Delivering Wellbeing and Opportunity in Leicestershire

Adults and Communities Department
Ambitions and Strategy for 2020 – 2024

CONSULTATION REPORT

1. Introduction

A formal consultation commenced on 16th December 2019 and was due to run until 22nd March 2020. Due to the COVID-19 pandemic and subsequent lockdown and change of business activities the consultation was left open until July 2020. During this time the consultation received 61 responses to the questionnaire. The consultation was supported by a wide range of engagement activities with identified stakeholders.

The aim of the consultation was to gather feedback on the proposals set out in the strategy. The consultation was specifically interested in:

- views on the proposed principles of future delivery of services, especially the increased focus on wellbeing;
- support or opposition regarding the different elements of the model;
- views on our ideas about delivering the model.

Throughout the consultation period, a broad range of audience was targeted and considerable efforts were made to raise awareness of the consultation and support opportunities to gather people's views. The target groups broadly consisted of:

- The people of Leicestershire (i.e. members of the public);
- Customers/carers with experience of using or accessing adult social care, learning and heritage sites;
- Partners/stakeholders with experience of using or accessing Adult and Communities services;
- Providers/organisations who could be directly or indirectly affected by the proposals (i.e. Community Managed Libraries).

2. Consultation activity

In order to encourage and support involvement, several engagement methods and approaches to promotion were employed throughout the consultation period, with the aim of raising awareness and encouraging people to give feedback on the draft strategy. The draft strategy, along with background information, was available on the Leicestershire County Council website including an online questionnaire which was available in both standard format and easy read. This was further supported by an online video that was captioned and signed in British Sign Language.

In addition to public workshops and service specific workshops, people were invited to have their say by completing a questionnaire, either online or in hard copy format (i.e. printed paper versions). A combined questionnaire and information sheet were also made available in easy read format.

In total it is estimated that around 400 customers, carers, staff, partners and other stakeholders attended face to face meetings or workshops where the strategy was discussed, and 61 completed questionnaires were received. This included attendance and discussion at Extra Care schemes, Carers groups, the Learning Disability Partnership Board, provider forums such as those for Supported Living, VAL, Community Managed Library Board meetings, meetings with creative and arts based providers and attendance at a community summit.

In addition to this, views were sought from strategic partners through face to face meetings and these included Healthwatch, University Hospitals of Leicester, Leicestershire Partnership Trust, Clinical Commissioning Groups, Leicester City Council, Rutland County Council.

Provider engagement:

- The Adult Social Care provider forums were attended and a presentation was given about the strategy to explore the implications of the strategy for them and to engage providers in encouraging and supporting involvement in the consultation of their service users (with support from the Department's officers if requested and capacity allowed).
- Engagement has been achieved with provider groups in the community such as Parish Councils, libraries, adult learning and volunteers that are active in heritage sites.

Staff engagement:

- The Senior Leadership Team of Adults and Communities have been regularly briefed on the progress and drafts of the strategy and progress of the consultation. This is with the expectation that these messages were cascaded to their teams.
- The Service Managers in Adult Social Care have also been briefed.
- The draft strategy and consultation have been promoted internally.
- A staff and stakeholder workshop was held to progress development of the draft strategy and was attended by representatives from all Departments of the County Council.

Public engagement:

- The draft Strategy and consultation questionnaire were prominent on the 'Have Your Say' section of the Council's website.
- The draft strategy and consultation have been promoted in VAL's e-briefing.
- Communications Team activity:
  - Additional media release
  - Face-to-face engagement at targeted events and venues
  - Social media – using Twitter and Facebook channels
  - E-blast reminder
  - Reminder to parish councils
  - Article for internal audiences

Service user and carer engagement:

- The format of meetings conducted with service users and carers was developed in partnership with providers and the authority's Engagement Group and included presentations, informal interviews, question and answer sessions about the proposals, group feedback, and support on an individual basis to complete/ distribute questionnaires where requested.

There were several key themes that were drawn out through the face to face engagement sessions with providers, partners and stakeholders.

