear plan for your future that starts earlier at age 14 and changes with you
Making Choices Easier	This means that you and your families are given all the information needed to make sure you know what is going to happen when you become adults to help you make good timely decisions.

What We've Achieved So Far

Over the last few years, we have worked hard to improve the help you get. Here are some of the things we have done based on your feedback:

- **Planning Earlier:** We have started planning for your move into adulthood when you are 14.
- **More Collaboration:** Services now work together better to help with complex cases.
- **Accessible Tools:** We have created guides like the "Transitions Information Guide" and "Independence Checklist" to help you and your family prepare for the future very early on.
- **Training Staff:** We have trained staff to understand what you need, especially if you have additional needs.
- **Data Dashboard:** We have built a system to track what is working and what isn't so we can make services better for you.





You Said, We Did

We have been listening to what you, your families, and the people who support you have been saying. Here is how we have acted on your feedback to make transitions better.

What you have told us

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	You Said (Young People)	What we did and What we are doing
1.	We want to plan earlier	<ul style="list-style-type: none">Started planning from age 14 to give you more time to prepare for adulthood
2.	We want to travel independently	<ul style="list-style-type: none">Enabled Independent Travel Training (ITT) so schools and colleges can help you learn these skills.
3.	Services need to work together better	<ul style="list-style-type: none">Created joint panels to manage complex cases and shared tools like the Adult Social Care Checklist.
4.	We want to understand our options	<ul style="list-style-type: none">Built information guide and improved the Local Offer and Leaving Care Offer websites to give you clear, simple information.
5.	We want to decide how our support is delivered.	<ul style="list-style-type: none">Created ways for you to share your views so your voice is heard when planning your support.

What you have told us

38

	You Said (Parents-Carers)	What we did and What we are doing
1.	We do not know what services my child will be entitled to from Adult Social Care when they reach 18.	<ul style="list-style-type: none">Started earlier conversations about transitions and developed guides like the Independence Checklist.
2.	Parents need more information about transition and preparing for adulthood.	<ul style="list-style-type: none">Improved how we share information with newsletters, events like Local Offer Live, and online tools.
3.	Help my child learn independence skills sooner	<ul style="list-style-type: none">Created tools like the Independence Checklist and included them in EHCP reviews to start skill-building earlier.
4.	Make information easier to find online	<ul style="list-style-type: none">Updated and improved the Local Offer website for easier navigation.

Next Steps

What would like us
to add to the plan?



Early Action In Adult Social Care

Adult Social Care Scrutiny Commission

Date of meeting: 6 May 2025

Lead director/officer: Ruth Lake

Useful information

- Ward(s) affected: All
- Report author: Ruth Lake
- Author contact details: ruth/lake@leicester.gov.uk
- Report version number: 1

1. Summary

- 1.1 This cover report accompanies the slide deck at appendix 1. It provides a high-level summary of work taking place in Adult Social Care (ASC) that enables the department to prevent, delay or reduce the need for statutory ASC services.
- 1.2 Whilst this type of support is commonly referred to as 'prevention', through co-production we understand that this is not a term that people who engage with ASC find helpful. Therefore, we choose to refer to this as 'early action'.
- 1.3 Appendix 1 illustrates the types of early action available, what impact we can see from this support and where our areas for further attention lie.

2. Recommendation(s) to scrutiny:

ASC Scrutiny Commission are invited to:

- Note and make any comments.

3. Main report

- 3.1 Adult Social Care (ASC) Scrutiny Commission members expressed an interest in understanding more about the range of preventative work taking place in ASC. Early action is the term used in ASC in Leicester to describe services, interventions or approaches that focus on enabling people to live their lives well, reducing the need for statutory services. This is a focus for ASC as:
 - It increases people's ability to be independent, drawing on the types of support available to everyone
 - It reduces costs to individuals who might otherwise need to contribute to statutory service provision
 - It reduces costs to the Council in meeting ASC needs through statutory, long-term services
 - It protects scarce resources for people whose needs can only be met through statutory provision
- 3.2 Early action can be described in three tiers:
 - 'Primary' or universal help, available to all citizens.
 - 'Secondary' or targeted help, available to people with emerging needs.

- 'Tertiary' or supplementary action that minimises the level of long-term support required.

3.3 In appendix 1, examples are provided of the types of activity that can be seen in each tier, together with the impacts that can be identified and, drawing on this information, our areas for further work to maximise the benefits of early action.

3.4 This report is for information only.

4. Financial, legal, equalities, climate emergency and other implications

4.1 Financial Implications

There are no direct financial implications as a result of this report. However, the Early Action approach will counter growing demand to help adult social care remain within budget. The total approved budget for 2025/26 is £178.9 million.

Signed: Mohammed Irfan, Head of Finance

Dated: 14 April 2025

4.2 Legal Implications

As this report is for information purposes only, there are no legal implications arising from this report.

Signed: Susan Holmes

Dated: 11th April 2025

4.3 Equalities Implications

There are no direct equality implications arising from this report as it is for information only. We need to ensure that equality considerations continue to be embedded through the early action services being provided across Adult Social Care in order to meet the needs of Leicester's diverse communities.

Signed: Sukhi Biring, Equalities Officer

Dated: 10 April 2025

4.4 Climate Emergency Implications

The climate emergency implications of taking early action, and the resulting reduced need for statutory services are not likely to be significant.

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

Dated: 9th April 2025

4.5 Other Implications

None

Signed:

Dated:

5. Background information and other papers: None

6. Summary of appendices:

Appendix 1: Slide pack illustrating the early action offer

Early Action in Adult Social Care

ASC Scrutiny Commission

6 May 2025

Scope and terminology

Early Action is used rather than 'prevention'

Early action operates at a primary, secondary and tertiary level:

- Universal offers
- One / off or short term offers for people with emerging needs
- Approaches for people with longer term needs that maximise independence

This presentation explores all three levels of early action in ASC and what impact can be seen

