Proactive Prevention

Adult Social Care Prevention Framework and High-Level Action Plan 2025-2027

Nottinghamshire County Council

Contents

1 Introducing the Mission: Proactive Prevention at Scale

A stitch in time saves nine...

Across Nottinghamshire, people can draw on a wide range of information, advice, care and support to stay healthy and independent for longer. We see many positive stories where people are living their gloriously ordinary lives and we have data and other evidence that backs this up too. However, we also see too many people who are in crisis or in more restrictive support, and we hear some difficult stories across our Health and Care System where preventative opportunities have been missed.

The public sector needs to reform. Health and care systems are emerging from a damaging pandemic. Over 15 years of austerity and the recent cost-of-living crisis have exacerbated health inequalities, with disproportionate and preventable poorer outcomes for some. People are living longer in ill health and the need for care and support is increasing. Prevention is gaining a higher profile nationally and health and care systems need to respond to the three shifts in the NHS ten-year plan: from analogue to digital, from treatment to prevention, and from acute to community. Across the system, we are seeing a stronger focus on working at a neighbourhood level and the opportunities that this brings.

Despite the need to invest in prevention, many national reviews show us that the opposite is happening. Spend on acute care has risen from 47% in 2002 to 58% in 2022, while primary care spend has fallen from 27% to 18%. In Adult Social Care, the ADASS Spring Survey 2024 found that investment in prevention fell from £1549 million in 2023/24 to £1428 million in 2024/25. The proportion of councils developing a positive investment strategy for preventative social care services has dropped significantly from 44% in 2023/24 to 29% in 2024/25. We need to think differently.

In 2024, we approved our first ever Adult Social Care Prevention Joint Strategic Needs Assessment. Building on the findings from this JSNA, we want to grow our preventative offer and strengthen and increase the reach, depth and effectiveness of prevention across Nottinghamshire.

This Prevention Framework sets out our ambition to shift the system towards earlier, more effective prevention, grounded in evidence and local insight. We will work with partners across all sectors, and co-produce solutions with people who draw on care and support, to embed prevention at the heart of everything we do.

This is our call to action...and everyone is invited!

2 What is Proactive Prevention?

2.1 Definition and focus

"Prevention is about helping people stay healthy, happy, and independent for as long as possible. This means reducing the chances of problems arising in the first place and, when they do, supporting people to manage them as effectively as possible".
(Department of Health and Social Care, 2018).

There are many different forms of prevention, from the building blocks of public health, through to very targeted prevention for specific groups of people. Preventative support can also be important at particular times in a person's life.

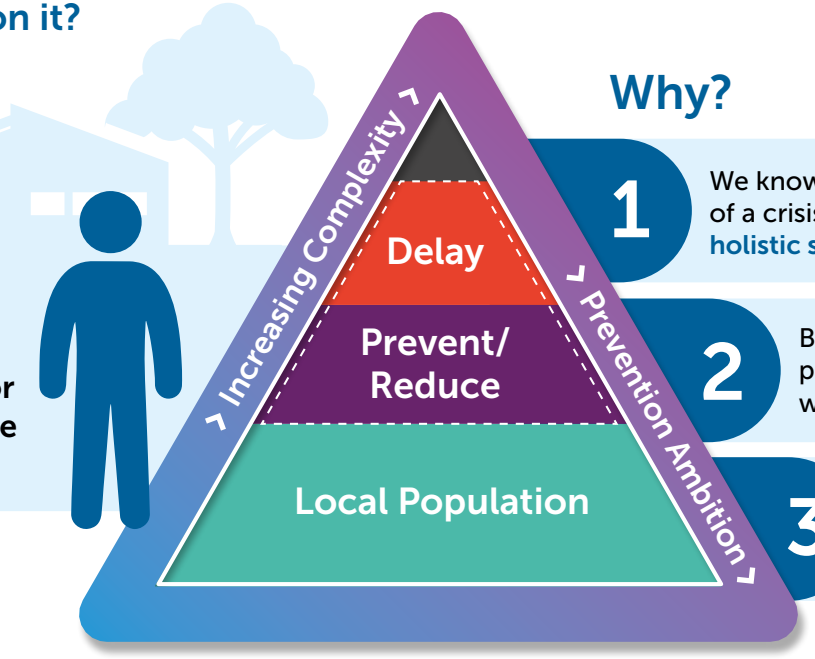
While all forms of prevention are important, this Adult Social Care framework is focused on **proactive prevention**.

