

**ADULT SOCIAL CARE CABINET COMMITTEE**

**Thursday, 16th January, 2020**

**10.15 am**

**Council Chamber, Sessions House, County Hall,  
Maidstone**





## AGENDA

### ADULT SOCIAL CARE CABINET COMMITTEE

**Thursday, 16 January 2020 at 10:15 am**  
**Council Chamber, Sessions House, County Hall,**  
**Maidstone**

Ask for: **Emma West**  
Telephone: **03000 412421**

*Tea/Coffee will be available 15 minutes before the start of the meeting*

#### **Membership (15)**

Conservative (11): Mrs P T Cole (Chairman), Ms D Marsh (Vice-Chairman),  
Mr M J Angell, Mr M A C Balfour, Mrs P M Beresford,  
Mrs S Chandler, Miss E Dawson, Ms S Hamilton, Mrs L Hurst,  
Mr M J Northey and Vacancy

Liberal Democrat (2): Mr S J G Koowaree and Ida Linfield

Labour (1) Mr J Burden

Independents (1) Mr J Clinch

#### **Webcasting Notice**

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By entering into this room, you are consenting to being filmed. If you do not wish to have your image captured please let the Clerk know immediately

#### **UNRESTRICTED ITEMS**

*(During these items the meeting is likely to be open to the public)*

- 1 Introduction/Webcasting Announcement
- 2 Apologies and Substitutes
- 3 Declarations of Interest by Members in items on the agenda
- 4 Minutes of the meeting held on 27 November 2019 (Pages 1 - 8)
- 5 Adult Social Care Cabinet Committee Meeting Dates for 2020/21 - For Information Only (Pages 9 - 10)
- 6 Verbal Updates by Cabinet Member and Corporate Director (Pages 11 - 12)

- 7 Draft Capital Programme 2020/2023 and Revenue Budget 2020/2021 (Pages 13 - 22)
- 8 Outcome of the formal consultation on Minnis Community Hub (Pages 23 - 32)
- 9 Community Based Wellbeing Services (Grants to Contracts) - Procurement Programme and Grant Extension Approvals (Pages 33 - 58)
- 10 Work Programme 2020/21 (Pages 59 - 62)

### **EXEMPT ITEMS**

*(At the time of preparing the agenda there were no exempt items. During any such items which may arise the meeting is likely NOT to be open to the public)*

Benjamin Watts  
General Counsel  
03000 416814

**Wednesday, 8 January 2020**

*Please note that any background documents referred to in the accompanying papers may be inspected by arrangement with the officer responsible for preparing the relevant report.*

## **KENT COUNTY COUNCIL**

### **ADULT SOCIAL CARE CABINET COMMITTEE**

MINUTES of a meeting of the Adult Social Care Cabinet Committee held at Council Chamber, Sessions House, County Hall, Maidstone on Wednesday, 27th November, 2019.

PRESENT: Mrs P T Cole (Chairman), Mr M J Angell, Mr M A C Balfour, Mrs P M Beresford, Mr J Burden, Miss E Dawson, Ms S Hamilton, Mrs L Hurst, Mr S J G Koowaree, Ida Linfield and Mr M J Northey

ALSO PRESENT: Clair Bell

IN ATTENDANCE: Cathy Bellman (Local Care Programme Lead), Matt Chatfield (Operational Analytics and Systems Manager), Damien Ellis (Head of Service Provision), David Firth (Policy Adviser), Clare Maynard (Head of Commissioning Portfolio - Outcome 2 and 3), Shannon Ryan (Business Planning Officer), Richard Smith (Interim Portfolio Manager), Penny Southern (Corporate Director, Adult Social Care and Health), Anne Tidmarsh (Director of Adult Social Care and Health Partnerships) and Emma West (Democratic Services Officer)

#### **UNRESTRICTED ITEMS**

**182. Apologies and Substitutes**

*(Item. 2)*

Apologies for absence had been received from Ms Marsh and Mr Clinch.

**183. Declarations of Interest by Members in items on the agenda**

*(Item. 3)*

No declarations of interest had been received.

**184. Minutes of the meeting held on 27 September 2019**

*(Item. 4)*

(1) Mr Koowaree referred to minute 171 (2) and confirmed that his Great Grandson was in care.

(2) RESOLVED that the minutes of the meeting of the Adult Social Care Cabinet Committee held on 27 September 2019 are correctly recorded and that they be signed by the Chairman, subject to minute 171 (2) being amended.

**185. Verbal Updates by Cabinet Member and Corporate Director**

*(Item. 5)*

(1) Clair Bell (Cabinet Member for Adult Social Care and Public Health) gave a verbal update on the following issues:

**a) Recent Visits and Events**

- 02 October 2019 – Mrs Bell visited Chamberlain Manor Extra Care Accommodation, Ashford
- 08 October 2019 – Mrs Bell visited Minnis Community Hub, Birchington
- 11 October 2019 – Mrs Bell attended and spoke at the Kent Dementia Action Alliance Awards Ceremony
- 29 October 2019 – Mrs Bell visited Fairlawn Children’s Short Break unit, Ashford
- 29 October 2019 – Mrs Bell visited The Nest, Ashford
- 4 November 2019 – Mrs Bell attended the Local Government Association’s Digital Showcase Conference, London
- 7 November 2019 – Mrs Bell visited Gravesham Place Integrated Care Centre, Gravesend
- 14 November 2019 – Members of the Adult Social Care Committee visited the new Harmonia Dementia Village, Dover
- 18 November 2019 – Mrs Bell visited Southfields Adult Short Break Short Break unit, Ashford
- 18 November 2019 – Mrs Bell visited Involve Kent (Community Navigation & Carers), Ashford
- 19-21 November 2019 – Mrs Bell attended the National Children’s and Adults Conference, Bournemouth

**b) Kent’s new Domiciliary-based Neighbourhood Care team**

Mrs Bell referred to the Dutch community, nursing and care model ‘Buurtzorg’ which had recently been trialled in Kent and said that Kent’s Design & Learning Centre had led the project, whilst working in partnership with the Kent Community Health Foundation Trust and Community Health developing Community Nursing teams. From 2<sup>nd</sup> December 2019, a Domiciliary-based Neighbourhood Care team would be formed in Ashford, working closely with the Primary Care Network. The Domiciliary-based Neighbourhood Care team would consist of occupational therapists, enablement workers and care workers, all working flexibly and connecting with communities in Kent.

**c) Update on the past consultations and developments in relation to the Minnis Community Hub, Birchington**

Mrs Bell confirmed that the consultation which had been undertaken between September 2019 and November 2019 to seek the views of Community Hub users in relation to the future of Minnis Community Hub had ended. She added that a full report on the proposals would be presented to the Adult Social Care Cabinet Committee on 16 January 2020.

(2) Penny Southern (Corporate Director of Adult Social Care and Health) gave a verbal update on the following issues:

**a) Proposed changes to Top Tier posts in Adult Social Care and Health Directorate**

Mrs Southern confirmed that a consultation had been undertaken in relation to the proposed changes to the senior structure of Adult Social Care and Health. She added that further information would be

shared with the Adult Social Care Cabinet Committee at the meeting on 16 January 2020.

**b) Kent Registered Manager Conference 2019**

Mrs Southern attended the Kent Registered Manager Conference on 30<sup>th</sup> October 2019, led by Kent County Council and the Design & Learning Centre. The conference provided updates to all registered managers, deputies, owners, nurses and senior staff in relation to Kent's care sector. The CCG's also attended the conference to receive support and training to assist in improving the quality of care provided to communities in Kent. She added that Members of the Committee were welcome to attend future Kent Registered Manager Conferences.

**c) Porchlight 45<sup>th</sup> Anniversary Conference – World Homeless and World Mental Health Day**

Mrs Southern attended Porchlight's 45<sup>th</sup> anniversary conference on 10<sup>th</sup> October 2019 which was also World Homelessness Day and World Mental Health Day. Mrs Southern emphasised the importance of attending and supporting such crucial events and said that the event had been well attended.

**d) Dementia Friendly Communities Awards Ceremony 2019**

Mrs Southern had recently attended the Dementia Friendly Communities Awards Ceremony 2019 which showcased the achievements of individuals, groups and organisations across the UK who had led the way on creating dementia-friendly communities and improving the lives of everybody affected by dementia.

**e) Kent's new d/Deaf and deafblind communication service launch**

Mrs Southern announced that a new dedicated interpretation and communication service for d/Deaf, deafblind or hard of hearing Kent residents would launch on 3<sup>rd</sup> December and would take place in the Lecture Theatre, Sessions House.

(3) In response to a question, Mrs Southern provided more information in relation to the services that were provided by Minnis Community Hub, Birchington, and briefly outlined the proposals that would be set out within the report to be submitted to the Adult Social Care Cabinet Committee on 16 January 2020.

(4) The Chairman also attended the Dementia Friendly Communities Awards Ceremony 2019 and congratulated Jackie West (Kent Community Service Warden) on receiving an award.

(5) RESOLVED that the verbal updates be noted.

**186. Strategic Delivery Plan Monitoring: Quarter 2 2019/20**  
(Item. 6)

*Mr Firth (Policy Advisor) and Ms Ryan (Business Planning Officer) were in attendance for this item*

- (1) Mr Firth introduced the report which provided an overview of the Council's Strategic Delivery Plan monitoring arrangements and the analysis and emerging themes from Quarter 2 2019/20 Strategic Outcome 3 activity submissions.

Officers then responded to comments and questions from Members, including the following: -

- a) Mr Firth referred to activity points 52 (Review of Voluntary and Community Sector (VCS) Grants across the Council), 56 (Kent & Medway Neurodevelopmental (ND) Health Service commissioning) and 59 (Recommissioning of Carers Short Breaks) within the appendix and explained the reasons behind the potential delay in delivering each activity.
- b) Mrs Southern said that whilst Kent County Council offered short breaks for carers, hospices for respite care were referred and funded through the NHS, not Kent County Council.
- c) Mrs Southern explained that the Strategic Delivery Plan Monitoring report was an internal document used to monitor strategic direction of travel, emerging themes within the Adult Social Care and Health directorate and the ambitions that had been set out.
- d) Ms Maynard emphasised the importance of working collaboratively with providers and the VCS.
- e) Mrs Bell (Cabinet Member for Adult Social Care and Public Health) reassured Members of the Committee that they could speak to her or Mrs Southern if they had specific concerns relating to their own divisions.

- (2) RESOLVED that the report be noted.

#### **187. Adult Social Care Performance Dashboard** (Item. 7)

*Mr Chatfield (Operational Analytics and Systems Manager) was in attendance for this item.*

- (1) Mrs Southern introduced and welcomed Mr Chatfield to his first meeting of the Committee.
- (2) Mr Chatfield introduced the report which set out progress against targets set for key performance and activity indicators for September 2019 for Adult Social Care.

Officers then responded to comments and questions from Members, including the following: -

- a) Mr Chatfield stated that some of the indicators within the performance dashboard were national indicators, also referred to as Adult Social Care Outcome Framework (ASCOF) indicators. He confirmed that he could provide further information to Committee Members outside of the meeting



in relation to the current ASCOF indicators and comparisons in relation to the position of other Councils in the country.

- b) Mrs Southern referred to the 'Delayed Transfers of Care – Total Delays per 100,000 Population' indicator within the performance scorecard and explained that whilst the indicator was rated red, it was a whole-system response, and the 'Delayed Transfers of Care – Social Care Responsibility' indicator was stable. She added that whilst risks were significant when the Delayed Transfers of Care system as a whole was rated red, the risks would be responded to accordingly with health partners.
- c) Ms Tidmarsh referred to the 'Admissions to permanent residential or nursing care for people aged 65+' indicator within the performance scorecard and explained that the number of admissions fluctuated randomly throughout the year.
- d) Mr Chatfield referred to indicators 8 (Number of people aged 65+ in permanent residential care), 9 (Number of people aged 65+ in permanent nursing care) and 10 (Number of people receiving homecare) and said that the figures reflected the positive work that had been undertaken in ensuring that individuals remained independent and in their own homes for longer.
- e) Mrs Southern referred to the ongoing pattern of changing need in Kent and emphasised the importance of investing in analytics and producing demand forecasts to project and shape the market.
- f) Mr Chatfield confirmed that the figures outlined within the performance scorecard only included statistics which related to clients who received a service directly from Kent County Council. Mrs Southern referred to privately funded services within the market and stated that conversations in relation to privately funded services took place between Kent County Council and the CCQ regularly in a bid to better understand where the privately funded services were located. Ms Maynard referred to the significant impact that privately funded services had on the market and emphasised the importance of working closely with providers to shape needs for the future.
- g) Mrs Southern said that she had attended several workshops in November 2019 in relation to shaping and understanding the future of Adult Social Care and Health. She added that the documents that were presented and referred to within each of the workshops were available online.
- h) Mrs Bell referred to the National Children's and Adults Conference which she had attended in November 2019 and referred to the positive engagement work that had been undertaken with political leaders at the conference.
- i) Mr Chatfield confirmed that further analysis work would be undertaken in relation to the significant reduction in the number of people over the age of 65 receiving direct payments.

- (3) Officers noted comments made by Members of the Committee in relation to the format of the charts within the performance scorecard.
- (4) RESOLVED that the report be noted.

**188. Presentation on the Adult Social Care and Health Being Digital Strategy 2019-2021**  
(Item. 8)

*Mr Ellis (Head of Service (Learning Disabilities and Mental Health Adult and Children's Services)) was in attendance for this item*

- (1) Officers presented a series of slides which set out information relating to the Adult Social Care and Health Being Digital Strategy, which described the changes to be put into place over the next few years to complement more traditional forms of care and support.