General themes

- Overall, the strategy was supported and considered to be well written.
- Particularly welcome was statements in the strategy that were more explicit in recognising and encouraging the link between/contribution of Community and Wellbeing services and/to social care.
- LCC should continue to build on its development of partnerships. The feedback stressed the importance of timely, considerate, and clear communications including, listening and practical support (e.g. enabling partners to make use of LCC purchasing power, training, social media)
- The department was asked to consider additional clarity in the Strategy about partnership commitments that the department has made and where there may be future opportunities including with health and district councils.
- Some respondents queried what resources will be available to deliver the Strategy and how will governance (including joint governance) work?
- Respondents cited the importance of sharing information from/with NHS, providers and other partners and finding ways to do this within the framework of GDPR compliance

Social Care Services

- It was suggested that the department emphasises the value of 'purposeful' activity for service users within the Strategy.
- Suggested and acknowledged that LCC continues to emphasise the importance of leading on tackling discrimination/stigma against; and advocating for service users – either based on characteristics (e.g. age, disability, sexuality) or circumstance (poverty, rurality, access to work).
- Some carers noted that they do not feel listened to in some areas such as the assessment process and when making decisions about the person they are caring for. Their perception is that it is assumed that they will take on any additional caring requirements.
- Changes in social worker and other support staff can potentially create difficulties, inconsistencies and misunderstandings for service user and carers.
- Carers may not formally complain as it is perceived that this will be a lengthy process.
- Smaller providers may have limited leadership capability and need more support than larger organisations.
- Departmental direct support (e.g. reablement) to service users potentially needs to be more flexible for certain scenarios.
- The department could consider doing more to assure the quality of support services in the community as this is variable (e.g. quality mark, self-assessment scheme) and promote/encourage continuing professional development.
- Some providers noted that they need to feel LCC understand what they do and the pressures they are under (often responsible 24/7) and therefore have reasonable expectations and demands.
- It was generally perceived that the department needs to address the challenges of recruiting staff and equally ensure (older) service users accept younger members of staff.
- There was a request to facilitate provider and other partner relations with the NHS which can sometimes be challenging.

Community and Wellbeing Services

- It was noted by some that C&W partner services may appear to be just one entity (e.g. CML, local museum) but are / have potential to be community hubs.
- Some felt that there needs to be greater certainty of LCC objectives, plans, funding (and support for other funding bids) and anticipated nature of relationship/partnership (e.g. future of CMLs)
- That the service continues to develop its approach to partnerships stressing the importance of timely, considerate, and clear communications which include listening and practical support (e.g. enabling partners to make us of LCC purchasing power, training, social media).
- Providers stated that volunteering is key to LCC and partner services going forward but this is not free – it requires LCC initial and ongoing investment and for volunteers to feel valued.

Transport and access

- One of the key points of feedback from the consultation responses was the perception that it is difficult to access services from rural areas because of the opinion that services are not considered alongside public transport timetables and the use of bus passes.

- Some people note that in their experience there are insufficient and unsuitable disabled parking spaces close to services.

Housing and Accommodation

- Some respondents particularly welcome and encourage departmental work in this area (e.g. extra care)

- A few returns requested affordable housing in the right place to be able to downsize their accommodation

- Some housing should be considered to be adaptable for assisting with ageing related issues

- A few replies commented on the possible potential of inter-generational living / communities

Digital

- A request was made to think about people who can't access online (easily) and the need to maintain alternatives

- Tech that uses mobile phones may potentially be more accessible.

- It was suggested that partner organisations can help to deliver an increased digital and online LCC offer

- Respondents had a view that technology should augment care, not replace personal support and social interaction for some.

3. Overview of Responses

3.1 Volume of responses

In summary, the following written responses were received during the consultation process:

Consultation method	Number of responses received
Paper Questionnaires	5
Online Questionnaires	56

3.2 Analysis of responses

All feedback communicated in workshops and meetings were recorded in note form and key themes were identified. Not all respondents answered all the questions, analysis percentages are for those that did respond to each question:

3.3 Overall ambition and direction of the strategy

There was a very high level of support for the ambition and direction to which the Department will work, both in face to face sessions and in responses to the questionnaire. Generally, responders appear to be enthusiastic about the potential increased use of technology to provide and support services.

> "Realistic and moving in the right direction."

> "Positive way forward if implemented sufficiently and enough resources are given to community services."

There were some concerns that the workforce would not be adequately skilled or available to support the ambitions due to perceived reductions in funding. There was a repeated request to have a distinct volunteer strategy.

