

Freedom of Information – Response – 27407

Clarification:

Thank you for your response and for your offer of assistance under Section 16 of the Freedom of Information Act 2000.

I note your concern that my original request may appear broad. However, the scope was deliberately limited to Adult Social Care discussions and communications since 8 May 2026, which represents a short and clearly defined timeframe. The request is therefore proportionate and consistent with the ICO's guidance that authorities should interpret requests liberally and constructively, seeking clarification only where genuinely necessary to locate the information.

To assist you further, I confirm the following refinement:

The request concerns communications, briefings, and meeting records involving the Cabinet Member for Adult Social Care and senior officers or councillors directly engaged in Adult Social Care matters since 8 May 2026.

It includes emails, Teams or WhatsApp messages, minutes, notes, agendas, and circulated documents relating to Adult Social Care policy, service delivery, or decision-making during that period.

It excludes any records predating 8 May 2026 or unrelated to the Adult Social Care portfolio.

This clarification should enable the Council to identify the relevant material without imposing an unreasonable burden.

Under Section 16, the duty to advise and assist requires the authority to work with the requester to refine the scope without unduly narrowing the substance of the request. I trust that this version satisfies that requirement and allows you to proceed.

Please see the attachments

Original Request

I am requesting disclosure of all recorded information held by Suffolk County Council relating to any discussions, deliberations, briefings, meetings, or communications concerning the provision of Adult Social Care in Suffolk from 8 May 2026 to the present date.

This request includes, but is not limited to:

1. Meeting records

Minutes, notes, agendas, action logs, attendance lists, or summaries of any formal or informal meetings (including Cabinet, Cabinet Committees, portfolio-holder meetings, officer meetings, cross-departmental meetings, or briefings) where Adult Social Care provision was discussed.

2. Internal communications

Emails, email attachments, internal memos, letters, briefing papers, draft documents, or reports exchanged between councillors, Cabinet members, directors, senior officers, or staff relating to Adult Social Care.

3. Instant messaging and informal channels WhatsApp messages, SMS messages, Microsoft Teams chats, Signal messages, or any other instant-messaging communications used for council business that relate to Adult Social Care.

(As per the ICO's guidance, information held on personal devices or private messaging apps is still subject to FOI if it relates to council business.)

4. Documents and reports

Any documents, presentations, spreadsheets, assessments, risk registers, financial analyses, or policy papers produced or circulated since 8 May 2026 that relate to Adult Social Care provision.

5. External communications

Correspondence with external bodies (e.g., NHS partners, care providers, central government departments, consultants, or contractors) relating to Adult Social Care provision during this period.

Redacted Information

All information released in response to a Freedom of Information Act 2000 (FOIA) or Environmental Information Regulation 2004 (EIR) request is deemed to be in the public domain. As such we must consider whether or not the requested information qualifies as personal information and should therefore not be released into the public domain.

The council has determined that this is personal information and is therefore exempt from disclosure under **section 40** of the FOIA and **regulation 13** of the EIR.

The Council considered the following, including the possible consequences of disclosure for the data subjects concerned and their reasonable expectations as to the use of their data:

- expectations of the individuals concerned about personal information being put into the public domain;
- reasonable expectations - the data subjects concerned would have a legitimate expectation of privacy concerning their personal information and would not have anticipated this being put into the public domain;
- whether or not the requested information could be anonymised; and
- balancing the individual's rights and the legitimate interests - In past cases the Information Commissioner has weighed the individual's rights to privacy against the public interest in disclosure. There is no presumption in favour of releasing personal data.

This is an absolute exemption, which means that if the condition is satisfied there is no additional public interest test to consider.

In assessing fairness, the Council considered the likely consequences of disclosure of the requested information. Personal information should not be used in ways that have unjustified adverse effects on the individuals concerned. The council also considered

whether such disclosure would be within the reasonable expectations of the individuals, given that any response to a request under the FOIA or EIR is deemed to be in the public domain. The council believes that in this instance it is not fair to disclose personal data and is therefore withholding the requested information under section 40 of the FOIA and regulation 13 of the EIR.

From: Gareth Everton
Sent: 21 May 2026 14:18
To: Philip Faircloth-Mutton (SCC Councillor)
Subject: ADASS information
Attachments: ADASS_ASC_briefing_May_2026_v2_4_.pdf

Hi

You might find this useful- further information about the role of adass as the association of directors
ASC

Regards

Gareth

Gareth Everton

Executive Director Adult Social Care

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Alternative Contact

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Executive Assistant

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Please note: While I may email you outside working hours, I do this because it fits with my workload and schedule. Please do not feel obliged to respond outside your normal working hours.



Who is ADASS?

The Association of Directors of Adult Social Services is a membership organisation for leaders working in Adult Social Care (ASC). We work with partners across health and social care and with Government to raise awareness of adult social care and aim to ensure all of us who need care and support can live the lives we want regardless of age, ability and background.

Our members include current and former Directors of Adult Social Services (DASSs) and Principal Social Workers from England's 153 Councils. We have regional teams across the country and a national team with a base in London as well as expert policy groups with specialist knowledge drawn from across local authority adult social care.

We are contracted by DHSC to provide leadership and advice around social care issues, and we work closely with other Departments, as well as with many organisations across the social care sector.

We can support political leaders with background briefings, data, case studies, speakers and support on a range of issues.

What is a DASS?

The Care Act imposes general legal duties on local authorities to promote wellbeing in their communities. Directors of Adult Social Services have a statutory role in ensuring these duties are met, in particular relating to people who draw on care and support services. This includes assessing people's needs; commissioning and funding care services and safeguarding, as well as general information, advice and guidance.

We have an elected President, a DASS, this year it is Phil Holmes, the DASS at Doncaster.

What is a Principal Social Worker (PSW)?

PSWs are a statutory role required by the Care Act and there is a legal duty on local authorities to support their PSW. The role can vary between councils but the PSW is responsible for providing both professional practice and strategic leadership.



Get in touch: team@adass.org.uk

What is adult social care?