Officers then responded to comments and questions from Members, including the following: -

- a) Ms Tidmarsh referred to the use of technology connecting people who were socially isolated and confirmed that handheld devices were readily available for these individuals. She added that many services within Adult Social Care and Health were already familiar with using the handheld devices and the devices were proving to be very effective.
- b) Ms Tidmarsh confirmed that a demonstration session could be arranged for Members to use the handheld devices and familiarise themselves with the Carers App.
- c) Mrs Southern confirmed that the provider of the MOSAIC system was 'Serverlec'.
- d) Mrs Southern reassured Members that all of Kent County Council's systems were covered by the General Data Protection Regulation, and that the systems within Adult Social Care were covered through shared agreements with the NHS and other providers. She added that whilst there would always be a risk in handling and storing data, the infrastructure to mitigate risks was in place across Kent County Council.
- e) Ms Tidmarsh said that provider forums and workshop sessions had been set up to share knowledge and best practice in relation to digital strategy and innovation work.
- f) Ms Tidmarsh said that although digital services were being introduced for people who were experiencing social isolation and loneliness, these services would not replace face-to-face contact. Mrs Southern added that digital services would enhance and develop the services that were already in place within Adult Social Care and ensure that more time could be spent with individuals who preferred to have face-to-face contact.

- g) Ms Tidmarsh confirmed that monitoring sensors were in place, should the assistive technology fail, to ensure that individuals were safe and remained in contact with staff.
- h) Mrs Southern emphasised the positive approach that the elderly population had taken in embracing technology.
- i) Ms Tidmarsh stated that often, technology was used to make a referral by a relative, on behalf of an older person. She referred to some of the recent public engagement sessions that had taken place and said that elderly people with long-term conditions would like to receive more support from a mixed support group in relation to the use of technology.
- j) Ms Tidmarsh addressed concerns from Members of the Committee in relation to the affordability of technology for older people and said that technology would not be enforced on individuals, face-to-face contact would always be offered.
- k) Ms Tidmarsh noted comments from Members of the Committee in relation to improving the accessibility features within Kent County Council's website and ensuring that the different Apps that Kent County Council used were listed clearly.
- l) Ms Tidmarsh said that an access strategy had been put in place for individuals with specific needs to allow them to access systems with ease. She added that work had been undertaken with colleagues in Adult Social Care's Sensory team to further assess the needs of individuals with sensory impairments to ensure that they were fully supported.
- m) Mr Ellis confirmed that in-house documents provided a range of different tools which allowed individuals to easily navigate around the document, such as changing the colour of the document's border, inserting photos, changing frontline font sizes and colours, verbal dictation and embedding videos within the document's content.
- n) Ms Tidmarsh said that she would provide further information to Members of the Committee outside of the meeting as to whether the Carers App was accessible from a personal android device.
- o) Mrs Bell (Cabinet Member for Adult Social Care and Public Health) expressed her strong support for exploring the potential of technology across Adult Social Care to improve the lives of the elderly and disabled, as well as assisting carers and social care staff. She referred to an Age UK report and a Local Government Association report, both of which were referenced within the February 2019 Loneliness and Social Isolation Select Committee papers, highlighting the benefits of digital technology. She assured the Committee that technology would never replace "face to face" contact, but the more support that could be provided to individuals which allowed them to be more independent, the more resource would be available for supporting individuals who needed it the most. She emphasised the importance of ensuring that Wi-Fi was readily available in facilities such as short break units to ensure that people could stay connected to their friends and families and did not feel isolated. Mrs Bell

also thanked staff within KCC's Adult Social Care and Health team for their hard work in implementing the Mosaic case management system which had been successfully launched in October 2019.

(2) RESOLVED that the presentation be noted.

**189. Presentation on Health and Social Care Integration - The journey so far**  
(Item. 9)

*Ms Bellman (Local Care Programme Lead for the Kent and Medway STP) was in attendance for this item*

(1) Officers presented a series of slides which set out information relating to the opportunities and challenges for Health and Social Care integration, Kent County Council's response to the transformation and the Local Care model.

Officers then responded to comments and questions from Members, including the following: -

- a) Ms Bellman emphasised the importance of future planning, considering the wider determinants of health and liaising with partners to assess need and improve outcomes for residents.
- b) Ms Bellman specifically referred to the challenges which related to mental health support for children and young people and the significant need to address the issues within the next five years.
- c) Mrs Southern referred to the joint working arrangements between Kent and Medway Health and Social Care and said that Kent and Medway would soon be divided into four integrated care partnerships to support the achievement of improved outcomes, greater efficiency in terms of the use and deployment of resources and potentially greater cost effectiveness and outputs.
- d) Mrs Southern said that patients from Kent that had moved outside of the county that then wished to return to Kent would be supported in returning.

(2) RESOLVED that the report be noted.

**190. Work Programme 2020/2021**  
(Item. 10)

RESOLVED that the work programme for 2020/21 be noted.

**From:** Ben Watts (General Counsel)

**To:** Adult Social Care Cabinet Committee – 16 January 2020

**Subject:** Adult Social Care Cabinet Committee Meeting Dates - 2020/21 – For Information Only

Classification: Unrestricted

Past Pathway of Paper: None

Future Pathway of Paper: None

**Summary:** This report provides details of the 2020/21 meeting dates for the Adult Social Care Cabinet Committee.

**Recommendation:** The Adult Social Care Cabinet Committee is asked to note the Adult Social Care Cabinet Committee meeting dates for 2020/21.

**Adult Social Care Cabinet Committee meeting dates for 2020:**

- 16 January 2020
- 4 March 2020
- 22 May 2020
- 14 July 2020
- 29 September 2020
- 25 November 2020

**Adult Social Care Cabinet Committee meeting dates for 2021:**

- 20 January 2021
- 5 March 2021
- 17 June 2021

**Recommendation:** The Adult Social Care Cabinet Committee is asked to note the Adult Social Care Cabinet Committee meeting dates for 2020/21.

**Contact details:**

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**From:** Clair Bell, Cabinet Member for Adult Social Care and Public Health  
Penny Southern, Corporate Director of Adult Social Care and Health

**To:** Adult Social Care Cabinet Committee – 16 January 2020

**Subject:** Verbal update by the Cabinet Member and Corporate Director

**Classification:** Unrestricted

**Electoral Divisions:** All

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Update/s from the Cabinet Member:

- Presented with Deborah Stuart-Angus the Kent & Medway Adult Safeguarding Report at County Council – 17 December 2019
- Visited with Chairman – Worrall House and Sevenoaks Community Learning Disability Day Service
- Attended MOSAIC Demonstration

Update/s from the Corporate Director:

- Team Visits

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**From:** Peter Oakford, Deputy Leader and Cabinet Member for Finance, Corporate and Traded Services  
 Clair Bell, Cabinet Member for Adult Social Care and Public Health  
 Penny Southern, Corporate Director of Adult Social Care and Health

**To:** Adult Social Care Cabinet Committee – 16 January 2020

**Subject:** **DRAFT CAPITAL PROGRAMME 2020-23 AND REVENUE BUDGET 2020-21**

**Classification:** Unrestricted

**Past Pathway of Paper:** None

**Future Pathway of Paper:** Cabinet – 27 January 2020  
 County Council – 13 February 2020

**Electoral Divisions:** All

**Summary:** The draft budget proposals for 2020-21 were published on 6 January 2020 to support the scrutiny and democratic process through Cabinet Committees, and Cabinet, culminating in the annual County Council budget setting meeting on 13 February 2020. The draft budget takes account of the response to the consultation and engagement campaign. This report provides the Adult Social Care Cabinet Committee with an opportunity to comment on the draft budget proposals and make recommendations to Cabinet Members as part of this process.

Members of the Adult Social Care Cabinet Committee are asked to bring to this meeting the draft (black combed) 2020-21 Budget Book document published on 6 January 2020 as information from this document is not repeated in this report

**Recommendation:** The Adult Social Care Cabinet Committee is asked to:

- a) **CONSIDER** and **COMMENT ON** the draft capital and revenue budgets and Medium Term Financial Plan, including responses to consultation and the estimate of the government's funding settlement; and
- b) **SUGGEST** any changes which should be made before the draft is presented to Cabinet on 27 January 2020 and County Council on 13 February 2020.

## **1. Introduction**

- 1.1 The Local Government Finance Act 1992 and KCC Constitution requires the Council to consult on and ultimately set a legal budget and Council Tax precept for the forthcoming financial year, 2020-21. The accompanying draft Budget Book sets out the detailed proposals. This document is designed as a reference document and includes a number of sections/appendices. This report is produced as a guide to help navigate the document.
- 1.2 The democratic process through Cabinet Committees, Cabinet, and ultimately full County Council is the culmination of the budget setting process which takes almost a year to evolve beginning almost immediately after the budget is approved in February. This starts with the forecasts for the subsequent year(s) in the Medium Term Financial Plan (MTFP) at the same time as the approved budget for the forthcoming year, including the indicative central government settlement. These are based on estimates and subject to regular revision and refinement.
- 1.3 In previous years an interim update of the MTFP has been provided to County Council through the Autumn Budget Statement report. This year an Autumn Budget Statement report was not produced primarily due to the degree of uncertainty following the one-year Spending Review and lack of detail around the local government finance settlement. A multi-year plan for 2021-22 and beyond has not been produced given the settlement is for one year only.
- 1.4 On 16 October 2019 the formal budget consultation was launched as required under the Council's Constitution to set a legal budget and Council Tax. The draft budget published in January for the final democratic process is based on funding assumptions derived from the Spending Round and technical consultation on the provisional local government finance settlement. It is also based on provisional Council Tax and business rate tax bases from districts. There is no indication when the local government finance settlement will be announced, and districts have until 31 January 2020 to finalise their tax base estimates. The draft budget also includes the proposed response to the consultation, estimates of spending demand and cost pressures and local spending priorities.
- 1.5 The budget will be presented to County Council on 13 February 2020 for approval and the final Budget Book will be published in March 2020.

## **2. Fiscal and Economic Context**

- 2.1 The national fiscal and economic context is an important consideration for the Council in setting the budget. This context does not just determine the amount received through central government grants, but also sets out how local government spending fits in within the totality of public spending. This latter aspect essentially sets the government's expectations of how much local authorities would raise through local taxation.

- 2.2 The Chancellor announced on 4 September 2019 the government's spending plans for 2020-21 which are hereon referred to as the Spending Round (SR2019). SR2019 included additional spending compared to the previous plans. The stated aim of SR2019 is to provide stability and certainty in funding in 2020-21 to enable government departments and devolved administrations to focus on delivering Brexit. The Chancellor has confirmed that a multi-year Spending Review will follow in 2020 although the exact timing of this has not been confirmed.
- 2.3 SR2019 was originally set within the current fiscal targets:
- keeping the structural deficit below 2 per cent of GDP in 2020-21 together with total debt falling as a percentage of GDP, and
  - structural deficit to be eliminated and converted to a surplus by the middle of the decade.
- 2.4 The Chancellor would normally be expected to make his annual budget statement during the autumn in response to forecasts from the Office for Budget Responsibility (OBR) of performance against the targets. The budget would have included any tax changes necessary to finance spending plans within the targets. In October 2019 the Chancellor postponed the budget statement scheduled for 6 November 2019. In November he announced the introduction of revised fiscal targets:
- Balance current spending (i.e. excluding capital spending) in three years' time
  - Investment limited to 3% of GDP
  - Borrowing plans to be reviewed if total debt interest exceeds 6% of tax revenues.
- 2.5 SR2019 was based on a "rollover" concept with the continuation of a number of grants received in 2019-20. The grants continuing are listed in table 1 below with estimates for both the national and KCC amounts in 2020-21:

Table 1 – List of 2019-20 grants which are continuing in 2020-21

Description of grant or fund	2019-20		2020-21 Estimate	
	National Amount £'m	KCC Amount £'m	National Amount £'m	KCC Amount £'m
Revenue Support Grant <sup>1</sup>	2,284	9.5	2,323	9.6
Business Rate Top-up <sup>1</sup>	-	136.2	-	138.5
Business Rate Baseline <sup>1</sup>	12,276	48.7	12,484	49.5
New Homes Bonus Grant	918	6.4	918	6.4
Social Care Support	410	10.5	410	10.5
Business Rate Compensation for under indexation of the multiplier <sup>2</sup>	424	6.1	424	6.1
Business Rate Compensation for other reliefs <sup>2</sup>	1,373	4.9	1,373	3.9
Improved Better Care Fund <sup>3</sup>	1,837	42.4	2,077	48.5
Winter Pressure Grant	240	6.2		
New Social Care grants			1,000	23.8

- 2.6 SR2019 included an additional £1bn nationally to support Adult and Children's Social Care pressures. The technical consultation proposed that this would be allocated according to the adult social care relative needs formula (RNF) with up to 15% adjusted to reflect ability to raise council tax. For KCC, this equates to £23.8m share of the £1bn total.
- 2.7 SR2019 also confirmed that the Government intends to set the Council Tax referendum threshold for 2020-21 at 2% (this level is subject to final decision by Parliament). In addition, councils with responsibility for adult social care can choose to levy up to a further 2% increase on council tax under the social care precept.
- 2.8 Finally, the SR confirmed that the £2 billion funding provided to government departments for Brexit will be continued in 2020-21, although at this stage it is not known how much KCC will receive.
- 2.9 There are no indicative spending plans/local government settlement or Council Tax referendum limits for 2021-22 and beyond, meaning the future funding envelope remains incredibly uncertain. These will not be known until after the outcome of the full Spending Review, which was originally anticipated sometime during 2020 but might be delayed. A further rollover for 2021-22 settlement is one of many possibilities.

<sup>1</sup> Uplifted by 1.7% uplift to business rate multiplier based on September CPI and adjusted to include notional RSG for business rate retention pilot authorities

<sup>2</sup> Notified after final settlement

<sup>3</sup> Includes winter monies in 2020-21

- 2.10 Further details are still awaited on whether the new government will proceed with the proposed 75% business rate retention arrangements, and the reforms following the Fair Funding review. These are likely to have a significant impact on future year's settlements and the Council's MTFP, this uncertainty makes forward financial planning very imprecise.
- 2.11 In light of the uncertainty, a one-year only plan has been published. Appendix A in the Draft Budget Book provides detail of individual growth pressures and savings. Different scenarios of funding for future years will continue to be modelled so that the potential impact from each scenario is understood.

