
From: Diane Morton, Cabinet Member for Adult Social Care and Public Health
Richard Smith, Corporate Director Adult Social Care and Health

To: Adult Social Care and Public Health Cabinet Committee
- 10 September 2025

Subject: **Adult Social Care: Prevention Framework 2025-2035**

Key Decision: Yes

Decision no: 25/00054

Classification: Unrestricted

Pats pathway of report: None

Future Pathway of report: Cabinet Member decision

Electoral Division: All

Is the decision eligible for call-in? Yes

Summary: This report informs the development of the draft Adult Social Care Prevention Framework 2025 – 2035, which sets the priorities for preventative working alongside key partners to support the Kent population to lead fulfilled, healthy and independent lives. This report presents the final draft Adult Social Care Prevention Framework, along with the Consultation Report and Equality Impact Assessment. It also provides information about the consultation process and changes made as a result to reflect the feedback provided.

Recommendation(s): The Adult Social Care and Public Health Cabinet Committee is asked to **CONSIDER** and **ENDORSE** or make **RECOMMENDATIONS** to the Cabinet Member for Adult Social Care and Public Health on the proposed decision attached as Appendix A.

1. Introduction

- 1.1 The Adult Social Care Making a Difference Every Day Strategy and the Kent Adult Carers' Strategy have set the direction for adult social care. These strategies are supported by the Kent and Medway Integrated Care Strategy, as well as Framing Kent's Future, Securing Kent's Future, the Joint Strategic Needs Assessment, and the Kent and Medway Social Prescribing Strategy. Together, these all support a shift towards proactive, preventative approaches that reduce demand, promote wellbeing, and help people remain independent for longer.

- 1.2 Even though there is reference to preventative support (primary prevention, secondary prevention and tertiary prevention), within the various strategies the approach is not codified in a single document. The development of the Adult Social Care Prevention Framework is intended to satisfy this objective and to express our ambitions clearly in respect of the fundamental statutory requirements of the Care Act 2014 and the care and support statutory guidance.
- 1.3 The Adult Social Care Prevention Framework (Appendix 1) will serve as a practical tool to support the design, planning, and delivery of preventative initiatives over a ten-year period, aiming to sustainably manage the growing adult social care demand with a regular formal review to ensure it remains relevant and responsive to emerging needs. Strong engagement and robust data have shaped a collaborative and evidence-based foundation.
- 1.4 The Adult Social Care Prevention Framework covers a ten year period and during that time there will be significant change, with Local Government Reorganisation (LGR) in 2028. The draft Adult Social Care Prevention Framework acknowledges this by stating that, *“devolution, local government reorganisation and changes to health and social care may also create opportunities and challenges yet to be fully understood. Therefore, we will review our framework regularly to ensure that it remains relevant and aligned to the changing context and needs of the people of Kent”*. The delivery plan which will support the implementation of the Adult Social Care Prevention Framework will be 2025-2028 and at that point the Adult Social Care Prevention Framework will be reviewed.

2. Background

- 2.1 The Government acknowledges through its 5 Missions and the Casey Commission, that Adult Social Care in England is facing unprecedented challenges due to rising demand, increased costs of care and support, and budget pressures. Adopting a prevention-first approach has emerged as one of a number of sustainable solutions, helping people live independently while easing the financial strain on local authorities, benefiting both residents and providers. It also provides an opportunity to strengthen partnerships, particularly with the close alignment to the NHS 10 Year Plan.
- 2.2 To inform the development of the Adult Social Care Prevention Framework, extensive engagement was undertaken with over 200 individuals. A series of co-designed and co-chaired workshops were held with the Voluntary, Community, and Social Enterprise (VCSE) sector, ensuring their active involvement throughout. Regular updates were also provided to the VCSE Strategic Partnership Board and the VCSE Steering Group.
- 2.3 There was engagement with Kent residents, facilitated by Adult Social Care Involvement Officers. Staff engagement has included sessions with commissioning teams and senior managers. Additionally, a monthly meeting was held with members of frontline Adult Social Care teams and colleagues from the Growth, Environment and Transport (GET) directorate.
- 2.4 The Adult Social Care Prevention Framework has also been shared through existing partnership structures, including Health and Care Partnership Boards and the Integrated Care Partnership sub-committees. Engagement has involved

representatives from District Councils, the Integrated Care Board (ICB), and other key stakeholders.

