

Adult Social Care Member Induction Pack 1

What is Adult Social Care?

June 2026

Making the difference every day



About Adult Social Care

What is Adult Social Care?

Adult social care covers social work, personal care and practical support for adults over 18 years old with a physical disability, a learning disability and / or autism, or physical or mental illness. It also covers support for their family carers.

Adults who cannot perform some **activities of daily living** such as washing, dressing, cooking, or shopping without support have care needs. These needs are often multiple and interrelated with other needs.

Despite the typical focus in public debate on older people, adult social care is much broader – indeed, ECC spends more on working age adults than we do on older people.

People may need help with:

Personal care or
nutrition

Keeping their home
safe and clean

Maintaining family
or personal
relationships

Participation in
work, education or
volunteering

Using community
services including
public transport

Caring
responsibilities

People's needs may be met through:

Care & support from
family, friends or
neighbours.

Local authority commissioned social services.
These are means-tested. Following financial assessment, the
person may be asked to pay some or all of their care costs.

Private care services and
support paid for by the adult
themselves. (Self-funded)

Voluntary and
community services

Our Legislative Duties

Care Act 2014

The Care Act 2014 sets legal duties on Local Authorities to:

- Promote individual wellbeing
- Prevent needs for care and support from developing
- Promote integration and cooperation with health services
- Provide information and advice
- Promote diversity and quality in provision of services
- Assess and meet eligible care and support needs
- Safeguard adults at risk of abuse or neglect

Health and Care Act 2022

The Health and Care Act 2022 establishes that the Care Quality Commission (CQC) will inspect and assure local authorities in respect of how they meet their duties under the Care Act 2014.

It also established Integrated Care Systems (ICSs), which bring together providers and commissioners of health and care services and other partners to plan health and care services to meet the needs of their local population.

Local Authorities also have duties under:

- **Mental Health Act 1983 (as amended) 2007**
- **Mental Capacity Act 2005**
- **Equality Act 2010**
- **Human Rights Act 1998**

Safeguarding

Safeguarding is defined in the Care Act as “*protecting an adult’s right to live in safety, free from abuse and neglect*” and has been an integral part of Adult Social Care.



Local Authorities have a duty to help and protect adults in its local area who:

- a) Have needs for care and support (whether or not the local authority is meeting any of those needs) and;
- b) Are experiencing, or at risk of, abuse or neglect; and
- c) As a result of those care and support needs are unable to protect themselves from either the risk of, or the experience of, abuse or neglect.