Proactive prevention is a targeted form of preventative support which can make a real difference for people over the short to medium term. It is focused on people who, without this preventative support, may otherwise experience crisis or an escalation of need. It includes people who do not currently draw on care and support but are likely to need to do so in the near future. It also includes people who already draw on care and support but who are likely to need increasingly intensive forms of care if preventative support is not put in place. Proactive prevention is important in helping us to meet our Care Act 2014 duty to 'prevent, reduce and delay' people's need for care and support.

What is proactive prevention and why focus on it?

Who?

Individuals at risk of a crisis or escalation in the near future.



Why?

1. We know people in these cohorts are at risk of a crisis. We should be **proactive in making holistic support available.**
2. By **responding to today's pressures** by working with the people we know will need services in the next few years, we will release capacity for further preventative support.
3. This approach means we can **build an evidence base for prevention more quickly**, which in turn can act as a business case for further investment.

2.2 What is not in scope for this Framework?

This Framework will not focus on 'acute' support or areas where high-end, co-ordinated support already exists, for example for people experiencing homelessness or severe and multiple disadvantage. This Framework won't repeat other plans and strategies that already exist but does make recommendations into those areas where needed.

3 The Framework

3.1 Our Vision

The Nottinghamshire Adult Social Care vision is for every person in Nottinghamshire to **live in the place they call home with the people and things that they love, in communities where they look out for one another, doing things that matter to them**. Our vision is adopted from Social Care Future. The Prevention Framework supports this vision.

3.2 Our Prevention Principles

Bold system leadership	Workforce	Evidence based	Intelligence -led	Best value	People at the heart	Prevention at scale
Prevention is a shared responsibility.	Prevention and a therapy-led, strengths-based approach go hand in hand, this is how we work.	Build more evidence of what works and stop the things that don't.	Use data to identify the opportunities where proactive support could have the most impact.	Demonstrate the financial impact of proactive prevention and hard wire this resource shift.	Proactive prevention approaches should be co-produced with people.	Strengthen our delivery model for proactive prevention, organised around the Care Act 2014 Duty to Prevent, Reduce and Delay.

3.3 Our Prevention Ambitions

Policy and Strategy	We will hardwire prevention into our DNA and work with our partners to champion prevention at a strategic, system-wide level.
Research and evaluation	We will increase research and evaluation of prevention to understand what works in Nottinghamshire and where best to focus investment for maximum impact and value.
Growing our Prevention Offer	We will scale up and embed evidence-based preventative support, promoting the practice, behaviours and interventions that help people to live well.
The Right Support When You Need It	We will invest in the intervention points and cohorts where preventative activity can have the most impact, working with our partners to ensure a joined-up approach.
Workforce	We will ensure that prevention is everyone's business, continuing with our journey to embed therapy-led, strengths-based approaches, and empowering the Adult Social Care workforce to connect people to support.
Community and Place	We will work with people, carers and partners to develop communities which promote and support wellbeing and independence.

4 Why is Prevention Important?

4.1 Better for people

Investing in prevention is the right thing to do. We know what an impact proactive prevention can have, helping people to stay healthier, happier and more independent. Effective support (or the lack of it) at key points in people's lives can have significant and long-lasting consequences, setting individuals on a track of increasing need, deterioration and poorer outcomes, or helping them to regain and maintain their wellbeing and independence and live the life they choose.

Sherree's story:

"I was introduced to the enablement service as I was struggling with a variety of chronic conditions which meant I had lost confidence in leaving the house to do anything other than medical appointments. I was having no quality of life and the pain was making me anxious about using public transport, the only way I have of going anywhere at the minute. The enablement service introduced Emma, a Promoting Independence Worker to me to help me use public transport and get back out. At the beginning I was so anxious. We started going out together with my assistance dog Maple in tow. Emma came with me every step of the way, at my own pace. The first time we went out and had a coffee, such a simple thing, but something I realised I'd been unable to do for 4 years, I cried! But this time they were tears of happiness! We built it up from there, hiring mobility scooters and even went round a few shops. At the end I managed to travel alone and meet Emma at our destination. Something I didn't think I could do at the beginning. It really has changed my life, enabling me to do it by myself with my trusty assistance dog Maple. Emma I would say that you personally are the most wonderful kind and beautiful person inside and out, an absolute blessing to me and has changed my whole perspective of being disabled. You helped me learn that being disabled doesn't mean life's over, it has changed yes but with adaptations and support you can live a full life. It's all about embracing the change."