'The Social Care Future Vision: 'Everyone should have the right to live in a place we call home with the people and things that we love, in communities where we look out for one another, doing things that matter to us.' Social care is a vital part of our public services and the futures we want for ourselves, for our parents, for our siblings, children and wider family and friends.

Social care is social work, personal care and practical support for adults with a physical disability, a learning disability, or physical or mental illness, as well as support for their carers.

Social care is adaptations and aids for living at home. It's supported living, residential and nursing care.

Social care is about supporting people to lead the lives they want to, in a place they call home. For more insight, read the sector's *'Time to act: a roadmap to reform care and support in England.'*



Who uses adult social care?

- ▶ Adults aged 18–64, including those of us with physical disabilities, a learning disability or who are autistic
 - ▶ Older people who need support
 - ▶ Unpaid or family carers
 - ▶ People experiencing homelessness
 - ▶ People with drug and alcohol issues
 - ▶ People experiencing abuse, exploitation or harm
 - ▶ People with mental ill health
- And many more...**

How big is adult social care?

Almost 1 million adults used care and support in 2024/25

- More than 880,000 people drew on long-term care funded by the council, and 2mn people requested support
- In 2026, the [Laing Buisson](#) estimate people aged over 65 spent more than £14.9bn of their own money on social care

ASC represents over 5% of all jobs in the English economy

- [Skills for Care](#) data shows more than 1.5mn people work in adult social care

Unpaid carers are the back bone of health and social care

- According to census data, there are over 5mn carers in England, though [Carers UK](#) research suggests there might be as many as 10mn
- They contribute £164bn a year to the economy, equivalent to a second NHS

Adult social care adds £77.8bn to our economy

- According to the [Future Social Care Coalition](#), on average, 600 people a day leave work to provide care. Also there is a 29% difference between the employment rate of disabled and non-disabled people. Social care is key to unlocking the economic potential of everyone in our communities.

What are some of the key issues in adult social care?



Council budgets

Councils' overall core funding per person has become increasingly squeezed. When accounting for population growth, spending power fell 27.5% in real terms between 2010/11 and 2019/20 and will still be 13.7% lower in real terms in 2028/29 than in 2010/11.

Financial challenges facing adult social care

Between 2012/13 and 2024/25, spending on adult social care has risen by 74% from £14.5bn to £25.5 bn. Overspending has become the norm for councils in order to meet their statutory duties. 2026/27 is the first multi-year funding settlement for councils this decade and the first with the new national ['notional allocations'](#) for ASC which have replaced a more ring-fenced approach to central government grants. Despite increases in funding since the pandemic, in 2025/26, central government granted exceptional financial support (EFS) worth £1.3 billion to a record 28 local authorities (not all with ASC responsibilities) who made a request for financial assistance to handle pressures that they considered unmanageable and to enable them to set balanced budget. In a [2026 survey](#), more than half of ASC councils said they are likely to have to apply for emergency government bailout agreements to set budgets in the next three years.

Council reform and reorganisation

40 councils are going through a process of Local Government Reorganisation, with substantial impacts on ASC. These local changes are happening in the context of a national merger of NHSE and the Department of Health and Social Care (DHSC).

Early support closer to home

Shift resources to provide early support to more people in their homes and communities so people are empowered to maintain their wellbeing for longer. This requires a boost in investment in digital, technology and data as well as a multi-year programme to significantly increase the availability of good quality accessible, specialised and age-friendly housing and accommodation.

ASC has a key role to play in achieving the ambitions set out in the [10 Year Health Plan](#), including the intention to shift towards [neighbourhood health](#). The reduction in ICB headcount is having an impact on integrated working in many local areas.

Workforce

In 2024/25, there were 111,000 vacancies in adult social care, with each unfilled post meaning someone misses out on vital support. The vacancy rate was 7%, higher than the rest of the English economy. We need a proper workforce plan and a new deal for care workers with pay, terms and conditions and clear career progression that reflects the true value of the amazing work they do. The Employment Rights Act aims to address these challenges, but the proposals are insufficiently funded. Planning continues for the introduction of a Fair Pay Agreement in 2028 but as it stands, councils won't have a formal seat at the wage negotiation table. National Living Wage increases continue to really squeeze the sector.

The ending of the international recruitment of care workers and an increase in license revocations for providers sponsoring international workers is exacerbating the workforce capacity crisis in many areas.

Adult social care performance and insights

The new '[Local Outcomes Framework](#)' changes how councils report. DHSC has also published its [Adult social care priorities for local authorities: 2026 to 2027 - GOV.UK](#) outlining the 3 priorities of quality, integration and choice and control. The Care Quality Commission (CQC) assesses how well local authorities are meeting their duties under [Part 1 of the Care Act \(2014\)](#), publishing ratings from Inadequate to Outstanding, reports from the first phase of CQC assessment can be found [here](#) for each local authority. A [revised methodology](#) was introduced in April 2026, following the first round of inspections.

Independent commission

As part of her [independent review into ASC](#), Baroness Louise Casey has been doing site visits and meetings with many councils. The next stage of the Commission is a large public engagement exercise.

Digital, data and technology

We need a boost for councils and other organisations investing in digital, technology and data to give people more choice, control and information about the care and support available to them and better join up between care data and health, housing and welfare.

Unpaid carers

Too many carers don't get the support they need and rates of burnout are increasing. We urgently need investment to support the things that matter to carers and address undue financial hardship incurred through the inadequacy of Carers Allowance.

Adult social care statutory duties and legal responsibilities

Summary of the Care Act and wider legislative responsibilities, informed by resources from the Local Government Association (LGA).



The Care Act

The Care Act (2014) provides the framework for how councils must support adults with care and support needs, and their carers. Duties under the Act include:

- ▶ **Promote individual wellbeing:** all decisions must promote individual well-being, including dignity, health, independence, and participation.
- ▶ **Prevent needs for care and support:** provide services and interventions that reduce or delay the need for care.
- ▶ **Promote integration:** work with health services and other partners to integrate care and support.
- ▶ **Provide information and advice:** ensure accessible, comprehensive advice for residents, carers, and self-funders.
- ▶ **Promote diversity and quality in services:** develop a diverse, sustainable care market offering choice and quality.
- ▶ **Co-operate with partners:** collaborate with other agencies to deliver joined-up care.
- ▶ **Safeguard adults at risk:** protect adults at risk of abuse or neglect through robust systems.