Primary (universal) early action

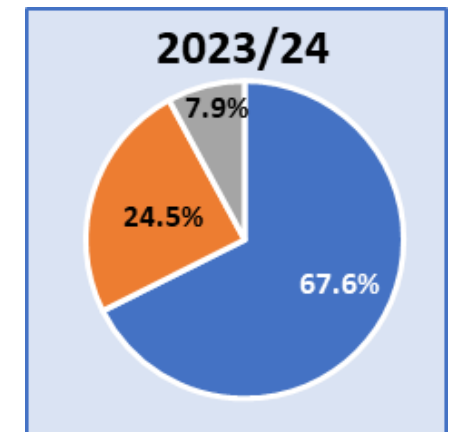
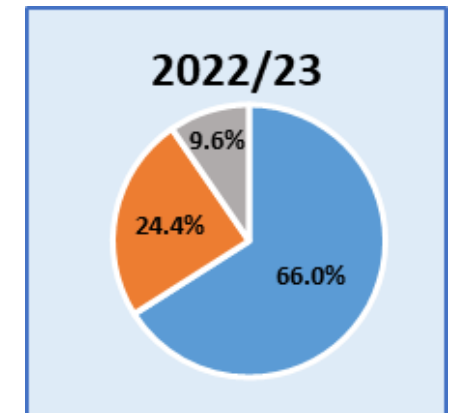
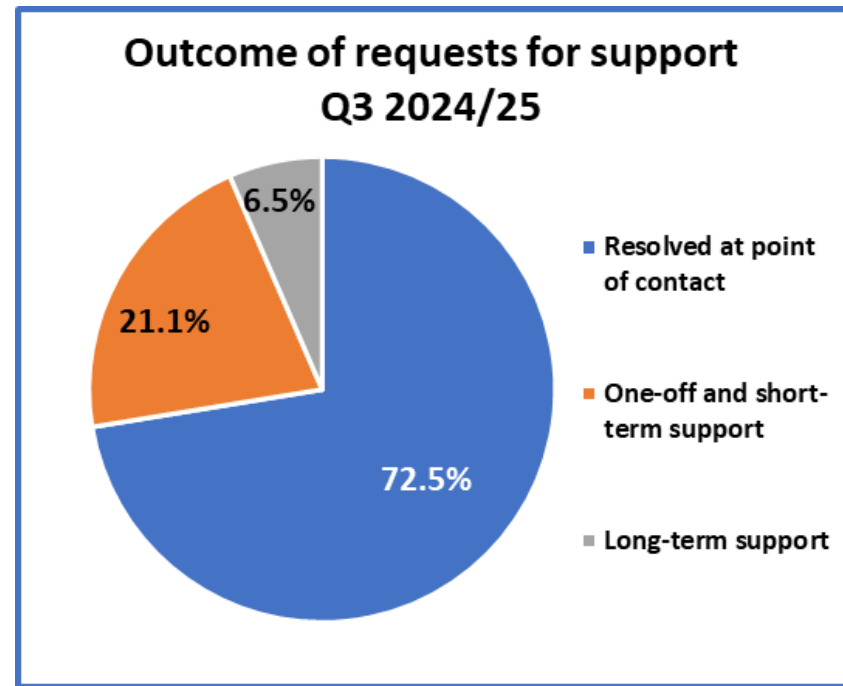
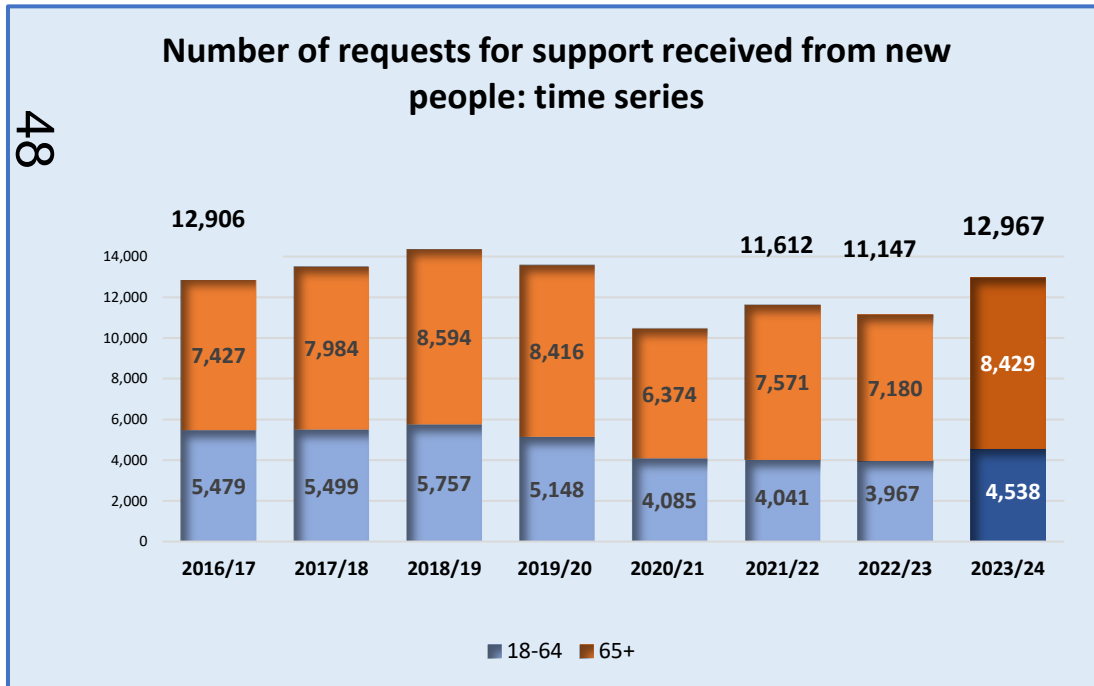
- Information, advice and guidance
- Equipment, adaptations and technology
- Community connections
- Leading Better Lives

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Primary early action impacts

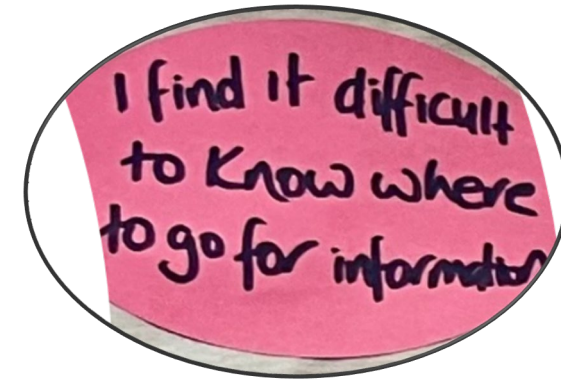
- Demand for support continues to grow – 24/5 forecast 14,380
- Our response to this demand is increasingly via ‘early action’



Primary early action – areas of focus

- Access to information and advice pre-ASC
- Digital inclusion and skills for those who would benefit = freeing up capacity for those who need other routes
- Addressing low level equipment waits

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Secondary (targeted) early action

- Targeted at people with emerging needs
- Not restricted to people with eligible ASC needs
- Care Navigators – linking to social prescribers, community coordinators
- Crisis Response
- Intermediate Care
- Enablement

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Secondary early action impacts

- Well established services achieve good outcomes that reduce the need for ongoing support
- Contribute to system priorities (e.g. timely discharge) and ASC cost control

Key outcomes

Oct 23 – Sept 24



Over **6,200** people supported

100% of high-risk callouts responded to on time. **2 hours**



Avoiding hospital admissions.



Facilitating timely hospital discharge.

Over half of all referrals are submitted by LeicesterCare, with a quarter made by Adult Social Care.



With **80%** of people requiring no further support.

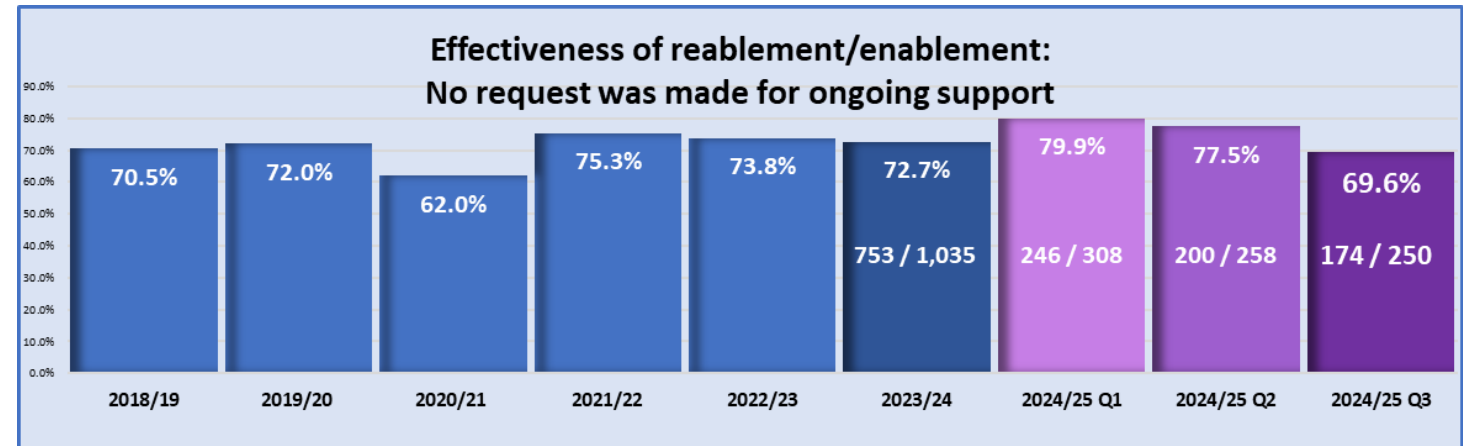
Just 1% of people go on to need more long-term care and support of people are admitted to hospital



1 in 4 people are supported because they have fallen over



90% require no further support.



“...the growth in the number of older people being supported is now -0.36% i.e. below the standstill target of 0%.”

(2024/5) P9 Corporate Revenue Budget Report

Secondary early action – areas of focus

- Increasing community (rather than discharge) access to reablement
- Enablement at the ‘front door’
- OT assessment hub



