

**Minutes of the Social Care and Wellbeing Scrutiny Committee
Monday 22nd September, 2025 at 6.00 pm
In Committee Room 2, The Council House,
Priory Road, Dudley**

Present:

Councillor A Tromans (Chair)
Councillor K Lewis (Vice-Chair)
Councillors C Bayton, H Bills, T Creed, D Bevan, A Dale, M Hanif, J Hill, S Ridney
and K Westwood

Dudley MBC Officers:

T Curran (Complaints Manager), S Faulkner (Benefits Manager), E Matthews
(Interim Director of Adult Social Care), M O'Meara (Public Health Manager),
H Shukla (Interim Director of Public Health), M Young (Assistant Director of Adult
Social Care) and K Malpass (Democratic Services Officer).

In Attendance via MS Teams:

A Harris (Health and Wellbeing Business Programme Manager) and A Dewhirst –
(Local Government Association Peer Member) – Observing

Also in Attendance:

M Smith (Local Democracy Reporter), together with one member of the public

20 **Apologies for Absence**

Apologies for absence were received on behalf of Councillors A Smith and
A Goddard, Cabinet Member for Adult Social Care and Public Health; and
J Griffiths (Co-opted Member for Healthwatch Dudley).

21 **Appointment of Substitute Members**

It was noted that Councillor H Bills had been appointed as a Substitute
Member for Councillor A Smith, for this meeting of the Committee only.

22 **Declarations of Interest**

No member made a declaration of interest in accordance with the Members' Code of Conduct.

23 **Change in order of business**

Pursuant to Council Procedure Rule 1(c), it was:

Resolved

That the order of business be varied, and the agenda items be considered in the order set out in the minutes below.

24 **Update on the Household Support Fund**

The Committee considered a report of the Interim Director of Public Health on the Household Support Fund 7 (HSF7) and how funds have been used to date, together with significant changes to future funding and current preparation. A detailed presentation was provided to Members, a copy of which would be circulated after the meeting.

Members asked questions, made comments and responses were provided where necessary as follows: -

- (a) Councillor J Hill queried the urgency of releasing funds under the HSF scheme and suggested allowing a longer application window, with recipients selected at random rather than on a first-come, first-served basis. Concern was expressed that the current process would disadvantage those unable to apply immediately and it was considered that a fairer approach was necessary. In responding, the Benefits Manager explained that due to high anticipated demand, extending the application period would result in significantly more applications than the available funding could support, which would lead to a large number of rejections and raise unrealistic expectations. It was noted that current resources did not allow for detailed financial assessments of all applicants.

Whilst Councillor J Hill acknowledged the limitations, he suggested that a clearly communicated random selection process, including extending the application window, would offer a fairer alternative. In responding, the Benefits Manager acknowledged the suggestion raised and Members were advised that, whilst no approach was without its disadvantages, the suggestion could be considered in future schemes. It was noted that the forthcoming Crisis Resilience Fund would adopt a more holistic approach, and alternative strategies would be considered during its development.

- (b) Councillor A Dale raised concerns regarding the discretionary Council Tax Relief Fund, indicating that some residents had experienced significant increases in Council Tax but did not meet the eligibility criteria for support. He requested an update on the allocation of the £1 million fund and the number of recipients that had benefited from the fund. In responding, the Benefits Manager advised that figures were not available at the meeting but would be circulated to all Members of the Committee.

Councillor A Dale further expressed concern that the HSF may not reach all those in need, particularly individuals who fell outside the eligibility criteria and queried what measures were in place to support those that may be excluded. In responding, the Public Health Manager acknowledged the challenge in reaching all residents that would benefit from the fund and highlighted Dudley's approach of working with multiple partners to maximise that range. The importance of Members raising awareness of available support routes was considered essential in ensuring that the most vulnerable people accessed the HSF.