A carer's story

A 60-year-old man attended a carer support session seeking help with fuel poverty. He cares for his two children with learning disabilities and works part-time, while his wife also has health needs. He expressed concerns about rising prices for energy, food, and clothing, which were affecting his mental health and his ability to care for his family. He received direct support from Nottingham Energy Service, including advice on managing utility bills and reducing costs. He was able to get wall insulation through their home referral service and received food vouchers to help with shopping. He was referred for a full benefit check, received a warm pack and was given information on carer support groups. This information and support helped improve his well-being and mental health and enabled him to continue in his caring role.

We know from speaking to people how important prevention is. We have carried out a number of engagement exercises in recent years, including The Big Conversation 2023 and the development of the Joint Carers Strategy. Some of the recurring themes that people have talked about are the importance of contributing to society, keeping fit and active, building communities and social connections, maintaining good physical and mental wellbeing, having a home adapted to your needs and having information and support to help achieve these things. However, people have told us that this is not always happening and we have heard people's concerns about feeling isolated and lonely, dealing with crisis and poverty and not being able to access the support they need. There is clearly more we need to do.

4.2 A sustainable approach

As well as the benefits for people, we know that there is also an overwhelming business case for prevention: making this shift is vital if we are to meet the challenges that public services face, now and in the future.

Demographic trends

- **The population is ageing** and this is the main driver of people needing social care, as illnesses and disabilities increase with age. Projections in Nottinghamshire show an increasingly ageing population, for both males and females, with a 30% increase in the number of people aged 65 and over by 2040.
- People are living with **longer periods of ill health and disability** at the end of their lives. Analysis has shown that children in Nottinghamshire can expect on average twice as many years living with disability at the end of their life, compared with current generations of older people.
- There is a strong correlation between **deprivation** and health. Research shows that adults aged 65 and over from the most deprived areas of England are twice as likely to need help with day-to-day activities, compared with adults living in the least deprived areas. In Nottinghamshire there are 31 areas in the top 10% most deprived areas in England, with the most deprived areas concentrated in the districts of Ashfield, Mansfield, Bassetlaw and Newark and Sherwood.
- **Loneliness and social isolation** are significant but preventable factors associated with poorer outcomes. In Nottinghamshire, 21% of adults report feeling lonely always, often or some of the time and this is predicted to rise.
- **Disability and long-term conditions** are a factor in people needing social care support. Approximately one in ten adults in Nottinghamshire aged 18-64 lives with moderate to severe physical disabilities and approximately one in five individuals aged 65+ in Nottinghamshire is unable to manage at least one daily activity, such as washing, dressing or preparing food.

30%
increase of people ages 65 years and over by 2040

21%
of adults report feeling lonely

- As the population ages, the number of people living with dementia is expected to rise. In Nottinghamshire the number of older people aged 65 and over living with **dementia** is projected to **increase by 41% between 2019 and 2040**.
- **Frailty** is also an area of focus locally: 13.7% of people aged 65+ in Nottinghamshire are classed as frail, compared with 10% for England. Older people with frailty are more likely to experience poorer outcomes and require social care. Nottinghamshire also has a higher-than-average number of people with hip fractures, often as a result of falls.
- Nottingham and Nottinghamshire ICS has one of the highest percentages nationally of people needing **mental health** support. Depression and severe depression are predicted to rise in all districts, with the steepest rise for those aged 80 and over. 8,540 people are diagnosed with Serious Mental Illness (SMI) across Nottingham and Nottinghamshire, with the greatest prevalence amongst people of black ethnicity and in areas of greatest deprivation. 72% of people with SMI have at least one additional long-term condition.

8,540 people are diagnosed with serious mental illness

13.7% aged 65+ are classed as frail

- More people are living with **multiple conditions**: as the population ages, more than two-thirds of those aged 65 years and over will live with two or more long-term conditions (LTCs). This can lead to significant challenges and a disproportionately higher need for social care. Local data shows that sex and deprivation are important factors in the prevalence of LTCs, with women in the most deprived areas of Nottinghamshire having their first long-term condition 15 years before their peers in the least deprived areas.
- The need for support through **transitions to adulthood** is expected to increase as the number of 18-year olds nationally is forecast to rise by 20%, peaking in 2030. The proportion of young people with Education, Health and Care Plans (EHCPs) has already increased significantly and continues to rise. Although not all of these young people will require ongoing adult social care support, analysis indicates that the number of transitions per year is expected to increase, resulting in at least 25% more people a year by 2030.