Tertiary (supplementary) early action

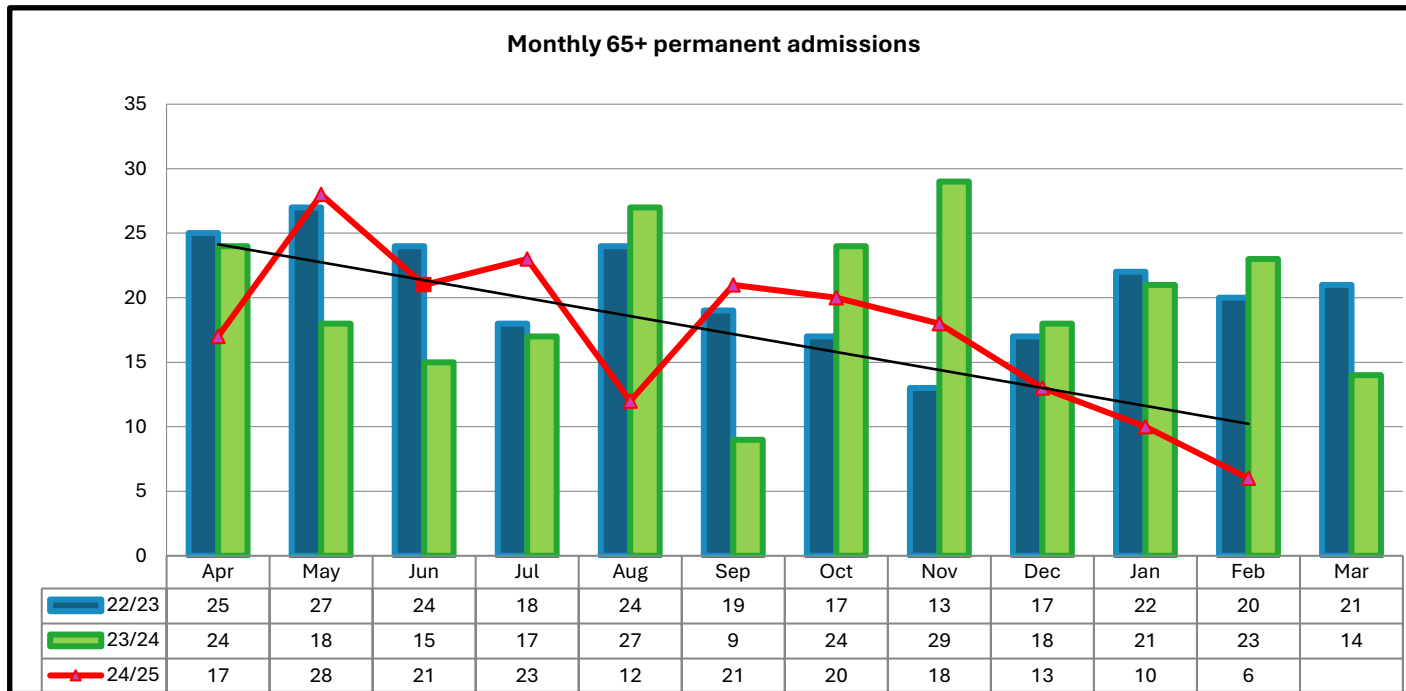
- Support that promotes the independence and choice of people with established ASC needs
- Strengths-based practice
- Major adaptations
- Double handed care support
- Outcomes and support sequence



Tertiary early action - impacts

- May be qualitative in nature – choice, participation, degree of independence
- Enable people to live well / at home
- More limited in scale – especially if primary and secondary offers are strong

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Tertiary early action – areas of focus

- Increased independent living options (generally lower cost)
- Continued focus on strengths
- Drawing in community services for people with long term support needs





Adult Social Care Workforce Strategy 2025-30
Adult Social Care Scrutiny

Date of meeting: 30 April 2025

Lead directors: Laurence Jones

Useful information

- Ward(s) affected: ALL.
- Report authors: Leanne Karczewski
- Author contact details: leanne.karczewski@leicester.gov.uk
- Report version number: 1.0

1. Purpose of report

1.1 This report summarises 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.

1.2 Consultation on a draft strategy took place in May 2024. The results of the consultation have been considered and are reflected where appropriate in the final strategy.

1.3 In July 2024, further to local planning, a workforce strategy for Adult Social Care in England was launched.

1.4 This report sets out how the draft strategy is to be updated to reflect valuable insights gathered through consultation and to align with the ambitions of the National Strategy.

1.5 Whilst the strategy is being finalised for formal implementation, it should be noted that work is in place to support availability and retention of a skilled and competent workforce. Actions in place to address this are outlined in this report.

2. Summary

2.1 Social care is 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.

2.2 In 2023/24 the adult social care sector in England had an estimated 18,500 organisations with 40,000 care-providing locations and a workforce of around 1.84 million posts. However, with a growing population and increasing need for social care support, projections show that if the number of adult social care posts grows proportionally to the projected number of people aged 65 and over in the population between 2023 and 2040, an increase of 29% (540,000 extra new posts) would be required nationally by 2040. ¹

¹<https://www.skillsforcare.org.uk/Workforce-Strategy/Introduction/>

2.3 With this growth in volume, the challenges that already exist for the sector are only likely to be exacerbated if actions are not agreed and put in place. We already face significant challenges in attracting and retaining staff. In 2023-24, there were 131,000 vacancies on any given day – a vacancy rate of 8.3%; for Leicester the rates are slightly lower with a vacancy rate of 7.1%. Turnover rates in Leicester are also better than regional and national averages, with England and regional turnover of 24.8 % and 25.5% respectively, compared to 16.9% locally.

2.4 Whilst we may perform slightly better in attracting and retaining staff in Leicester, our vacancy and turnover rates are still not where we need them to be. In addition, we face several other challenges 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.

2.5 These challenges need to be addressed to make sure that there are enough people working in social care with the right training, skills, and qualifications to meet the changing and increasing needs of our population - and that those people are valued in their roles. Making social care more attractive as a place to work in an increasingly competitive global labour market is going to be even more important in the future. In summary the growing need for adult social care, and the current challenges in attracting and retaining a suitably qualified workforce, underpin the commitment for us to launch and mobilise a strategy for the Adult Social Workforce.

3. Recommendations

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

3.1 Endorse the strategy in its final form and approve the work to develop and implement two delivery plans one for the internal workforce and a second for the external workforce. ([Final Strategy at Appendix E](#))

3.2 Note the continued work both regionally and nationally through our work with East Midlands Association of Directors of Social Services and our local area's Workforce Oversight Group to deliver on the three priority areas: recruitment and retention of staff, training, and transformation of workforce through digital technology.

4. Report

4.1 Background and Context for Leicester

4.11 In 2023/24 the adult social care sector in England had an estimated 18,500 organisations with 40,000 care-providing locations and a workforce of around 1.84 million posts. The total number of posts in Leicester was around 15, in 2023/24. This was comprised of 14,500 filled posts and 950 vacant posts across all sectors.

4.12 Since the previous year, the total number of posts has increased by 750 (5%), the number of filled posts has increased by 800 (6%) and the number of vacancies has decreased by 50 (4%). The estimated 14,500 filled posts were split between local authorities (5%), independent sector providers (82%), posts working for direct payment recipients (7%) and other sectors (5%).²

4.13 In Leicester we currently employ 5% of the total adult social care workforce in the city. Typically, our workforce is 77% female, with an average age of 41 years old. Whilst 87% of the workforce are on a permanent contract, 34% of the total workforce are working to a zero-hour contract. The turnover rate of staff is currently 16.9 %, and there are approximately 1000 vacancies across all social care job roles.³

4.14 We believe that everyone working in adult social care should be able to take part in learning and development so that they can carry out their roles effectively. Learning and development helps everyone to develop the right skills and knowledge to enable them to provide high-quality care and support. Skills for Care estimates show that 37% of the direct care providing workforce in Leicester hold a *relevant* adult social care qualification (43% in East Midlands and 47% in England). Raw data from the ASC-WDS showed, of those workers without a relevant adult social care qualification recorded, 37% had five or more years of experience in the adult social care sector, 78% had engaged with the Care Certificate and 75% had completed training.

4.2 Existing Initiatives

4.2.1 Given the importance of an available, skilled and competent workforce we have been working for some years to support our local market of social care providers in their workforce ambitions. In addition, key actions and priorities support a stream of work to support our internal workforce. The work that is in train supports the priorities being proposed for the Workforce Strategy.

Workforce Sufficiency – attracting and retaining the working force.

4.2.2 Induction is recognised as a key enabler in supporting staff retention. Internally, the induction programme is prioritised, and through Inspired to Care our provider market has the support of a dedicated 10-week induction framework.

4.2.3 **Ethical International Recruitment** -supported by a grant from East

² A Summary of the adult social care sector and workforce in Leicester 2023/24- Skills for Care

³ Extract from Skills for Care Workforce Intelligence Data Set for 2023-2024

Midlands Association of Directors of Social Services we are working closely with East Midlands Care Alliance to deliver a programme of support for both social care providers and international workers, this programme includes working with a team of dedicated pastoral workers to support both displaced workers, prospective social care workers and social care providers to ensure safety and support are paramount for our international workforce. The service is free to the workforce and includes support for providers to apply for visas as well as provide funding, advice and guidance and visa and sponsorship documentation support.

4.2.4 Inspired To Care – commissioned by City and County Adult Social Care Departments Inspired to Care work innovatively to build a sustainable workforce by supporting providers with their recruitment and retention challenges. Inspired to Care also host an annual award ceremony for carers.

4.2.5 Employment Hub- There is a dedicated officer in the Council's Employment Hub dedicated to work with the social care sector around recruitment, particularly working with colleges and other routes to attracting young people into this sector.

Training the workforce

4.2.6 Leicestershire Social Care Development Group- commissioned jointly by City, County and Rutland to support the workforce development and raise quality for the independent and voluntary sector across the city, county and Rutland.

4.2.7 A Diverse and Inclusive Workforce Leading work with system partners we have several training and development opportunities in place to support the development of a workforce reflective of our diverse population. This includes our active bystander programme; reverse mentoring; unconscious bias training; Oliver McGowan training; developing diverse leaders; and diverse by design – supported by the Departmental Inclusive Decision-making forum.