3.4 Have we got the focus of our strategy right? Is there anything missing?

When asked about the focus of the strategy and if we have missed anything the responses were predominantly positive and in support of what we plan to focus on. There was some concern that we are overly reliant on volunteers to achieve the strategy and that we have not made enough explicit plans for improving and maintaining good mental health in the community. It has also been noted that the strategy requires further acknowledgement and planning for the role of PA's in the market and for the continued support of people receiving a direct payment.

> "It feels right, and it is important that the key voluntary sector role is fully supported."

> "I think attention needs to be given to learning opportunities around wellbeing and to how libraries could contribute more."

3.5 What will success look like?

We asked in the questionnaire what success would look like if our plans were implemented to their satisfaction. We received a broad range of responses with some responses bringing our thinking to harnessing the skills of individuals and others focusing on securing the right funding. The following word cloud illustrates the most common responses. There is a clear emphasis on people both as our customers and as our workforce and the importance of them.

> "Service users feel more empowered and independent."

> "1. Joined up social and health services. 2. Minimal delay in accessing services. 3. Effective promotion of the changes to the public at large. 3. Keeping a lid on the costs. 4. Implementation of a mechanism to monitor the effectiveness of the changes over time."

# 4. Demographic Breakdown of Questionnaire respondents

The following tables show the demography of the 61 questionnaire respondents. People in face to face sessions were not asked these questions.

The number of respondents with an ethnic origin other than white is not representative of the place of Leicestershire or people who use our services. This will be investigated as part of the strategy implementation plan. A similar point is observed for the number of non-heterosexual respondents; however, this data does not exist in order to state confidently if it is representative of people who use our services. It can be noted that it is not representative of the Leicestershire County Council workforce who choose to declare their sexuality.

What is you gender identity?

Male (23)	43%
Female (28)	52%
Prefer to self-describe (e.g. pangender, non-binary etc)	6%
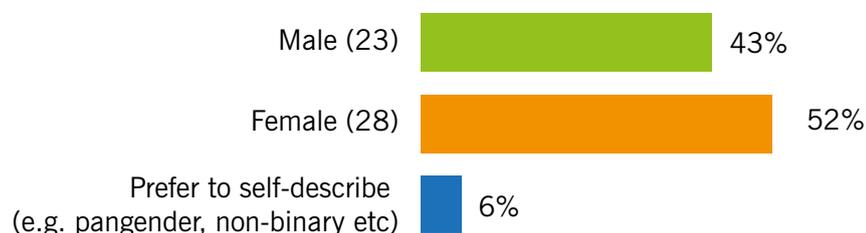
Is you gender identity the same as the gender you were assigned at birth?

Yes (52)	100%
No (-)	52%

Are you a parent or carer of a young person aged 17 or under?

Yes (13)	24%
No (41)	76%
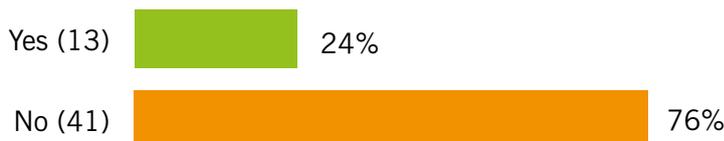
Are you a parent or carer of a person aged 18 or over?

Yes (11)	21%
No (41)	79%
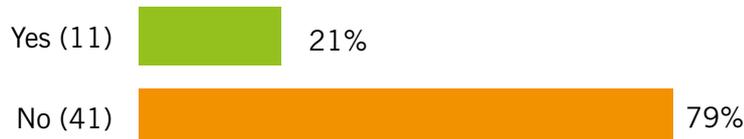
Do you have a long-standing illness, disability or infirmity?

Yes (12)	23%
No (40)	77%
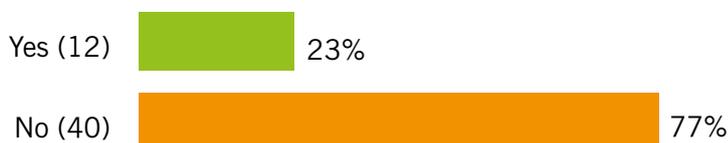
What is your ethnic group?