### **3. Revenue Budget Strategy and Proposals**

3.1 The Council's revenue expenditure is what is spent on the provision of day to day services e.g. care for the elderly and vulnerable adults, supporting children in care, maintaining and managing the road network, library services, etc. It includes the cost of salaries for staff employed by the Council, contracts for services commissioned by the Council, the costs of servicing debt incurred to support the capital programmes, and other goods and services consumed by the Council. Revenue spending priorities are determined according to the Council's statutory responsibilities and local priorities as set out in the MTFP, which is the financial expression of the vision set out in the Strategic Statement.

3.2 The Draft Budget Book includes the following sections in relation to the revenue budget proposals:

- Section 3 – Revenue Budget - Summary
- Section 4 – Revenue Budget - Key Service
- Appendix A – Detailed Revenue Plan by Directorate
- Appendix B – Budget Risk Register

The revenue budget sections set out the planned spending on services, the revenue plans in the appendices show the main reasons for year on year changes.

3.3 In order to meet the legal requirement to set a balanced budget the Corporate Director of Finance must be satisfied that it is based on robust estimates and includes adequate provision for reserves to cover risks and uncertainties. The draft budget is increasing by £68m, from £986.4m in 2019-20 to £1,054.3m in 2020-21, although this requires the remaining gap of £1.9m to be resolved.

3.4 The Draft Budget includes provision for £83.1m of additional spending demands (changes to existing budgets plus forecasts for future demand and cost increases) and £21.1m to replace the use of one-off funding/savings in the 2019-20 approved budget.

3.5 These spending demands include the decision to change budgets based on current activity/costs, future known unavoidable cost increases (including contractual price increases, legislative changes and financing capital programme), forecasts for future eventualities (including estimated demand, non-specific price increases and contract retender), and local policy choices (including investment in services, and Kent pay scheme). The Draft Budget

also includes £6.0m of growth for spending priorities that support the new Strategic Statement.

- 3.6 The 2020-21 Draft Budget includes savings and income proposals of £34.3m. The vast majority of these arise from the full year effect of existing savings plans or the roll out of existing charging policies.
- 3.7 The revenue budget can be summarised in the following equation. This equation assumes the Council agrees the proposed Council Tax precept increases up to but not exceeding the assumed 2% referendum limit and the 2% social care levy. Section 6 of this report sets out the main revenue spending demands and savings/income proposals for the Adult Social Care and Health.

<b>Spending and Savings</b>			
			£000s
Realignment			10,453.4
Reduction in Grant Income			1,400.0
Pay			7,693.0
Prices/Inflation			20,284.4
Demand/Demography & Legislative			21,238.5
Service Improvements			22,001.4
<b>Sub Total - Pressures</b>			<b>83,070.7</b>
Replace use of one-off solutions used in 2019-20			21,115.2
Savings and Income			-34,283.6
			<b>69,902.3</b>
<b>Funding</b>			
	Spending Round £000s	Other £000s	Total £000s
Council Tax	37,185.0	-4,975.0	32,210.0
Business Rates	827.5	154.9	982.4
Government Grants			
- Business Rate Top Up and RSG	2,476.9		2,476.9
- Other grants	23,836.0	8,463.6	32,299.6
	64,325.4	3,643.5	<b>67,968.9</b>
<b>Current Budget Gap</b>			<b>1,933.4</b>

- 3.8 The 2020-21 plan is presented in appendix A. This represents the most realistic estimate of future funding following SR2019 (including estimated distribution through the local government finance settlement) and provisional tax base estimates/assumed council tax increases. The plan also include forecasts for future spending pressures and replacing the one-off funding/savings used to balance the previous year's budget.

## **4. Budget Consultation**

- 4.1 As described in paragraph 1.4, the consultation on the Council's revenue budget and Council Tax proposals was launched on 16 October 2019 and closed on 25 November 2019. This consultation sought views on a general Council Tax increase, the social care levy and KCC's spending priorities. The consultation was web based supported by a social media campaign. This approach was in line with last year, which helped to achieve increased engagement at lower cost, and a total of 1,360 responses were received (compared to 1,717 responses last year). Furthermore, there were fewer numbers who started a response but did not complete the survey (552 compared to 698 last year).
- 4.2 The campaign also aimed to increase public understanding of the Council's budget and the financial challenge arising from rising demand for/cost of providing council services, the need to find cost savings whilst at the same time protecting valued services, and impact on Council Tax. Further evaluation of the extent to which these aims were achieved will be undertaken.
- 4.3 The finance team have worked in collaboration with colleagues responsible for updating the Strategic Statement. A number of engagement events took place between September and November 2019 with residents, businesses, voluntary sector organisations, parish councils, young people and staff. At these events information on KCC's current spending plans were provided, and the financial challenges faced next year. Their views on what is important to them and their views on spending priorities have been captured and fed into the budget consultation process.
- 4.4 Overall there was an increased proportion of respondents supporting council tax increases than in last year's consultation but still lower than historical levels of support in previous years. In relation to spending priorities, respondents highlighted Adult Social Care for Older People, Education and Youth Services and Public Protection as their three highest priorities. The three lowest spending priority areas were Community Services, Libraries Registration and Archives and Social Support within Adult Social Care.
- 4.5 A detailed report on the information and insight gained from the consultation and engagement strategy is available in the background documents section of this report and on the Council's website.

## **5. Capital Programme**

- 5.1 Capital expenditure is spent on the purchase or enhancement of physical assets where the benefit will last longer than the year in which it is incurred e.g. school buildings, roads, economic development schemes, IT systems, etc. It includes the cost of purchasing land, construction costs, professional fees, plant and equipment and grants to third parties. As with revenue, capital spending plans are determined according to the Council's statutory responsibilities and local priorities as set out in the MTFP, with the ultimate aim of delivering the vision set out in the Strategic Statement.

- 5.2 Capital spending has to be affordable as the cost of interest on borrowing and setting aside sufficient provision to cover the initial investment funded by loans over the lifetime of the asset, are borne as revenue costs each year over a very long period. This affordability would also apply to invest to save schemes which need to have a reasonable payback period.
- 5.3 Sections 1 and 2 of the Draft Budget Book set out the proposed 2020-23 programme and associated financing requirements. The summary (section 1) provides a high-level overview for the whole Council, and the individual directorate pages (section 2) provides more detail of rolling programmes and individual projects.
- 5.4 The capital strategy has been revised for the 2020-23 budget and one of the principles is to have a longer-term capital programme over a ten-year period, within which statutory responsibilities and strategic priorities are prioritised. It is particularly important to provide some stability for services in a year with a one-year funding settlement from Government. The timing of capital projects and programmes has also been reviewed to ensure capital plans and delivery are as realistic as possible.
- 5.5 Some additional capital spending has been deemed appropriate to meet statutory responsibilities, for invest to save projects or to enable continuation of other key capital ambitions. A total of £120m additional borrowing will be used to fund this spend over the three-year period 2020-23. The revenue consequences of this capital spending have been included in the budget.

## **6. Headline Adult Social Care and Health Directorate Proposals**

- 6.1 Included within the **additional spending demands** of £83.1m (see 3.4) are pressures totalling £21.3m for the Adult Social Care and Health (ASCH) Directorate, all of which fall under the remit of this Cabinet Committee. The pressures can be summarised as follows: £5.2m for a provision for both contracted and negotiated price increases for those services not currently being retendered from April 2020, a budgetary provision is held centrally for those services being retendered (See 6.4); demographic pressures across all client groups of £13m for increased care packages and costs relating to increased complexity and budget realignment relating to the full year effect of care packages in 2019-20 of £3.1m. In addition a further £21.1m of additional spending (see 3.4) is required to replace the use of one-off funding/savings in the 2019-20 approved budget, of this £9.4m relates to Adult Social Care and Health
- 6.2 Included within the new **savings and income proposals** of £34.3m (See 3.6) are net budget reductions totalling £10.7m for the ASCH Directorate all of which fall within the remit of this Cabinet Committee. The savings and income can be summarised as follows: £6.2m relating to the final phasing of transformation savings and also the Whole System Programme for Change; uplift in social care contributions of £3.3m; changes to the non-residential charging policy (subject to the outcome of consultation) of £0.1m; drawdown of directorate reserves of £7.7m; offset by the removal of the specific grant income for winter pressures



now funded through the Improved Better Care Fund (IBCF) for which the income is held centrally of £6.1m and the removal of one off savings from 19-20 of £0.5m.

- 6.3 In addition to the specific allocations shown against the Adult Social Care and Health Directorate within the budget proposals, there is approximately £8m - £10m earmarked for Adult Social Care listed under Financing Items and Unallocated (FI&U) which is also part of the £81.7m additional spending demands referred to in 3.4. Similarly, there is a further £3m listed under FI&U for drawdown from reserves to offset the pressure of £8m - £10m which form part of the overall savings and income proposals of £32.9m referred to in 6.2 above.

## 7. Recommendations

7.1 Recommendation: The Adult Social Care Cabinet Committee is asked to:

a) **CONSIDER** and **COMMENT ON** the draft capital and revenue budgets and Medium Term Financial Plan, including responses to consultation and the estimate of the government's funding settlement: and

b) **SUGGEST** any changes which should be made before the draft is presented to Cabinet on 27 January 2020 and County Council on 13 February 2020.

## 8. Background Documents

KCC's Budget webpage

<https://www.kent.gov.uk/about-the-council/finance-and-budget>

KCC's approved 2019-20 Budget and 2019-21 Medium Term Financial Plan

[https://www.kent.gov.uk/\\_data/assets/pdf\\_file/0006/93390/Budget-Book-2019-20.pdf](https://www.kent.gov.uk/_data/assets/pdf_file/0006/93390/Budget-Book-2019-20.pdf)

KCC Budget Consultation launched 16 October 2019

<https://www.kent.gov.uk/about-the-council/finance-and-budget/our-budget>

HM Treasury Spending Round 2019 document

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/829177/Spending\\_Round\\_2019\\_web.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/829177/Spending_Round_2019_web.pdf)

KCC report on 2019 Budget Consultation

[https://www.kent.gov.uk/\\_data/assets/pdf\\_file/0012/103530/Summary-and-analysis-of-budget-consultation-responses.pdf](https://www.kent.gov.uk/_data/assets/pdf_file/0012/103530/Summary-and-analysis-of-budget-consultation-responses.pdf)

KCC Draft Budget book 6 January 2020

<https://www.kent.gov.uk/about-the-council/finance-and-budget/our-budget>

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**From:** Clair Bell, Cabinet Member for Adult Social Care and Public Health  
Penny Southern, Corporate Director of Adult Social Care and Health

**To:** Adult Social Care Cabinet Committee – 16 January 2020

**Subject:** **OUTCOME OF THE FORMAL CONSULTATION ON MINNIS COMMUNITY HUB**

**Classification:** Unrestricted

**Past Pathway of Paper:** Adult Social Care and Health Directorate Management Team Meeting – 11 December 2019

**Future Pathway of Paper:** N/A

**Electoral Division:** Birchington

**Summary:** Over the past ten years the Minnis Community Hub has made several changes to improve facilities in order to promote more efficient running and provide the best possible experience for service users. This has included significant investment to improve facilities with the aim of attracting different groups of people to make use of the building. The number of service users eligible to attend the Older Peoples Day Service has continued to fall.

**Recommendation(s):** The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **COMMENT ON** the outcome of the eight-week consultation and the proposal to continue to deliver the day service but deliver it in another suitable building, (Westbrook House, near Margate). With this proposal, service users will be able to transfer as a group with the staff they are familiar with and within three miles of Minnis Community Hub.

## 1. Introduction

1.1 Kent County Council (KCC) has concluded the consultation on the future of Older People's Day Services at Minnis Community Hub in Birchington, Kent.

## 2. Background

2.1 Over the past ten years, the Community Hub has made several changes in order to promote more efficient running and the best possible experience for service users. This included significant investment to improve the facilities with the aim of attracting different groups of people to make use of the building. Additional funding was also put in place for a one-year Change Manager post to work in partnership with local community groups to develop the range of opportunities offered at the Hub.

- 2.2 Despite this additional investment, the number of users attending the Older People's Day Service has fallen from 79 in August 2011 to 21 in July 2019. The average number of service users attending every day is five. Staffing and running costs continue to be the same, but as there are fewer people attending the service, it has become less efficient to run.
- 2.3 The older people's day service delivered at Minnis Community Hub is delivered by Kent County Council (KCC). Unlike day activities delivered by community organisations, KCC provides a service for older people that meet the eligibility criteria for services under the Care Act. Older people that use the day service at Minnis Community Hub have higher needs than people who are able to access community-based day services or activities.
- 2.3 The Community Hub is also used by KCC's Adult Learning Disability service. This service was not part of this consultation and it is planned that it will remain at the Hub.

### **3. Consultation Proposal**

- 3.1 The proposal that was put forward as part of the Consultation held between 25 September and 20 November 2019 is:

**To continue to deliver the day service but deliver it in another suitable building, (Westbrook House, near Margate).**

- 3.2 With this proposal, service users will be able to transfer as a group with the staff they are familiar with and under three miles away from the Minnis Community Hub.
- 3.3 This proposal would provide all the facilities service users currently enjoy at Minnis, but with the potential for people to use more services in the future; such as physiotherapy and occupational therapy. In using Westbrook House, the pick-up and drop-off service provided by Thanet Community Transport could continue.

### **4. Consultation Process**

- 4.1 An eight-week public consultation on the future of Minnis Community Hub concluded on 20 November 2019. Service users, relatives/carers, staff, staff Unions, Local MPs, local councillors and KCC Members have been involved in the consultation meetings and their views have been collected and considered.
- 4.2 All public consultation documents were uploaded onto KCC's Consultation webpage and a dedicated email, phone number and freepost mailing address created to handle written responses and queries. As well as being available online, a total of **250** paper copy consultation documents and questionnaires were posted out to Minnis Community Hub, Westbrook House, local libraries in Birchington, Margate and Westgate-on-Sea. A poster about the consultation was also available at the above locations.