Other legislative duties

While the Care Act 2014 is the primary legal foundation for adult social care, councils must comply with a wider set of laws and regulations that shape how care is delivered, safeguarded, funded, and overseen.

- ▶ **[The Mental Health Act 2025:](#)** modernises the 1983 Act, setting out the legal framework for assessing, treating, and, when necessary, detaining people living with mental illness, to protect their safety or the safety of others
- ▶ **[The Health and Care Act 2022:](#)** strengthens councils' adult social care responsibilities by introducing CQC assessments of how well they deliver their Care Act duties and by driving greater integration with the NHS through statutory Integrated Care System
- ▶ **[The Mental Capacity Act 2005:](#)** requires councils to ensure that adults who may lack capacity are properly supported to make decisions wherever possible, and that any decisions made on their behalf, follow the Act's principles of best interests and least restriction.
- ▶ **[NHS Continuing Healthcare \(CHC\):](#)** under NHS legislation, councils must ensure that people who are eligible for NHS Continuing Healthcare are funded by the NHS, not the local authority, and must work closely with NHS partners to avoid unlawful provision of health services.

From: Gareth Everton
Sent: 26 May 2026 14:32
To: Philip Faircloth-Mutton (SCC Councillor)
Subject: Benchmarked data
Attachments: LG Inform.pptx

Hi Philip

Please find attached financial benchmarking information as we discussed.

Disclaimer alert, this is my interpretation of the data available nationally. I've not asked public health intelligence team or SCC finance officers to contribute, so please take it in that fashion- not official policy or a briefing.

This information is taken from LG inform and the ASC use of resources report. The first page includes their guidance around the use of data and the danger of taking any figures in isolation and that it's hard to compare and that different places often count differently.

I've presented this as "the source data" and then "my interpretation" i.e. what does this mean.

Hope that helps and happy to talk through in more detail

Regards

Gareth

Gareth Everton

Executive Director Adult Social Care

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27 May 2026 07:00 - Gareth Everton

Morning Philip. The annual safeguarding partnership report is going to cabinet in July. CYP will also take the SCC CYP safeguarding annual report at the same time. It makes sense that we also take the ASC safeguarding annual report. We're just getting it on the agenda/forward plan and need to check you are happy with that approach. Obviously we'll get you a draft as soon as its ready. Thanks

27 May 2026 07:03 - Philip Faircloth-Mutton

Hi Gareth, thank you for the update and happy with that approach. Look forward to receiving the draft as soon as ready. I need to discuss the meeting date with Michael as I've had a longstanding commitment in the diary that day in July **Section** but am otherwise okay

27 May 2026 07:05 - Gareth Everton

Thanks Philip. So do I, **Section. 40 - Personal Data**, so it would be one of my service directors to answer any questions if required. I'd suggest Clement as he is the lead for safeguarding and a safe pair of hands. We're in a good position safeguarding wise and the CQC agreed, so I can't see anything material being raised.

27 May 2026 07:59 - Philip Faircloth-Mutton

Thanks for the heads up and appreciate the contingency plans; that all sounds in good order. I'm going to see if we can bring the meeting forward a week but tbc. On the EA side, it seems like **Section. 40** will be doing my Dep Leader matters and your one my ASC ones, according to what I was told at the end of yesterday

02 Jun 2026 10:56 - Gareth Everton

Hi Philip I'm starting to prep for the scrutiny workshop. We've been asked to prepare three slides which will include your priorities for ASC. See below the brief. I'm happy to draft this, based on what I think they could be. Did you have a particular steer or are you happy to review the draft and confirm? We intend to put together a presentation and send it to members as an evidence set before the meeting. For each Cabinet Member's Portfolio, please could you arrange for 3 PowerPoint slides to be sent to me covering the following issues: Slide 1 – the priorities within the Cabinet Member's Portfolio; Slide 2 – the challenges within their Portfolio; Slide 3 – how could Scrutiny add value?

02 Jun 2026 11:13 - Philip Faircloth-Mutton

Hi Gareth, if you could include something on Transformation in there that would be great, please. Otherwise very happy for you to draft and then I review.

04 Jun 2026 07:09 - Gareth Everton

Morning Philip. I had a good chat with Cllr Robinson yesterday and I understand his efficiency brief is procurement. He's keen to get to know more. I did discuss our transformation programme and savings work and general efficiency. He's looking to get further meetings in to better understand care purchasing and whether there are opportunities to do more, faster. How do you want to be played into the conversation (or not at all?), Happy to keep you in the loop on here or to include you in any future meetings?

04 Jun 2026 07:13 - Philip Faircloth-Mutton

Morning, Gareth. Pleased to hear. Please ensure Martin is given full transparency across the board on this subject. As discussed before, there may be areas where we can work with Norfolk or Essex on joint procurement. Would appreciate being included in all future meetings on the subject, please. On a side note, I would be interested to know how Somerset goes about its work on this. I remember a few years ago they were our most statistically similar neighbour but with lower costs per head (and a similar distance from London). Do they tend to have one big provider or a few providers to reduce package prices, for example?

04 Jun 2026 07:17 - Gareth Everton

Hi, what I know of Somerset, they had a lot of market failure i.e they struggled to get providers, so

invested heavily into community catalysts and smaller micro-providers. Something we are also trying to build, however its a long term piece of work to build a market of smaller micro providers. We'll do some further digging and get back to you.

04 Jun 2026 07:18 - Philip Faircloth-Mutton

That's helpful to know from a technical standpoint, thank you. Look forward to our next catch up

04 Jun 2026 07:56 - Gareth Everton

Hi. Just looking at Somerset use of resources report, and it looks like the 'bear trap' of comparing spend per person in the population vs spend per service user. Somerset spent £27,577.85 on long and short term care per older adult supported in 2024/25. Suffolk spent £21,859.68 on long and short term care per older adult supported in 2024/25. Somerset spent £38,662.54 on long and short term support per younger adult supported in 2024/25. Suffolk spent £40,410.36 on long and short term support per younger adult supported in 2024/25. In Somerset, the total spend on Adult Social Care in 2024/25 expressed as the spend per adult in the local population was £670.04 per adult. In Suffolk its £707.68 per adult. I think this shows we do better for people once they are in the service... but Somerset do better in terms of keeping people away from the service.

