



Leicester  
City Council

Minutes of the Meeting of the  
ADULT SOCIAL CARE SCRUTINY COMMISSION

Held: THURSDAY, 26 JUNE 2025 at 5:30 pm

P R E S E N T:

Councillor March – Chair  
Councillor Cole – Vice Chair

Councillor Batool  
Councillor Orton  
Councillor Sahu

Councillor Kaur Saini  
Councillor Russell

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**129. WELCOME AND APOLOGIES FOR ABSENCE**

It was noted that apologies for absence were received from Councillor Joannou and Kate Galoppi.

**130. DECLARATIONS OF INTERESTS**

The Chair asked members to declare any interests in proceedings for which there were none.

**131. MINUTES OF THE PREVIOUS MEETING**

The Chair highlighted that the minutes from the meeting held on Tuesday 6<sup>th</sup> May 2025 were included in the agenda pack and asked Members to confirm whether they were an accurate record.

**AGREED:**

It was agreed that the minutes for the meeting on Tuesday 6<sup>th</sup> May 2025 were a correct record.

**132. MEMBERSHIP OF THE COMMISSION 2025/26**

The Membership of the Commission was confirmed as follows:

Councillor Melissa March (Chair)  
Councillor George Cole (Vice Chair)

Councillor Misbah Batool  
Councillor Manjit Kaur Saini  
Councillor Sarah Russell  
Councillor Jenny Joannou  
Councillor Hazel Orton  
Councillor Liz Sahu

### **133. DATES OF MEETINGS FOR THE COMMISSION 2025/26**

The dates of the meetings for the Commission were confirmed as follows:

26th June 2025  
28th August 2025  
13th November 2025  
15th January 2026  
12th March 2026  
23rd April 2026

### **134. TERMS OF REFERENCE**

The Commission noted the Scrutiny Terms of Reference.

### **135. CHAIRS ANNOUNCEMENTS**

The Chair advised that she did not have any announcements to make.

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

It was noted that none had been received.

### **137. PETITIONS**

It was noted that none had been received.

### **138. CQC VERBAL UPDATE**

The Strategic Director for Social Care and Education provided a verbal update on the CQC position.

It was noted that the initial draft of the report had been received six weeks ago for the purpose of accuracy checking. A detailed response, including comments

had been submitted. The draft report was over 50 pages in length. An accuracy check was completed and returned, but no further correspondence had been received at the time of reporting. No publication date or proposed amendments had been shared. The Commission would be updated as soon as further information became available.

In discussions with Members, it was noted that:

Members discussed the issue of factual accuracy within the report, querying whether it reflected inaccuracies, misunderstandings or disputed interpretations. It was confirmed that draft reports would be circulated and if any inaccuracies were identified a formal response could be submitted for review by CQC, which had happened. The response identified inaccuracies and omissions. Members expressed frustration that the report remained under embargo and that the timescale provided by the inspecting body was not helpful.

Clarification was given that the inspection process operated differently from others, with no clear timeframe or urgency for publication.

The potential involvement of a quality assurance team was raised. However, it was explained that no such team was in place. Instead, a moderation panel which comprised of other inspectors would carry out this role. Members queried whether the delay had implications for the organisation. It was noted that while all reports contain areas for improvement many of which were already recognised internally the absence of a published report limited the ability to move forward with clarity.

#### **AGREED:**

The report would come to a future meeting once received.

### **139. DEMENTIA SUPPORT ENGAGEMENT**

The Head of Strategic Commissioning for Social Care and Education gave the commission an overview of the commissioned service for Dementia Support.

Key points to note were as follows:

- The reports set out the process of formal engagement which would be published on the Citizen Space consultation website.
- The purpose of the engagement was to understand the support and services required for those affected by Dementia. The aim being to gain an understanding from a broad mix of people.
- The Dementia Support Service was currently jointly commissioned, up until March 2026, with Leicester City Council, Leicestershire County Council and the ICB. An extension could give more time for a full review and proposals.
- The formal engagement work was being carried out by Leicester City Council, and it was hoped that there could be co-production with those

living with Dementia.