The Interim Director of Public Health added that vouchers remained available through Family Hubs and Adult Social Care and could be used for essential items including food and furniture and emphasised the importance of residents being signposted to those services for assistance. The Public Health Manager indicated that emergency vouchers were also available from Adult and Children's Social Care out-of-hours services and a leaflet outlining all access routes, including QR codes for further information, was available and circulated to all Members of the Committee for distribution to constituents.

Councillor A Dale acknowledged the efforts made by Public Health to reach eligible residents, however, suggested that distributing vouchers through non-social care channels, such as schools, may help reduce barriers for families reluctant to engage with social services. In responding, the Public Health Manager confirmed that Dudley Council for Voluntary Services also distributed funds to organisations such as Barnardo's, food banks, Provision House, and schools and reiterated that hardship funds were available through schools and voluntary sector partners, offering alternative access points for families in need.

- (c) Councillor C Bayton queried the rationale behind the allocated figure of 16% of the HSF to the Revenue and Benefits application stage, describing the figure as arbitrary and queried how that allocation percentage compared with neighbouring authorities. In responding, the Public Health Manager explained that the allocation was based on the previous years' data, partner feedback, and delivery capacity, particularly within Revenues and Benefits. It was noted that funding was reviewed bi-weekly with partners and reallocated where needed, including to schools and voluntary sector organisations.

The Benefits Manager indicated that comparisons with other Local Authorities was difficult, as each authority administered its scheme differently. Members were advised that some Local Authorities focused solely on direct cash payments whilst Dudley used a multi-channel approach. The Interim Director of Public Health emphasised that allocations were based on need rather than fixed percentages. Members were advised that rather than relying solely on online applications and direct cash payments, Dudley distributed support through a network of frontline professionals, including Family Hubs, schools, and voluntary sector partners that were well-positioned to assess individual circumstances and provide tailored assistance. The approach enabled early intervention and helped prevent residents from falling into crisis.

The Interim Director of Public Health indicated that in some councils, funding was distributed primarily through online platforms, which limited visibility into how funds were used and what additional support recipients required. In contrast, Dudley's model allowed for a more holistic engagement, where professionals could identify broader needs such as food insecurity, fuel poverty, or risk of homelessness, and provide immediate and follow-up support. This integrated approach aligned with national best practice and had contributed to Dudley being selected as a partner in the national HSF co-design programme. Whilst there was always room for improvement, the current model reflected a balanced strategy that prioritised both immediate relief and long-term resilience.

Whilst Councillor Bayton acknowledged the preventative work carried out, the concerns around the 16% allocation were maintained, particularly given the high demand evidenced by the rapid closure of the application window which questioned whether the allocation was proportionate to actual need. It was noted that whilst preventative work was important, the current scheme did not fully reflect a preventative model and the need to align future support mechanisms with Dudley's co-produced Poverty Strategy was emphasised to ensure a more integrated and sustainable approach to tackling hardship across the borough.

Councillor C Bayton welcomed the introduction of a multi-year HSF settlement, indicating that whilst the criteria for future allocations remained unclear, the extended timeframe would enable more effective planning and delivery. It was important that reasonable access was provided to support residents, particularly considering digital exclusion, which affected approximately 21% of residents across the borough. It was highlighted that digital exclusion, whether due to lack of access to devices, internet connectivity, or digital literacy could significantly hinder residents' ability to apply for support, especially in crisis situations where timely intervention was critical. Councillor C Bayton urged the Council to consider how the HSF model could be adapted to meet the needs of digitally excluded individuals, ensuring that immediate assistance was accessible to all, regardless of their ability to engage with online systems.

In responding, the Public Health Manager indicated that digital exclusion and lack of access to bank accounts were key barriers to residents not applying for the HSF and explained that Dudley's approach prioritised face-to-face engagement through schools, family hubs, and voluntary sector partners, allowing for immediate support and follow-up, which offered more meaningful assistance than one-off payments. Whilst Councillor C Bayton reiterated the concerns regarding the allocation percentage, she welcomed the holistic approach and acknowledged the positive impact on constituents who had received support through the scheme.