4.2.8 Internally a raft of mandatory training is in place to support our workforce from cyber security, deaf awareness, to safeguarding adults and think carers. In addition, we offer a social work apprenticeship programme, a social work progression framework and other professional development opportunities.

5. Summary of the consultation and alignment with the National Strategy

5.1 To give this much needed agenda the priority and focus that is needed we set out our ambition for a workforce strategy in a draft document that was consulted on in 2024 ([Draft Strategy – Appendix A](#)). The draft strategy was developed in partnership with people who draw on support, providers of social care, and the social care workforce - paid and unpaid.

5.2 The consultation set out our strategic objectives and sought views from stakeholders on their relevance and importance, or whether any other

considerations should be included in the final strategy. The three strategic priorities we consulted on were **Valued, Sufficient, Competent and Confident**.

5.3 In [Appendix B](#) is a breakdown of the roles of the respondents to the consultation. Most respondents were either employees or providers in social care, which gives us assurance that the results of the consultation are consistent with the audience we had intended to reach.

5.4 The findings from the consultation were overwhelming in support of the proposed priority areas ([See appendix C](#)). In addition, several suggestions were made which will be incorporated into the final strategy and its delivery plan([see Appendix D](#)). Following the alignment work that has since been completed, these priorities have now been translated into **Attract and Retain, Train and Transform** to mirror the National Strategy.

5.5 Whilst as a Local Authority we do not have the control or ability to influence all aspects that define workforce, the strategy will set out how we will work with partners both locally, regionally and nationally to bring about improvements.

5.6 The National Adult Social Care Workforce Strategy has been adopted regionally with work being undertaken by Leicester City Commissioners as part of the East Midlands Association of Directors for Adult Social Services Workforce Network to align the national and local objectives. This will enable us to enhance regional coordination and collaboration on the strategic priorities, share data and research and benefit from the resources and good practice that is being developed across the region and nationally.

5.7 Alignment work between the national strategy and our regional strategy has highlighted a gap in the strategy to address the specific work required to support ethical international recruitment. This workstream has been included in the final strategy to ensure alignment regionally and nationally – recognising that this work is already underway in the city as described in 4.5.1 of the report.

6 Partnership Opportunities

The adult social care workforce is a significant part of our local population and a key contributor to the health and care system. There are a number of strategic partnership arrangements that will support the ambitions of a workforce strategy.

6.1 Leicester, Leicestershire and Rutland Draft People Strategy. Strategically we work in partnership health and our neighbouring Local Authorities. We are active members of the ICB People and Culture Board, with a shared ambition to support a One Workforce for health and care. This Board is driving the development of a People Strategy, which will have the strategic objectives of attraction, retention, innovation and transformation across the LLR footprint and will enable a joined-up approach to workforce development and improvement.



6.2 Social Care Academy. A partnership with our local universities and further education facilities will support us to ensuring the Council and wider care community

across the Leicester City has the skilled and empathic workforce required for the future. It is a single brand, with a “look and feel” that will be familiar and trusted by those who are, or would desire to be, a part of the social care workforce in the city.

7. Timeline and Next Steps

Given the critical importance of a sufficient, competent and valued workforce and building on the raft of existing work outlined in this report, we will move quickly to formalise and launch our strategy and deliver its ambitions. Supporting the ongoing development of the strategy and delivery plan we will work with Partners in Care and Health in their capacity as expert reviewers, with consideration of the framework they offer to underpin this work.

April 2025	April	April - May	November	April 2026
Seek approval from LMB for the approach set out in the report.	Take report to Scrutiny Commission	Publish Strategy, consultation results and Delivery plan	6-month review against targets update to Lead Member	12 months review against targets and further objectives set for 2026-2027


 Delivery plan actions and workstreams to continue throughout timeline.
 

8. Financial, legal and other implications

8.1 Financial implications

This report does not directly commit any additional costs for the Council. Recruitment to posts is done following financial checks that budget is in place. It also needs to be considered if vacant posts are recruited to as there may be an opportunity to reduce costs for the Council in light of the challenging overall financial position.

Mohammed Irfan, Head of Finance
11 April 2025

8.2 Legal implications

No direct legal implications from a social care perspective.

14th April 2025

Susan Holmes, Head of Law, Social Care & Safeguarding

8.3 Climate Change and Carbon Reduction implications

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

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

9th April 2025

8.4 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 and any other conduct prohibited by the Act, 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 and sexual orientation.

This report summarises the current position for the workforce that supports Adult Social Care in Leicester and seeks endorsement of the new strategy and related action plans.

Social care is important for people and for communities. Demographic changes mean that it is likely that the adult social care workforce will need to grow. The future of social care and the people that draw on it depends on a strong and valued workforce. The Strategy builds on current legislation and previous policy to set out a vision for the social care workforce for the future, making evidence-based recommendations and commitments to attract, retain, train and transform the workforce. The strength of social care is in celebrating, valuing and recognising what makes people unique and supporting them to overcome challenges. It is important that the adult social care workforce reflects the society we live in, and that people feel included and treated equally. There may be actions arising from the plans which would benefit from further consideration of the equalities implications and possibly a full equality impact assessment in certain circumstances.

Equalities Officer, Surinder Singh, Ext 37 4148

9 Background information and other papers:

10 Summary of appendices:

Appendix A Draft Workforce Strategy

Appendix B Breakdown of respondents to the consultation

Appendix C Summary of findings from the consultation

Appendix D Additional suggestions from people during the Consultation

Appendix E - Final Draft Strategy

Leicester's Adult Social Care Workforce Strategy

**Making Leicester a great place to work and deliver
high quality social care services**

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Summary

Our Vision

Making Leicester a great place to work and deliver high quality social care services.

- The social care workforce feels valued in their role.
- Care work is seen as a worthwhile and rewarding career, in which people can develop and progress, and potential workers understand the personal qualities necessary.
- Young people view the role as an attractive career.
- Terms and Conditions are appropriate to recruit and retain quality staff.
- Care services are operating with not just safe and sustainable staffing levels, but with staff motivated to provide excellent quality and consistency of care for people.
- There is increased staff retention in the sector as people choose to stay and develop their careers in care.
- Providers feel supported by the local authority to recruit and develop a sustainable and highly skilled workforce.

Our Strategic Priorities

1. Valued

- Enhancing the professionalisation of staff.
- Bring in rewards and incentives.
- Set out clear career pathways and upskilling staff.
- Ensuring there is a fair pay offer.
- Develop a communications campaign that shows how we value carers.

2. Sufficient

- Supporting Recruitment and Retention.
- Learning from data from partners such as Skills for Care and using to focus our efforts.
- Moving towards an Integrated workforce strategy.
- Exploring how pathways into Social Care can be enhanced and publicised to all age groups.
- Working in partnership with internal and external colleagues to synergise and add value.
- Engaging with and consulting the workforce and representing them as appropriate.

3. Confident and Competent

- Continuing to offer and support training provision either directly or through partners such as the LSCDG, Inspired to Care and Skills for Care.
- Linking with key work programmes to identify gaps and opportunities.
- Supporting our workforce through practical solutions and information sharing.
- Embracing innovation and the use of technology.

Our Actions

Based on our understanding of the current and future social care workforce in Leicester, and the challenges it faces, we have devised these key actions for the next twelve months.

- Improve the usage of updated data and intelligence as a shared resource to support the social care workforce
- Promote available resources to providers more effectively, and engage with providers who need the most support to use those resources
- Develop improved pathways into work
- Strengthen our partnership approach to learning and development
- Improve the positive recognition of social care as a valued career

- Increase the level of capability to use digital and technology innovations
- Support improved practice across the sector in recruitment and business continuity planning

How did we develop our strategy?

This strategy has been developed in partnership and we will continue to work with all our social care provider partners in the city, people drawing upon support, and with colleagues from across the health and social care sector and beyond, including:

- Those receiving care and their families
- The workforce – paid and unpaid
- The provider community – regulated and non-regulated
- The Council as commissioners of care and support
- Providers of accommodation and support
- The Integrated Care System as a driver of integrated care
- Leicester Employment Hub
- Inspired to Care
- Skills for Care
- The local Care Associations, EMCare and Home Care Alliance
- Leicester, Leicestershire & Rutland Integrated Commissioning Board
- LSCDG (Leicestershire Social Care Development Group)
- Organisations supporting those directly delivering social care

What does our current workforce look like?

This strategy covers a wide range of roles in the external workforce, such as staff in care homes, home care and community-based care, including extra care, supported living and day opportunities for adults aged over 18. Our information comes largely from the Skills for Care data gathered through completion of the Adult Social Care Workforce Data Set, completed by over 48% of Leicester's Adult Social Care providers.