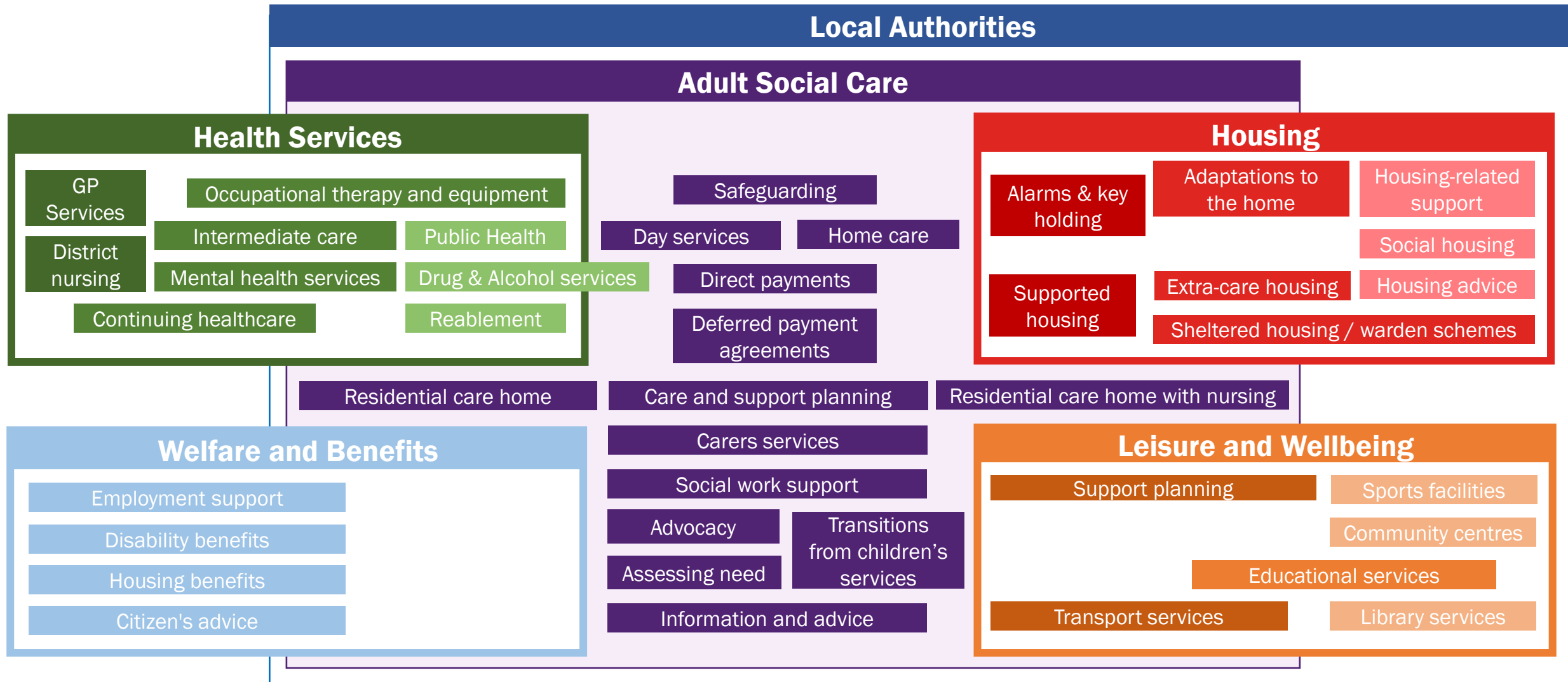
Where an adult meets the criteria as defined in the Care Act:

“the local authority must make...whatever enquiries it thinks necessary to enable it to decide whether any action should be taken in the adult’s case...and, if so, what and by whom.”

This is known as a Section 42 (S.42) enquiry.

The range of support – National Audit Office

How well adults' needs are met depends on a wide range of public services interacting effectively



National eligibility criteria

The Care Act (2014) requires local authorities to ensure the provision or arrangement of services, facilities or resources to help prevent, delay or reduce the development of needs for care and support.

An adult or their carer may require help to manage their social care and support needs.

Needs such as:

- managing and maintaining nutrition;
- maintaining personal hygiene;
- managing toilet needs;
- being appropriately clothed;
- being able to make use of the adult's home safely and maintain a habitable home environment;
- developing and maintaining family or other personal relationships;
- accessing and engaging in work, training, education or volunteering;
- making use of necessary facilities or services in the local community including public transport and recreational facilities or services; and
- carrying out caring responsibilities for a child.



Approach the local authority social services to apply for help.

The provision of social care is means-tested. Depending on a person's financial situation, they may be asked to contribute to some or all of their costs of care.

There are several routes to getting these needs met



Arrange and pay for care privately.

An adult may choose to do this where they have capital and savings above the local authority financial thresholds. A person who decides to do this may be described as a 'self-funder'.



Receive care and support from family members or friends.



Financial assessment

Usually, a person will have to pay the full cost of their care if they have more than £23,250 in savings. Unless they are going into a care home, this amount does not include the value of the person's property.

If savings are less than £23,250 but more than £14,250 then the local council will pay for care, but the person will have to contribute £1 to the fees for every £250 of savings they have.

If a person has less than £14,250 in savings, their care will be fully paid for by the council.

Local authorities also take a person's income into account during the financial assessment.

Overview of Adult Social Care in Essex

How many people we support in Essex

At any one time in Essex we support **between 17 – 18,000 people**. This can be roughly broken down into...



Older People



**Adults with Learning
Disabilities and/or Autism**



**Adults with physical
and/or sensory
impairments**



**Adults with mental
health needs**

We also support around 4,000 carers.

Demand



ASC now has **16.3% more contacts and referrals each year** than in 2019/20.