3. Building the Evidence Base: Analytics to Inform Prevention Priorities

- 3.1 Detailed data analysis of the Kent and Medway Care Record (KMCR) was undertaken by the Kent Public Health Observatory and key drivers of demand were identified. Certain risk factors appear to increase risk for accessing adult social care, including rising age, living alone, living in areas of high deprivation and certain long-term conditions such as dementia. A range of Public Health and Adult Social Care experts developed more detailed summaries of these drivers to identify evidence-based actions that adult social care could take to mitigate the identified risks.
- 3.2 A more detailed analysis was conducted on the current and future needs of people over 65, as this demographic accounts for 80% of social care costs despite making up only 28% of the population. Future scenarios were modelled through the use of Systems Dynamic Modelling; if we 'do nothing' to alter the trajectory of need for care, assuming costs and activity remain at 2024 levels, then by 2035, the costs associated with meeting the needs of the over 65 population in Kent alone, will rise by at least 48%.
- 3.3 These projections highlight the urgent need to adopt a more preventative approach to alter this trajectory and support the long-term sustainability of Adult Social Care.

4. Wellbeing and Prevention Market Position Statement (2021-2026)

- 4.1 The 2021-26 Wellbeing and Prevention Market Position Statement was published in June 2021. At this time, Wellbeing Services in the Community were delivered via grant arrangements and Kent County Council (KCC) has since moved to commissioned provision (as had been envisaged by the Position Statement). The Position Statement was drafted under chapter 4 of the statutory guidance, which requires local authorities to seek to manage their local care services market to ensure a sufficient variety of services and service providers are available.
- 4.2 The Market Position Statement (2021-26) set out the services and future demand when drafted in 2021. The assessment of supply and demand within the Market Position Statement is using data from 2020 which is related to the impacts of covid. The assessment of supply and demand in the Market Position Statement is now superseded by the work undertaken to identify key drivers of demand and projections of future demand, as set out in the Supporting Information (Appendix 2) document, and in order to underpin the development of the Adult Social Care Prevention Framework. The Market Position Statement is intended to be replaced in 2026 to reflect the principles in the Prevention Framework.

5. The Prevention Framework

- 5.1 The development of the Adult Social Care Prevention Framework is guided by the following five approaches, which are aligned with the Adult Social Care

Making a Difference Every Day Strategy and the Integrated Care Strategy. These have been informed and refined through co-production.

1. **Principle of Prevention First:** We are committed to a stronger, purposeful and shared model of prevention throughout adult social care service delivery. This includes considering prevention opportunities at every step of an individual's adult social care and support journey. We also need to empower our workforce to have holistic conversations and optimise opportunities for information, advice and guidance and connecting with wider community support. This will embed a prevention first and strengths-based approach with a focus on ensuring there is the right support at the right time at every stage of a person's care journey.
2. **Focused Support:** Focused Support is aimed at people who have an increased risk of developing needs or who may already have established conditions, to help reduce or delay any further escalation of need whilst helping them live well and as independently as possible. This includes focused interventions for older people, people with mental health needs, people with long term conditions such as frailty and dementia, people who are unpaid carers and young adults with additional needs.
3. **Partnership Working:** Partnership working is striving to embed prevention in KCC through system-wide interventions. We recognise that prevention is a responsibility wider than social care alone and should be seen as an ongoing consideration and not a single activity or intervention. We will therefore seek to make it easier for people to adopt lifestyles that help them stay healthy, happy and independent for as long as possible. We acknowledge that the conditions Kent residents live and work in are very influential, therefore it is important to promote positive behaviours and strengthen work focusing on the building blocks of health including good housing, education, financial security, work and employment, transport and social networks.
4. **Inclusion and Equity:** We are committed to promoting equality, diversity and inclusion throughout our adult social care work including prevention. There is significant variation in the health and wellbeing of people in Kent. We recognise that prevention should play a pivotal role in narrowing the gaps in health and social care outcomes by supporting people to lead healthier and happier lives. We are also committed to finding innovative ways to improve accessibility, including embracing the full transformative power of new assistive technologies in preventing, reducing and delaying care and support needs.
5. **Measuring and Evidencing Impact:** Ensuring that we make better use of data and intelligence to inform and measure the effectiveness of prevention initiatives and identify emerging needs. This includes more consistent and meaningful measures to understand how we are making a difference to the lives of Kent's residents. We will embed a culture of research and continual monitoring of the outcomes of the people we support and the impact of change, whilst ensuring we optimise prevention in our strategic commissioning. We can only plan and