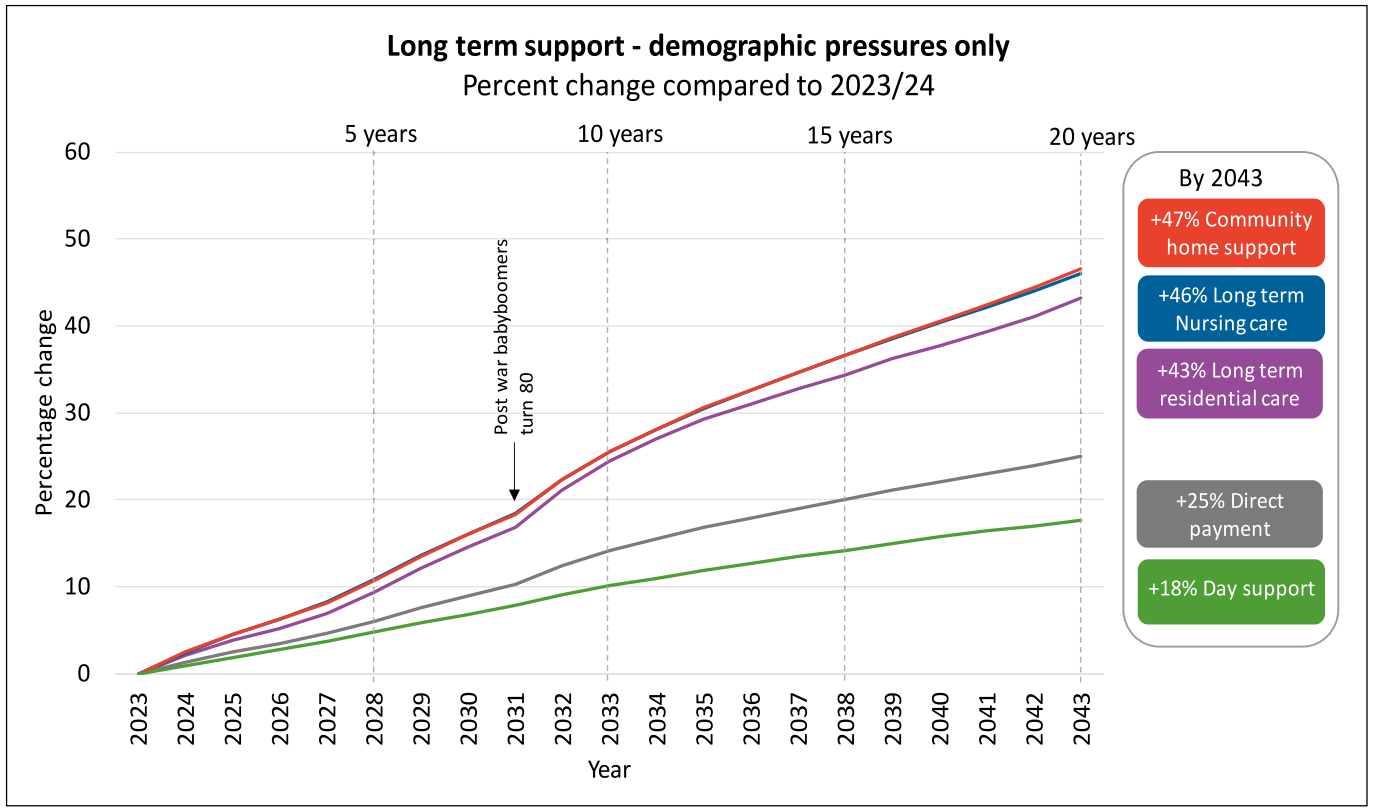
Impact on public services

This growing need across the population has significant implications for social care services. Analysis by the King's Fund shows that the number of new requests for social care support in the UK increased from 1.81 million in 2016/17 to 2.0 million in 2022/23. Among older adults, this was an increase of 6.1% and among working age adults it was an increase of 22.2%.