This is in line with our ageing and growing population.

Our focus on supporting people to be independent has helped us mitigate this demand growth.

We have only seen a **4% increase since 2019/20 in long term care.**



While demand for Adult Social Care grows, we are focussing on ensuring we support people to remain at home and as independent as possible.

7.3% of older people who leave hospital receive reablement, compared to 5.7% nationally. This supports **low residential care rate admissions** (450 admissions per 100k people compared to 592 most recent nationally published data).



Our frontline operational workforce has been static since 2019/20.

The workforce is under pressure due to increasing demand and will struggle to meet future growth.

We are developing new ways to support our workforce and are monitoring team activity levels so we can support teams which complete less activity.

Vision and Mission

Our vision: Enabling people to live their lives to the fullest

Our mission: Making the difference every day

The ambition is for people to enjoy:

- Maximised independence and wellbeing
- Choice and control over health and care
- Access to a place called home
- Access to social and employment opportunities
- Positive experience of health and social care
- Reduced inequalities and increased inclusion
- People at risk can live free from abuse, harm and neglect

This focus on **independence**, **wellbeing** and **safety** enables the Council to fulfil its statutory duties under the Care Act 2014.



Essex Residential Care Market

Mental Health Residential & Nursing Care

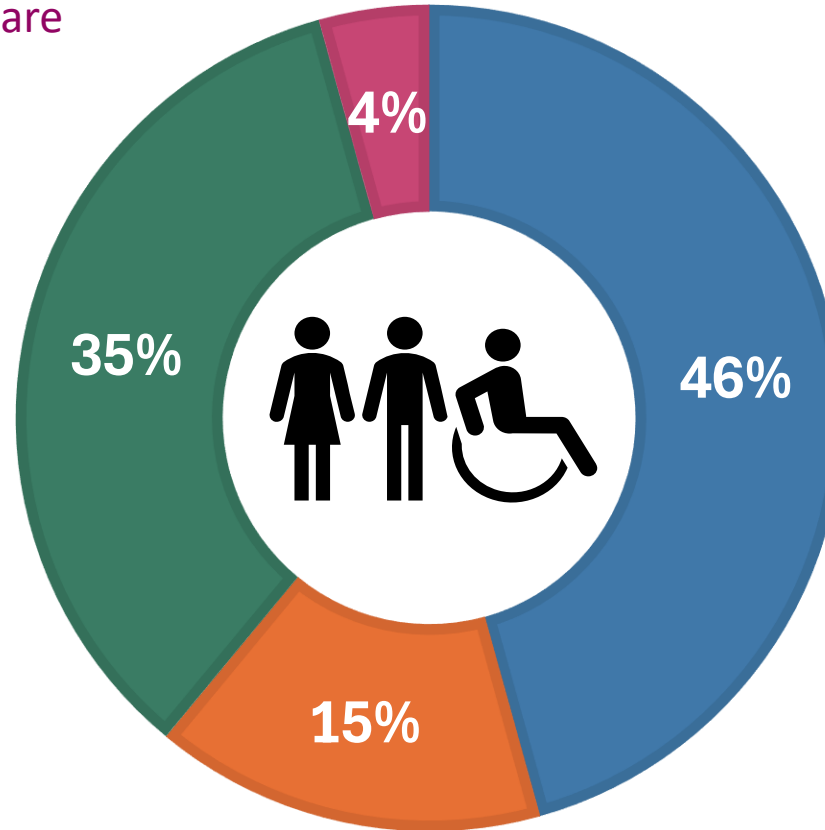
60% Good or Outstanding
238 ECC funded adults

20

Working Aged Adults Residential & Nursing Care Homes

81% Good or Outstanding
1,104 ECC funded adults

161



Older People Residential & Nursing Care

212

75% Good or Outstanding
2,942 ECC funded adults

Older People Nursing Care

71

72% Good or Outstanding
736 ECC funded adults

Essex Care in the Community

410 Domiciliary Care Providers
87% rated Good or Outstanding
7,296 Adults placed by ECC

1,842 Supported Living Units
77% rated Good or Outstanding
1,472 Adults placed by ECC

1,686 Adults using
Day Care services

2,415 Adults using
Direct Payments

695 Extra Care Units
71% rated Good or Outstanding
340 Adults placed by ECC

Informal care

Most care is provided informally by unpaid family, friends and neighbours who provide personal care, practical help and coordinate formal services. Estimates of the value of informal care across England and Wales total over £160 billion per year.