White (50)	94%
Mixed (1)	2%
Asian or Asian British (1)	2%
Black or Black British (-)	
Other ethnic group (1)	2%

Bisexual (-)	
Gay (1)	2%
Heterosexual/straight (46)	94%
Lesbian (1)	2%
Other (1)	2%
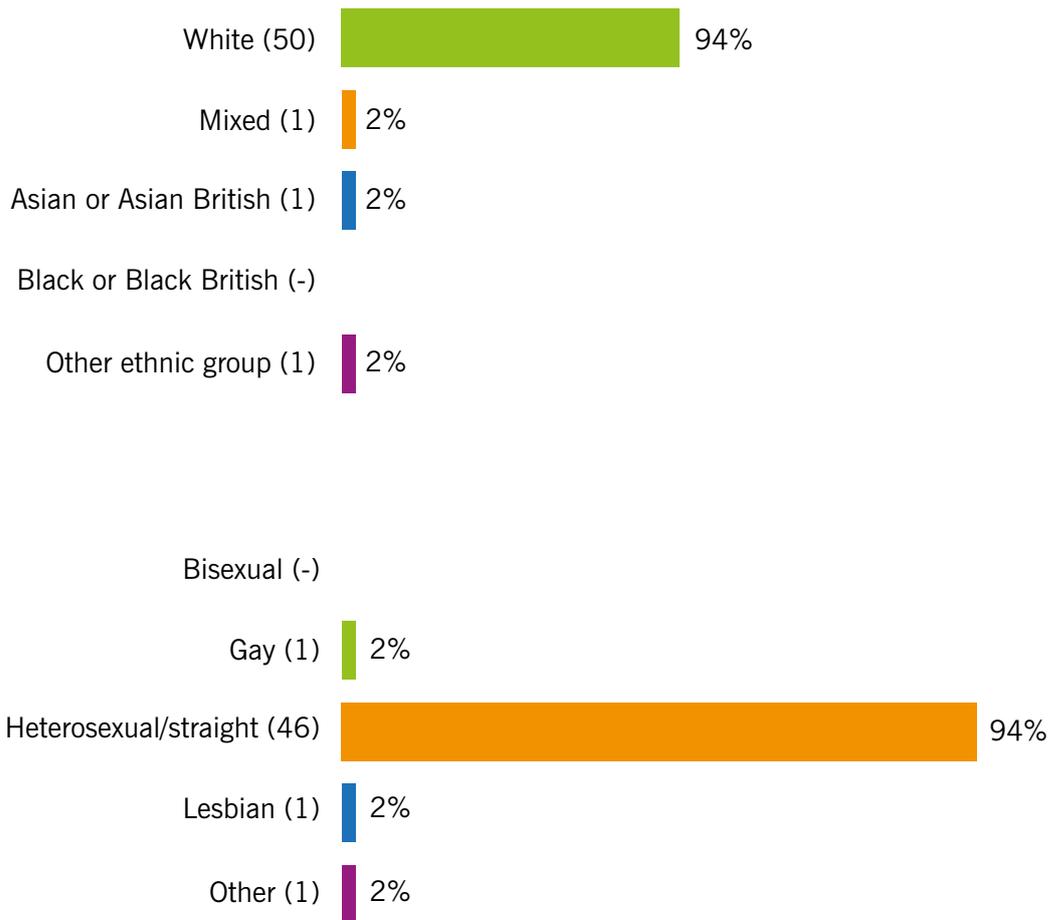
5. Findings and Conclusion

The key themes from feedback received can be summarised as:

- Continued support for the principles and model;

- Acknowledgement and support for the addition of 'wellbeing' into the model;

- Concern about perceived over reliance on communities/volunteers, and how communities/volunteers can be supported and sustained;

- Overall, it is welcomed that the two functions of the department are brought together into one strategy

- The view that inappropriate transport options remain an issue to maximise the effectiveness of prevention activities

- A strong view to consider the balance between price and quality;

- The importance of effective communication from the department;

- The key role of Information and advice;

- A desire for improvements in relation to internal processes, including the timeliness of reviews and payment mechanisms for both cash direct payments and payments to providers of commissioned services;

- Concern that the workforce is not being given the required training to keep improving

- Acknowledgement that PA's and direct payment holders require more support

Overall there is a high level of support for this strategy and the ideas put forward as potential ways in which we can deliver it. Engagement and consultation have highlighted the need to make sure that communication is prompt and clear, and to check that people fully understand our purpose and intentions. The issues and concerns raised have all been in relation to the delivery of our aims and will inform the commissioning strategy and its associated documents (eg delivery action plan, EHRIA, risk assessment).