Size and structure of the workforce

In 2022/23 the adult social care sector in England had an estimated 18,000 organisations with 39,000 care-providing locations and a workforce of around 1.79 million posts. The total number of posts in Leicester was around 15,000 in 2022/23. This was comprised of 14,000 filled posts and 1,000 vacancies. Since the previous year, the total number of posts has decreased by 1,200 (- 7%), the number of filled posts has decreased by 400 (-3%) and the number of vacancies has decreased by 750 (-42%).

There were an estimated 14,000 filled posts in adult social care, split between local authorities (6%), independent sector providers (81%), posts working for direct payment recipients (8%) and other sectors (6%). As at March 2023, Leicester had 268 CQC regulated services; of these, 98 were residential and 170 were non-residential services.

If the adult social care workforce grows proportionally to the number of people aged 65 and over in Leicester's population, then the number of posts needs to increase by 23% or an additional 3,220 posts. That would take the total number of posts to 17,220.

Recruitment and Retention

Skills for Care estimates that the staff turnover rate in Leicester was 18.6%, which was lower than the region average of 29.7% and lower than England at 28.3%. Not all turnover results in workers leaving the sector, around half (51%) of starters were recruited from within the adult social care sector, therefore although employers need to recruit to these posts, the sector retains their skills and experience.

It is estimated that the vacancy rate in Leicester was 7.50%, which was below the regional average of 9.9% and England at 9.9%.

Across England, the vacancy rate has decreased compared to last year and the number of filled posts has increased. During this period international recruitment increased substantially which has impacted these trends. Workers in Leicester had on average 8.1 years of experience in the sector and 68% of the workforce had been working in the sector for at least three years.

CQC (the Care Quality Commission) report that Care homes have found it very difficult to attract and retain registered nurses. They report nurses moving to jobs with better pay and conditions in the NHS. However, the ability to recruit overseas staff has alleviated this somewhat but nevertheless, a job in the NHS seems to remain a more attractive proposition for these staff than the adult social care sector.

Employment Information

We estimate Leicester had 12,000 adult social care filled posts in the local authority and independent sectors. These included 950 managerial roles, 300 regulated professionals, 9,500 direct care (including 8,200 care workers), and 1,300 other-non-care proving roles.

The average number of sickness days taken in the last year in Leicester was 5.2, (7 in East Midlands and 5.9 across England). With an estimated directly employed workforce of 11,000, this means employers in Leicester lost approximately 58,000 days to sickness in 2022/23.

Under half (42%) of the workforce in Leicester were on zero-hours contracts. Around half (45%) of the workforce usually worked full-time hours and 55% were part-time.

Workforce Demographics

The majority (79%) of the workforce in Leicester were female, and the average age was 42 years old. Workers aged under 25 made up 11% of the workforce and workers aged 55 and above represented 21%. Given this age profile approximately 2,500 posts will be reaching retirement age in the next 10 years.

Nationality varied by region, across England 81% of the workforce identified as British, while in the East Midlands region this was 82%. An estimated 68% of the workforce in Leicester identified as British, 9% identified as of an EU nationality and 24% a non-EU nationality, therefore there was a higher reliance on non-EU than EU workers.

A further breakdown of Leicester's workforce shows 39% of workers identify as White, 39% as Asian/Asian British, 19% Black/African/ Caribbean/Black British, 2% Mixed/multiple ethnic groups and 1% other.

This compares with the latest general demographic profile of Leicester which is 43% Asian/Asian British, 40.9% White, 7.8% Black/African/ Caribbean/Black British, 4.1% Other, 3.8% Mixed/multiple ethnic groups.

Pay Levels

Many roles in the social care sector have a relatively low level of pay.

In March 2023, the average workplace hourly pay for a care worker in Leicester's independent sector was £10.07 – that's 57 pence more than the National Living Wage at that time. A senior carer's average hourly pay was £10.51. Other support and outreach roles were paid on average £9.76 an hour. In Leicester we ensure that our fee rates support payment of at least the national minimum rate and include additional components such as a travel time allowance, uniform, 5 days of sick pay.

Qualifications, Training and Skills

Skills for Care estimates show that 40% of the direct care providing workforce in Leicester hold a relevant adult social care qualification (43% in East Midlands and 46% in England).

Raw data from the ASC-WDS showed, of those workers without a relevant adult social care qualification recorded, 48% had five or more years of experience in the adult social care sector, 68% had engaged with the Care Certificate and 71% had completed training.

What challenges are we facing?

Leicester's local employment market

The local economy has faced unprecedented changes over the last few years: Covid19; the war in Ukraine; the cost-of-living crisis. All of these have had significant impact on the local employment and skills landscape. Providers report that inflationary pressures continue to be a major risk to their businesses.

According to the [Office of National Statistics](#), employment in Leicester has increased compared with the previous year. Leicester's employment rate for working age adults was lower at 66.7% than across the East Midlands as a whole in the year ending March 2023. Unemployment (people looking for work) has fallen since a year earlier. The most recent unemployment rate for Leicester was higher at 5.1% than across the East Midlands as a whole. The number of people who are claiming unemployment-related benefits is higher at 5.2% than the previous year, and people who are neither employed nor seeking work (called economic inactivity) has decreased since the last year to 28.5%.

Within the adult social care sector, these statistics are mirrored so more people are employed so the number of vacancies and staff turnover are lower than the previous year, however, recruitment and retention of skilled staff remains a problem, particularly amongst nursing qualified staff. People may choose to work in the hospitality or retail sectors as these are perceived to have less responsibility.

Promoting careers in social care continues to be an ongoing challenge.

Skills for Care tell us that across England, variables that influence the likelihood of a worker leaving their role were:

- Workers who travelled further were more likely to leave.
- Those under 25, and over 60 years old, were more likely to leave their posts.
- Turnover decreased with higher levels of experience working in the sector.
- Likelihood of leaving decreased as pay levels increased.
- Likelihood of leaving decreased with higher levels of experience in role.
- Likelihood of leaving decreased if workers had more training.
- Turnover decreased if workers had a higher number of contracted hours.
- Likelihood of leaving decreased if workers had fewer sickness days.
- Workers on zero-hours contracts were more likely to leave their posts.
- Likelihood of high turnover rates increased if the establishment had high turnover historically.

What has the workforce told us?

This section to be completed.

What has worked elsewhere?

Information from other councils and skills bodies tells us that the following good practice actions can lead to improvements:

- Values based recruitment
- Improved coordination of recruitment, training, and support
- Engaging with schools and colleges for the workforce of the future
- Using 'Ambassadors' to change public perception of the care sector's image
- Improving training and support for people entering the care sector
- Sector wide working to address skills gaps
- Establishing a clear career structure
- Recognising and rewarding length of service and experience
- Improving remuneration, employment terms and conditions, staff benefits

- Targeting support towards small and medium sized organisations

What are our key issues and risks?

Strengths

- Large and growing part of the local economy
- Most of the workforce find care a rewarding career
- The perception of care work has improved since the Covid19 pandemic
- Ethnic profile of the workforce largely matches our local population
- Staff choose to stay in the sector when moving jobs

Weaknesses

- Large number of zero hours contracts
- Lack of sustainable investment into social care
- Lack of awareness of pathways into social care as a career
- Key skills shortages e.g., nurses in social care

Opportunities

- New ways of working including technology and digital opportunities
- Strengths based working and greater emphasis on frontline staff
- Good cross sector partnership approaches

Threats

- Competition with other sectors of the economy
- The impact of the cost-of-living crisis
- The number of staff reaching retirement age is not matched by the number of new entrants to the sector
- Zero hours contracts do not suit a younger workforce

What are we doing to shape the future of social care in Leicester?

Our vision is to make Leicester a great place to work and deliver high quality social care services, using strengths-based ways of working and embracing innovation and technology. We want a workforce that is sustainable, that is competent, and which feels valued. We want to attract a workforce across every stage of their career, including new starters. Strategically we are an active partner in the LLR Integrated Care System's People Board, and the work that this supports, including provision of training opportunities through the LLR Academy, and other initiatives to work as one system to support the workforce across health and care.

To do this we will:

- Work collaboratively with providers to support them to recruit, retain and develop their workforce.
- Work in partnership to carry out targeted local recruitment campaigns, promoting the sector in schools and with potential job applicants, building consistent and co-ordinated local skills offer, and promoting the benefits of working in social care.
- Work alongside others to make a case for fair and sustainable funding for the social care sector.
- Work alongside our system partners to achieve a position of 'one workforce'.

We cannot address all the challenges facing our local workforce. Some require a consistent and sustainable long-term national funding approach. However, we will work together to do all that we can to make the difference to social care in Leicester.

How will we know this is working?