There are 124,443 carers in Essex according to the latest Census in 2021. This is 8% of the Essex population. Many carers don't identify themselves, so the real number is likely higher.

Local authority support for carers

Under the Care Act, councils have a duty to assess and meet carer's needs on a similar basis to those for whom they care.

Breaks from caring

Carers can also be supported by respite care – this is replacement care allowing the carer to take a break from their caring responsibilities.

Carer entitlements

Carers may be entitled to welfare support. They also have rights to unpaid leave from work to provide or arrange care. Information and advice is often important in making sure carers are aware of their rights and what they are entitled to.



The role of Technology Enabled Care (TEC)

- **Telecare** - responding to emergency health incidents and care in the home
- **Care Devices** – enabling independent living around the home
- **Remote Monitoring** – supporting those with long term conditions (telehealth)
- **Lifestyle Monitoring** – spotting changes in daily living for preventive intervention
- **Virtual Solutions** – supporting social interactions
- **Digital Support** – promoting the wellbeing of those with dementia
- **Remote Consultations** – using video technology to connect with health professionals (telemedicine)
- **Use of Robotics** – supporting people in the home with care activities



Veronica's Story: Carers Support

'I would like the opportunity to go out and have coffee with friends for a few hours, whilst knowing that Hendrik is safe at home with someone supervising and keeping him company.'

extract from the assessment summary



'It makes a huge difference in my life having time to myself without the worry about Hendrik's safety. I would like to thank you once again.'

68-year-old Veronica cares for her husband Hendrik who is living with a brain injury.

A referral was made to the Carers Telephone Assessment Team, Adult Social Care Connects by the short-term enablement service.

Veronica shared how she didn't feel comfortable leaving Hendrik home alone for too long, as was worried he might fall.

It was becoming difficult for her to maintain and develop friendships.

Alongside advice and information, Veronica accepted a carers direct payment for a companionship service for Hendrik.

Veronica is now able to focus on her own interests, enabling her wellbeing and caring role to be maintained.

An alarm was installed to support Veronica to call for help if her husband falls at home.

Information was provided on a bed/chair sensor to detect movement and falls.

Veronica was supported to set up a carer's emergency plan.

Care Quality Commission (CQC) assurance 2025



Key strengths

- Person-centred, focused on early help, prevention and Reablement
- Effective safeguarding systems and processes
- Leadership, culture and working with partners



Key areas of improvement

- Safeguarding support for partners and providers
- Assessments and Reviews
- Support for Carers

Essex's score of **73** shows a strong performance position, which is **within the top quartile** of all assessed councils.

"The local authority had good structure and processes in place to enable people to be **supported successfully**, and support people **to remain independent and live healthy lives.**"



You can read the full report [here](#).

National policy developments

Casey Commission

Independent review shaping medium and long-term reforms for adult social care:

- **Phase 1 (2025-26):** Roadmap for National Care Service; reforms on funding, accountability, prevention.
- **Phase 2 (to 2028):** Long-term transformation proposals.

ECC engaging via roundtables and seeking further input opportunities.

Mental Health Act 2025

The Act provides the legal framework to detain and treat people in a mental health crisis. It received Royal Assent in December and will be phased in over eight to ten years, to enable services to prepare for the changes.

The Act has 4 key principles: 1) choice and autonomy, 2) least restriction 3) therapeutic benefit and 4) the person as an individual.

Employment Rights Act 2025

The Act introduces:

- **Fair Pay Agreements**, with the first expected in April 2028.
- **Adult Social Care Negotiating Body** to set standardised pay, terms and conditions that Care providers will be legally obliged to implement.
- New rights to trade union representation; flexible working; sick pay from day one of sickness absence.

The Government is consulting on detailed implementation.