- (d) Councillor M Hanif raised concerns regarding the accessibility and effectiveness of the communication strategy for the HSF and stated that whilst the leaflet circulated referenced support for vulnerable individuals, the current outreach methods did not sufficiently reach all eligible residents, particularly those who were digitally excluded. It was suggested that expanding communication channels to include local radio stations, faith groups, and other community-based organisations, together with making hard copies of information available at accessible locations such as libraries, would ensure that those without internet access were not disadvantaged. The need for a more inclusive and targeted approach to ensure equitable access to support was emphasised.
- (e) Councillor S Ridney requested further context regarding the HSF data, specifically the proportion of households with children who had claimed support. Whilst it was noted that 30% of households had accessed the fund, recent figures suggested approximately 35% of children in the borough were living in poverty.
- (f) Councillor S Ridney raised concerns regarding the low proportion of respondents aged 65 and over which equated to 2.6% that had accessed the HSF and queried whether the figure reflected a lack of financial need among older residents or whether it highlighted issues of digital exclusion. It was essential that the application process was explored, particularly its reliance on digital access and bank accounts, which was unintentionally excluding older residents. It was requested that future reporting included contextual data to better understand the extent of need among older people and other vulnerable groups to inform decision-making and ensure fair access to support.

In responding, the Interim Director of Public Health acknowledged the importance of considering broader trends and data when planning future allocations of the HSF. Members were advised that the current funding covered only a six-month period, and that a full-year analysis would provide a more comprehensive understanding of need across the borough. It was suggested that reviewing historical data over the past seven years would be beneficial in identifying patterns of demand and informing future funding decisions. The approach would support a more strategic and evidence-based allocation process, ensuring that resources were directed to areas of greatest need.

- (g) Councillor H Bills emphasised the importance of using accessible and non-intimidating language when signposting residents to support services. It was noted that terminology associated with statutory services, such as Children's or Adult Social Care, could deter individuals from seeking help, particularly if they had not previously engaged with such services. Concerns were also raised regarding the impact of digital exclusion on access to support, particularly in the context of Universal Credit and online application processes. In responding, the Interim Director of Public Health welcomed the feedback and confirmed that it would be considered when planning future delivery of support schemes.
- (h) Councillor D Bevan raised concerns regarding the accuracy of percentage figures presented highlighting inconsistencies where different monetary allocations were all listed as 1%, despite varying amounts. It was suggested that rounding figures had led to misleading representations and recommended the use of decimal places for greater clarity. Reference was made to the process on how final figures for specific allocations, such as school meals during holidays, were determined if not based on percentage distribution. In responding, the Public Health Manager explained that funding was regularly reviewed and reallocated based on emerging needs, with adjustments made during bi-weekly meetings with delivery partners. The percentages were intended to provide a general overview rather than precise calculations; however, the feedback was welcomed and would be considered to provide more accurate percentage reporting in future reports.

Councillor D Bevan emphasised the importance of transparency in financial reporting, indicating that even small percentage discrepancies could represent significant sums. The Interim Director of Public Health confirmed that the figures presented were current but provisional, and a full breakdown would be available at the end of the financial year once all funds had been distributed. The Public Health Manager indicated that each delivery partner was required to submit quarterly returns, which informed the overall financial reporting. The figures presented were intended as a snapshot and subject to change based on partner submissions and evolving needs. Councillor D Bevan reiterated that his concern was not with the underlying processes but with the presentation of data and highlighted the need for clarity and accuracy in financial summaries.

- (i) In referring to the map outlining initial findings from the evaluation survey, Councillor M Hanif queried the identification of Brierley Hill and Wordsley, and St Thomas's Wards as areas of concern, indicating that Lye and Stourbridge, although marked green, was also recognised as a deprived area. In responding, the Benefits Manager clarified that the map reflected survey responses rather than actual fund distribution or deprivation levels. Members were advised that a similar mapping exercise would be undertaken once the scheme concluded, which would provide a more accurate representation of fund allocation. Councillor M Hanif reiterated the importance of widening the communication strategy to ensure broader and more inclusive outreach.
- (j) In responding to a question raised by Councillor T Creed, the Public Health Manager explained that vouchers were issued as unique codes, which could be printed, emailed, or sent via text message depending on the recipient's needs. The type of voucher was determined based on individual circumstances through a professional assessment and recipients were guided by frontline staff on how to redeem the vouchers at relevant outlets.

