

KENT COUNTY COUNCIL

ADULT SOCIAL CARE AND PUBLIC HEALTH CABINET COMMITTEE

MINUTES of a meeting of the Adult Social Care and Public Health Cabinet Committee held at Council Chamber, Sessions House, County Hall, Maidstone on Tuesday, 8th July, 2025.

PRESENT: Ms I Kemp, Mr A Kibble, Mr O Bradshaw, Mr R Mayall, Mr S Dixon, Mr R Ford, Mr M Brown, Mr C Sefton and Mr S Jeffery

ALSO PRESENT: Ms D Morton, Mr M Mulvihill and Mr P King

IN ATTENDANCE: Richard Smith (Corporate Director for Adult Social Care), Dr Anjan Ghosh (Director of Public Health), Victoria Tovey (Assistant Director of Public Health), Sydney Hill (Director of Operations for Short Term Support), Mark Albiston (Director for Adult Social Care).

Michael Thomas-Sam (Corporate Lead in Adults' and Children's Policy and Strategy), Simon Mitchell (Assistant Director for Adult Commissioning), Christopher Beale (Senior Commissioner), Hannah Brisley (Senior Commissioner), Luke Edwards (Senior Commissioner), Melanie Anthony (Commissioner Manager), Nathalie Reeves (Public Health Specialist), Sarah Crouch (Consultant in Public Health), Clare Maynard (Chief Procurement Officer), Tricia Pereira (Head of Service Improvement & Interim Assistant Director Strategic Safeguarding, Practice, Policy & Quality Assurance), Jade Shepherd (Business Improvement Manager), Steve Samson (Head of Economy), Paula Parker (Head of Transformation, Delivery and Support), Danielle Miller (Commissioner), Linda Smith (Consultant in Public Health), and Ruth Emberley (Democratic Services).

UNRESTRICTED ITEMS

1. Election of Chair
(Item. 2)

Ms Isabella Kemp was nominated by the Leader to be the Chair of the Adult Social Care and Public Health Cabinet Committee. The Committee agreed the nomination and Ms Kemp was declared as Chairman of the Committee.

RESOLVED that Ms Isabella Kemp be elected Chair of the Committee.

2. Election of Vice-Chair
(Item. 3)

A Member proposed that Mr Oliver Bradshaw be elected as Vice-Chair of the Adult Social Care and Public Health Cabinet Committee. This nomination was seconded by another Member. There were no further nominations.

RESOLVED that Mr Oliver Bradshaw be elected as Vice-Chair of the Committee.

3. Apologies, Substitutes and changes to Membership
(Item. 4)

It was confirmed that since publication, changes to the Membership included Mr Trevor Shonk joining the Committee.

Apologies were received from Ms Connie Nolan.

4. Declarations of Interest by Members in items on the agenda
(Item. 5)

There were no Member declarations of interest.

5. Minutes of the Adult Social Care Cabinet Committee meeting held on 15 January 2025
(Item. 6)

RESOLVED that minutes of Adult Social Care Cabinet Committee held on the 15 January 2025 were a correct record and a paper copy to be signed by the Chair.

6. Minutes of the Health Reform and Public Health Cabinet Committee meeting held on the 11 March 2025
(Item. 7)

RESOLVED that minutes of Public Health Cabinet Committee held on the 11 March 2025 were a correct record and a paper copy to be signed by the Chair.

7. Verbal Updates by Cabinet Member and Corporate Directors
(Item. 8)

1. The Cabinet Member for Adult Social Care and Public Health, Miss Diane Morton provided a verbal update. Some of the key highlights were as follows:
 - a) Deputy Cabinet Member, Mr Mark Mulvihill had taken on the role of Mental Health Champion and would focus on all aspects of mental health in Kent.
 - b) Miss Morton confirmed that she attended a provider conference in July, which was a valuable exercise to work with the sector in constructive and engaging dialogue ahead of forthcoming Nursing and residential home contract renewals.
 - c) The Carers' Cuppa took place on the 13 June 2025 at Sessions House which marked Carers' Week and supported the Someone's Listening Campaign.
 - d) The theme for the 2025 Alcohol Awareness week was the link between alcohol and work-related stress.