Lampard Enquiry

The Lampard Inquiry became a statutory Inquiry in November 2023 after being initially established as a non-statutory inquiry in 2021. Its purpose is to investigate the circumstances surrounding the deaths of children and adults in mental health inpatients services and those who died within 3 months of discharge from hospital between 2000 and 2023. The Council is fully committed to supporting the Inquiry over the course of its work.

Introduction to the department

Key People



Cllr Paul Godfrey

Cabinet Member for Adult Social Care

Cllr Paul Godfrey was appointed in May 2026.



Nick Presmeg

Executive Director, Adult Social Care (DASS)

Nick Presmeg was appointed Executive Director, Adult Social Care in January 2017.

Nick has held a number of roles since joining the council in 1999, including Operational Director and Director of Commissioning for Vulnerable Adults, during which time he has championed the agenda of personalisation for social care users.

Nick has also previously served as Chief Operating Officer for Basildon and Brentwood NHS Clinical Commissioning Group.

Key People: Directors

MCA – Mental Capacity Act
DoLS – Deprivation of Liberty Safeguards



Nick Presmeg
Adult Social Care Executive Director



Peter Devlin
ASC Director, North Essex and
Mental Health



Alison Ansell
ASC Director, Mid Essex and
Safeguarding, MCA and DoLS



Ruth Harrington
ASC Director, South East Essex
and Disabilities



Simon Griffiths
ASC Director, South West Essex
and Older People



Jon Dickinson
ASC Director, West Essex and
Social Care Practice



Moira McGrath
ASC Director, Strategic
Commissioning & Integration



Peter Fairley
ASC Director, Strategy Planning
and Assurance

Essex also has dedicated countywide senior leadership roles for **Principal Social Worker** and **Principal Occupational Therapist**, who work together to develop our professional practice across ASC.



Dr Tanya Moore
Principal Social
Worker



Alex Laidler
Principal Occupational
Therapist

The Director of Strategy, Planning & Assurance has a dual role and is also the managing director of **ECL**.

**Where to go for
information and queries**

How we support residents

There is a wealth of information on our website www.essex.gov.uk/topic/adult-social-care-and-health about different kinds of support available to meet a range of needs including:

- Help with meals and shopping
- Adaptations for your home
- Equipment to stay independent
- Technology for independent living
- Walking and mobility aids
- Preparing for going into and leaving hospital
- Paying for care and support

If you're assessed as needing care and support, we will agree a care and support plan with you. The plan includes:

- How your support will be provided
- How much it costs
- Who will be paying for it

How we support carers

There is a lot of support available for carers in Essex.

The Essex County Council website is a great first step. It brings together information on practical help, financial advice, emotional support, and services for carers of all ages. While it doesn't cover absolutely everything, it includes many of the most useful resources and can point you in the right direction.

Visit: [Local support for carers | Essex County Council](#)

We know that a high proportion of carers are supporting a person with dementia. Along with [our **Southend, Essex and Thurrock Dementia Strategy 2022 to 2026**](#), you can find out more about the support available via the [Alzheimer's Society](#).



Key contacts

Adult Social Care:



Telephone:
0345 603 7630



Textphone:
0345 758 5592
Monday to Thursday: 8.45am to 5pm
Friday: 8.45am to 4.30pm



Emergency Duty Service
(for out of hours queries):
0345 606 1212



Email:
socialcaredirect@essex.gov.uk



**Essex
Wellbeing Service**

The Essex Wellbeing Service supports people in the community and at work with a range of health, wellbeing and day to day needs.

They also coordinate requests and referrals for everyday tasks and connect people to volunteers.