Councillor A Tromans concluded the discussion and thanked officers for the report and presentation provided acknowledging the extensive partnership work undertaken, particularly with professionals in schools and other settings. The positive approach taken in delivering support across the borough was recognised however, concerns had been raised regarding the accuracy of data presentation, the clarity of percentage allocations, the accessibility of funding through the online portal, and the need to better support digitally excluded residents and urged officers to consider the comments raised moving forward.

Resolved

- (1) That the information contained in the report submitted on the Household Support Fund 7 and the comments made by Members as outlined above, be noted.
 - (2) That the Benefits Manager be requested to provide a written response on the allocation of the £1 million discretionary Council Tax Relief Fund and the number of recipients that had benefited from the fund to all Members of the Committee.
 - (3) That Members submit any further thoughts or feedback on how the Committee would like to be informed when the final allocations and guidance was published and progress on local planning to the Chair of the Committee.
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25 Public Forum

A member of the public raised concerns regarding the accessibility and eligibility criteria of the HSF. It was noted that alternative methods of accessing the fund had not been widely publicised, resulting in limited awareness among vulnerable individuals. The member highlighted that some applicants on low incomes, including those receiving basic Universal Credit had been unsuccessful in applying online, while individuals earning up to £30,000 were eligible which raised questions regarding the fairness and clarity of the eligibility criteria.

The member of the public also shared difficulties encountered when assisting a disabled individual with the online application process, including issues with account recognition and the requirement for Council Tax reference numbers. These barriers were compounded by the absence of welfare rights support, which had previously been available through local food banks. It was emphasised that food banks were increasingly supporting individuals with a wide range of needs beyond food, including access to household items and benefits advice, and called for a simplified application process and clearer printed guidance to support those who were digitally excluded.

In responding, the Public Health Manager confirmed that £50,000 of HSF funding had been allocated to the Black Country Food Bank to support local distribution. It was acknowledged that communication could be improved and recognised the need for more consistent updates and clearer information for community organisations. The member of the public reiterated the importance of regular engagement with frontline organisations, particularly in the absence of dedicated welfare support, and welcomed the opportunity to be involved in future planning.

The Public Health Manager confirmed that the Council was currently working with the Department for Work and Pensions (DWP) on the development of the new Crisis Resilience Fund (CRF) and welcomed the suggestion to involve community representatives in the planning process to ensure that future schemes were more accessible and better targeted.

Councillor A Tromans supported the proposal for direct engagement between the member of the public and the relevant officers.

Resolved

That Public Health be requested to consider the suggestion to involve community representatives in the planning process, to ensure that future HSF schemes were more accessible and better targeted.

26 **Proposed Redesign of the Adult Social Care Services to deliver improved outcomes for the people who use services**

The Committee considered a report of the Interim Director of Adult Social Care on the statutory functions primarily governed by the Care Act 2014 that were required to be delivered by Adult Social Care, which would inform the future of the service in Dudley. The report also included the future vision of Adult Social Care that had been developed in co-production with staff and the people who used the services to meet the forecasted demand in the Dudley Borough.

The Interim Director of Adult Social Care reported that the purpose of the presentation was to engage Members at an early stage in the redesign of Adult Social Care services. It was emphasised that the proposals were currently at conception stage and therefore did not include detailed processes or pathways. The intention was to provide Members with an opportunity to scrutinise the emerging approach and offer feedback before the design was finalised, ensuring that any necessary changes could be made whilst the model remained flexible. A presentation was provided to Members which had been circulated prior to the meeting.