1. Valued

Outcomes				Measures
1.1	A social care workforce that is, and feels, valued and rewarded	1.1a	The workforce feels valued by their employer	Improved percentage of the social care workforce who report that they feel valued by their employers and the public, and rewarded by their employers
		1.1b	The workforce feels valued by the public	
		1.1c	The workforce feels rewarded by their employer	

2. Sufficient

Outcomes				Measures
2.1	Workforce has the right capacity to manage predicted demand	2.1a	A workforce with the right types and numbers of roles to meet demand	Reduction in the number of vacancies
		2.1b	A workforce at full complement	Reduction in the level of turnover
		2.1c	A workforce where staff have skills to cover more than one role or to safely flex tasks within their existing role	Improvements in the timeliness of care packages being fulfilled.
		2.1d	A workforce willing and able to flex their working patterns to meet fluctuations in demand	
2.2	A social care workforce that is representative of the local population	2.2a	A workforce that is recruited locally	Closer match between the demography of Leicester and the demography within the social care workforce
		2.2b	A workforce that is representative of the diversity of the local population	
		2.2c	A workforce whose senior roles reflect the diversity of the local population	
2.3	Social care is a career aspiration across the whole life course	2.3a	More young people want to have care as a career aspiration	Closer match between the demography of Leicester and the demography within the social care workforce and in particular, the number of younger people in post.
		2.3b	Social care as a career is an opportunity, available for all ages of the population	

3. Confident and competent

Outcomes				Measures
3.1	A social care workforce that is competent,	3.1a	All social care roles have access to training and	Improved percentage of the social care

	well trained and supported to be the best they can be		development opportunities	workforce who report that they have sufficient training opportunities to support their career development
		3.1b	All roles have access to career development and progression opportunities	
3.2	A social care workforce that operates in a strength-based and outcome-focussed way	3.2a	A workforce that uses strength-based practice to help those they support achieve their goals	Improved percentage of people who feel that their goals have been achieved
		3.2b	The right outcomes are achieved for those supported by the workforce	
3.3	A digitally/technologically skilled social care workforce	3.3a	A workforce that can use technology to do their job well	
		3.3b	A workforce able to support people to maintain their independence using technology	

Our key actions to make a difference

The actions below show how we intend to work collaboratively to achieve our outcomes. Our focus will be on the first two years of the strategy, but some actions will be longer term and some actions may well be added during the life of the strategy.

Action		Detail		Outcomes
1	Accelerate our exploration of technology to support care work and to address gaps in the workforce		Promote the adoption of digital working across the sector	3
			Increase the availability of local high-quality training for digital and technology skills	
			Promote the use of innovation and technology to support the realisation of outcomes	
2	Support improved practice across the sector in recruitment and business continuity planning	2.1	Continue our partnership with Inspired to Care who lead on the promotion of jobs and careers within the sector, including engagement with schools and colleges	1,2,3
		2.2	Connect with local, regional and national recruitment campaigns	
		2.3	Continue to support Values Based recruitment and practices that support inclusion, equality and diversity	
		2.4	Continue to work with the sector to reduce the number of zero hours contracts	

		2.5	Work with the sector to identify rewards and benefits schemes to recognise long service and good practice	
		2.6	Ensure that our fee rates are reviewed at least annually to reflect fair remuneration for providers and value for money for the council	
3	Improve the positive recognition of social care as a valued career, particularly amongst younger people	3.1	Across local and national networks, make the case for promoting social care as a valued career, and for a fair and sustainable funding approach for the sector	1,2,3
		3.2	Encourage the development of support networks and opportunities across all roles of social care	
		3.3	Connect with local, regional and national campaigns, including recruitment of Care Ambassadors, staff satisfaction surveys etc	
		3.4	Work alongside our NHS colleagues to develop a 'One Workforce' strategy	
4	Promote available resources to providers more effectively, and engage with providers who need the most support to use those resources	4.1	Continue to provide and promote coordinated training and staff development opportunities through the LSCDG (Leicestershire Social Care Development Group), Inspired to Care, the NHS, our provider forums and other providers as identified with local partners	1,2,3
		4.2	Promote the use of good practice toolkits and on-line resources	
		4.3	Support the further development of peer support and networking opportunities	
5	Improve the usage of updated data and intelligence as a shared resource to support the social care workforce	5.1	Measure progress against outcomes at least annually	1,2,3
		5.2	Review and agree priority areas at least annually	
		5.3	Update projections at least annually	

Appendix B – Breakdown of the respondents to the consultation

In what role are you responding to this consultation?	No. of responses
I work in supported living	10
I employ care staff who work with adults in Leicester	7
I work for a home care or domiciliary support organisation	4
I am an interested member of the public	3
I work for a council	3
I work for the NHS in secondary care	3
I receive support from carers or am a carer or family member of someone who receives support from care staff	2
I work for a residential care or nursing home	2
I work for a day service	1
I work for the NHS in the primary care network	1
I am a representative of a voluntary sector organisation, charity, or local community group	1
Other	1
I work as a personal assistant	0
I am a stakeholder (like an elected member, representative of statutory body)	0
Not Answered	0

Leicester's Adult Social Care Workforce Strategy

Public Consultation - initial analysis

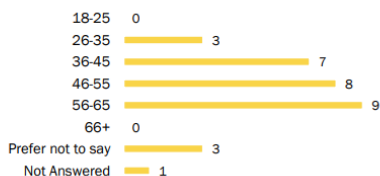
31st May- 14th July 2024

Who responded? Demographics:

Ethnicity

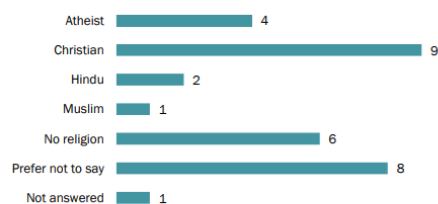


Age

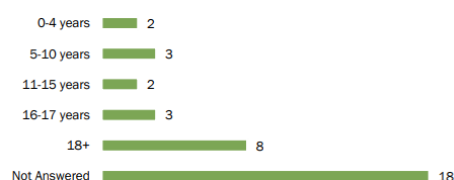


2

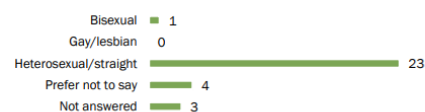
Religion/Belief



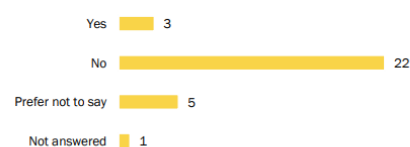
Ages of children/people you care for if you are a parent/carer



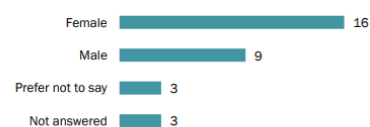
Sexual Orientation



Disability



Sex



The three proposed Strategic Priorities we consulted on

01. Valued

02. Sufficient

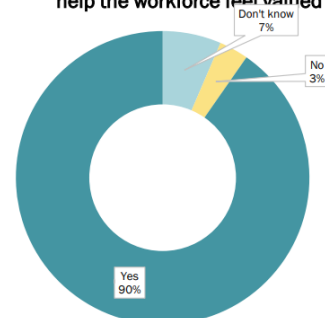
03. Confident and competent

1. Strategic Priority: Valued



3

Feedback - Do you think these priorities will help the workforce feel valued?



Is there anything else we should consider to make the workforce feel valued?

- Increase Pay
- Continuous Professional Development, provide better Training opportunities and access to team building workshops
- Recognition of staff for their contribution and service - establishing formal recognition programmes for long service, exceptional performance, and milestone achievements.
- Promoting diversity and inclusion within the workforce to ensure all staff feel respected and valued regardless of their background.
- The priorities need to have tangible measurable metrics that are visible and displayed to everyone (e.g. on a website)
- Creating platforms for regular feedback from staff, ensuring their voices are heard and their suggestions are acted upon
- Improved Working Conditions
- Work-Life Balance and Wellbeing Initiatives
- Discourage zero-hour contracts
- Make all care workers pin registered
- Leadership and Management Training
- Ensuring staff have access to the latest tools and technology to perform their jobs efficiently and effectively
- Clarity on processes and more transparency by the local authority
- Volunteer Opportunities

4

2. Strategic Priority: Sufficient

Supporting Recruitment and Retention.

Learning from data from partners such as Skills for Care and using to focus our efforts.

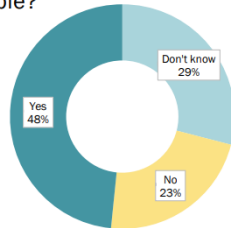
Moving towards an Integrated workforce strategy.

Exploring how pathways into Social Care can be enhanced and publicised to all age groups.

Working in partnership with internal and external colleagues to synergise and add value.

Engaging with and consulting the workforce and representing them as appropriate.

Do you think these priorities will enable us to have a workforce that is sufficient in numbers to support people?



5

Feedback - If no - what are the reasons why?