In Nottinghamshire, we currently support over 12,000 adults in long-term care and support at a total annual cost of more than £274 million. Much work has been done to help people move to less intensive care and support where this is the best outcome for them. However, we know that demand for long-term support is likely to continue to increase significantly. As the graph on page 13 shows, if nothing else changes, the population change alone will increase the number of people who use long-term care by up to 47% by 2043.

Added to these projections, we also need to consider the rising cost of care due to factors such as inflation, local market pressures and increasing complexity. Analysis of current data shows that the unit cost of supporting people has risen significantly, with this increasing across all age groups and settings but particularly for working age adults. We also know that in Nottinghamshire the average weekly cost of nursing and residential care is higher than the average for England. For nursing care for working age adults, it is more than twice the national average.

This combination of rising demand, increasing complexity, and escalating costs makes the current trajectory unsustainable. A fundamental shift towards prevention is essential if we are to manage future need, maintain quality, and ensure the long-term sustainability of adult social care.



Percentage change in the number of adults in Nottinghamshire requiring long term support 2023-2043 (based on ONS population projections)

5 The Evidence: what works?

Evidence-based approaches help identify where best to invest resources to ensure better outcomes. A solid evidence base exists in many areas of the health, public health and children's contexts. However, there has been a historic lack of national evaluation within adult social care. A recent report from the NHS Confederation Value in Health series highlighted that there is a significant opportunity to have a much bigger impact from prevention if we focus on community-based support with the highest returns: "The conservative estimate suggests this could be equivalent to £11 billion a year, based on the £5 billion that is currently spent on the public health grant by local authorities and on health inequalities by the NHS."

There are some areas of emerging evidence and a summary of this is detailed below.

Advice and guidance	Evidence from health is promising but there's no evidence from the social care sector.
Physical activity promotion	There's strong evidence of the impact of promoting exercise and movement, and the role of social care in this work should be further explored.
Social prescribing	The evidence for social prescribing is uncertain, however, the number of these schemes is likely to increase which will give a better evidence base for assessing their effectiveness.
Reablement	There's evidence to support that reablement improves health-related quality of life and improved service outcomes. Research is ongoing to consider the cost-effectiveness of the approach.
Asset-based and strength -based approaches	The complexity of this approach makes evidence synthesis difficult, but there is potential in developing this approach and our knowledge on the role and impact of social care.

Five key approaches to prevention, Skills for Care (2019) Prevention in Social Care: where are we now?

Even where there is evidence, we know that there can be significant variance in return on investment: what works in one place may not be so effective elsewhere. We also know that the benefits of prevention activity can appear in different parts of the system, can take time to materialise, and are not always easily translated into immediate financial savings that can be reinvested into the support that works.

Strengthening both the national and local evidence base is therefore a key aim of this Framework. While national data on preventative impact in adult social care remains limited, there are a wide range of local initiatives that show promise or early positive outcomes, and we are committed to building on this learning.

We will develop a stronger approach to test and learn evaluation locally, to better understand:

- Which services, support and approaches prevent, reduce, or delay the need for care in higher-cost, more intensive settings?
- Which strategies and approaches promote quality of life for key cohorts at risk?
- Which are the most cost-effective services to invest in and which services cannot be justified based on the evidence?
- What are the interdependencies across the health and social care system that have the greatest impact on outcomes?
- How can we upskill the workforce and continue to support capacity building in our communities?

We will also collaborate in a national evaluation focused on one cohort to begin producing evidence on a national level.

6 Proactive Prevention in Nottinghamshire: where are we now?

6.1 A strong foundation

In Nottinghamshire we have a wide range of prevention activity across the county, supporting people to live healthy lives and remain independent for longer.

89% of carers said TEC had reduced their stress levels

Mapping of preventative activity commissioned by Nottinghamshire Adult Social Care identified over 40 different services, working across all levels of the prevent, reduce, delay triangle. This includes information and advice, services to connect people to their local communities, support after leaving hospital and short breaks for carers. The JSNA chapter on Prevention and Equity in Adult Social Care identified a further 27 services including some we directly provide such as the Maximising Independence Service.

We have also mapped some of the preventative work commissioned and provided through our Public Health team. This includes support such as preventing falls, weight management services and seasonal flu vaccinations. As a Council, we are developing a 'Thriving Communities' programme with our voluntary and community sector that will support proactive prevention and Adult Social Care too. There is also a large amount of prevention activity taking place across the wider system including within health, housing and the community and voluntary sector.