The Chair thanked the officer for the overview and welcomed questions and comments from the commission. Key points to note were as follows:

- There was an emphasis on early support of carers, this was delivered through the Dementia Support Service provider Age UK.
- Benchmarking with other local authorities had taken place to maintain the best model for Leicester. Commission members noted that Leeds City Council demonstrated success in gaining the voices of the people and it was agreed that this would be a good comparative source.
- Leicester had a strong record of co-production, and the wider engagement meant that more lived experience could be taken into account across the differing communities.
- The model ensured that contract figures could be reviewed separately, meaning Dementia and Carer contract numbers would not be accounted for twice.
- The contract totalled £464k annually, Leicester City Council contributing £116k. Figures could be shared with the commission showing the number of carers with specific needs, such as those caring for people with Dementia, carers with SEND or younger carers.
- Communications were being improved to help people to navigate and access support online. The commission suggested exploring how existing organisations, such as the over 50's support group The Silver Foxes, could signpost carers with Dementia to the service.
- There was a continued challenge in supporting carers with Dementia. Focus groups and communication assisted in this area so that reasonable adjustments could be made.
- Results of the engagement would be publicly available on Citizen Space and would be shared with the commission.
- The work was underpinned by the Equality Impact Assessment, and this could be shared with the scrutiny commission.
- Best Interest assessments could capture valuable information and learnings on lived experience could come back to the scrutiny commission.
- It was noted that those defined as 'Carers' did not always elect to use this title, and this could make engagement problematic.
- The commission suggested a broader scope to include other support groups where people might go on to develop Dementia, such as Parkinsons support groups.
- The commission raised the issue of efficacy of services and questioned if those requiring Dementia support might present as carers and not be counted towards figures for Dementia carer's assistance.

## **RECOMMENDATIONS:**

- Dementia Support Engagement - To explore the community work in Manchester which captures the voices of local people.
- Dementia Support Engagement - Further consideration to take place on engaging with existing groups such as the Silver Foxes & Parkinsons

support groups.

- To consider similar strategies as Leeds and Manchester to gain the voice of the people.

#### **AGREED:**

- To provide figures on numbers of people being supported with Dementia and the numbers of carers with their own support needs.
- Results of the engagement would be shared with the commission.
- To share information on the Equality Impact Assessment with the scrutiny commission.
- To bring case studies on lived experience.

### **140. SOCIAL CARE AND EDUCATION QUARTERLY DASHBOARD**

The Strategic Director for Social Care and Education updated the Commission on the new Social Care and Education quarterly performance dashboard designed to support scrutiny by offering improved access to data and enabling more effective oversight and questioning. It was noted that:

- The dashboard was initially created in Excel format and included a range of financial, workforce and performance metrics across Children's, Adults and Education services.
- Although the data had not yet been fully verified, it provided a working example of what the dashboard would contain and how it might be used.
- Plans were in place to eventually host the dashboard on a web page to improve navigation and usability over time.
- The dashboard aimed to show direction of travel and included comparisons with national data and statistical neighbour groups to help contextualise performance.
- It was intended to be updated on a quarterly basis, with some time lag in data availability expected.
- Key content would include financial information, budget variances, and a series of selectable graphs to help interpret trends.
- The dashboard would also provide context for local data, comparative analysis, and actions being taken in response to trends.
- Further detail would be included on external providers, such as CQC ratings, usage and cost data relating to the most frequently used and most expensive providers.
- Information on volumes across different care settings would also be included, covering both adult domiciliary care and children's services, including those leaving care.
- A new set of statistical neighbour comparators had been introduced, including areas such as Birmingham, Coventry, Luton, Manchester, Nottingham and Wolverhampton, although it was noted that not all were considered directly comparable.