Website: www.essexwellbeingsservice.co.uk

Telephone: 0300 303 9988

Member enquiries team

Role & Purpose:

- Single point of contact for all County Member and MP enquiries
- Work with internal services and external partners to gather information and provide responses

Response Times:

- Standard response time: within 10 working days
- Aim to respond as quickly as possible

Priority Handling:

- Urgent enquiries are prioritised over routine cases
- Examples include:
 - Social care matters
 - Flooding
 - Dangerous potholes

Urgent Contact Numbers

- **Highways: 0345 603 7631**
- **Children and Families Hub (safeguarding): 0345 603 7627**
- **Social Care Direct (adult concerns): 0345 603 7630**

How to submit Enquiries

Online: [Member Enquiry Form](#)

Email: member.enquiries@essex.gov.uk

Appendix

Cohorts

Older people (over 65)

- Frailty and dementia
- Purchasing residential and domiciliary care
- Largest volume of people and increasing demand
- Closely linked to hospital activity and discharge
- Carer's assessments and support
- High numbers of self-funders

Disabilities - Working Age Adults (18-65)

- Learning Disabilities and/ or Autism, and Physical & sensory impairments
- Focus on increasing independence through inclusive employment and more independent living solutions
- Move away from residential and inpatient care

Mental Health (over 18)

- Shared duty with the NHS – section 75 agreements (Thurrock & Essex)
- Rising demand post Covid
- Focus on wider determinants: employment, accommodation

Carers (all age)

- Focus on identification and outreach
- Information, Advice & Guidance
- Valuing carers as equal partners
- Carer's Assessments - recognising their rights and needs
- Networks of peer support

Access to and types of care in England

Adults with care needs are supported in two main ways:

- either **formally** through services that they or their Council pay for;
- or **informally** by family, friends or neighbours. Some adults may get their care needs met through a combination of these different ways. Some voluntary organisations provide free formal services.

Social care paid for by local authorities makes up a minority of the total amount of care.

Short Term and Intermediate Care

Time limited with the intention of maximising the independence of the individual using the care service and eliminating their need for ongoing support.

Typically free – at least for first 6 weeks.

Long Term Care

Provided on an ongoing basis and range from high-intensity services like nursing care to lower-intensity community support.

Accommodation-based care & support

Accommodation-based care and support in adult social care refers to services where housing is combined with care, supervision, or support to help adults live safely and with dignity. These services are typically provided for people who cannot live independently due to age, disability, mental health needs, or other vulnerabilities.

Type of Service	Description	Typical Users
Residential Care Homes	Provide accommodation with personal care support	Older people, people with physical disabilities
Nursing Care Homes	Residential care with on-site nursing	People with complex health or medical needs
Supported Living	Independent living with tailored support	People with learning disabilities, autism, mental health needs
Extra Care Housing	Self-contained housing with care available	Older adults needing support but wanting independence
Sheltered Housing	Independent living with low-level support	Older people who are mostly independent
Shared Lives	Living with a trained carer in their home	People with learning disabilities, mental health needs
Residential Rehabilitation	Structured support for recovery	People recovering from mental health issues or substance misuse
Respite Care	Temporary residential care	Individuals whose carers need a break
Secure / Specialist Units	Highly supervised accommodation	People with high-risk or complex needs
Step-down / Transitional Housing	Bridge between care and independence	People moving toward independent living

Community-based support

Community-based support in adult social care refers to services that help individuals live independently in their own homes and communities rather than in residential care. It includes practical, social, and health-related support tailored to individual needs, with a focus on promoting wellbeing, independence, and choice.

Type of Service	Description	Who It Supports
Domiciliary Care (Home Care)	Care provided in a person's own home	Older people, disabled adults
Reablement Services	Short-term support to regain independence	People leaving hospital or after illness
Day Care Services / Day Centres	Structured daytime activities and support	Older adults, people with disabilities
Community Mental Health Services	Support for mental health in the community	People with mental health conditions
Occupational Therapy (OT)	Helps individuals adapt to daily activities	People with physical or cognitive difficulties
Assistive Technology	Technology to support safety and independence	People at risk of falls or emergencies
Direct Payments / Personal Budgets	Funding given directly to individuals	Adults eligible for social care funding
Carer Support Services	Support for unpaid carers	Family members or informal carers
Community Transport Services	Helps people access services and activities	People with mobility or transport barriers
Advocacy Services	Helps individuals express their views and rights	People with difficulty communicating or understanding
Employment Support Services	Help accessing and maintaining work	People with disabilities or mental health needs
Community Outreach Teams	Support delivered directly in the community	People reluctant to engage with services
Peer Support Groups	Support from people with shared experiences	Various groups (mental health, carers, etc.)