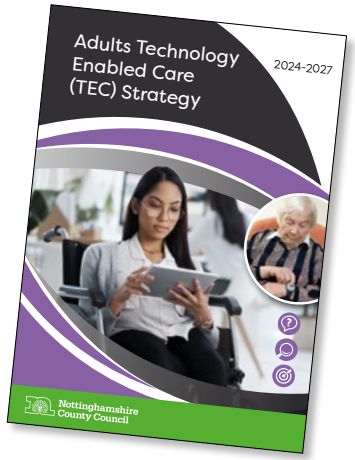
Alongside this, our social care community teams are working every day to prevent, reduce and delay the need for care, supporting individuals in a strengths-based and therapy-led approach to help them stay independent for longer and live the life they choose.

We also recognise that formal services are only one piece of the jigsaw. Everyday relationships are often the first line of support for people and can play a critical role in promoting wellbeing, spotting early signs of need and reducing the need for services. Informal networks and local connections play a vital role in preventing isolation and supporting people to remain independent. We want to enable and strengthen these informal networks as part of a sustainable approach to prevention.

85% people have reduced/delayed need following reablement

6.2 Developing a delivery model for prevention

We know we have a wide range of preventative support in place. The data we collect and the feedback we receive shows how this can make a real difference in people's lives. However, more needs to be done to evidence where the approach to prevention is having a lasting impact, and to better understand the experiences of individuals as they move thorough different parts of the system. We also want to ensure that lesser heard voices are listened to and that their experiences can help shape and improve the support available.



We have a number of strategies and systems already in place to address this and we are beginning to develop some key indicators to evaluate what is working, for example with the Joint Carers Strategy and the Adult Social Care Technology Enabled Care (TEC) Strategy. However, we need to do more, nationally and locally, in measuring outcomes and tracking longer-term impact for all. We need to build better and more holistic evaluation of our services and develop a meaningful approach to measuring impact, with a core set of prevention indicators. The involvement of people who draw on care and support will be an important part of this to ensure that the measures reflect the outcomes which matter most to people and carers.

Our mapping of current support has also highlighted that we need a more joined-up and equitable approach across Nottinghamshire. Too often we are working in silos, with potentially overlapping services, interventions and roles in some areas, and potential gaps in other areas. Individual services work well, but we need to do more to scale up and integrate the services that have the greatest impact. We need to develop a prevention delivery model for Nottinghamshire, a joined-up approach to how prevention is organised and delivered to really make a difference for our local communities. This framework is our first step on the journey to achieving this.

Current proactive prevention in Nottinghamshire: preventing, reducing and delaying the need for care and support