04 Jun 2026 08:04 - Philip Faircloth-Mutton

Thanks for the swift and easily digestible follow up. Always helpful to have a breakdown of the different stages. I seem to remember support for Serious Learning disabilities for younger adults as a transformation programme was always the one that was slightly further behind up until 2024, when I last sat in the board. Nic Roper seemed to be right on it, however. Let's talk more on the younger people's piece when we next meet

04 Jun 2026 08:05 - Gareth Everton

Loads to share on that, we've had some help to review and find opportunities- coming to the conclusion now and a lot of savings opportunities I'll be able to share in the next week or two.

08 Jun 2026 13:55 - Gareth Everton

Hi Philip. Is there any chance we could either start our catch up earlier or push back a bit please?

08 Jun 2026 13:56 - Philip Faircloth-Mutton

Absolutely. Can meet any time from 3

08 Jun 2026 13:56 - Gareth Everton

perfect, I'll give you a call in 5 mins. thanks

From: Gareth Everton
Sent: 15 May 2026 13:28
To: Philip Faircloth-Mutton (SCC Councillor)
Subject: FW: Induction session for new ASC lead members 24th/25th June - ALSO OPEN TO EXISTING ASC LEAD MEMBERS

Importance: High

Hi Philip
As discussed
Regards
Gareth

Gareth Everton

Executive Director Adult Social Care
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From: Section. 40 - Personal Data@local.gov.uk>
Sent: 11 May 2026 17:40
To: Section. 40 - Personal Data@adasseast.org.uk>; Section. 40 - Personal Data@centralbedfordshire.gov.uk>; Section. 40 - Personal Data@luton.gov.uk>; Gareth Everton <Gareth.Everton@suffolk.gov.uk>; Section. 40 - Personal Data@hertfordshire.gov.uk>; Section. @norfolk.gov.uk>; Section. 40 - Personal Data@bedford.gov.uk>; Section. 40 - Personal Data@southend.gov.uk>; Section. 40 - Personal Data@essex.gov.uk>; Section. 40 - Personal Data@cambridgeshire.gov.uk>; Section. 40 -@thurrock.gov.uk>; Section. 40 -@peterborough.gov.uk>; Section. 40 - Personal Data@Milton-keynes.gov.uk>
Subject: FW: Induction session for new ASC lead members 24th/25th June - ALSO OPEN TO EXISTING ASC LEAD MEMBERS
Importance: High

 **EXTERNAL EMAIL: Don't click any links or open attachments unless you trust the sender and know the content is safe. [Read more information](#) for help from Suffolk IT**

Hi Colleagues, please find details of an Induction session for new ASC lead members below. For those of you who have not had elections or have not had a change in Lead Member, the webinar is also open to existing Lead Members.

It is a virtual session and the link to book is in the email below.

Information on other offers for Members will be shared once they are confirmed.

Regards

Section.

Section. 40 - Personal Data

Care and Health Improvement Adviser East of England | Partners in Care and Health (PCH)
Local Government Association (LGA)

Section. 40 - @local.gov.uk | Section. 40 -
www.local.gov.uk/PCH

Upcoming annual leave from Monday 18 May, returning Tuesday 2 June

LGA and ADASS are Partners in Care and Health (PCH), supporting councils to improve the way they deliver adult social care services

Please note that I work part time, typically on Monday afternoon, Tuesday and Wednesday.

From: Section. 40 - Personal Data @local.gov.uk>

Sent: 22 April 2026 12:45

To: Section. 40 - Personal Data @local.gov.uk>; Section. 40 - Personal Data @local.gov.uk>; Sectio

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Cc: Section. 40 - Personal Data @local.gov.uk>; Section. 40 - Personal Data @local.gov.uk>

Subject: Induction session for new ASC lead members 24th/25th June

Hello – offer for new ASC members from PCH. (If it is oversubscribed I can run another in early September if required)

**Virtual induction session for new local political leaders in adult social care – over two mornings
Wednesday 24th June 9.30 am - 1pm & Thursday 25th June 9.30 am - 1pm**

This leadership development session is aimed at elected members new to the adult social care lead member role or portfolio. Existing lead members/portfolio holders who would like to refresh their knowledge and get an update on national policy are also welcome to join.

The session is virtual and runs over two mornings. There will be briefings on the current policy landscape for adult social care, a look at the challenges and opportunities for local political leadership, and relate these to the local context. As well as hearing from a range of experts across the care and health system, you will hear about further support on offer for you. There will be plenty of opportunity for discussion including Q&A and networking with peers.

Please see registration link below.

<https://lgaevents.local.gov.uk/lga/3026/home>

Regards Section. 40 - Personal

Section. 40 -

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Welcome to Adult Social Care (ASC)

Gareth Everton, Director of Adult Social Care

June 2026



What is Adult Social Care?

Adult Social Care (ASC) is a statutory service delivered by Suffolk County Council. We have legal duties set out in national legislation to support adults who have care and support needs, to protect people at risk of abuse or neglect, and to promote independence and wellbeing.

Not everyone who contacts ASC will receive ongoing services, but everyone is entitled to information, advice and support at the right time.

ASC is legally required to:

- Assess needs - carrying out Care Act assessments for adults and carers
- Safeguard adults - protecting people at risk of abuse or neglect
- Support independence - helping people live safely and independently where possible
- Arrange care and support - when eligible needs cannot be met another way
- Support carers - recognising and supporting unpaid carers
- Ensure mental capacity protections - including Deprivation of Liberty Safeguards (DoLS)
- Provide information and advice - even where no ongoing service is provided

These duties mainly come from the Care Act 2014 and the Mental Capacity Act 2005. These responsibilities mean ASC must always be able to respond, regardless of demand, workforce pressures or financial constraints.