In discussions with Members, the following was noted:

- Members welcomed the transparency of the new dashboard and the opportunity it presented for improved scrutiny and questioning.
- Members noted the importance of having governance arrangements in place to ensure that patterns such as rising placement costs or increased use of unregulated settings were escalated and addressed.
- It was confirmed that the dashboard was intended to support strategic-level oversight, with operational data and early intervention continuing to be handled by service teams.
- The dashboard aimed to democratise access to information, allowing elected members and scrutiny bodies to examine trends independently and raise questions.
- Members asked whether a model similar to performance oversight panels used elsewhere, such as in Cambridgeshire, could be introduced locally to investigate red flag areas in more depth. It was explained that several forums were already in place, including departmental management meetings, lead member briefings and the Education, Health and Care Board, where performance data was scrutinised and turned into actions.
- It was acknowledged that historically, a wide range of performance information had not been made available on a regular basis. The dashboard aimed to change this and encourage broader challenge from different perspectives.
- Concerns were raised that the focus should not only be on monitoring but also on acting to improve long-term outcomes. Members asked whether outcomes, rather than outputs, would be measured and tracked.
- It was confirmed that outcome measures would be included where possible, and that the dashboard could evolve over time based on what data was available and what members wanted to see.
- Members highlighted the importance of ensuring the data supported a “triangulated” approach to understanding performance, and not be seen as a standalone source of truth.
- The limitations of comparative data were discussed, with members noting that some statistical neighbours were not truly comparable to the local context.
- There was support for the use of a live, accessible dashboard, but members raised questions about how to encourage regular engagement with the data beyond formal meetings.
- It was noted that there was a risk of drawing incorrect conclusions by focusing too narrowly on data without the broader context.
- A live example was shared of a past inspection in which unfamiliar data requests had revealed issues previously unconsidered, reinforcing the importance of diverse data perspectives.
- It was emphasised that the dashboard should be used to prompt questions and generate discussion, rather than as a tool to provide definitive answers.
- Questions were raised about agency staffing levels and whether there were plans to reduce reliance on agency staff in order to promote cost

savings and improve continuity of care. Agency use was minimised wherever possible, though some reliance remained in hard to recruit areas such as Level 3 social work roles. Across adult social care and safeguarding, fewer than 20 agency staff were in post at any one time within a workforce of around 470.

- Members welcomed the inclusion of workforce data but requested further breakdowns, such as distinctions between children's and adults' staffing, and between domiciliary and residential care provider data.
- It was explained that children's agency staffing had been prioritised due to higher levels of use, while it had not been a significant issue in adult services. However, members' suggestions could be explored further through the Commission's annual workforce item.
- A request was made for clearer time series data to avoid over-fixation on small changes. It was noted that the dashboard did contain time series graphs to highlight more statistically significant trends.
- Members supported the dashboard as a valuable starting point for improving scrutiny and emphasised the need to develop habits around year-on-year comparisons to better understand change over time.

#### **AGREED:**

1. That the report be noted and that members welcomed the idea of the dashboard.
2. The Virtual schools report to be circulated.
3. Rational between residential and domiciliary care to be added to the work programme.
4. Agency rates to be added to the next workforce item.
5. Diverse by design to be added to the work programme.

#### **141. EARLY ACTION UPDATE - LEADING BETTER LIVES**

The Head of Strategic Commissioning for Social Care and Education presented a briefing on the Leading Better Lives work to date. Key points to note were as follows:

- The 'Think Local Act Personal' approach had been adopted in terms of vision for the city and every person with care and support needs. There was an emphasis on doing what is important for people, including unpaid carers.
- Work was centred around co-production.
- When compared to other Local Authorities, Leicester did tend to support more people and this brought financial challenges.
- Early intervention was key.
- Work had commenced with the Ernst and Young Consultancy in the previous year. The aim was to create an ethos of one council one culture, early action and a strength based community.
- A significant exercise, including the Voluntary, Community and Social Enterprise (VCSE), had seen mass engagement across the city,
- The VCSE were invited to host focus groups and talk with people.