4.3 Feedback was received during the consultation, this included questionnaire responses as well as other types of communication. See the tables below:

Contact Type:	No.
Online Questionnaires	19
Paper Questionnaires	47
Emails	1
Phone calls	1
Letters	0
Written Proposals	0
<b>Total</b>	<b>68</b>

Feedback From:	No.	%
Member of the public	27	40%
Service user	13	19%
Friend/Relative	13	19%
Staff member	4	6%
On behalf of an organisation	4	6%
Not known	4	6%
Other	3	4%
<b>Total</b>	<b>68</b>	<b>100%</b>

## 5. Consultation Feedback Received – Key Themes

5.1 The feedback received falls into a number of key themes that are listed below. These themes are in the order of the most comments received ('People who do not want change' had the most comments and 'Westbrook is not appropriate and does not offer the same activities' the fewest comments):

- a) People do not want change.
- b) The service is not being advertised in the local community, leading to low attendance.
- c) The distance to Westbrook House will cause issues for people living and travelling from Birchington.

- d) There will be a greater need for services in Birchington due to the large housing developments planned in the area.
- e) The lack of new referrals to the service is contributing to the low attendance
- f) The building should be used more and opened-up to other community groups in Birchington.
- g) Westbrook House is not appropriate and does not offer the same activities.

## 5.2 What people told us

### **a) People do not want change**

More responses were received on this theme than any other. Thirty-six people, of which eleven were service users, nine family members and four staff members, told us that they do not want the change and are happy where they are. Some responses are below:

*"I feel sorry because I love and enjoy coming here and I like the company. I feel worried about going to Westbrook as I don't like change at my time of life"*

*"the care is excellent, ... is very happy there, I hope they all go together, ... doesn't like change very much"*

*"these community hub members are very happy where they are, especially with the quality of care they receive from the existing staff"*

*"I don't know very much about Westbrook House, if you think it will be ideal for ... and his friends, it would be perfectly alright with me"*

The proposed option to continue to deliver the day service but deliver it in Westbrook House was chosen because it offers a solution to the issues highlighted in the Consultation Report, with the least impact to those service users and staff that are currently based at Minnis Community Hub. With this proposal, service users will be able to transfer as a group with the staff they are familiar with. The staff would be a consistent link with the service and will ensure that the service users are supported to settle in at Westbrook House.

### **b) The service is not being advertised in the local community, leading to low attendance**

The Project Team carried out some research into this matter and identified a number of articles published between 2015 and 2019 as follows: Birchington Parish Council Portal, Parish Council Community Magazine, Thanet Support Guide to Local Services, Birchington & Westgate Inner Wheel Club News, leaflets in local Libraries and Doctors Surgeries.

It was found however that there was limited presence on the KCC Website. This will be addressed once there is a decision regarding the future of the service in Minnis Community Hub.

**c) The distance to Westbrook House will cause issues for people living and travelling from Birchington**

Feedback was sent in by nineteen people, eleven of which were from members of the public, three from family members and one from a service user. The feedback highlighted the distance to Westbrook House and the need for transport to continue to be provided at Minnis Community Hub and if the service is moved, to Westbrook House. Feedback from a family member stated:

*“... has been going to the Hub for a short time. Westbrook would be nearer. I know that there are so few people going [to Minnis], it must be wasteful”*

Currently there are no service users that walk independently to the centre, all are transported by either Thanet Community Transport (TCTA), taxis or family. The proposal is to continue with this arrangement to Westbrook House.

There are currently thirteen service users who attend Minnis who live in the Birchington area and nine service users who live in Westgate-on-Sea, Ramsgate, Margate, Broadstairs and Canterbury areas. Therefore, the move would mean some service users would add a further eleven minutes (approx.) to their journey time and others would reduce their journey time by approximately eleven minutes.

**d) There will be a greater need for services in Birchington due to the large housing developments planned in the area**

Twelve responses were received from Members of the Public regarding the need for services to remain in Birchington, due to plans for the development of large numbers of new housing in the Birchington area.

The Project Team looked into this and identified that there are plans for 1,600 new houses in the Birchington area and 2,000 new houses in the Westgate and Westbrook area.

The service moving to Westbrook House will not disadvantage people living in the new developments as the service will be closer to the majority of new homes and there will be the opportunity to increase the numbers of people attending.

With all new large developments, agreements are negotiated between planning authorities and developers to secure a percentage contribution towards the local community infrastructure. This is called Developer Contributions and the funding can be used towards such things as parks, new schools and other community facilities required to support an increased population. These contributions are to reduce the impact of a new development and to make sure it does not place additional pressure on existing infrastructure.

**e) The lack of new referrals to the service is contributing to the low attendance**

Eight people commented on the low attendance at the service and linked this to a lack of referrals coming into the service, along with the lack of advertising reported above.

Figures were requested from the service for the period of between **1 October 2018 to 30 September 2019**. The figures received highlight the following:

- **27** Referrals were received by the day centre in a one-year period. This is equivalent to more than two referrals each month.
- Of the 27 referrals only **11** took up their offer of a place, with two on hold.
- **14** people did not take up their offer of a place.

The above figures show there were a reasonable number of new referrals received over the course of the year. The service at Minnis accepted all the referrals as appropriate for the service offered, 60% had chosen not to take up the place they had been offered. Feedback from a family member stated:

*“... lives about ¼ of a mile from the Minnis Community Hub. ... has been a service user for quite some time. ... enjoys the time there and says the staff are lovely but ... is often bored as there is often only three or four other elderly service users and not much in activities provided. I do feel that the lack of service users is down to KCC not promoting this service enough in an area where the elderly population is high”*

The older people’s day service delivered at Minnis Community Hub is delivered by Kent County Council (KCC). Unlike day activities delivered by community organisations, KCC provides a service for older people that meet the eligibility criteria for services under the Care Act. Older people that use the day service at Minnis Community Hub have higher needs than people who are able to access community-based day services or activities.

The day service is not available to people who are not eligible for services under the Care Act. This limits the numbers of people that can be referred, and the scope for advertising the service to members of the public.

**f) The building should be used more and opened-up to other community groups in Birchington**

There were seven responses received that queried why the Hub wasn’t used by more community groups, space rented out or groups merged to make better use of the building. Feedback received from a member of the public stated:

*“Falling numbers of service users is not a reflection of a reduction in need, we believe it is a reflection of the constraints placed on access and innovation at the Hub and the limited scope for change allowed to staff at the Hub. It*



*appears to many of us that KCC exerts a distant and inflexible grip on the Hub's services.*

*The consultation documents comment on the need for services to move with the times yet KCC has failed to move with the times and has failed to allow the Hub to adapt to changing expectations”*

Over the past ten years, KCC has made several changes at Minnis Community Hub in order to promote more efficient running and the best possible experience for users. This included investing a large amount of money in developing facilities in the building with the aim of encouraging other services to rent or share space within the Hub, particularly during the evenings and weekends.

A partnership agreement was developed with The Children’s Society (later the service was provided via Thanet Age UK). The Children’s Society based their very successful and well attended Intergenerational Project within the Minnis Community Hub. This partnership was in place for two years between 2013 and 2015 and utilised the building two evenings a week and at weekends, with over a hundred older and younger people accessing across their weekly sessions.

**g) Westbrook House is not appropriate and does not offer the same activities**

Five people (three members of the public and two family members) commented that Westbrook House is not appropriate and doesn't offer the same services as Minnis Community Hub.

The proposal to move to Westbrook House would mean that the service could continue to provide all the facilities service users currently enjoy at Minnis Community Hub, and with the potential for people to use more services in the future; such as physiotherapy and occupational therapy. Individual meetings will be held to agree personal care plans.

**6. Staffing Implications**

- 6.1 As part of the proposal to transfer the service, a formal 30-day staff consultation period will be initiated, and our recognised Trade Unions will be informed. The staff consultation will be managed by the Operational Management Team and Human Resources.
- 6.2 The majority of Minnis Community Hub day service staff would have the opportunity to continue to deliver the day service at Westbrook House. Service users and staff would be supported through the period of change and our recognised Trade Unions would be involved in the process.

## 7. Financial Implications

- 7.1 The current budget spend on Minnis Community Hub for Adult Social Care is £189k; the majority of which is staffing costs. If the service is transferred to Westbrook House with the majority of the current staff, there may be a small reduction in overall costs.

## 8. Equalities Impact Assessment

- 8.1 An initial Equality Impact Assessment (EqIA) was included in the consultation documents in September 2019.
- 8.2 When asked about equalities in the consultation the impact on older people was commented on. These comments have been taken into account within the EqIA review and the updated version of this is available with the consultation report.

## 9. Conclusion

- 9.1 Kent County Council (KCC) has concluded an eight-week consultation on the future of Older People's Day Services at Minnis Community Hub in Birchington. The consultation documents were available online and a total of **250** paper copy consultation documents and questionnaires were posted out to key community venues across the Birchington and Westgate area. We received feedback from 68 people, with the highest number of replies from members of the public (see 4.3 above).
- 9.2 The main concern raised by service users, families and staff during the consultation was focused around change for those currently accessing the older people's day service at Minnis Community Hub. We have listened carefully to what people have told us, however we believe that with the option proposed we will be in a better position to support the service to develop and offer new opportunities for those that use the service now and in the future.
- 9.3 A robust plan will be put in place to support the transition of the service users from Minnis Community Hub to Westbrook House. It is proposed that the majority of the current staff team would be moving with the service users, and because they know the service users very well, would be in a good position to support the transition and help settle everyone in.

## 10. Recommendation(s)

10.1 Recommendations: The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **COMMENT ON** the outcome of the eight-week consultation and the proposal to continue to deliver the day service but deliver it in another suitable building, (Westbrook House, near Margate). With this proposal, service users will be able to transfer as a group with the staff they are familiar with and within three miles of Minnis Community Hub.

## **11. Background Documents**

Consultation on The Future of Older People's Day Services at Minnis Community Hub. [www.kent.gov.uk/minnisconsultation](http://www.kent.gov.uk/minnisconsultation)

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**From:** Clair Bell, Cabinet Member for Adult Social Care and Public Health

Penny Southern, Corporate Director of Adult Social Care and Health

**To:** Adult Social Care Cabinet Committee – 16 January 2020

**Subject:** **COMMUNITY BASED WELLBEING SERVICES (GRANTS TO CONTRACTS) – PROCUREMENT PROGRAMME AND GRANT EXTENSION APPROVALS**

**Classification:** Unrestricted

**Past Pathway of Paper:** Adult Social Care and Health Divisional Management Team Meeting - 12 June and 11 September 2019 and 15 January 2020

Adult Social Care Cabinet Committee - 23 November 2017 and 27 September 2018

**Future Pathway of Paper:** None

**Electoral Division:** All

**Summary:** To update Members of the Adult Social Care Cabinet Committee on progress made on the Community Based Wellbeing Services project and the procurement programme and grant extensions required to ensure continuity of service for providers through the phased procurement programme.

**Recommendation(s):** The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **COMMENT** on the content of the report.

## 1. Introduction

1.1 The project in 2017-18 to commission a Core Offer of Community Based Wellbeing support for older people, people living with dementia and people with a physical disability was halted to achieve savings against the voluntary sector budget. Recognising the impact, the reduced budget would have on existing proposals the Adult Social Care Cabinet Committee agreed on 23 November 2017 that a new approach was needed to end the remaining grants and commission wellbeing support. This project is tracked in the Strategic Delivery Plan, project number 52.

1.2 The new approach proposed moving separate core offers into one commissioned service, aligning timelines, reducing duplication, maximising

value for money, providing more holistic support for vulnerable adults in Kent and their carers, as well as measuring and evidencing the benefit of these preventative services

- 1.3 On 27 September 2018, the Adult Social Care Cabinet Committee endorsed, under decision number 18/00041, that this new approach would be undertaken in two stages. Specifically, to commission Community Navigation services that connect people to the support that they need by 1 April 2019, and to commission the support that people are navigated to by 1 April 2020. This approach required interim arrangements for grants for 2019-20.
- 1.4 Procurement of Community Navigation was completed and contracts awarded on 26 February 2019, with contracts commencing 1 April 2019. Interim arrangements for the remaining adult social care grants were put in place for April 2019 – March 2020.
- 1.5 This paper provides an update on the proposed procurement programme for services that people are signposted to; Community Based Wellbeing Services, and extension of grants to allow a phased programme approach as previously agreed.

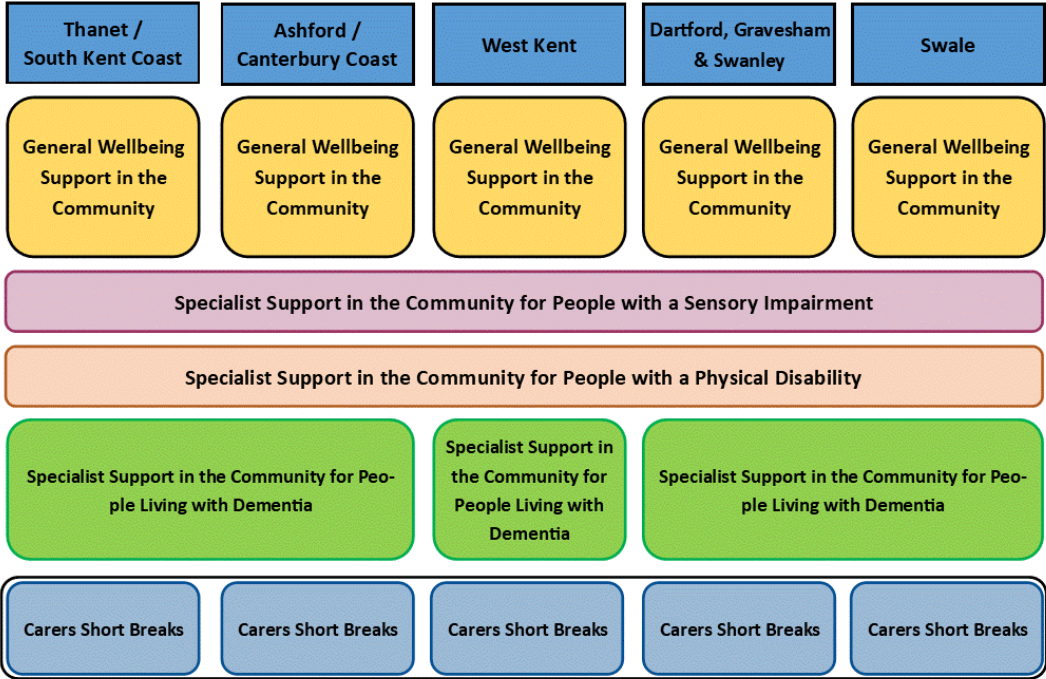
## **2. Strategic Statement and Policy Framework**

- 2.1 This project supports the strategic outcomes of the Council through a support service which works with people to identify their aims and aspirations, then connects them to community resources and activities which promote wellbeing and reduce social isolation. This will fully support the Your Life, Your Wellbeing Strategy 2016 – 2021 through enabling people to remain demonstrably well and independent through the delivery of sustainable services and managing demand on social care services.
- 2.2 The proposal supports the development of Local Care Models as outlined in the Kent and Medway Sustainability and Transformation Plan by commissioning support services to reduce demand on health and social care and improve outcomes for people using non-medical interventions.
- 2.3 The proposal will enable the Council to meet its duties under the Care Act 2014 by promoting wellbeing for individuals and their carers, through the provision of information and advice that enables people to make choices about their care, by preventing or delaying people deteriorating to the point where they require health or social care support and through supporting market sustainability.