Members asked questions, made comments and responses were provided where necessary as follows: -

- (a) Councillor T Creed commended the officers for their approach to community engagement and problem-solving, indicating that it reflected the proactive role many Councillors take in supporting residents. The importance of ensuring that all staff were aligned with the service's goals and fully committed to the redesign process was emphasised. In responding, the Interim Director of Adult Social Care indicated that staff were very supportive of the proposed changes and emphasised that staff enthusiasm had also been recognised by external bodies, including the Care Quality Commission (CQC), and described the current level of staff engagement as a positive and encouraging position to be in.
- (b) Councillor C Bayton welcomed the preventative approach being proposed within Adult Social Care and emphasised the importance of long-term commitment from the Council. It was noted that the benefits of prevention both in terms of outcomes and financial savings did take time to materialise and therefore required sustained investment and strategic alignment across the organisation and queried whether the Council was committed to supporting the model over the long term.
- (c) Councillor C Bayton also raised the importance of inclusive co-design, particularly with voluntary and community sector organisations, and emphasised the need to ensure that Black, Asian and Minority Ethnic (BAME) communities were actively engaged and did not fall through gaps in service provision. It was suggested exploring opportunities to align the proposed hub model with existing Family Hubs, recognising that families often required integrated support across both adult and children's services. It was noted that such alignment could enhance resource efficiency and promote a 'One Council' approach.

- (d) Councillor C Bayton highlighted the need for a robust communication strategy to ensure residents were aware of available services, particularly those that were digitally excluded. It was suggested that inclusive communication methods be built into the planning process to ensure reasonable access across all communities.

In responding, the Interim Director of Adult Social Care confirmed that the proposed model aligned with the Council's strategic direction and that prevention was a core priority. Confidence was expressed in organisational support for a long-term approach and highlighted ongoing discussions with Public Health and Housing to ensure a joined-up delivery. The suggestion to explore integration with Family Hubs would be considered and it was acknowledged that the need to simplify terminology to avoid confusion among residents was essential. The flexibility of the model allowed for services to be delivered where they were most needed, and communication would be critical to its success. The service was committed to ensuring that messaging was clear, consistent, and continuously reinforced to maximise awareness and accessibility.

- (e) Councillor A Dale raised concerns regarding the financial pressures facing Adult Social Care, indicating that cost neutrality was often impacted by external factors beyond the Council's control, such as judicial orders in Children's Services. The high costs associated with out-of-borough placements was highlighted and it was suggested that the Council take greater responsibility for developing in-borough provision to reduce reliance on external services. Data on the average weekly cost of residential care placements for adults was requested, indicating that such figures would be useful for Members to understand the financial impact.

The Interim Director of Adult Social Care confirmed that average cost data was not available at the meeting but would be provided to Members of the Committee. It was reported that costs varied significantly depending on individual needs and the type of placement, such as residential care for older adults versus those with learning disabilities. Whilst the financial strain caused by out-of-borough placements was acknowledged, reference was made to the current commissioning work aimed at expanding supported living options within the borough, which would enable individuals to transition from residential care to more independent living arrangements, thereby freeing up capacity and reducing costs.

Councillor A Dale emphasised the need for the Council to move beyond discussion and take practical steps to address long-standing issues. Reference was made to the innovative approaches being used by other authorities, such as Shropshire Council's use of AI and sensor-based technology to support independent living, and suggested Dudley explore similar solutions to reduce demand for residential care. In responding, the Interim Director of Adult Social Care agreed and confirmed that the integration of technology was a key part of future planning. Opportunities would be explored to use AI and sensor-based systems to support individuals in their own homes and in supported living settings. A new project was being launched to explore those options, with the aim of enhancing independence, reducing staffing pressures, and improving financial sustainability.