1. Low Pay rate (minimum wage)
2. High level of complexity in people drawing on support
3. Expected to work long hours
4. Poor working conditions
5. Inadequate training
6. Career Progression

Is there anything else we could do to ensure sufficient staff numbers to meet people's support needs?

- Fair pay structures/better pay
- Continuous professional development, provide better training opportunities and access to team building workshops
- Recognition of staff for their contribution and service - establishing formal recognition programs for long service, exceptional performance, and milestone achievements.
- Promoting diversity and inclusion within the workforce to ensure all staff feel respected and valued regardless of their background.
- Creating platforms for regular feedback from staff, ensuring their voices are heard and their suggestions are acted upon
- Ensuring staff have access to the latest tools and technology to perform their jobs efficiently and effectively
- Improved Working Conditions
- Work-Life Balance and Wellbeing Initiatives
- Discourage zero-hour contracts. This gives stability to carers
- Leadership and Management Training
- Increased structured education availability
- Volunteer Opportunities

6

3. Strategic Priority: Confident and Competent

Continuing to offer and support training provision either directly or through partners such as the LSCDG, Inspired to Care and Skills for Care.

LINKING WITH KEY WORK PROGRAMMES TO IDENTIFY GAPS AND OPPORTUNITIES.

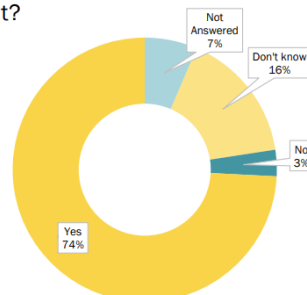
SUPPORTING OUR WORKFORCE THROUGH PRACTICAL SOLUTIONS AND INFORMATION SHARING.

EMBRACING INNOVATION AND THE USE OF TECHNOLOGY.

Feedback - Will priorities support having confident and competent staff? If no, please give reasons why.

1. Some of the different training all feels a little disjointed and not always simple to use and so valid training can be missed
2. It's difficult to comment as there are no specifics.

Do you think these priorities will support us to have a workforce that is confident and competent?



7

Anything else we can do to ensure staff are confident and competent?

Training and Development:

- May work if staff are employed by an organisation/agency, and not with privately employed staff.
- An online platform with access to electronic resources and supplemented by focussed face-to-face training would be great.
- Free training for staff
- Working closely with providers to support training requirements
- Ensure training provided is useful for front line staff
- Identify those who are doing great work and reward them.
- Clear paths of expectation within the industry and expectations on how and where to achieve.
- A clear strategy which enables the Council to see the whole sector and where it can improve.

8

Appendix D – Addition suggestions from people during the consultation

Finding	Brief Description	Alignment with strategic objective	Specific actions
Recognition for all staff for their contribution and service	Establishing formal recognition programmes for long service, exceptional performance, and milestone achievements.	Attract and retain	Inspired to Care projects including the Carer of the year awards. Skills for Care are developing career pathways for development
Promoting diversity and inclusion within the workforce	Ensure all staff feel respected and valued regardless of their background.	Attract and retain	Inspired to Care funded projects and recruitment initiatives. Working with Skills for Care to improve provider inclusion in the Workforce Data Set to enrich data International Recruitment project
Continuous Professional Development	Volunteer Opportunities Clear career pathway in the industry Ensuring staff have access to the latest tools and technology to perform their jobs efficiently and effectively.	Train	Skills for Care programme of work Leicestershire Social Care Development Group programme of training
Creating platforms for regular feedback from staff	Ensuring staff voices are heard and their suggestions are acted upon	Train and transform.	Accelerate our exploration of technology to support care work and to address gaps in the workforce.
Improved Working Conditions	Discourage zero-hour contracts. Work-Life Balance and Wellbeing Initiatives	Attract and retain. Attract and retain	Working with providers Support improved practice across the sector in recruitment and business continuity planning.



Leicester's Adult Social Care Workforce Strategy 2025-2030

Leanne Karczewski

Lead Commissioner

Adult Social Care & Commissioning

April 2025

Our Vision



Our vision is to make Leicester a great place to work and deliver high quality social care services, using strengths-based ways of working and embracing innovation and technology



We want a workforce that is sustainable, that is competent, and which feels valued.



We want to attract a workforce across every stage of their career, including new starters



Leicester
City Council

Introduction to the Leicester City Adult Social Care Workforce Strategy 2025-2030

We Statement:

- 1** We co-produce our workforce strategy and action plan, and their delivery and evaluation, with people who work for us. We make sure our plans are informed by people with lived experience of care.
- 2** We make sure that we are working together across the wider workforce in an integrated, preventative and flexible way

To create this strategy, we have worked collaboratively with our social care provider sector, our social care workforce in Leicester City Council and in the wider sector as well as organisations with workforce expertise, especially Inspired to Care and Skills for Care.

We have also involved partners and colleagues from the Integrated Care Board, Leicestershire Partnership Trust and Leicestershire County Council.

Strategically we are an active partner in the Leicester, Leicestershire and Rutland Integrated Care System's People Board and the work that this supports this including provision of training opportunities through the LLR Academy as well other initiatives.

These partnerships are helping us work towards integration and working together as one system to support the workforce across health and social care, in line with the direction NHS ten-year plan which focuses on shifting towards community-based care, preventative measures, and digital technology, while also addressing workforce challenges and improving patient outcomes.¹

Through consultations our internal City Council and external adult social care workforce have told us what is most important to them as well as what needs to improve and develop. We have found that the themes of recruitment and retention, training and transformation of the workforce are shared across the sector - these themes have guided us in the develop of our strategic priorities.

As these themes and aspirations are shared across both the internal and external workforce, we have decided to take a joint approach to this strategy and the delivery – encompassing both the internal and external adult social care workforce in Leicester city. This approach will enable us to benefit from continued cross working and collaboration across the system, whilst maintaining two distinct delivery plans which accommodate the requirements of the different professionals within the social care workforce.

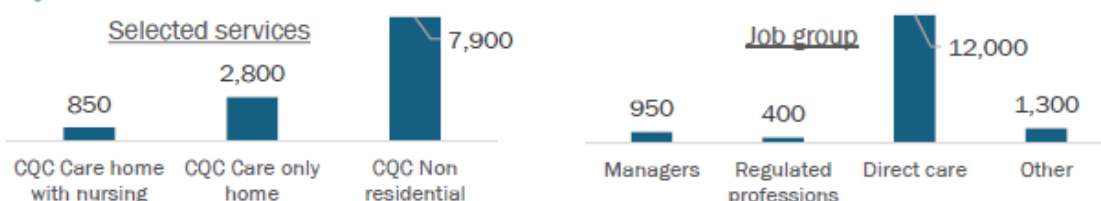
During delivery we commit to working alongside the workforce and with people with lived experience who draw on adult social care support, to ensure that people stay at the centre of this work. Through our strategic co production group “Leicester Voices together Group” we have the support to be able to achieve this.

Our local Adult Social Care Workforce Data – the Context

Employment Overview

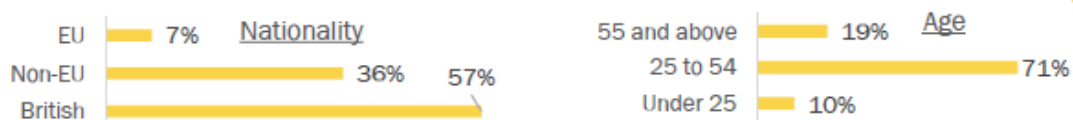
Skills for Care estimate Leicester had 13,000 adult social care filled posts in the local authority and independent sectors. These included 950 managerial roles, 300 regulated profession roles, 10,500 direct care (including 9,000 care workers), and 1,300 other-non-care proving roles. The average number of sickness days taken in the last year in Leicester was 4.2, (5.7 in East Midlands and 5.3 across England). With an estimated directly employed workforce of 11,500, this means employers in Leicester lost approximately 49,000 days to sickness in 2023/24.

Over half of the workforce (57%) usually worked full-time hours in Leicester and 43% were part-time. Around a third (34%) of the workforce were on zero-hours contracts



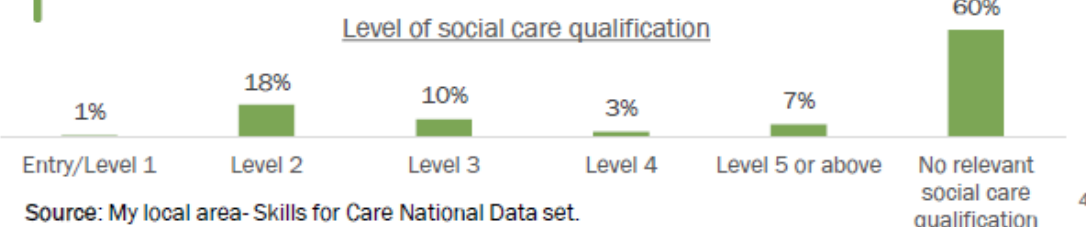
Workforce Demographics

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 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. Across England 73% of the workforce identified as British, while in the East Midlands region this was 73%. An estimated 57% of the workforce in Leicester identified as British, 36% identified as of a non-EU nationality and 7% identified as of an EU nationality, therefore there was a higher reliance on non-EU than EU workers



Qualifications, training and skills

Skills for Care estimates show that 37% of the direct care providing workforce in Leicester hold a relevant adult social care qualification (43% in East Midlands and 47% in England). Raw data from the ASC-WDS showed, of those workers without a relevant adult social care qualification recorded, 37% had five or more years of experience in the adult social care sector, 78% had engaged with the Care



What has the workforce told us?