- e) The Directorate had taken part in the Shared Lives Week and Learning Disability Week (in partnership with MENCAP), with an art exhibition showcasing in the Stone Hall. These were just some of the awareness campaigns scheduled to take place throughout the year and it was hoped the Council would continue to participate.
 - f) The Prevention Framework consultation commenced on 6 June 2025 and finished on 14 July 2025. It was confirmed that a report on the outcome would be presented to the Committee in September 2025.
 - g) Miss Morton confirmed that she recently visited Gravesham Place, one of 4 integrated care centres, to meet staff and residents. During the visit, a discussion took place regarding how technology enabled care helped people live more independently at home.
2. The Corporate Director for Adult Social, Mr Richard Smith, extended a welcome to the new Committee and confirmed that there were several forthcoming key decisions which needed to be taken in order to fulfil the legal statutory responsibilities and duties of the Council.
 3. The Director of Public Health, Dr Anjan Ghosh, echoed Mr Smith's remarks and confirmed that this was the first meeting of the two merged Cabinet Committees.
 4. RESOLVED that the Committee noted the verbal updates.

8. 25/00042 Older Persons Residential and Nursing Re-commissioning Contract - Key Decision
(Item. 9)

Mr Richard Streatfeild was in attendance for this item.

1. The Report was presented by the Head of Transformation, Delivery and Support, Ms Paula Parker.
2. Some of the key highlights were as follows:
 - a) The current contract supported around 3,800 older people assessed to require care and support which could not be delivered in their own home.
 - b) The current contract had been in place for 12 years and was scheduled to end in March 2026, unless new arrangements were in place.
3. Councillor Richard Streatfeild was in attendance for this item in his capacity as a local Member. He drew the following points to the Committee's attention:
 - a) That he was previously a Member of the Adult Social Care Committee and when the contract was first let, it was valued at £100 million per year. On the most recent figures, the contract

was valued at £235 million per year. In reference to the forecast in the business case, the growth was anticipated as 45% in the first year of growth and 2.8% in the following three years.

- b) Mr Streatfeild commented that to achieve the percentage of forecast growth, there was an assumption that the demographic remained the same, however he pointed out that the over 65 population was anticipated to grow across the county by 40%.
 - c) A previous report from the January 2024 Cabinet Committee provided that of the 270 care homes, 179 were on dynamic purchasing (66%). The current paper indicated that the figure was going to move to 70% on 1 April 2026 and to 80% in open framework over 4 years. Mr Streatfeild referred to the risk register and indicated that it contained a high impact risk due to the high likelihood of providers not accessing the open framework.
 - d) Mr Streatfeild indicated that Members should seek assurance that the high impact likelihood risk was either removed or mitigated during the course of the next 4 years.
 - e) It was highlighted that the papers from the January 2024 Committee attributed a cost of £150 million per year to the contract whereas the papers before the Committee today provided a contract cost of £222 million. Mr Streatfeild encouraged Member to enquire as to the reason for the increase.
4. Mr Smith commented that it was recognised that adult social care saw an average 10% growth every year and only 4% was funded from ring fenced grants, whilst the Authority could budget for around 6%.
5. The framework was designed to identify providers which the Council wanted to work with, as a whole system approach, that enabled working together to reduce demands of services. Mr Smith explained that the service users who needed care later in life had multiple needs which increased their support demands. The complexities of this were reflected in the framework.
6. Quality of service and NHS demand were drivers to the framework and thought had gone into creating a single pathway into adult social care and the market place. Whilst the figures for the contract were large, equally adult social care demands were such that it was required.
7. The Director for Adult Social Care, Mr Mark Albiston, commented that accommodation was the responsibility of the District Councils and not the County Council. One of the enablers for reducing spending centred around the development of appropriate extra care provision across Kent. Mr Albiston clarified that Districts were responsible for planning and the provision of housing.

8. RESOLVED that the Committee considered and endorsed the proposed Key Decision - 25/00042 Older Persons Residential and Nursing Re-commissioning Contract.