deliver services and prioritise our resources effectively if we have a full and detailed understanding of current, future and unmet need. This will require improvements in data sharing, data linkages and intelligence across health and social care in Kent to predict future trends. This will allow us to predict demand for provision services, understand the impact of preventative action and invest in what has been proven to reduce future need and make the most efficient use of resources whilst responding to the challenges to social care funding.

- 5.2 Easy read and text only versions of the Adult Social Care Prevention Framework will be developed and made available.

6. Consultation Process

- 6.1 The consultation on the framework opened on 6 June 2025 and it closed on 14 July 2025. The consultation process identified the main stakeholders with interest in the framework, and this included people supported by the service, carers, KCC staff, KCC Members, voluntary sector organisations, NHS trusts, Kent and Medway Integrated Care Board, and social care providers, as well as the public. Full details of the consultation process and responses are included in the Prevention Framework Engagement and Consultation Outcome Report (Appendix 3).
- 6.2 There were 17 face-to-face engagement sessions during June and July 2025 across the county. The face-to-face drop-in sessions engaged with 450 people.
- 6.3 In advance of the consultation, a meeting was held on 23 May 2025 with the Adult Social Care People's Panel, whose members include people from the Older Peoples' Forums, Mental Health User Voice and the Kent Physical Disability Forum as well as Healthwatch Kent volunteers, to share the proposals and approach to the consultation.
- 6.4 The consultation was promoted to 60,679 people/organisations via our Adult Social Care networks. There was a targeted social media campaign which reached 32,036 people. An email was sent to 9,523 people registered with Let's Talk Kent.

7. Consultation Outcomes

- 7.1 The responses to the consultation have been carefully considered, and the draft Adult Social Care Prevention Framework has been updated to reflect feedback from the consultation. This includes amending words that were considered corporate language and further elaboration on particular areas of need such as unpaid carers and young adults with additional needs. For a full breakdown of how the document has changed to reflect the feedback, please see the 'You said, We did' document in Appendix 4.

8. Delivery Plan

8.1 The Adult Social Care Prevention Framework will be supported by a detailed co-designed delivery plan. Initially we will be focusing on the first three years (2025-2028) which will build on and strengthen existing prevention activity and new actions and work programmes to deliver against the priorities set out in the document. Some examples of actions proposed in the draft Delivery Plan are;

- Prevention training and skills in the workforce
- Integrated social prescribing and neighbourhood health
- Age-friendly communities
- VCSE strategic partnership

8.2 The Delivery Plan will be finalised by October 2025 and be supported by appropriate governance, to ensure the actions are delivered against, and align with other programmes of work across the Council.

8.3 Each action in the Delivery Plan will have specific measures and indicators to evaluate against, including high level population health outcomes data and lived experience feedback which will be regularly monitored and reviewed. We will use these evaluations to indicate how we are making a difference to the lives of the people living in Kent.