Analysis of our targeted workforce consultation confirmed that are our priorities are the right ones. The Workforce told us that they want to see:

Fair pay structures/better pay	Recognition of staff for their contribution and service - establishing formal recognition programmes for long service, exceptional performance, and milestone achievements.	Ensuring agency staff get the same recognition in the strategy
Promoting diversity and inclusion within the workforce to ensure all staff feel respected and valued regardless of their background.	Clear paths of expectation within the industry and expectations on how and where to achieve	Creating platforms for regular feedback from staff, ensuring their voices are heard and their suggestions are acted upon

Our Strategic Priorities:

The strategic priorities align with the 2024 National Workforce Strategy for Adult Social Care in England, and we benefit from being a partner and collaborator at both regional and national workforce development networks. These networks will enable us to deliver this strategy in the knowledge that our priorities are the rights ones locally as well as being aligned nationally.

They are also conversant with the Skills for Care National Workforce Data Set which gives us an evidence-based approach to our specific local workforce improvement and innovation planning.

We will use the Workforce Together', 'I' and 'We' Statements Framework which has been co-produced by people and for people who work in care and people who draw on care and support, and their carers They have been created by Partners in Care and Health who have worked in collaboration to facilitate the co-production discussions and translate the insights into these statements.³ The purpose of this framework is to support improvement in workforce development, wellbeing and the quality of care, so we can all live "gloriously ordinary" lives.

These We statements will be used to benchmark our progress against during the delivery of the strategic priorities giving us a framework to measure against and be accountable to.

5

Priority 1 - Attract and Retain

We Statement:

- 1** We make sure that our workforce is diverse, reflecting the communities in which we work and the people who we support
- 2** We co-produce our approach to wellbeing with people who work for us.
- 3** We prioritise safety and safeguarding when considering current and future workforce.

What this means:



Priority 2 - Train

We Statement:

- 1** We research, develop and invest in new roles and new ways of working, when it makes sense to do this.
- 2** We develop clear career pathways, and development and progression opportunities.

What this means:

Staff have the right professional skills and personal qualities to excel at their job.



There is a good quality training provision either directly or through partners such as the LSCDG, Inspired to Care and Skills for Care.



Resources are promoted to providers more effectively, and there is engagement with providers who need the most support to use those resources



There is a strong partnership approach to learning and development



Apprenticeships are encouraged as a way of encouraging social care as a valued career.

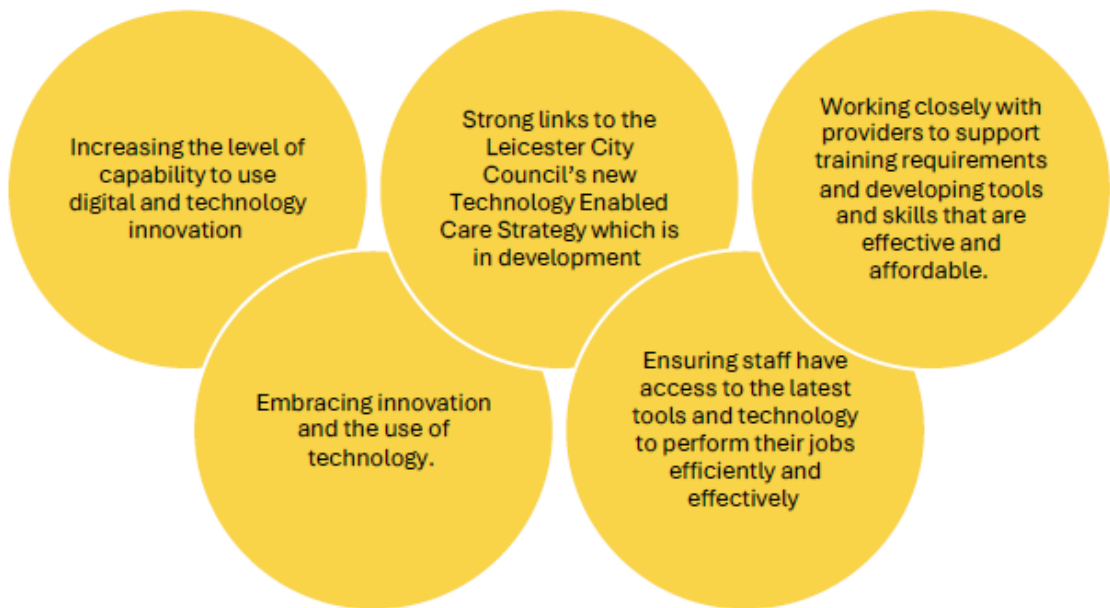
Priority 3 - Transform

We Statement:

1

We analyse national, regional and local information, data and intelligence to underpin our workforce plans.

What this means:



Next Steps - Making It happen

This new strategy will be delivered via two delivery plans – one for the internal and a second for the external workforce these robust delivery plans will set out annual actions to meet the ambitions of the strategy – Attract and retain, train and transform.

The alignment of this Strategy with the National Adult Social Care Workforce Strategy will enable us to enhance regional coordination and collaboration on the strategic priorities, share data and research and benefit from the resources and good practice that is being developed across the region and nationally.

In conjunction with this strategy, we will work with health and social care partners across the region to develop a People Strategy, which will have the strategic objectives of attraction, retention, innovation and transformation across the LLR footprint and will enable a joined-up approach to workforce development and improvement.

Our workforce challenges need to be addressed to make sure that there are enough people working in social care with the right training, skills, and qualifications to meet the changing and increasing needs of our population - and that those people are valued in their roles.

In summary the growing need for adult social care, and the current challenges in attracting and retaining a suitably qualified workforce, underpin the commitment for us to launch and mobilise this strategy for the Adult Social Care Workforce.

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.	Information provided to members.
	Support for Carers		

Meeting Date	Item	Recommendations / Actions	Progress
9 January 2025	Draft General Revenue Budget and Capital Programme 2025/26	Section 15.3 of the budget report will be updated for Care Leaver to be included in the Councils Protected Characteristics.	Completed.
		An update on supported living will be presented at the next meeting.	Completed
		Members to be updated once properties which are determined to be sold under the Capital Programme have been decided.	Ongoing
	ASC Savings Delivery Programme	That an item on loneliness be added to the Work Programme.	The item has been added to the work programme.
		An item on increasing complexity of needs be added to the Work Programme.	The item has been added to the work programme.
		An item on SEND children transitioning to Adult Social Care be added to the Work Programme.	The item has been added to the work programme.
		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.	Ongoing.
	Support for Self-Funders	Health Watch Leicester to circulate flyer with details of support available for Members and the wider Council.	The information was circulated to Members.
		Any further questions be sent over to the Director of Adult Social Care and Safeguarding.	The information was circulated to Members.

Meeting Date	Item	Recommendations / Actions	Progress
	CQC Assessment Update - Verbal		
13 March 2025	<p>CQC Inspection – Verbal</p> <p>The Annual Complaints and Commendation Report</p> <p>Autism and Neurodiversity Delivery Plan</p> <p>Delivering the City’s Supported Living and Extra Care Strategy</p>	<p>To continue to be a reoccurring item.</p> <p>For an anonymised addendum to be presented in the next report.</p> <p>Dementia be added to the work programme.</p> <p>scrutiny to follow matters of budget and any inconsistencies arising</p> <p>Concerns were noted on slippage.</p> <p>Numbers of providers to be monitored.</p> <p>Progress would be followed with a planned return to scrutiny</p>	
24 April 2025	<p><i>Suggested items:</i></p> <p><i>CQC Inspection – Verbal/written</i></p> <p><i>Transitions from Childrens to Adults</i></p> <p><i>Prevention Update</i></p> <p>External Workforce Strategy</p>		

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.	6 May 2025
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.	Rolling item.
Self-neglect	The Commission requested that an item on Self-Neglect be added to the work programme.	

Loneliness	The Commission requested that an item on Loneliness be added to the work programme to discuss.	
Dementia	The Commission requested that an item on Dementia be added to the work programme to discuss.	
Young Carers		
Supported Housing		