9. Improvement Plan
(Item. 10)

1. The item was presented by the Head of Service Improvement & Interim Assistant Director of Strategic Safeguarding, Practice, Policy and Quality Assurance, Ms Tricia Pereira. In answer to Members' questions the following was said:
 - a) It was confirmed that the Improvement Plan was an initial draft action plan that the Council had to submit in the first part of their return, in response to the CQC (Care Quality Commission) assessment. Once a response had been provided to the CQC and the Department of Health, a more robust and detailed action / Improvement Plan was required. Ms Pereira confirmed that this was currently being developed.
 - b) The final Improvement Plan would be shared by August 2025. Each of the community teams had their own delivery plan (which sat under the Improvement Plan) and included KPIs (Key Performance Indicators) and milestones / timelines. Once these had been refined, that information would be published.
 - c) Improvement plans had already been delivered for all the locality teams. These plans sat within the business-as-usual criteria. The focus of these was the reduction of excessive wait times, which had arisen as a result of increasing demands for social care through the need for assessment, reviews, adult safeguarding and challenging workforce environment. In relation to the latter, staff retention was being reviewed.
 - d) The metrics used the number and percentage of people who had the assessment within 28 days of contact from the Council. From this data, it was possible to examine the medium wait time and the steps to reduce it. At present, a risk prioritisation approach was being used and so those with the greatest risk received an earlier response. It was acknowledged that this also meant people who had been assessed with a lower risk, could end up waiting for extended periods of time.
 - e) Assistant Directors and Performance colleagues monitored the performance plans on a weekly basis and from across several metrics it was possible to see improvement, via the dashboard.
2. RESOLVED that the Committee noted the Local Authority rating and commented on the improvement activity identified.

10. Update on Public Health Service Transformation
(Item. 11)

1. The Assistant Director of Public Health, Ms Victoria Tovey, presented the report. The papers were taken as read. Some of the key points were as follows:
 - a) The programme started in July 2023 and was currently in the late stages of implementation. The aim of the programme was to improve on current services by ensuring they delivered better value, greater impact, improved services for the community and that they were safe, effective and sustainable for the future.
 - b) The service was funded by ring fenced Public Health grants and income from external NHS organisations. The service supported the Council to deliver against statutory duties.
 - c) Services such as Health Visiting, Sexual Health, Substance Misuse and NHS Health Checks were included and their performance was reported nationally.
 - d) The programme followed a standard commissioning cycle but aimed to look across other services; currently seven service areas had been reviewed to examine the best ways of maximising impact and cross cutting themes.
 - e) The programme was overall on track and several milestones had been delivered.
2. RESOLVED that Members noted the information contained in the updated report and commented on the programme and the next steps.

11. 25/00039 Public Health Service Transformation: NHS Health Checks - Key Decision
(Item. 12)

1. The report was introduced by Director of Public Health Dr Anjan Ghosh and presented by Senior Commissioner, Mr Christopher Beale.
2. In answer to Member questions, the following was said:
 - a) In 2024 100% of the eligible population were invited (approximately 95,000 individuals). The uptake rate for the health checks was 36.4% although the aim was to increase this, through the programme.
 - b) Work had been conducted through GP surgeries and pharmacies to maximise engagement, as well as the use of digital technology to extend invitations, which could then be monitored. This provided a robust way to record successful invites.
 - c) The Outreach Service ensured that areas of deprivation would be included. Work within the Commissioning Teams had been conducted

with a focus on identifying the areas where a difference could be made, as well as those areas with high air pollution.

- d) Nationally the uptake was 37.5% and it was anticipated that with the new model this would increase, taking into consideration the limiting factor of the budget. Mr Beale indicated that a progress update could be brought back to the Committee in due course.

- 3 RESOLVED that the Committee endorsed the proposed Key Decision – 25/00039 Public Health Transformation: NHS Health Checks - as set out on the Proposed Record of Decision.

12. 25/00041 Public Health Service Transformation: Sexual Health Services - Key Decision
(Item. 13)

- 1. The item was introduced by Public Health Specialist, Ms Nathalie Reeves and presented by Senior Commissioner, Ms Hannah Brisley. The key points of the report were highlighted for Member attention.
- 2. There were no Member comments or questions.
- 3. RESOLVED that the Committee considered and endorsed the key decision – 25/00041 Public Health Service Transformation: Sexual Health Service – as set out in the Proposed Record of Decision.