## **3. The Report**

- 3.1 Adult social care has historic grant arrangements in place with voluntary and community sector providers across the county. These grants provide a contribution towards the costs of services which support older people, people living with dementia, people with a physical disability and people with sensory impairments. Services meet the relevant strategic outcomes of the Council and enable people to remain well and living independently.

- 3.2 There are currently 48 of these historic grants remaining, all of which fall within the scope of this project. Grants currently end on 31 March 2020.
- 3.3 There are issues related to use of historic grant arrangements including an inconsistency in the type of support and services funded across the county, lack of correlation between spend and demographic factors, limitations in the ability to monitor the performance of services and therefore to understand the impact that services have on people.
- 3.4 Through the process, it has become clear that there is no single commissioning solution which can address the needs of all client groups. Therefore, it is likely that both universal and specialist services will be required. There is also a need to move to a needs-based approach and outcome-based specifications.
- 3.5 The public consultation focused on understanding the type of support which residents would benefit from on a day to day basis and asks some key questions to inform service specification. The summary report on the findings from the consultation can be found in Appendix 1.
- 3.6 Given the above, different options will need to be considered in terms of contract utilised as well as how the arrangements are geographically and client specialism lotted. The agreed model is outlined below:



3.7 The above model does not represent a radical shift from the current grants. It has become clear there is no ‘one size fits all’ option and so it has been necessary to consider a more moderate approach. The benefit of the above model is it will rationalise the market, reduce service disruption and enable increased performance monitoring of service delivery and increase management of the market. This allows a phased procurement approach to be implemented.

3.8 Initial approximate contract values for the above model are as set out in the table below. All contracts agreed will be for three years initially with the provision for two single year extensions. Therefore the approximate figures in the table below are for a five year term:

	Thanet / South Kent Coast	Ashford / Canterbury Coast	West Kent	Dartford, Gravesham and Swanley	Swale
General Wellbeing	£4,700,000	£3,600,000	£4,600,000	£3,000,000	£750,000
Dementia	£2,000,000		£2,000,000	£1,500,000	
Physical Disability	£750,000				
Sensory Impairment	£5,000,000				
Carers Short Breaks	£15,000,000				

3.9 Commissioners recognise feedback received from small organisations about their ability to enter into contracts and the instability of being reliant on larger organisations for sub-contracting relationships. In order to support smaller organisations and enable innovation, it is proposed a percentage of the overall budget be allocated to a grant pot. Grants will be awarded through Kent County Council’s grant prospectus and in accordance with the Council’s Voluntary and Community Sector Policy.

3.10 Specification Development workshops are being held with current and interested providers. Workshops have been held across the county through November, December and January, to ensure the market has had involvement and influence over the development of the service specifications.

3.11 The phased procurement programme has been prioritised based on several risk categories, to ensure that the process is supportive, while allowing the best competitive process to occur. The Council is fully aware of the potential uncertainty this creates within the voluntary sector and will support the market to ensure potential providers/bidders are able to engage in the process.

3.12 The areas of the market that are not in the early phases of the procurement programme will be available for grant funding. To align to policy and to support the principles of competition, a light touch expression of interest will be advertised.

3.13 It is recommended that a ‘Competitive Procedure with Negotiation’ procurement methodology is undertaken with a ‘Restricted’ process. This will allow the procurement (specifically the ‘invite to tender’ stage) to proceed with a limited number of bidders (restricted to a maximum of five) following an assessment at the expression of interest/Standard Questionnaire (SQ) stage, of the bidder’s



suitability to deliver the contracts in the locality or area of client specialism they are seeking to bid for.

3.14 Proposed project / procurement timeline is as follows:

<b>Project Area / Procurement Task:</b>	<b>Dates:</b>	<b>Complete</b>
<i>Develop plan for future commissioned model (phased approach)</i>	30/08/2019	complete
<i>Paper to Adult Social Care Cabinet Committee</i>	27/09/2019	complete
<i>Public Consultation (began 07/1/2019)</i>	01/12/2019	complete
<i>Market / Provider engagement (begins 30/10/2019)</i>	31/01/2020	ongoing
<i>Develop specifications</i>	31/01/2020	ongoing
<i>Develop Tender Documentation</i>	31/01/2020	ongoing
<i>Grant extensions approved</i>	31/01/2020	
<i>Phase 1: Issue Contract Notice</i>	03/02/2020	
<i>Phase 1: Return of Request to Participate (SQ)</i>	17/02/2020	
<i>Phase 1: Evaluation of SQs &amp; shortlisting completed by</i>	29/02/2020	
<i>Phase 1: Issue Initial ITT to shortlisted organisations</i>	02/03/2020	
<i>Phase 1: Return of ITT</i>	16/03/2020	
<i>Phase 1: Evaluation of ITT by</i>	20/03/2020	
<i>Phase 1: Negotiation (if required) completed by</i>	25/03/2020	
<i>Phase 1: Issue Request for final tenders</i>	30/03/2020	
<i>Phase 1: Return date for final tenders</i>	13/04/2020	
<i>Phase 1: Evaluation of final tenders completed by</i>	17/04/2020	
<i>Phase 1: Contract award approval by</i>	30/04/2020	
<i>Phase 1: Contract start date</i>	01/07/2020	
<i>Procurement (go live): Phase 2</i>	01/04/2020	
<i>Procurement (close): Phase 2</i>	30/06/2020	
<i>Contract award approval: Phase 2</i>	30/08/2020	
<i>Contract start date: Phase 2</i>	01/10/2020	
<i>Procurement (go live): Phase 3</i>	01/10/2020	
<i>Procurement (close): Phase 3</i>	30/12/2020	
<i>Contract award approval: Phase 3</i>	30/02/2021	
<i>Contract start date: Phase 3</i>	01/04/2021	

3.15 As a phased procurement programme will be undertaken, taking through to April 2021 to complete, certain current grant provisions will need to be extended to ensure a continuity of service provision, through the procurement process.

3.16 The following table outlines which grants will be required to be extended, for what period and value. It should be noted that some organisations provide services across District/CCG boundaries and where these areas of service delivery fall into different phases, organisations have been consulted on what impact this would have on incomes to cover service delivery in those areas.

Organisation	Current grant value	Procurement Phase	Extension required	Extension value (2020/21)	
Age Concern Deal	£170,739.50	1	3 months	£42,684.88	
Age UK Ashford	£118,946.89	3	12 months	£118,946.89	
Age UK Canterbury	£166,585.98	3	12 months	£166,585.98	
Age UK Dover	£78,767.51	1	3 months	£19,691.88	
Age UK Faversham & Sittingbourne	£442,990.27	3	12 months	£442,990.27	
Age UK Folkestone	£137,862.40	1	3 months	£34,465.60	
Age UK Herne Bay & Whitstable	£271,832.25	3	12 months	£271,832.25	
Age UK Hythe & Lyminge	£200,046.15	1	3 months	£50,011.54	
Age UK Maidstone	£216,731.39	1	3 months	£54,182.85	
Age UK NWK	£575,235.27	2	6 months	£287,617.64	
Age UK Sandwich	£83,820.64	1	3 months	£20,955.16	
Age UK Sevenoaks & Tonbridge	£272,971.18	1	3 months	£68,242.80	
Age UK Sheppey	£139,478.49	3	12 months	£139,478.49	
Age UK Tenterden	£68,207.04	3	12 months	£68,207.04	
Age UK Thanet	£200,134.50	1	3 months	£50,033.63	
Age UK Tunbridge Wells	£232,290.73	1	3 months	£58,072.68	
Alzheimer's & Dementia Support Services	£263,499.72	2	6 months	£131,749.86	
Alzheimer's Society (Kent & Medway)	£286,395.54	2	6 months	£143,197.77	
Ash Cum Ridley Parish Council	£2,404.92	1	3 months	£601.23	
Ashford Citizens Advice Bureau	£746.02	3	12 months	£746.02	
Bright Shadow	£6,871.20	1	3 months	£1,717.80	
Caring Altogether on Romney Marsh (CARM)	£49,080.00	3	12 months	£49,080.00	
Centre for Independent Living in Kent (CILK)	£74,684.05	2	6 months	£37,342.03	
Christians Caring	£8,597.83	1	3 months	£2,149.46	
Compaid Trust	£11,484.72	1	3 months	£2,871.18	
CROP (EK)	£69,465.00	3	12 months	£69,465.00	
Disability Information Services Kent (DISK)	£42,520.95	2	6 months	£21,260.48	
FACE (Faversham Assistance Centre)	£14,366.70	3	12 months	£14,366.70	
Good Neighbour Project	£24,540.00	1	3 months	£6,135.00	
Hersden Neighbourhood Centre Association	£4,908.00	3	12 months	£4,908.00	
Hi Kent	£277,662.25	1	3 months	£69,415.56	
Involve – Befriending	£6,225.31	1	3 months	£1,556.33	

KAB	£803,809.66	1	3 months	£200,952.42	
Kent Association for Spina Bifida and Hydrocephalus	£31,411.20	2	6 months	£15,705.60	
NWK Volunteer Centre	£38,251.97	2	6 months	£19,125.99	
Romney Marsh Day Centre	£148,261.85	1	3 months	£37,065.46	
Rural Age Concern Darent Valley	£61,641.00	1	3 months	£15,410.25	
Kent Coast Volunteering	£21,325.26	1	3 months	£5,331.32	
Swale CVS	£17,668.80	3	12 months	£17,668.80	
The over 60's Community Service (Northgate Ward & Canterbury District)	£63,538.97	3	12 months	£63,538.97	
Tonbridge Baptist Church	£11,376.74	1	3 months	£2,844.19	
Trinity Community Resource Centre	£49,729.82	1	3 months	£12,432.46	

3.17 The following grant has been redistributed due to the closure of Age Concern Malling. It is recommended the five organisations that received the redistributed monies, receive an extension to that additional grant money in line with the extensions recommended above

Organisation	Current grant value	Procurement Phase	Extension required	Extension value (2020/21)
<i>Age Concern Malling (redistributed)</i>	<i>£78,680.15</i>	<i>1</i>		
Age UK Maidstone		1	3 months	£2,560.03
Age UK Sevenoaks & Tonbridge		1	3 months	£3,611.87
Age UK Tunbridge Wells		1	3 months	£4,198.72
Involve		1	3 months	£7,191.26
Crossroads Care Kent		1	3 months	£2,108.16

3.18 Following consultation with stakeholders, the following grants are recommended to be extended for a full year, while it is explored whether there are further partnerships or collaborations possible through commissioned services in the Growth, Environment and Transport (GET) Directorate.

Organisation	Current grant value	Procurement Phase	Extension required	Extension value (2020/21)
Sevenoaks Volunteer Transport Group	£1,717.80	N/A	12 months	£1,717.80
Edenbridge Voluntary Transport Service	£4,459.41	N/A	12 months	£4,459.41

3.19 The following grants to services delivered by local hospices, following consultation with stakeholders, are recommended to be extended in line with the procurement programme and transferred to contracts at a later date (Phase 3) following further engagement with providers and stakeholders.

Organisation	Current grant value	Procurement Phase	Extension required	Extension value (2020/21)
Hospice in the Weald	£24,540.00	3	12 months	£24,540.00
Heart of Kent Hospice	£13,742.40	3	12 months	£13,742.40

#### **4. Financial Implications**

- 4.1 There is no anticipated reduction in spend for these services for 2020/2021, with the same level of budget passing to the Voluntary sector.
- 4.2 Based on the proposed future contract structure, contract values would be calculated firstly according to the respective costs of the specialist services and outcomes-based services. Secondly, the funding will be redistributed based on demographic factors. This therefore will necessitate some re-profiling of funding across the various lifetimes of the contracts.
- 4.3 It is proposed that funding associated with the outcomes-based element of the service will be re-profiled incrementally over the contract life to avoid sharp changes in the level of funding to specific areas within the county.
- 4.4 Work is underway to determine the degree to which Clinical Commissioning Groups will contribute towards these services.
- 4.5 Given a phased approach to procurement is being implemented, the project is now projected to be complete in April 2021. This will therefore require further extension of some grant arrangement through 2020/21.

#### **5. Equality Implications**

- 5.1 An updated equalities impact assessment will be completed.

#### **6. Conclusions**

- 6.1 Following internal comment and feedback the phased procurement programme is recommended and proposed timetable for this programme is included.
- 6.2 Procurement will commence in January 2020 and be completed by March 2021.
- 6.3 Grants will need to be extended to ensure continuity of service provision through the procurement.

## 7. Recommendation(s)

7.1 Recommendation(s): The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **COMMENT** on the content of the report.

## 8. Background Documents

**18/00041 Community Navigation Service (Care Navigation and Social Prescribing.** <https://democracy.kent.gov.uk/documents/s86522/Item%208%20-%20Community%20Navigation%20Service.pdf>

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**Appendix 1: Summary Report on the Resident Engagement for Community Wellbeing Services**



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**Community Based Wellbeing Services  
Consultation Report v2**

## Executive summary

This report describes the findings of the public consultation regarding the proposal to end a number of voluntary and community sector grants and to reinvest that funding in a new contract called Community Based Wellbeing Services.

