



Leicester  
City Council

Minutes of the Meeting of the  
ADULT SOCIAL CARE SCRUTINY COMMISSION

Held: THURSDAY, 13 NOVEMBER 2025 at 5:30 pm

P R E S E N T:

Councillor March - Chair

Councillor Batool  
Councillor Kaur Saini  
Councillor Russell

Councillor Joannou  
Councillor Dave (Substitute for  
Councillor Orton)  
Councillor Kitterick (Substitute  
for Councillor Sahu)

Also present:  
Councillor Moore  
Councillor Karavadra  
Councillor Chauhan  
Councillor Rae Bhatia

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**144. WELCOME AND APOLOGIES FOR ABSENCE**

It was noted that apologies for absence were received from Cllr Orton with Cllr Dave as substitute and Cllr Sahu with Cllr Kitterick as substitute.

**145. DECLARATIONS OF INTERESTS**

Cllr March announced a potential career interest in the CQC item.  
Cllr Russell announced that she had been the Executive Lead for the service area when the CQC inspection took place

**146. MINUTES OF THE PREVIOUS MEETING**

The Chair highlighted that the minutes from the meeting held on 26<sup>th</sup> June 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 26<sup>th</sup> June 2025 were a correct record.

#### **147. CHAIRS ANNOUNCEMENTS**

The Chair noted that all Council Members had been invited to the meeting for consideration of the CQC item and welcomed additional members.

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

It was noted that none had been received.

#### **149. PETITIONS**

It was noted that none had been received.

#### **150. PROPOSAL TO IMPLEMENT THE CARE ARRANGEMENT FEE IN ADULT SOCIAL CARE**

The Director for Social Care and Commissioning submitted a report and gave a presentation on the powers within the Care Act 2014 which allowed the council to implement the proposed charging approach. Research had been carried out to understand practice across the country. A targeted 6 week consultation took place between 11<sup>th</sup> August and 26<sup>th</sup> September. As a result of the feedback the proposal was revised to introduce a single one off fee payable to the local authority, with all other associated care costs covered by the council. It was noted that:

The proposed charge was £165.47 per arrangement. This was considered favourable compared to the 24 local authorities examined. The fee reflected the administrative cost incurred and the council emphasised that it was not a profit making organisation.

Implementation was planned in a way that minimised the impact on residents and responded to consultation feedback. A total of 45% of respondents felt the revised proposal was manageable. Scheduled payment options, and support to help people make an informed choice would be offered .

In discussion with Members, the following was noted:

- Clarification was sought on what performance indicators would be used to track the impact of the scheme and ensure quality. Officers referred to the quality information already included in the report and explained that relevant data on the service and fee would be collected.
- Concerns were raised that 32% of people were already known to be affected and that no clear indicators had been set to measure the impact. Officers stated that uptake of the arrangement was optional and

could be declined if residents believed it would negatively affect them.

- The discussion reflected wider concerns about the shift in responsibility towards residents managing their own care. Members highlighted the potential risks to individuals and the need to understand the real world impact of this change on people's lives and financial stability.
- Questions were raised about the financial implications for those with savings above the £23k threshold. Members noted that the proposed £165.47 fee would be a one off fee, not an annual fee,
- Further queries explored the administrative costs and whether the fee was being introduced to raise income. Officers confirmed that around 234 people currently received this type of arrangement, with an estimated 135 expected to take up the option each year. The administrative cost remained £165.47 per arrangement. Expected income was around £19k in year 1 rising to around £113k in year 5. Officers reiterated that the council was legally required to break even and could not generate profit from the fee.
- Members questioned why the department needed additional income when it had underspent in recent years. It was explained that the wider local authority continued to face financial challenges and that underspends could not be relied upon in future.
- The discussion broadened to consider the wider position of self-funders. Members highlighted that the £23k savings threshold had not increased for many years and no longer reflected current costs of living. Concerns were raised about growing financial pressure on residents, especially where hidden costs were involved.
- Examples were shared of day to day expenses faced by people receiving care, including paying for alarms or purchasing items privately when standard provision did not meet their needs. Members noted that such costs often accumulated unnoticed until people were directly affected.
- Officers confirmed that the proposed fee would not apply if a person's savings dropped below the £23k threshold. They emphasised the intention to provide clear advice and support and highlighted the importance of early help.
- Members proposed adding a deeper exploration of self-funders to the scrutiny work programme. They felt it would be valuable to understand how many self-funders lived in the city and what their experiences were compared to other areas. Reference was made to checking previous minutes where similar issues had been raised.
- The importance of involving voluntary and community sector partners in any future work was noted to ensure a fuller understanding of resident experiences.
- Members also wished to hear from larger care providers to better understand business models and pressures in the sector. Concerns were raised about the small consultation response, the potential for repeated fees as care needs changed and the risk of residents falling into arrears. It was stressed that any fee collection process must avoid causing additional financial strain.
- Officers confirmed that small changes would not trigger repeat fees, and

this detail will be agreed ahead of implementation. Care packages could increase as needs changed and support would be adjusted accordingly. The concerns raised about debt and unintended consequences were acknowledged in full.