Supporting Adults



There is no typical
'ASC customer'



In a year....

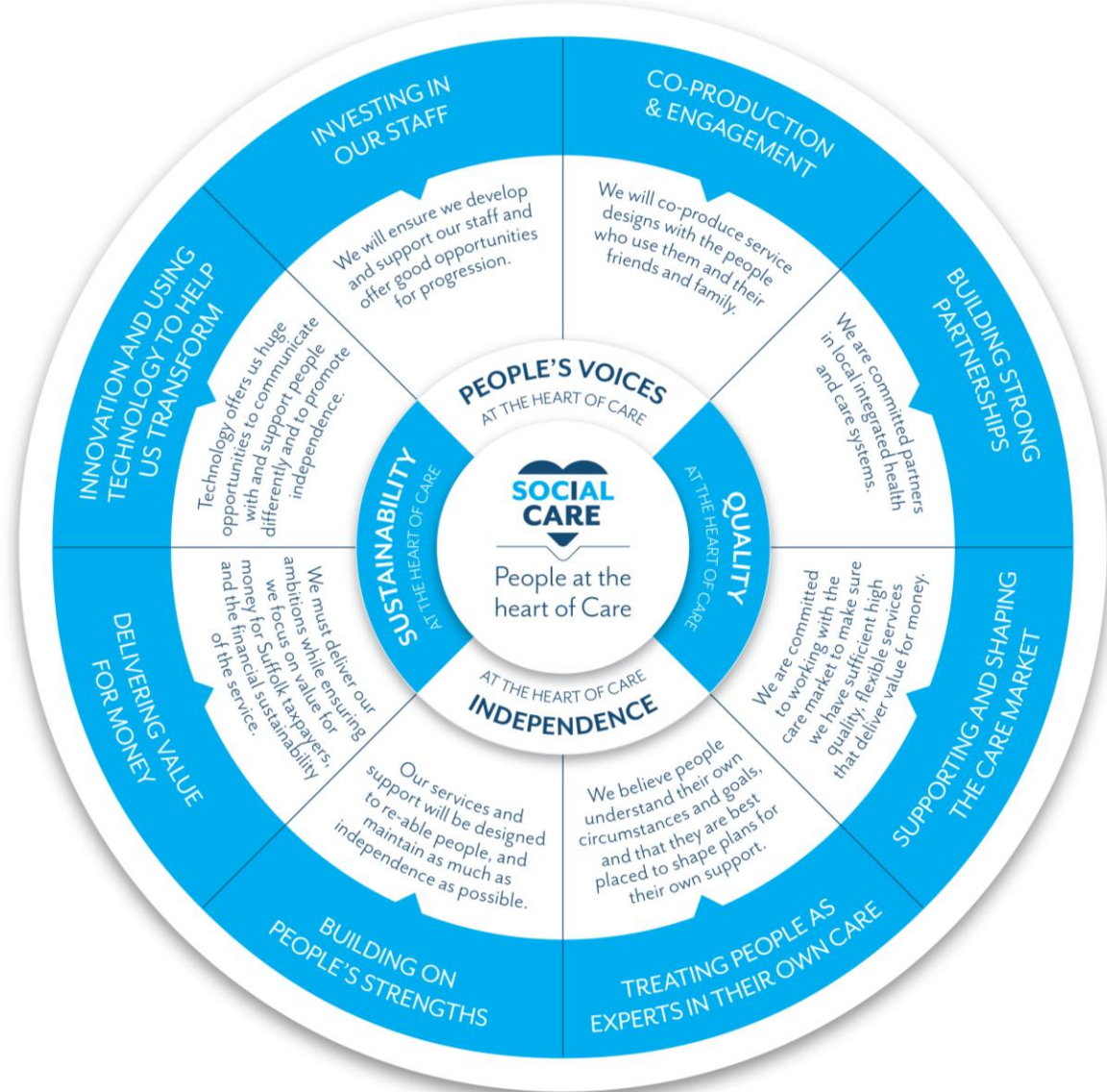
- ASC supports around **20,000** adults across Suffolk each year; 11,500 receive paid services
- **1,400** people managing their own care through Direct Payments
- Just over **4,000** in supported housing, residential or nursing care
- Nearly **6,400** receiving care at home or day services
- **2,445** supported by Learning Disability & Autism teams
- ASC manages over **200,000** contacts annually from the public and partner organisations, including health, mental health and emergency services
- **2,000-2,500** safeguarding enquiries are undertaken
- Customer First is the main access point, handling adult and children's enquiries via phone, webchat and online referrals
- Around **65%** of contacts are resolved through advice, guidance and signposting; others are routed to ASC teams
- Out of hours, calls are managed by the Emergency Duty Service