9. Options considered and dismissed, and associated risk

Options	Reason for dismissal and associated risk
1. Do nothing	It was recommended in the Care Quality Commission (CQC) assessment (September 2024) to create and adopt a single document to showcase the existing and new areas of work linked to Prevention, in accordance with our Care Act 2014 responsibilities. To do nothing, would increase the risk of not fulfilling those responsibilities and that being highlighted in our next CQC assessment.
2. Design a Kent County Council - wide Prevention Framework	<p>There is an established Kent and Medway Integrated Care Strategy, therefore to adopt a KCC wide Prevention Framework, would duplicate the actions set out in the Integrated Care Strategy.</p> <p>It was agreed by Corporate Management Team (CMT) on 24 September 2024, that the Prevention Framework would be an Adult Social Care document.</p>

10. Financial Implications

10.1 The implementation of the Adult Social Care Framework will be taken forward based on the budget allocation to the Adult Social Care and Health Directorate. Service delivery arising from this framework for future years will be determined by the approved budget and the Medium Term and Financial Plan requirements.

11. Legal implications

- 11.1 Section 2 of the Care Act 2014 requires KCC to provide or arrange for the provision of services, facilities or resources, or take other steps, which it considers will: contribute towards preventing or delaying the development by adults of needs for care and support, and the development by carers of needs for support; and reduce the needs for care and support of adults, and reduce the needs for support of carers. In performing that duty, KCC must have regard to the importance of identifying what is already available in Kent and the extent to which KCC could involve or make use of this and identifying adults and carers in Kent with unmet needs for care and support.
- 11.2 Section 78 of the Care Act 2014 requires KCC to act under the general guidance of the Secretary of State in the exercise of functions under the Act. The relevant guidance is the “*Care and support statutory guidance*”, ‘acting under’ this general guidance means that KCC should follow this guidance unless it has good admissible reasons for departing from it.
- 11.3 The Care Act 2014 highlights prevention as one of seven key responsibilities for local authorities, with an inextricable link to the fundamental principle of promoting wellbeing. This means intervening early to support individuals, helping people retain their skills and confidence, and preventing need or delaying deterioration wherever possible (see §2.1 of the Guidance). The guidance states that it is critical to the vision in the Care Act that the care and support system works to actively promote wellbeing and independence and does not just wait to respond when people reach a crisis point. It is vital that the care and support system intervenes early to support individuals, helps people retain or regain their skills and confidence, and prevents need or delays deterioration wherever possible. However, the Guidance emphasises that there are many ways in which a local authority can achieve the aims of promoting wellbeing and independence and reducing dependency. The term “prevention” or “preventative” measures can cover many different types of support, services, facilities or other resources. There is no single definition for what constitutes preventative activity and this can range from wide-scale whole-population measures aimed at promoting health, to more targeted individual interventions aimed at improving skills or functioning for one person, or a particular group or lessening the impact of caring on a carer’s health and well-being. Local authorities should consider the range of options available, and how those different approaches could support the needs of their local communities (§2.4).
- 11.4 The Guidance goes on to state that a local authority should develop a local approach to preventative support, and must provide or arrange for services, facilities or resources which would prevent, delay or reduce individuals’ needs for care and support, or the needs for support of carers. Local authorities should develop a clear, local approach to prevention which sets out how they plan to fulfil this responsibility, considering the different types and focus of preventative support outlined above (§2.23).
- 11.5 The Guidance emphasises that a local approach to preventative support is a responsibility wider than adult social care and support alone, and should include those responsible for public health, leisure, transport and housing services, as well as services provided in partnership with other local partners (e.g. the NHS)

and other organisations (e.g. specialist housing providers or carers' services) (§2.24). In developing its approach, the guidance says that KCC must, for example, identify current and future demand for preventative support, and the supply in terms of services, facilities and other resources available (§2.25).