- (f) Councillor M Hanif expressed appreciation for the presentation, and acknowledged the significant effort invested in the redesigned service model. It was noted that whilst some risks had been highlighted, contingency plans were in place should the implementation face challenges, such as staff departures or wider organisational issues like redundancies, which had been prevalent across the Council. Reference was made to the importance of safeguarding the community and vulnerable groups, particularly older residents, and it was queried what measures were in place to ensure resilience and continuity in the event of unforeseen difficulties.

In responding, the Interim Director of Adult Social Care outlined the governance and risk management structures currently in place. Members were advised that the service had established a Continuous Development Group, which was responsible for driving forward changes within Adult Social Care and overseeing its implementation. It was envisaged that the group would manage the proposed changes, provide oversight to enable early identification of emerging risks developing a dynamic and detailed risk register, which captured high-level strategic operational and service-specific risks. It was further reported that as new risks were identified, these would be added to the register, assessed for severity, and mitigated through targeted actions. The process would be continuously monitored and updated to ensure risks remained under control.

- (g) Councillor M Hanif indicated that the new model would require comprehensive training for staff in newly defined roles and queried whether a training programme was already in place or being planned. In responding, the Interim Director of Adult Social Care confirmed that training was a key component of the implementation strategy. As the model was developed, a training plan would be created to support staff in adapting to new roles and responsibilities. The need for a recruitment plan to address any staffing gaps that may arise during the transition was essential and would be developed. The department's ambition to establish a robust learning and development framework within the new model was highlighted, which would include creating a supportive environment for social workers to develop their skills, explore different areas of practice, and avoid becoming siloed. The model was designed to facilitate mobility and professional growth identifying potential future managers early and providing them with training before they assumed leadership roles. The approach aimed to build confidence and capability within the workforce and was being integrated into the model's design.
- (h) Councillor M Hanif emphasised the importance of the service area and suggested that the Committee received a progress update during 2026/27 municipal year. In responding, the Interim Director of Adult Social Care indicated that that an update to a future meeting of the Committee would be beneficial for Members and confirmed that once the new structure was fully developed, it would need to be presented to Full Council for approval, which would provide a formal opportunity for review. Members were encouraged to participate in upcoming workshops that would help shape the detailed design of the model, inviting them to contribute their views and ideas to the process.

Councillor A Tromans thanked Officers and Members for their presentation and contributions to the meeting.

Resolved

- (1) That the information contained in the report submitted and the comments made by Members on the Proposed Redesign of the Adult Social Care Services, as outlined above, be noted.
- (2) That the statutory functions required to be provided by Adult Social Care and the future vision of Adult Social Care in Dudley, be noted.

- (3) That the progression of the service redesign, as part of the consultation, prior to delegated authority being sought from Cabinet to approve the restructure, be noted.
 - (4) That the Interim Director of Adult Social Care be requested to provide a written response to all Members of the Committee, to include data on the average weekly cost of residential care placements for adults.
 - (5) That a progress report be submitted to a future meeting of the Committee.
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27 **Adult's Social Care Complaints, Comments and Compliments Annual Report – 1st April 2024 to 31st March 2025**

The Committee considered a report of the Interim Director of Children's Services which provided an overview of the Adult's Social Care Complaints, Comments and Compliment Annual report for the period 1st April 2024 to 31st March 2025.

In presenting the report, the Complaints Manager indicated that, arising from comments made at the previous meeting on the Children's Social Care Complaints, Comments and Compliments Annual Report – 1st April to 31st March 2025, anonymised examples of statutory complaints would be included in future annual reports as an addendum to the reports, to outline complaints, the process followed, outcomes and any resulting changes in practice, including positive feedback and compliments.

Councillor A Tromans concluded by noting that the report had been well received and that Members appreciated the context provided, particularly regarding the proportion of complaints upheld and thanked Officers and Members for their contributions.

Resolved

That the Adult's Social Care Complaints, Comments and Compliments Annual Report 1st April 2024 to 31st March 2025 be approved.

28 **Questions under Council Procedure Rule 11.8**

There were no questions to the Chair pursuant to Council Procedure Rule 11.8.

The meeting ended at 8.06pm

CHAIR