This proposed new contract will improve outcomes for older people, people living with dementia, their carers; and also provide longer term financial sustainability to the provider market.

The consultation opened on 7th October 2019 and we asked people to comment on:

The outcomes for the contract  
What services were important to them  
Where services should be delivered

When the consultation closed on 1st December 2019, 807 people had responded, the majority of whom were older people.

## Introduction

KCC currently invests £5.9 million into grants for community based services for older people. This funding contributes towards services such as:

- Social Opportunities - day support (older people)
- Social opportunities – day support (people living with dementia)
- Information Advice and Guidance
- Bathing – Domiciliary and in centre
- Dementia Outreach workers
- Befriending
- Voluntary Transport
- Peer support and dementia cafes

Funding is historic and has not been awarded in a coordinated way across the county. This means that current levels of funding are not linked to demography or demand. Furthermore, it means that some services are funded to different degrees in some areas compared to others, creating a post code lottery for residents.

The funding is awarded on an annual basis, making it difficult for recipient organisations to develop their services or their offer of support.

The proposal outlined in the public consultation is to end all of these grants and invest the current level of funding in a contract that will address these issues. Specifically, the contract will improve consistency of support across the county and allow providers to develop flexible and innovative services due to longer term investment. This will improve outcomes for older people and people living with dementia, promoting their wellbeing, reducing social isolation, connecting people to their communities and enabling people to live independently in their own homes for as long as possible.

The proposal is that these grants will be fully or partially terminated and replaced with contracts. The contracts for general wellbeing and specialist dementia will be split across five geographical regions, with the contracts for those with physical and sensory impairments being delivered county wide. As part of a plan to redistribute funding more equitably the values of these contracts will change gradually over a five-year period.



## Consultation process

A stakeholder engagement plan had been produced for the project identifying the following as key stakeholders:

- Older people and people living with dementia
- Their carers, family and friends
- Providers of services to older people and people living with dementia
- Health and social care professionals, including adult social care staff and Clinical Commissioning Groups
- District Councils

Pre-consultation engagement with key stakeholders included engagement events with current and future providers and engagement with older people, people living with dementia and their carers. This engagement helped inform the proposal and the outcomes identified within the consultation.

The consultation process is outlined in the table below:

Stakeholder group	Consultation process	Timelines
Older people and people living with dementia	Examination of previous consultation conducted in 2017 to look at key issues that were raised Promotion of the Public Consultation through older people's forums and providers of services. Visiting organisations to engage directly with clients, discussing with them what they feel is important	Aug 2019 to Dec 2019
Their carers, family and friends	As above	As above
Providers of services to older people and people living with dementia, and their carers	Pre-consultation engagement with providers to help design the outcomes and proposal outlined in the Public Consultation Emails sent to promote awareness of the Public Consultation to encourage organisations to participate and to support their clients to participate Hard copies sent to providers upon request	Feb 2019 - Ongoing
Health and social care professionals, including adult social care staff and Clinical Commissioning Groups	Clinical Commissioning group representatives involved in steering group meetings to raise awareness of the proposal and consultation	Feb 2019 - Ongoing

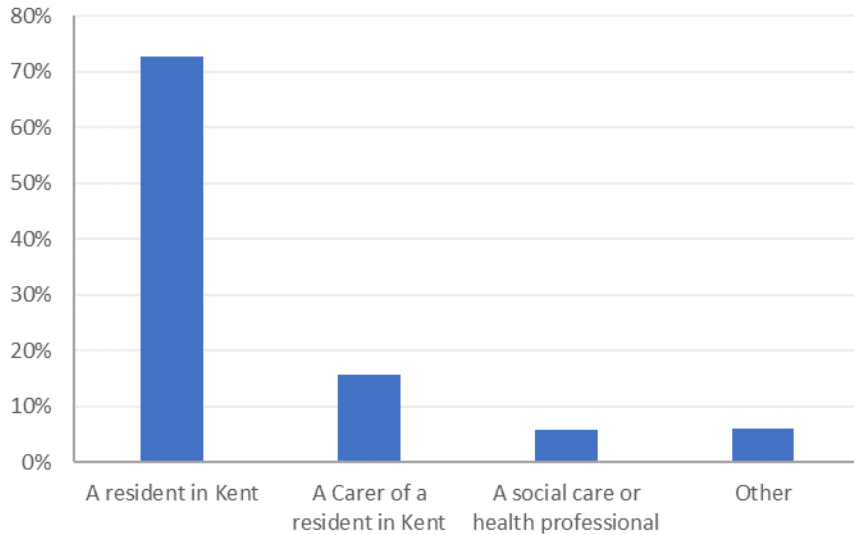
Information regarding the Public Consultation was also sent out through established distribution lists by the Council engagement team and was available via [www.kent.gov.uk](http://www.kent.gov.uk).

Easy read versions and hard copies of the consultation were made available on request.

## Respondents

The consultation was open for eight weeks, from 4th October to 1st December 2019. During that time, 807 responses were received, of which 560 were received electronically and 247 were hard copies. Commissioners also visited local providers and client groups to speak directly to clients, in some circumstances it was not appropriate to get the client to fill in the consultation questionnaire, so their views were recorded separately.

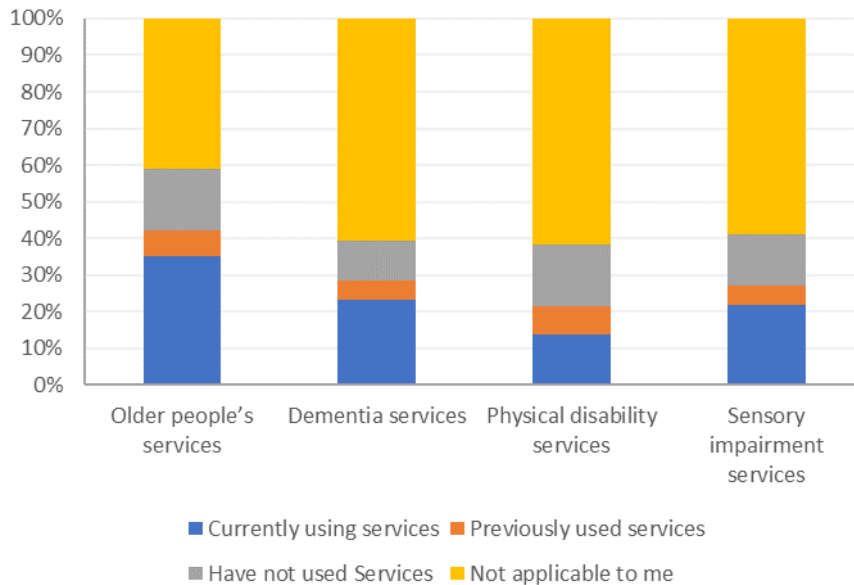
The majority of respondents were from people who identified themselves as residents of Kent



When looking at the percentage of respondents who are currently/have previously used services

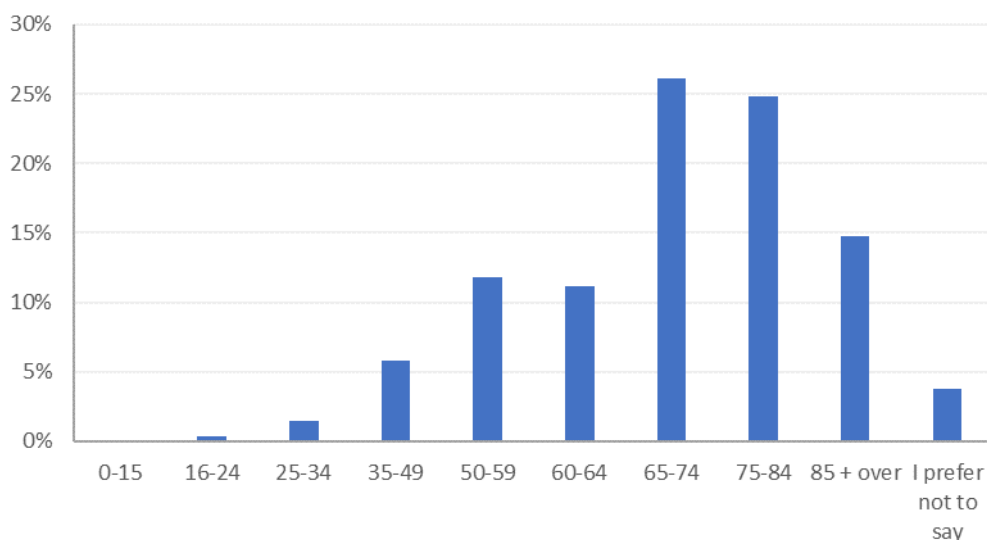
- 42% - Older peoples services
- 28% - Dementia services
- 22% - Physical disability services
- 27% - Sensory impairment services

29% of respondents have not accessed any services now or in the past, 41% have only accessed one, 19% have accessed two, 7% have accessed three and 5% have accessed all four.



617 individuals filled in the demographics section of the consultation, the following percentages are based on those that chose to complete this section.

The majority of responses (66%) were from people aged 65+, with 31% aged under 65 and the remaining 4% choosing not to answer this question.



Responses were received from across the county and beyond. 63 responses came from an unknown or out of area location, with the remaining 744 being split across the county as per the table below. Most districts had a response rate broadly in line with what would be expected apart from a few outliers such as Canterbury, whose response rate was more than twice what was expected, and Dartford, where even accounting for the skew of Canterbury’s responses, the response rate was lower than the population distribution would suggest.

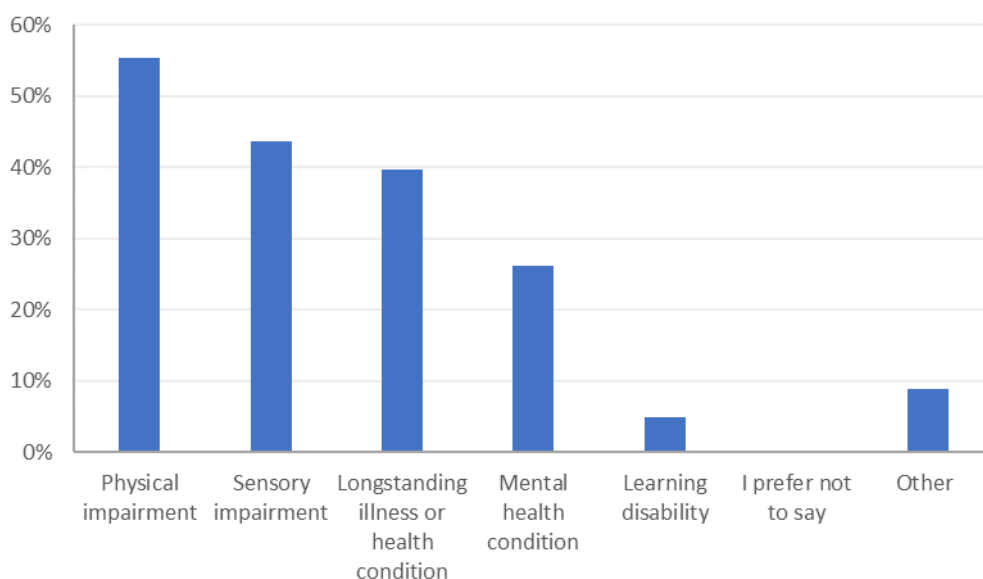
	Estimated Population		Responses	
<b>Gravesham</b>	107,100.00	7%	29	4%
<b>Dartford</b>	112,700.00	7%	14	2%
<b>Folkestone &amp; Hythe</b>	112,700.00	7%	85	11%
<b>Dover</b>	117,900.00	7%	60	8%
<b>Tunbridge Wells</b>	119,600.00	8%	40	5%
<b>Sevenoaks</b>	121,200.00	8%	39	5%
<b>Ashford</b>	131,000.00	8%	62	8%
<b>Tonbridge &amp; Malling</b>	131,100.00	8%	59	8%
<b>Thanet</b>	142,100.00	9%	61	8%
<b>Swale</b>	148,600.00	9%	54	7%
<b>Canterbury</b>	165,500.00	10%	177	24%
<b>Maidstone</b>	172,500.00	11%	64	9%
<b>Kent</b>	1,582,100.00		744	

While the total estimated population of Kent is 1.6 million, the estimated figure for those in the target age group (aged 65+) is around 330,000.

62% of respondents identify as female, 36% as male, with the remaining 2% not wishing to answer this question.

94% of respondents identified themselves as either White British (English, Irish, Scottish or Welsh), 3% saying they come from minority ethnic backgrounds with a majority of these being European countries.

49% of respondents said they had some form of disability, in particular 40% of respondents had a physical and/or sensory disability. Of those that responded to say they had a disability the following graph gives the breakdown of disability type.



Comments made elsewhere in the consultation identified additional challenges for people with disabilities, in terms of accessing support, and the Equality Impact Assessment has been updated to reflect the issues raised.

28% of respondents said that they were a carer with 67% saying they were not. This is higher than the figure stated earlier and may be down to respondents identifying more as a resident with their own needs than as a carer who is supporting someone else.

53% of respondents identified themselves as belonging to a particular religion or belief, 40% did not and 6% preferred not to say. Of those that identified themselves as belonging to a particular religion or belief, 93% identified themselves as Christian, 1% as Buddhist and 3% as other.

88% identified themselves as heterosexual/straight, 10% preferred not to say, 1% identified as bisexual and 1% as a gay man or woman.

### Consultation responses:

The consultation asked people to say which outcomes were important to them, what activities they would like to take part in and where in the community they would like them to be located. The responses are considered below.

### Who is using the services?

Respondents that said they were or had accessed services were cross referenced against different groupings to see if there were any noticeable differences.

	Under 65	65+
<b>Older people's services</b>	31%	47%
<b>Dementia services</b>	30%	29%
<b>Physical disability services</b>	24%	19%
<b>Sensory impairment services</b>	23%	26%

The increased use of older peoples and sensory services in the 65+ age group is expected as individuals age and conditions arise or deteriorate. The fact that the percentage of respondents accessing dementia services is similar between groups can potentially be explained by the fact that a higher proportion of these individuals are carers. This is born out in the data where the average

percentage of respondents using a service who are also carers is 27%, but within dementia service users its 40%. Within the users of this service group there is also a higher percentage of carers under 65 (54%) compared to those aged 65+ (48%).