**AGREED:**

1. The contents of the report were noted.
2. Self-funders would be added to the work programme.
3. Providers of care services would be invited to present their experience of working with self-funders and the local authority.

## **151. CQC REPORT**

The Strategic Director for Social Care & Education submitted a report and gave a presentation to the Commission on the outcome of the Care Quality Commission assessment of Adult Social Care, and the action plan developed as a result.

The Assistant City Mayor for Adult Social Care Dawood introduced the report noting the following:

- The Local Authority rating had been 'Requires improvement'.
- The report did not set out any recommendations. Since the inspection, substantial progress had been made, and an action plan had been implemented.
- Leicester's scoring was only marginally below the threshold for a rating of 'Good'.
- Scrutiny input played a vital role. Recommendations and engagement with the Commission were welcomed.

The Strategic Director for Social Care & Education presented the slides, key points to note were as follows:

- The inspection commenced over a year ago, with offsite work followed by the onsite inspection. Results had been published in July 2025.
- This had marked the first round of CQC assessments with the next expected to take place in 3 years' time.
- The inspection had taken individual comments into account.
- Ratings were scored in terms of percentages.
- Leicester had scored 56% which was higher than some neighbouring Local Authorities. Derbyshire County Council scored 67% and their strengths might be a source of learning.
- Other Council services were inspected separately, including the Integrated Crisis Response, Shared Lives and the Reablement Provider Services. All were rated Good.
- Some assessment criteria in the CQC Assessment had been rated

‘Good’ including Partnerships and Communities.

- Priority areas included improving carer experiences, accessible guidance and support, waiting times, governance and safeguarding processes, care market and quality. Targets had been created, risks and opportunities were identified in the action plan.

In response to member questions and comments, the following was noted:

- A blended approach to improvement was considered essential, combining the findings of the report with existing data and intelligence.
- Annual conversations via the Association of Directors of Adult Social Services and the peer reviews would continue to shape intelligence.
- There was a high level of confidence in delivering improvements and in setting future targets.
- Regular updates would be brought back to scrutiny.
- The Council's own self-assessment had already highlighted issues with waiting times.
- System related issues had contributed to some data inaccuracies.
- Significant work was going into improving performance reporting.
- The Council had raised some concerns regarding report accuracy, and this had been further raised (by the Regional Care and Health Improvement Advisor) with central government, but the focus was now on moving forward.
- The long-term strategy remained rooted in grassroots engagement, the report did not identify the groups that contributed feedback, which made following up specific comments more challenging.
- The Leading Better Lives Programme had been referenced in the report for good practice, this was fully co-produced.
- Multi-agency safeguarding procedures had been recognised but more detailed team-level guidance had been suggested as a gap; work was ongoing in this area and a new post of Safeguarding Adult Practice lead was being recruited to.
- It was noted that the majority of people preferred to contact the service via telephone, and other avenues were being explored to ensure accessibility. The Commission welcomed further work surrounding digital exclusion.
- Further Scrutiny work had been scheduled.
- The Commission recommended reviewing previous forecasts and outcomes when the next budget item came to the Scrutiny meeting.
- Staffing issues were acknowledged, work on career progression was ongoing and staff morale remained high. Members raised some concerns regarding staff morale and were asked to provide more information to Directors so this could be looked in to and addressed.
- The Commission suggested an overall approach of examining at a granular level on a theme-by-theme basis.
- The Commission recognised success in reducing waiting times, but noted ongoing inequalities linked to generational factors and language barriers. Work with partners across Care and Health aimed to target these issues through improved data.

- Further work was requested by the Commission to understand the gap in support for working age carers and the isolation experienced by those caring. An examination of respite provision for young carers was requested.
- Transition work preparing young people into adulthood could be explored within the SEN Inspection and scrutinised through the CYPE Scrutiny Commission.
- The Commission welcomed work with Partners in Care and Health to improve on Scrutiny.
- A lack of staff awareness of available services was noted. While a range of resources existed, additional training requirements were acknowledged.
- RECOMMENDATIONS:
  - For further scrutiny of carers' experience and with additional measurements in relation to working age carers, respite for young carers and experiences of isolation.
  - For cross departmental work with Public Health on digital exclusion.
  - For further consideration of Deprivation Of Liberty Safeguards.
  - For more work on developing the service for those with learning disabilities.
  - For budgetary reporting to Scrutiny to include previous forecasting and outturn information.
  - To extend Scrutiny work with Partners in Care and Health.
  - For an additional metric to be added under governance.
  - For Scrutiny to be conducted at a granular level, looking at each theme individually.
  - When each theme is brought back to scrutiny, for greater granularity over the measures being considered prior to November 2026.

AGREED:

1. The contents of the report were noted.

*Councillor Kitterick left during the consideration of this item.*

## **152. WORK PROGRAMME**

The Chair reminded Members that should there be any items they wish to be considered for the Work Programme to share these with her and the Senior Governance Officer.

## **153. ANY OTHER URGENT BUSINESS**

There being no further business, the meeting closed at 19.33