Our Strategic Approach

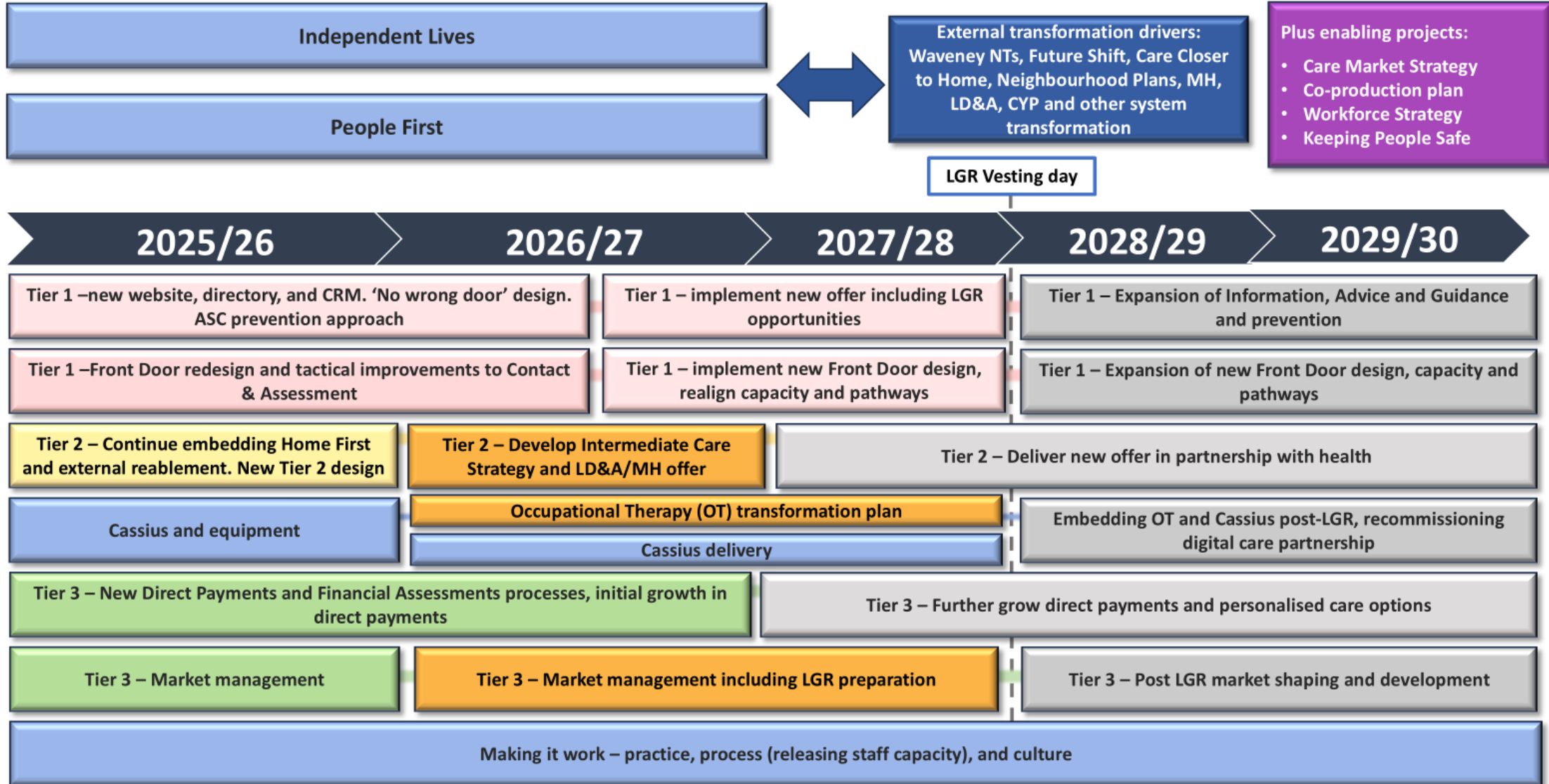
Our ASC mission is for people to live fulfilling and independent lives.

People at the Heart of Care is our strategic approach and sets out how we work to support people to achieve this.

Our Care and Support Compass sets out the four strategic outcomes and eight guiding principles of our strategy.



Our Transformation Programmes



Working across Health & Social Care

Locality Working

- Adult Social Care operates across three localities:
 1. West Suffolk
 2. Ipswich & East Suffolk
 3. North Suffolk (also referred to as Waveney)
- Integrated Neighbourhood Teams (INTs) bring together Social Care and Community Health professionals to:
 - support people to remain healthy, independent and at home for longer
 - focus on prevention, early intervention, reablement and alternatives to hospital admission
- Care is personalised, coordinated and guided by local needs, supporting safe transfers of care and better experiences for individuals and families

Countywide specialist services

- Alongside locality teams, ASC delivers countywide specialist services, including:
 - Learning Disabilities and Autism
 - Mental Health
- These services support people with more complex needs, often involving multiple physical and mental health conditions
- Services work closely with NHS partners, including Norfolk and Suffolk Foundation Trust and the Integrated Care Board, with many packages jointly funded under Section 117
- Strong co-production arrangements are in place with:
 - ACE Anglia (Learning

Disabilities)

- Suffolk User Forum (Mental Health)

- Teams also work closely with Children and Young People's services, particularly around transitions into adulthood

Safeguarding is everyone's business – Helping adults live safely, with dignity and autonomy

- Safeguarding is delivered through countywide teams working with partner agencies to respond to concerns, investigate risks of abuse or neglect, and ensure that any restrictions on a person's liberty are lawful, necessary and in their best interests.

The Care Market



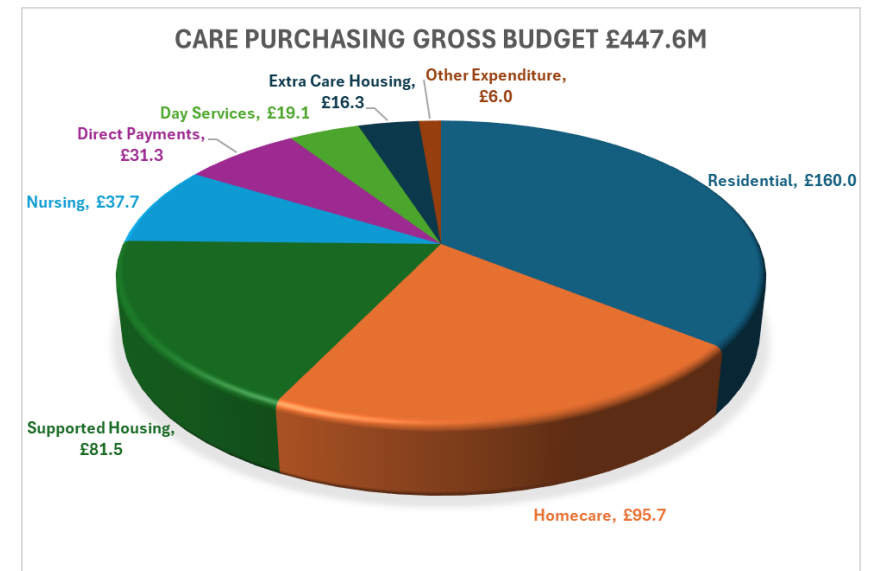
- Over **£400m** spent annually on Adult Social Care
 - Includes both gross and net budgets, with around **£85m** recovered through customer charges
- ASC is the largest single area of council spend and a major contributor to Suffolk's local economy
- Strategic commissioning and contract management teams work closely with finance, business partners and frontline social workers to ensure value for money and services that meet people's needs
- Suffolk has one of the **highest-quality** care markets in the UK
 - Over **85%** of providers rated **Good or Outstanding** by the CQC
 - Our approach to market management is a key contributor to this performance
- Commissioning includes:
 - Defining required services and outcomes
 - Letting and managing contracts
 - Working with providers to maintain quality and develop new services