- 11.6 In developing a local approach to prevention, a local authority must take steps to identify and understand both the current and future demand for preventative support, and the supply in terms of services, facilities and other resources available in their area, which could support people to prevent, reduce or delay needs (§§2.26, 2.29). A local authority should consider the number of people its area with existing needs for care and support, as well as those at risk of developing needs in the future and what can be done to prevent, delay or reduce those needs now and in future; and draw on existing analyses such as the Joint Strategic Needs Assessment and work with other local partners to develop a broader, shared understanding of current and future needs (§2.29). In particular, local authorities must consider how to identify 'unmet need', for example, those people with needs which are not currently being met, whether by the local authority or by anyone else and share this assessment with local partners to contribute to wider intelligence for local strategies (§2.30). Local authorities should consider how they can work with different partners to identify unmet needs for different groups and coordinate shared approaches to preventing or reducing such needs (§2.31).
- 11.7 This draft Adult Social Care Prevention Framework, together with the Supporting Information, complies with Kent's duties under the 2014 Act and the Guidance and sets out the local approach to preventative support.

12. Equalities implications

- 12.1 KCC is under a statutory duty to have due regard to the three equality needs under section 149 (1) of the Equality Act 2010 when exercising their functions. The three equality needs are the needs to (a) eliminate discrimination, harassment, victimisation and any other conduct prohibited by the Act; (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 12.2 The protected characteristics are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation: section 149 (7).
- 12.3 As part of the planning process for the framework development work, an initial equalities impact assessment (EqIA) was developed. This has subsequently been updated following feedback collected within the consultation and is attached as Appendix 5. The key equalities implications identified in the EqIA were related to engagement with the consultation itself, ensuring that we mitigated the risks of those in the population that may encounter barriers to engaging with an online consultation e.g. digital inclusion and skills, accessibility needs. Members must read this equalities impact assessment and carefully consider its contents before taking any decision.

13. Data Protection Implications

- 13.1 The development of the Adult Social Care Prevention Framework does not require a Data Protection Impact Assessment to be completed.

14. Governance

- 14.1 The Adult Social Care Prevention Framework will be supported by new and existing governance. The Director of Public Health, will be the Senior Responsible Officer (SRO) and chair a 'Prevention Framework Steering Group', which will come together regularly with representatives from across KCC and the health and social care system, to make decisions on key approaches, bring wider stakeholders on board ensuring capacity and ownership for priority actions and make connections between the Prevention Framework and wider system integration and impact
- 14.2 The Prevention Framework aligns with the CQC Improvement Plan, and key updates will also be taken to the Adult Social Care Delivery Board, and DMT where appropriate.

15. Conclusions

- 15.1 The majority of consultation responses agree with the draft ambition outlined in the framework (77%); only 8% disagreed. Those in agreement cited the importance of prevention, early intervention and equality as supporting reasons. Feedback received from the consultation have informed the updated Adult Social Care Prevention Framework.
- 15.2 The Care Act 2014 highlights prevention as one of seven key responsibilities for local authorities, with an inextricable link to the fundamental principle of promoting wellbeing. This means intervening early to support individuals, helping people retain their skills and confidence, and preventing need or delaying deterioration wherever possible.
- 15.3 The implementation of the Adult Social Care Prevention Framework will be in line with Kent County Council's adult social care responsibilities, set out in relevant legislation such as the Care Act 2014, the Mental Capacity Act 2005 and the Mental Health Act 1983. The Adult Social Care Prevention Framework will serve as a practical tool to support the design, planning, and delivery of preventative initiatives over a ten-year period, aiming to sustainably manage the growing adult social care demand with a regular formal review to ensure it remains relevant and responsive to emerging needs. Strong engagement and robust data have shaped a collaborative and evidence-based foundation.
- 15.4 If we 'do nothing' to alter the trajectory of need for care, assuming costs and activity remain at 2024 levels, then by 2035, the costs associated with meeting the needs of the over 65 population in Kent alone, will rise by at least 48%.

<p>16. Recommendation(s): The Adult Social Care and Public Health Cabinet Committee is asked to CONSIDER and ENDORSE or make RECOMMENDATIONS to the Cabinet Member for Adult Social Care and Public Health on the proposed decision attached as Appendix A.</p>

17. Background Documents

None

18. Appendices

App 1. Prevention Framework

App 2. Prevention Framework Supporting Document

App 3. Prevention Framework Engagement and Consultation Outcome Report

App 4. You Said, We Did

App 5. EQIA

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