	Female	Male
<b>Older people’s services</b>	46%	35%
<b>Dementia services</b>	32%	27%
<b>Physical disability services</b>	22%	19%
<b>Sensory impairment services</b>	26%	21%

Across the board it appears women are more likely to make use of services than men are

	Ashford, Canterbury & Coastal	DGS	Swale	Thanet & South Kent Coast	West Kent
<b>Older people’s services</b>	53%	21%	28%	34%	44%
<b>Dementia services</b>	52%	35%	19%	25%	28%
<b>Physical disability services</b>	28%	19%	28%	34%	34%
<b>Sensory impairment services</b>	29%	44%	37%	42%	38%

There are some pronounced differences in service usage between the different areas that have been proposed for the contract. However, it is important to remember that within DGS and Swale the cohort sizes are smaller (43 and 54 respectively) so small changes may have significant impacts.

What outcomes are important to respondents?

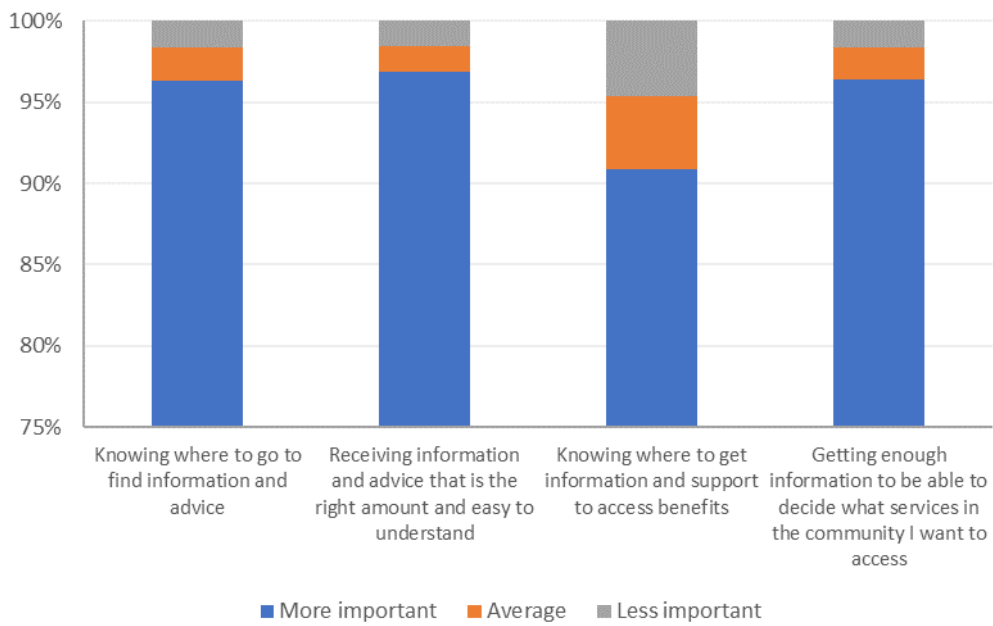
The list of outcomes was split into five groups based on a particular area, respondents were asked to rate the importance of that outcome on a scale of 1 (not at all important) to 5 (very important). If a respondent didn’t know what level of importance to give an outcome there was an option to select ‘Don’t know’, all ‘Don’t know’ answers were then removed from the analysis.

In order to simplify the responses, the scales were then grouped into three categories

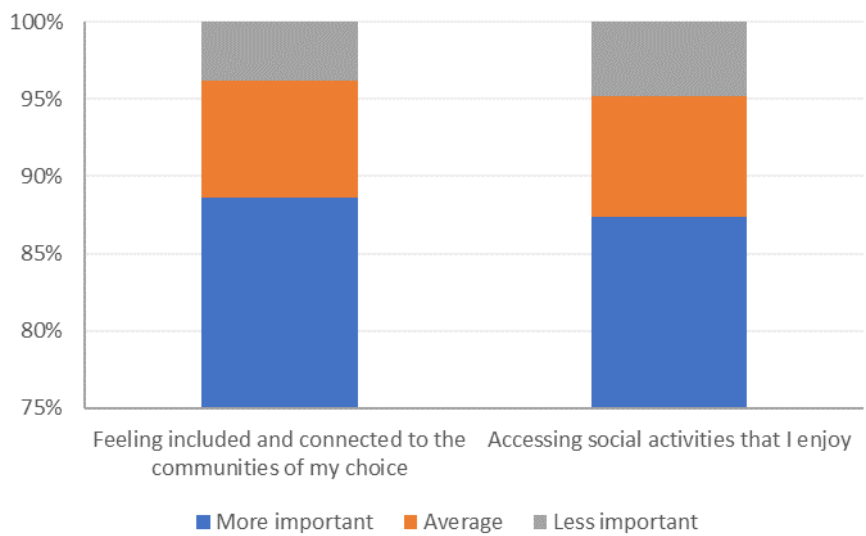
- Less important (1 & 2)
- Average (3)
- More important (4 & 5)

As the responses showed that the majority of respondents felt that all the outcomes were more important the following graphs start their scale at 75% in order to more clearly display the differences between them.

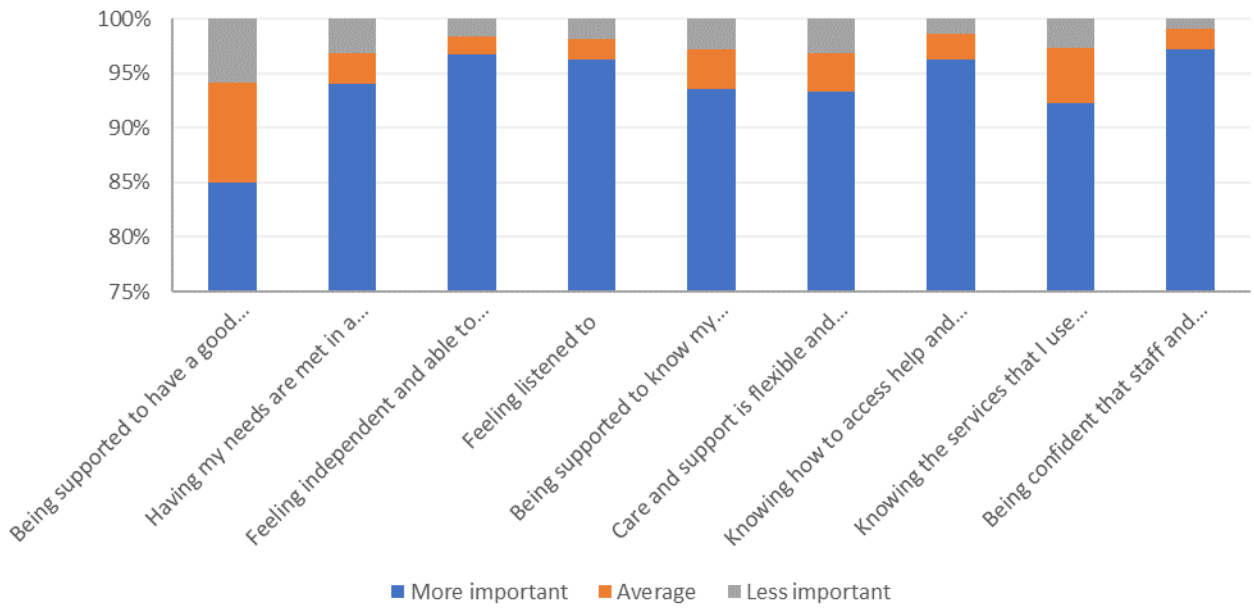
*Personal Outcomes*



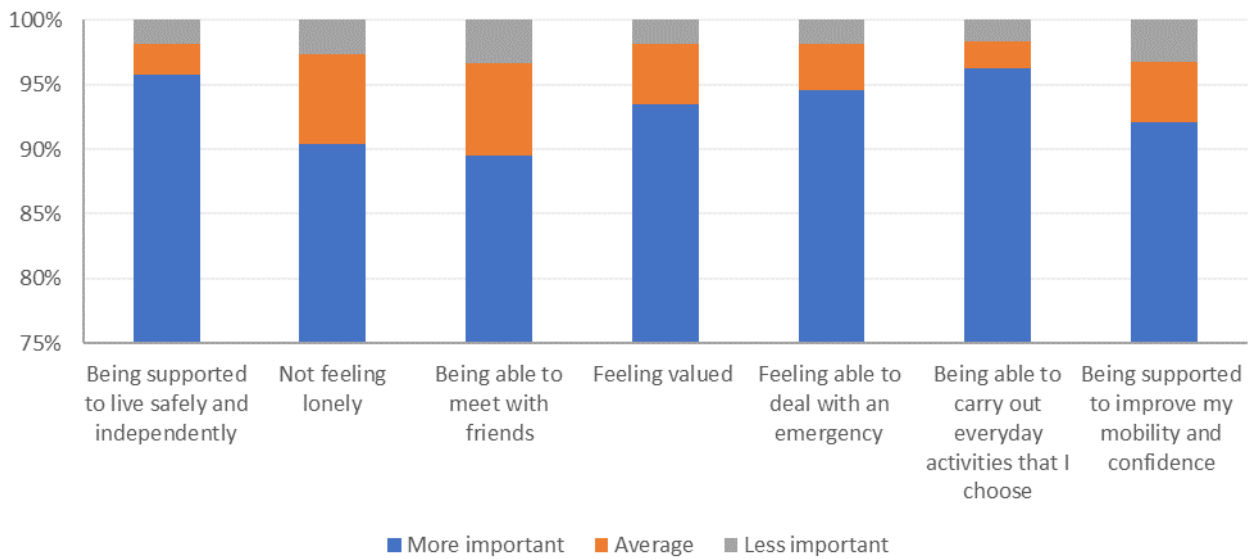
*Community Outcomes*



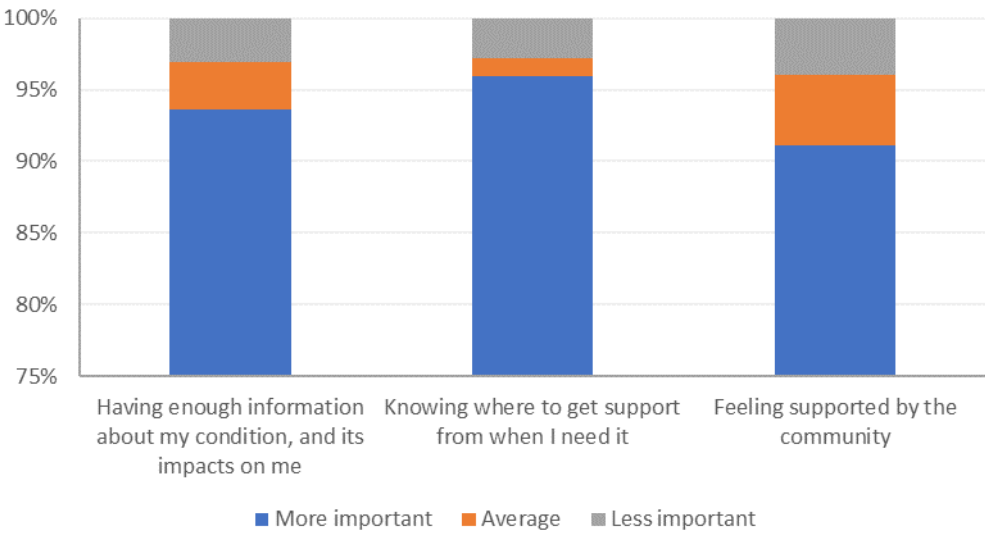
Care and Support Outcomes



Health Outcomes



*Dementia Specific Outcomes*



- Looking across all outcomes the following were shown to be the highest ranked
- 97.2% Being confident that staff and volunteers are well trained
  - 96.8% Receiving information and advice that is the right amount and easy to understand
  - 96.8% Feeling independent and able to make informed choices
  - 96.4% Getting enough information to be able to decide what services in the community I want to access
  - 96.3% Knowing where to go to find information and advice
  - 96.2% Feeling listened to
  - 96.2% Being able to carry out everyday activities that I choose
  - 96.2% Knowing how to access help and support
  - 96.0% Knowing where to get support from when I need it
  - 95.7% Being supported to live safely and independently

With a difference of 1.5% between the top and tenth ranked outcome, and with the lowest ranked outcome 'Being supported to have a good day' still being seen as more important by 85% of respondents, there are no clear outliers. Outcomes were matched against demographic indicators, such as age, gender, ethnicity but there were no significant differences between the different groups, or the cohort size was too small to provide significant results.

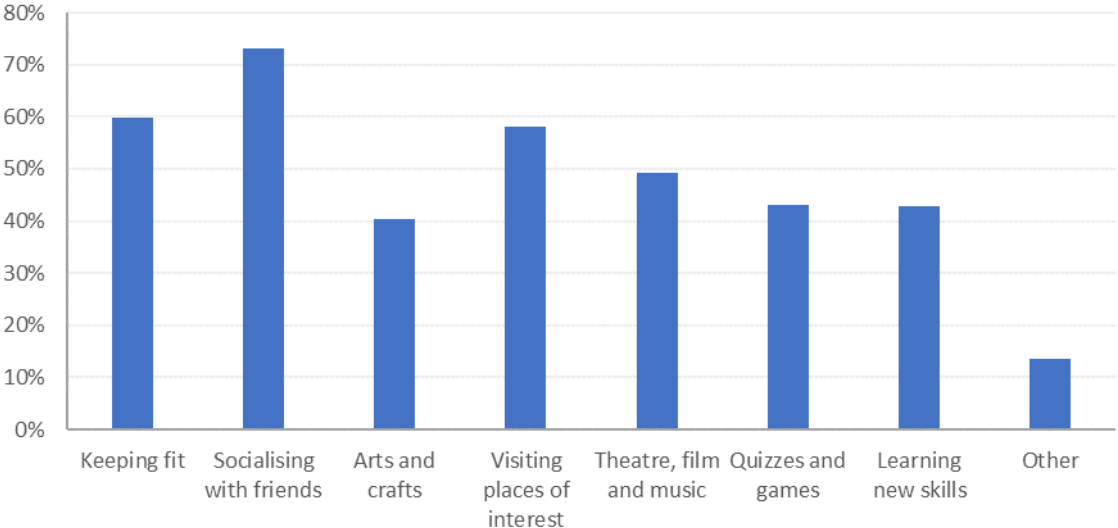




The above word cloud shows the responses we got to the free text question of what outcomes are important to you. Reading through responses, one of the more common comments was that individuals want support to stay in their own homes and to live normal lives. Having friends and being part of a community was also important as it prevents individuals feeling lonely and isolated.