Further detail is set out in the [Care Market Strategy 2025-2030 and Annual Market Position Statement - Suffolk County Council](#)

Budget 2026/2027

- Net Budget £382.3m which is 45% of the total SCC budget
- Care Purchasing is the largest spend area in ASC
- The gross care purchasing budget is used to commission care services, such as residential care or homecare from the independent care sector in Suffolk and for direct payments to customers for them to manage their own care
- The ASC budget has increased by £9.2m or 2.5% for 2026/27
- Inflation costs were budgeted as £14m, which is used for care services and has resulted in most care rates to rise by 3.53% (this compares to the National Living Wage increasing by 4.1%)
- Demand increases from new and existing customers of £17.8m are expected to be fully offset with transformation savings
- In addition to the £382.3m revenue budget there is a £10.3m capital budget of which £8.7m relates to the Disabled Facilities Grant

Adult Social Care 26/27 Net Budget	£m
Management and Workforce Development	4.458
Care Purchasing	339.011
Social Work Teams	30.824
Reablement, Equipment and Assistive Technology	17.151
Family Carers Support	2.245
Business and Transformation	6.075
Housing Related Support	1.821
Strategic Commissioning & Contract Management	6.356
Better Care Fund	-25.640
Total Adult Social Care	382.301



Meet ASC Directorate Management Team (ASC)




Andrew Cook & Mark Ash
Joint Chief Executive



Gareth Everton
Executive Director of Adult Social Care



Norfolk and Suffolk Integrated Care Board

- From 1 April 2026, the existing NHS Suffolk and Northeast Essex Integrated Care Board (ICB) and NHS Norfolk and Waveney ICB are formally abolished and replaced by a single new organisation: **NHS Norfolk and Suffolk Integrated Care Board**.
- The new ICB becomes the statutory body responsible for all NHS planning and commissioning across the whole of Norfolk and Suffolk, covering a population of around 1.7 million people.
- This change is part of the government-approved first phase of ICB mergers designed to reduce running costs and align systems more closely with strategic local government boundaries.



Customer Rights

Complaints relating to ASC are handled under the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009

Should you wish to make a complaint or share a compliment:

- Online: www.suffolk.gov.uk/feedback
- Email: customerrights@suffolk.gov.uk
- Telephone: 0345 266 1821

Members can also get in touch directly with Gareth Everton, Executive Director for ASC:

Email: gareth.everton@suffolk.gov.uk



Thank you for your time

We appreciate your interest in Adult Social Care and the role you play in supporting people in Suffolk.

Do you have any questions you would like to ask, or any areas shared today you would like to hear more about?

Adult Social Care Financial Benchmarking

<https://lginform.local.gov.uk>

ASC Use of Resources Narrative Report for Suffolk, 2024/25

We encourage councils to use this report to help with their understanding of the topic and to consider the similarities and differences in the trends shown in the published data. When comparing councils with one another, please bear the following in mind:

- Data recording is not fully consistent across England, so two figures from two different councils are not necessarily fully comparable.
- No one metric alone gives a complete picture of a council's situation.
- The metrics are the starting point of a conversation about the topic. There is a potential for metrics to be used to arrive at misleading conclusions without knowing local contexts. Further analysis and research will be required.
- In most cases, there is no assumed polarity to the metrics. For example, it is not necessarily the case that a low figure for a metric is 'good' and a high figure 'bad'. The needs and priorities of councils can vary significantly, so this needs to be considered when interpreting the figures.

Overall spending on Adult Social Care

- In Suffolk, the total spend on Adult Social Care in 2024/25 expressed as the spend per adult in the local population was £707.68 per adult. This was greater than the overall spend per adult for England of £632.97.
- Overall spending will likely be affected by the relative proportion of older people in the adult population. In Suffolk, 30.1% of the adult population are aged 65 and above, which is higher than England overall (23.6%), and higher than the average for the East of England region (25.3%).
- Overall spending will also likely be affected by the level of deprivation. Suffolk is ranked 98 among all English single-tier and county councils on the Index of Multiple Deprivation (where a rank of 1 indicates a high level of deprivation). Suffolk is more deprived than the average for All English county local authorities.

What does it really mean?

- We tend to use the “spend per head of the population” figure to benchmark spend on ASC.
- This isn't a great measure as Suffolk is different, even within our CIPFA nearest neighbours. Suffolk has 30.1% of the population aged 65+ and 2.2% of the population receive long term support from the council.
- This compared to Essex with 26.4% of the population aged 65+ and 1.75% of people using long term services
- In Worcestershire this is 29% 65+ and 1.8% of the population.
- Suffolk has more older people and more people using services. Cost per customer in receipt of services is a better measure for benchmarking.

Spending on Younger Adults

- Suffolk supported [0.91%](#) of its younger adult population with long term support in 2024/25, which was greater than the [0.88%](#) of younger adults supported in England. Compared to other councils, Suffolk is ranked 65th (1 is the highest proportion of the younger adults supported).
- Suffolk spent [£40,410.36](#) on long and short term support per younger adult supported in 2024/25, an increase of 0.6% from its previous level of [£40,162.24](#). For comparison, the spend per younger adult supported for England overall was [£37,692.34](#), which was 6.4% higher than the previous year.
- In Suffolk, £29,055,000 was spent in 2024/25 on permanent residential and nursing care placement for younger adults. This is 17.8% of the total spend on long term support for younger adults, which is lower than the national position of 29.4%. In terms of package costs, £66,793 was spent on average for each younger adult supported in permanent residential or nursing care in Suffolk, which is lower than the national average of £77,594.