- An online survey gathered responses around; what was good, what should change and future aspirations. A rich data pitch was collected, capturing the voices of people and the communities. Lived experience was shared.
- There was an even spread of people across the workgroups, a third of people were from the Council, Police and Crimes Commission Office and NHS, a third from the people and communities and a third from the VCSE.
- The data was examined, and four prevalent themes were identified; loneliness, not feeling listened to, information signposting, use of online technology. Other themes included GP equipment and anti-social behaviour and this feedback was passed to the corresponding organisations.
- Co-produced action plans resulted in multidisciplinary meetings, drop-in sessions within local communities, information and guidance surrounding online support.
- The projects consisted of:
  - Project 1 - Increase social inclusion – Public Health were leading on this, it was noted that they had an excellent infrastructure. This entailed door knocking and checking in with others, providing local tailored support. Pilot areas were being identified.
  - Project 2 – The Head of Strategic Commissioning for Social Care and Education was leading with a task and finish group. The mission being to bring a city centre showcase event together on the 13<sup>th</sup> September, highlighting the significant work taking place. Invites were going out to the VCSE, NHS and other partners offering free pitches to promote their work.
  - Project 3 – Consisted of multidisciplinary drop ins, working closely with the Housing and Enablement teams. This entailed front door work before people needed Adult Social Care involvement. Assistance offered included housing, income maximisation, debt recovery support via local drop ins.
  - Project 4 – Collaborating with community leaders, it was known that there was a lack of people wishing to visit the city centre. Engagement and collaboration could take place via local events with community leaders, showcasing local services.
- The next steps were to work hard on the action plans and hold an all encompassing event on 20<sup>th</sup> October to review the work and consider how to take things further corporately.

The chair thanked The Head of Strategic Commissioning for Social Care and Education for the presentation and welcomed questions and comments from the commission. Key points to note were as follows:

- The engagement strategy was vital, and the aim was to make things as welcoming and attractive as possible. A corporate communications team was on board, and media coverage such as radio would be utilised. Street performers would be present and it was hoped that this would draw people into the city centre.
- Regarding evaluation of success and value, tick box questionnaires provided information, and data analysis of the dashboard was ongoing. The key revolved around interactions with people to ascertain what was



working for them.

- A grass routes wide approach within communities would aid sustainability for a long-term vision. It was recognised that wider work would be necessary in some more challenging areas where community leadership was lacking. The recruitment of the new Head of Communities would support in this area. Local events held in the area could help to meet cultural needs. A small budget was available for local activities such as the event held in the St Matthews area. Learnings would be taken from this event as to how to approach similar activities.
- It would be important to keep a flexible model in mind to promote learning and adaptability.
- Community leaders could be identified through the festival of engagement.
- There was a good history coproduction, for example with the Make it Real group and the work done with carers. There were different levels of work with people.
- Members of the commission praised the co-productive work and were keen for follow ups on the data passed to the NHS in relation to Person Centred Care Planning.
- It was suggested that links could be established with mental health cafes to combat isolation and loneliness. It was noted that The Director for Adult Social Care and Commissioning, being a member of the commission, chairs a task group connected to the public health arena.
- The commission highlighted potential misconceptions around the online presence of older groups. It was felt that whilst some older people may not use the internet, many did, so this medium should not be ignored.
- Breakdowns for work in term of city demographics were requested by the commission, for example with newer city communities such as the Turkish community.
- Local event promotion would be communicated as part of the ongoing dialogue with the communities and might also come through ward councillors. Matters remained open.
- The commission reflected how community centres can help to combat loneliness, and The Strategic Director Social Care and Education noted that the current consultation was aimed at establishing how best to use the community centres to meet the needs of the people.

## **RECOMENDATIONS:**

- To bear in mind essential costs incurred within the voluntary sector.
- Leading Better Lives - To hold St Matthew's as an example of how to create impactful community events.
- Leading Better Lives – To receive and explore feedback from the community on the project impact.
- It was suggested that links could be established mental health cafes to combat isolation and loneliness.
- To receive follow ups on the data passed to the NHS in relation to Person Centred Care Planning.

## **AGREED:**

- To provide breakdown figures on demographics engagement.

#### **142. WORK PROGRAMME**

The Chair reminded to Members that should there be any items they wish to be considered for the Work Programme to share these with his/her and the senior governance officer.

#### **143. ANY OTHER URGENT BUSINESS**

There being no further business, the meeting closed at 19:27