What activities would respondents like to take part in?

Respondents were asked which of a list of possible community based activities they would be interested in taking part in in order to help improve their wellbeing.



The most popular activity, with 73% saying they would like, is socialising, followed by keeping fit (60%) and visiting places of interest (58%). Socialising with friends was one of the activities that came up the most in the free text boxes of the consultation and when speaking to users directly. For many this is the main/only reason that they attend services.



When asked what other activities respondents would be interested in many said that they wanted or had found lipreading classes to be an activity that benefitted them. There were comments around ensuring that activities were accessible for all and that those with disabilities could sometimes struggle. As would be expected based on previous questions many respondents were keen to take part in group activities.

	Under 65	65+
<b>Keeping fit</b>	68%	55%
<b>Socialising with friends</b>	74%	73%
<b>Arts and crafts</b>	47%	39%
<b>Visiting places of interest</b>	63%	57%
<b>Theatre, film and music</b>	57%	47%
<b>Quizzes and games</b>	42%	43%
<b>Learning new skills</b>	50%	41%
<b>Other</b>	13%	16%

Looking at the difference between age groups there is a trend for those aged 65+ to be less interested in activities, outside of socialising and quizzes & games. In some cases this is to be expected as older respondents may find it harder to engage in some of the more energetic activities.

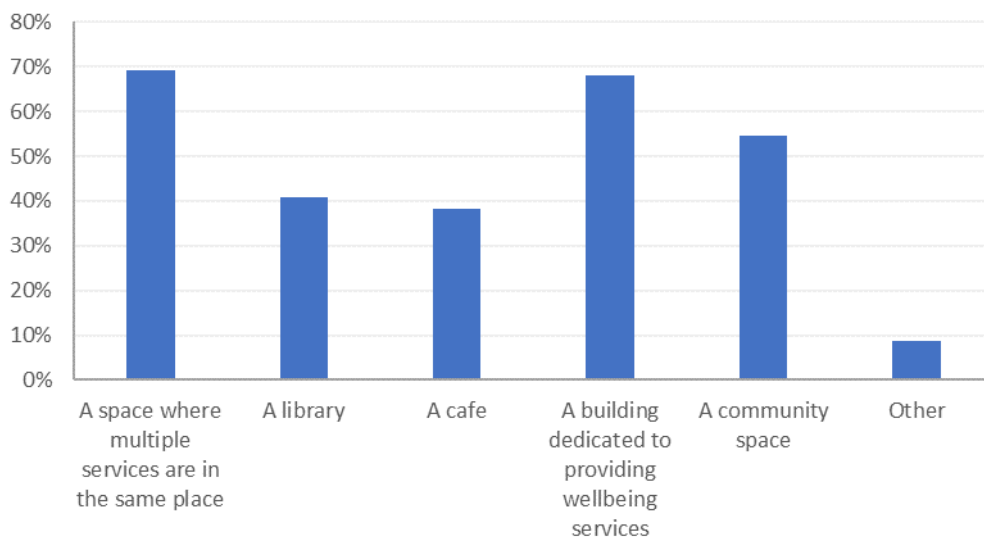
	Female	Male
<b>Keeping fit</b>	59%	59%
<b>Socialising with friends</b>	76%	67%
<b>Arts and crafts</b>	44%	37%
<b>Visiting places of interest</b>	58%	60%
<b>Theatre, film and music</b>	51%	48%
<b>Quizzes and games</b>	47%	34%
<b>Learning new skills</b>	43%	45%
<b>Other</b>	15%	12%

Comparing responses of males and females there is again a slight tendency for men to be less interested in activities than women.

	Ashford, Canterbury & Coastal	DGS	Swale	Thanet and South Kent Coast	West Kent
<b>Keeping fit</b>	53%	56%	74%	63%	64%
<b>Socialising with friends</b>	74%	72%	74%	70%	74%
<b>Arts and crafts</b>	40%	37%	52%	36%	43%
<b>Visiting places of interest</b>	53%	60%	65%	61%	58%
<b>Theatre, film and music</b>	44%	53%	57%	56%	48%
<b>Quizzes and games</b>	43%	49%	48%	38%	45%
<b>Learning new skills</b>	39%	37%	50%	51%	40%
<b>Other</b>	12%	9%	9%	16%	16%

### Where would respondents like services to be provided?

Respondents were asked where in the community they would like services to be delivered. There was a list of possible options and a free text box for any that weren't covered.



The most popular response was for services to be delivered in a space where multiple services are delivered (69%), closely followed by a building dedicated to wellbeing services (68%). It is worth noting, that due to the large number of responses being from individuals who already access services in these types of locations, there is a possibility that there is some bias within the results as they want things to continue as is.



	Ashford, Canterbury & Coastal	DGS	Swale	Thanet and South Kent Coast	West Kent
<b>A space where multiple services are in the same place</b>	66%	70%	72%	74%	69%
<b>A library</b>	34%	56%	39%	46%	44%
<b>A cafe</b>	36%	51%	28%	43%	38%
<b>A building dedicated to providing wellbeing services</b>	68%	65%	67%	67%	69%
<b>A community space</b>	45%	72%	56%	59%	63%
<b>Other</b>	9%	21%	4%	9%	8%

Respondents in DGS appear to be more in favour of public, mixed use locations than those in other areas. This is despite the fact that they, on average, had a higher proportion of respondents aged 65+.

#### Additional comments

Within the free text boxes there were many responses that didn't fit into one of the previous sections but were relevant and/or repeated by enough respondents that they have been placed below.

- There are a diverse range of needs within the target group and these can have a significant impact on the outcomes that are important to individuals, for services to support clients they need to be flexible
- There needs to be more communication between organisations, so clients don't have to explain their issues multiple times
- There needs to be more support for carers. Many of the carers within this group have their own issues and/or need wellbeing support themselves
- There is a fear of change, some are worried about losing services that they rely on and some, due to issues such as dementia struggle with changes
- The importance of those who use the services and their carers having a voice in any decisions that are made about the care and support they receive

#### Equality Analysis

The following were comments relating to the EqIA document, all will be considered when updating the EqIA in the future.

- There wasn't enough focus on mental health issues
- Concern that providers would spend too much time spent on monitoring equality and not on delivering services
- Concern that historic data on the demographics of wellbeing service users wasn't available
- There wasn't enough focus on where services will be held and the need for these places to be accessible
- Some older people struggle to access online support and information
- Income inequality should be considered

There is a clear under representation of responses from ethnic/religious minorities within the consultation. There was an attempt to address this part way through the consultation by reaching out to specific groups, but numbers remain low.

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**From:** Ben Watts, General Counsel

**To:** Adult Social Care Cabinet Committee – 16 January 2020

**Subject:** **Work Programme 2020/21**

**Classification:** Unrestricted

**Past Pathway of Paper:** None

**Future Pathway of Paper:** Standard item

**Summary:** This report gives details of the proposed work programme for the Adult Social Care Cabinet Committee.

**Recommendation:** The Adult Social Care Cabinet Committee is asked to CONSIDER and NOTE its work programme for 2020/21.

1.1 The proposed Work Programme has been compiled from items on the Forthcoming Executive Decisions List, from actions arising from previous meetings and from topics identified at agenda setting meetings, held six weeks before each Cabinet Committee meeting, in accordance with the Constitution, and attended by the Chairman, Vice-Chairman and the Group Spokesmen. Whilst the Chairman, in consultation with the Cabinet Member, is responsible for the final selection of items for the agenda, this report gives all Members of the Cabinet Committee the opportunity to suggest amendments and additional agenda items where appropriate.

## **2. Terms of Reference**

2.1 At its meeting held on 27 March 2014, the County Council agreed the following terms of reference for the Adult Social Care and Health Cabinet Committee: - *‘To be responsible for those functions that sit within the Social Care, Health and Wellbeing Directorate and which relate to Adults’.*

2.2 Further terms of reference can be found in the Constitution at Appendix 2, Part 4, paragraphs 21 to 23, and these should also inform the suggestions made by Members for appropriate matters for consideration.

## **3. Work Programme 2019/20**

3.1 An agenda setting meeting was held at which items for this meeting were agreed and future agenda items planned. The Cabinet Committee is requested to consider and note the items within the proposed Work Programme, set out in the appendix to this report, and to suggest any additional topics that they wish to be considered for inclusion to the agenda of future meetings.

3.2 The schedule of commissioning activity which falls within the remit of this Cabinet Committee will be included in the Work Programme and considered at future agenda setting meetings. This will support more effective forward agenda

planning and allow Members to have oversight of significant service delivery decisions in advance.

- 3.3 When selecting future items, the Cabinet Committee should give consideration to the contents of performance monitoring reports. Any 'for information' or briefing items will be sent to Members of the Cabinet Committee separately to the agenda, or separate Member briefings will be arranged, where appropriate.

#### 4. Conclusion

- 4.1 It is vital for the Cabinet Committee process that the Committee takes ownership of its work programme, to help the Cabinet Member to deliver informed and considered decisions. A regular report will be submitted to each meeting of the Cabinet Committee to give updates of requested topics and to seek suggestions of future items to be considered. This does not preclude Members making requests to the Chairman or the Democratic Services Officer between meetings, for consideration.

5. **Recommendation:** The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **NOTE** its work programme for 2020/21.

#### 6. Background Documents

None.

#### 7. Contact details

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# ADULT SOCIAL CARE CABINET COMMITTEE - WORK PROGRAMME 2020/21

## WEDNESDAY 4 MARCH 2020

<u>Item Subject:</u>	<u>Item Background Information:</u>
<ul style="list-style-type: none"> <li>Annual Presentation of Risks</li> </ul>	Annual Report
<ul style="list-style-type: none"> <li>Performance Dashboard (to include Adult Social Care Outcomes Framework (ASCOF) slides)</li> </ul>	To be brought to ASC Cabinet Committee every other meeting
<ul style="list-style-type: none"> <li>20/00013 - Rates Payable and Charges Levied for Adult Social Care</li> </ul>	Annual Report (Key Decision)
<ul style="list-style-type: none"> <li>20/00014 - Proposed Changes to the Adult Social Care and Health Non-Residential Charging Policy</li> </ul>	(Key Decision)
<ul style="list-style-type: none"> <li>Verbal Updates by the Cabinet Member and Corporate Director</li> </ul>	Standing Item
<ul style="list-style-type: none"> <li>Work Programme 2020/21</li> </ul>	Standing Item

## FRIDAY 22 MAY 2020

<u>Item Subject:</u>	<u>Item Background Information:</u>
<ul style="list-style-type: none"> <li>Adult Social Care Green Paper</li> </ul>	Developing Issue – awaiting further information from Central Government
<ul style="list-style-type: none"> <li>Deprivation of Liberty Safeguards (DoLS) Legislative Changes</li> </ul>	Deferred from Nov 2019 mtg
<ul style="list-style-type: none"> <li>Verbal Updates by the Cabinet Member and Corporate Director</li> </ul>	Standing Item
<ul style="list-style-type: none"> <li>Work Programme 2020/21</li> </ul>	Standing Item

## TUESDAY 14 JULY 2020

<ul style="list-style-type: none"> <li>Strategic Delivery Plan Monitoring</li> </ul>	Requested by Corporate Board in July 2019 (to be brought as 6-monthly item)
<ul style="list-style-type: none"> <li>Annual Equality and Diversity Report</li> </ul>	Annual Report
<ul style="list-style-type: none"> <li>Performance Dashboard</li> </ul>	To be brought to ASC Cabinet Committee every other meeting
<ul style="list-style-type: none"> <li>Verbal Updates by the Cabinet Member and Corporate Director</li> </ul>	Standing Item
<ul style="list-style-type: none"> <li>Work Programme 2020/21</li> </ul>	Standing Item

## TUESDAY 29 SEPTEMBER 2020

<ul style="list-style-type: none"> <li>Verbal Updates by the Cabinet Member and Corporate Director</li> </ul>	Standing Item
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• Work Programme 2020/21	Standing Item
<b>WEDNESDAY 25 NOVEMBER 2020</b>	
• Strategic Delivery Plan Monitoring	Requested by Corporate Board in July 2019 (to be brought as 6-monthly item)
• Performance Dashboard	To be brought to ASC Cabinet Committee every other meeting
• Verbal Updates by the Cabinet Member and Corporate Director	Standing Item
• Work Programme 2020/21	Standing Item
<b>WEDNESDAY 20 JANUARY 2021</b>	
• Draft Capital Programme 2020/2023 and Draft Revenue Programme 2020/2021	Annual Report
• Corporate Risk Register	Annual Report
• Verbal Updates by the Cabinet Member and Corporate Director	Standing Item
• Work Programme 2021/22	Standing Item
<b>FRIDAY 5 MARCH 2021</b>	
• Rates Payable and Charges Levied for Adult Social Care	Annual Report
• Annual Presentation of Risks	Annual Report
• Performance Dashboard	To be brought to ASC Cabinet Committee every other meeting
• Verbal Updates by the Cabinet Member and Corporate Director	Standing Item
• Work Programme 2021/22	Standing Item
<b>THURSDAY 17 JUNE 2021</b>	
• Annual Equality and Diversity Report	Annual Report
• Strategic Delivery Plan Monitoring	Requested by Corporate Board in July 2019 (to be brought as 6-monthly item)
• Verbal Updates by the Cabinet Member and Corporate Director	Standing Item
• Work Programme 2021/22	Standing Item