What does it really mean?

- Suffolk has more working age adults in the service than comparators.
- Although we are a relative high spender, our strategy is showing benefits with the cost per customer increasing by a lower rate than the national average (0.6% vs 6.4%)
- We spend less than the national average on residential care for working age adults. This shows that we are spending more than average on other types of care. We know we are an outlier for supported living arrangements which are higher cost. This is one of the commissioning priorities for 2026/27.

Spending on Older Adults

- Compared with 2023/24, the actual number of older adults with long term support in Suffolk increased by 13.0% to [10,020](#) (from its previous level of [8,870](#)). For context, the ONS population estimates for older adults in Suffolk increased by 1.9% over the same period.
- Suffolk spent [£21,859.68](#) on long and short term care per older adult supported in 2024/25, a decrease of -0.9% from its previous level of [£22,057.05](#). For comparison, the spend per older adult supported for England overall was [£22,258.30](#), which was 5.7% higher than the previous year.
- In Suffolk, £139,766,000 was spent on permanent residential or nursing care for older adults. This is 65.1% of the total spend on long term support for older adults, which is higher than the national position of 62.8%. In terms of package costs, £34,898 was spent on average for each older adult supported in a care home in Suffolk, which is higher than the national average of £33,813.

What does it really mean?

- This shows the significant benefit of our strategy for older people
- The spend per customer in Suffolk is £400 per year cheaper than the national average. This has decreased by 0.9% from the previous year. The national average increased 5.7%
- Suffolk's population is getting older and the number of people aged 65+ increased 2%. However, the increase in customers increased 13%. This shows that the older population is less healthy, with more needs than previously.

Spending funded by income from the NHS

- Gross current expenditure for Suffolk in 2024/25 was £448,649,000 which was greater than the 2023/24 figure of £415,774,000. This expenditure does not include spending funded by income from the NHS. Revised expenditure for Suffolk in 2024/25, which includes NHS income, was £499,802,000 and greater than the 2023/24 figure of £466,679,000.
- This translates to Suffolk receiving [£78](#) in NHS Income per adult aged 18+ in the population, compared to [£95](#) per adult for England overall. Compared to all other English single tier and county councils, Suffolk is ranked 101st in terms of NHS Income per head (where a rank of 1 is the highest level of funding per head).
- Compared with 2023/24, revised spending per adult supported changed by -2.7% from its previous level of [£36,488](#). For comparison, across England revised spending per adult supported changed by 4.2% from [£37,123](#) in 2023/24.

What does it really mean?

- SCC does not get enough NHS income compared to other areas. The NHS gives SCC £78 per person in the population compared to £99 nationally.
- The changes from the previous year was a decrease of nearly 3% compared to an increase of 4% nationally.
- This is not the case the Norfolk where they received £100 per head of the population. An increase of 2.2% from the previous year. Now the ICB is one organisation, we need to ensure Suffolk levels up, not Norfolk down.
- We know SCC continues to fund care which in other places would be funded by the NHS. This includes things like CHC, Section 117 and joint funded care. This is a priority for practice development in 2026/27

Total spend per head of the population

	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25
Suffolk	<u>£460</u>	<u>£475</u>	<u>£542</u>	<u>£547</u>	<u>£582</u>	<u>£663</u>	<u>£708</u>
Total for England	£424	£442	£477	£490	£524	£590	£633
Mean for All English county local authorities	£422	£440	£481	£492	£518	£590	£628

Average spend per customer aged 18-65

	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25
Suffolk	<u>£30,889</u>	<u>£31,554</u>	<u>£33,560</u>	<u>£36,509</u>	<u>£40,162</u>	<u>£40,410</u>
Total for England	£26,548	£27,792	£29,297	£31,964	£35,411	£37,692
Mean for All English county local authorities	£28,867	£29,867	£32,342	£33,837	£37,693	£39,817

Average spend per customer aged 65+

	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25
Suffolk	<u>£13,973</u>	<u>£15,178</u>	<u>£15,815</u>	<u>£18,795</u>	<u>£19,594</u>	<u>£22,057</u>	<u>£21,860</u>
Total for England	£14,285	£15,134	£14,967	£16,767	£18,461	£21,067	£22,258
Mean for All English county local authorities	£15,169	£16,065	£15,596	£17,868	£19,725	£22,359	£23,303

In a nutshell

- Suffolk has an older population and more demand than comparison authorities.
- Therefore, our spend per head of the population is greater, however the spend per person in receipt of care is lower than average for older people. The spend per person aged 18-65 is closer to the average for county councils and increasing annually less than the national average.
- Our strategy is working and more people are being supported outside of residential care.
- However, we need to reduce the cost of supported living services for people aged 18-65 and we need to recover more income from the NHS.

From: Gareth Everton
Sent: 15 May 2026 12:17
To: Philip Faircloth-Mutton (SCC Councillor)
Subject: RE: Catchup

Hi Philip
Nice to hear from you.
Unfortunately Monday is the only day I'm not in the office next week.
I'm free at 1pm or 3pm today if that works for you?
9am or 1pm on Monday via MS Teams
Thanks
Gareth

Gareth Everton

Executive Director Adult Social Care
Suffolk County Council | Endeavour House | 8 Russell Road | Ipswich | IP1 2BX
Email: gareth.everton@suffolk.gov.uk | Web: www.suffolk.gov.uk

Alternative Contact

Section 40 -
Executive Assistant
Email: Section 40 - @suffolk.gov.uk

Please note: While I may email you outside working hours, I do this because it fits with my workload and schedule. Please do not feel obliged to respond outside your normal working hours.

From: Philip Faircloth-Mutton (SCC Councillor) <Philip.Faircloth-Mutton@suffolk.gov.uk>
Sent: 15 May 2026 12:09
To: Gareth Everton <Gareth.Everton@suffolk.gov.uk>
Subject: Catchup

Hi Gareth,

Hope all well your side.

When you have a free moment, please could we have 30 mins for a catchup. I'm in EH on Monday, so could do in person then, or happy to do something on Teams before or after that.

Kind regards,

Philip

Sent from [Outlook for iOS](#)