13. 25/00038 Public Health Service Transformation: Physical Activity Service for Older People - Key Decision
(Item. 14)

- 1. The report was introduced by Consultant in Public Health, Ms Sarah Crouch and presented by Senior Commissioner, Mr Luke Edwards. Mr Edwards highlighted the key points of the report to Members.
- 2. In response to Member questions, the following was said:
 - a) The new model was more accessible and therefore would meet the needs of more people going forward. Progress would be monitored closely.
 - b) Ms Crouch explained that the approach needed to be flexible in that the intention was to go out into the community and understand which provisions would likely to work. It was estimated that if 12-week programmes ran with a set budget, around 1,000 people per year could be reached.
 - c) It was explained that the service was preventative and aimed to intervene before a fall had taken place. Prevention ideals included keeping people stronger, and in their own homes, for longer. The referral pathway was currently a self-referral and the services commissioned by the NHS continued to be through the clinical

pathways. A range of ways to market and promote the service were currently being examined, as a result of the public consultation.

- d) As part of the grant approval process, extensive training would be provided to ensure the service was consistent.
 - e) Core policies would in place and all grant providers would be required to demonstrate them. These included items such as safeguarding, good health and safety approaches, and sufficient training for the whole workforce. Ms Crouch confirmed that there was a strong evaluation focus with the programme.
 - f) Dr Ghosh clarified that the programme focused on aspects such as core strength improvement, balance, stability and staying fit to mitigate or prevent the risk of a fall. He confirmed that the approach was not clinical, rather evidence-based practice around different interventions
- 3) RESOLVED that the Committee considered and endorsed key decision – 25/00038 Public Health Service Transformation: Physical Activity Service for Older People - as set out in the Proposed Record of Decision.

14. 25/00005 Kent and Medway Work and Health Strategy - Key Decision
(Item. 15)

The Cabinet Member for Economic Development and Coastal Regeneration, Mr Paul King, was present for this item

1. Head of Economy Mr Steve Sampson introduced and presented the item. The key points were highlighted for Member attention.
2. The Cabinet Member for Economic Development and Coastal Regeneration, Mr Paul King, commented that the decision had been presented to the Growth, Economic Development and Communities Cabinet Committee and he was in full support of it. He commented that health issues appeared to be in the coastal region. He further explained that one of the key programme designs that helped to deliver the strategy was the Connect to Work Programme and KCC was the accountable body. Mr King confirmed that £34 million had been provided through Government funding to assist over 9,000 local people with long term conditions, disabilities and other disadvantages to gain access or remain in employment.
3. In answer to Member questions, the following was said:
 - a) There was no specific training programme envisaged as part of the strategy, however there were several schemes KCC actively delivered. The aspiration around the strategy was to encourage people to think about career opportunities.
 - b) A wider Government funded project ran concurrently with the Kent and Medway Work and Health Strategy called the Get Kent and

Medway Working Plan. This provided the mapping of skills, education and training provisions within the county.

- c) An element of the Get Kent and Medway Working Plan focused on young people building aspirations early on and providing the right career provision, as well as the right opportunities for engagement with employers. It was highlighted to Members that these were key building blocks of good health.
- d) A wide consultation had taken place with the District Councils via the Economic Development Officers Group, as well as via housing teams and other officers who worked with some of the target groups for the strategy. It was confirmed that the role which anchor institutions across the county played in the agenda, was recognised. Once the strategy had been signed off, engagement with District partners would continue.

4. RESOLVED that the Committed endorsed the Cabinet Member for Economic Development and Coastal Regeneration to:

- Approve and adopt the Kent and Medway Integrated Work and Health Strategy on behalf of Kent County Council;
- DELEGATE authority to the Director of Public Health, in consultation with the Director of Growth and Communities, Cabinet Member for Adult Social Care & Public Health and Cabinet Member for Economic Development & Coastal Regeneration, to sign off the final plan, refresh and/or make revisions to the Plan as appropriate during the lifetime of the plan;
- DELEGATE authority to the Director of Public Health, in consultation with the Director of Growth & Communities, to take relevant actions, including but not limited to finalising the terms of, and entering into required contract or other legal agreements, as necessary to implement the decision.

15. Work Programme
(Item. 16)

RESOLVED Members noted the work programme