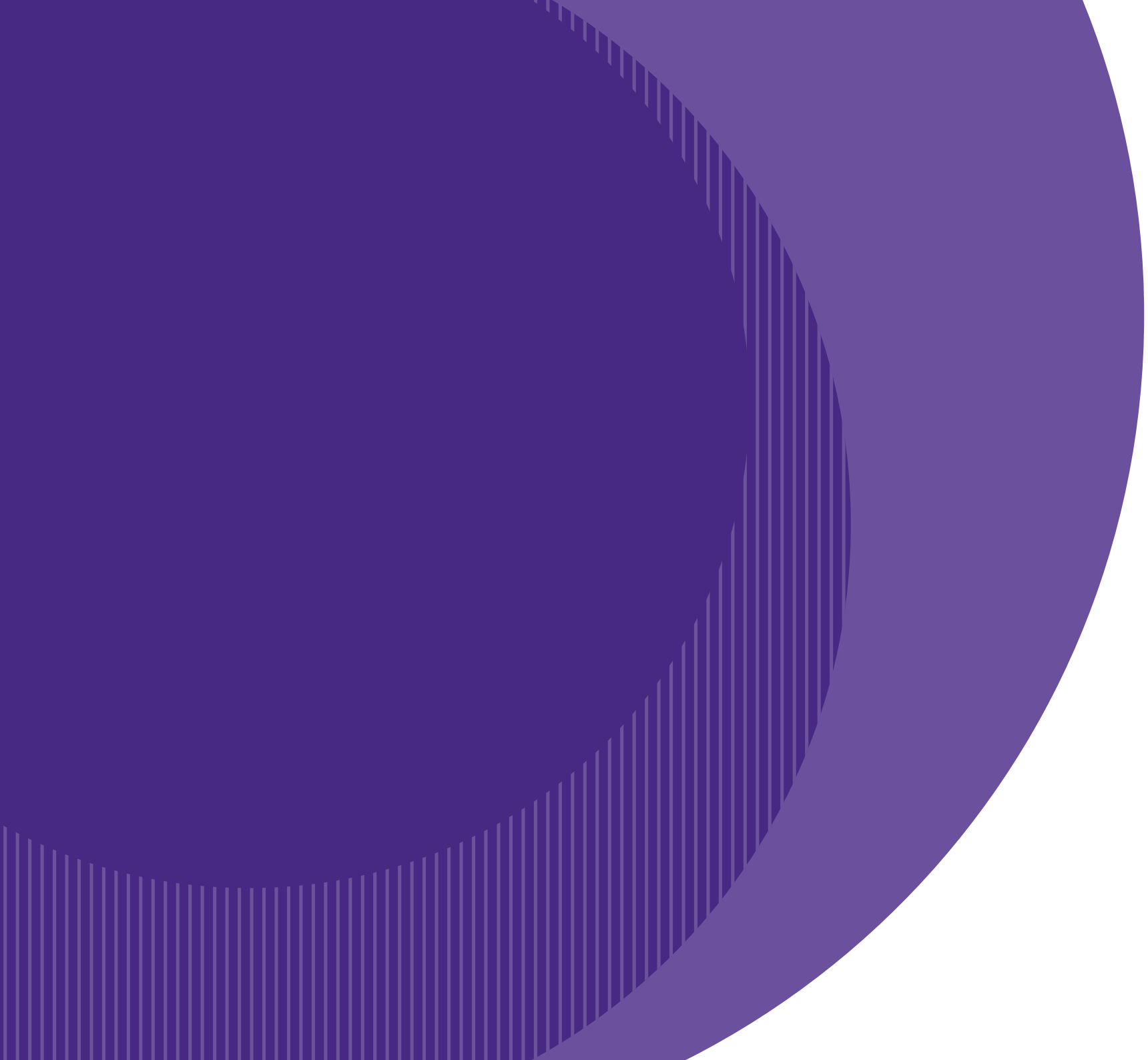
7 Action Plan: how will we achieve our ambitions?

This Action Plan sets out the actions we will take over the first two years to achieve our ambitions. These actions align with wider programmes of work taking place as part of other key strategies such as the Joint Carers Strategy, Technology Enabled Care Strategy and the Thriving Communities programme.

- The table on page 20 sets out the high-level actions we will take to achieve our ambitions.
- Each ambition and set of actions is supported by a delivery plan with owners and partners across Adult Social Care, Public Health, Children's Services, Place Team, Corporate Services and wider ICS partners.
- We have two co-production critical friends from the Our Voice Strategic Co-production Group, working with us to ensure we embed a co-production approach throughout delivery and evaluation.
- The Adult Social Care Senior Leadership Team will oversee progress and impact through regular updates and progress reviews.

Ambition	To do this we will...
Policy and Strategy: we will hardwire prevention into our DNA and work with our partners to champion prevention at a strategic, system-wide level.	• Ensure that prevention and equity is a core part of our strategic planning and decision-making o ensuring that people's voices and experiences are used to identify more opportunities for proactive prevention, and that we hear from lesser heard voices o increasing proactive prevention into the Learning Disability Strategy and Autism Strategy, building on the Autism JSNA 2025 and our first Learning Disability JSNA (to be published 2025). • Work with partners to complete a Joint Strategic Needs Assessment (JSNA) for dementia, as a foundation for the development of an integrated dementia strategy. • Embed the Adult Social Care proactive prevention agenda as a core strand of our new corporate Thriving Communities Programme in partnership with our voluntary and community sector.
Research and evaluation: we will increase research and evaluation of prevention to understand what works in Nottinghamshire and where best to focus investment for maximum impact and value.	• Support the national delivery trial (with Partners in Care and Health) to develop evidence for proactive prevention. o potential areas of focus to include unpaid carers at risk of family breakdown and people experiencing falls. • Recruit the Local Authority Research Practitioner (LARP) to establish a research and evaluation framework and strengthen research and evaluation skills in-house (jointly with our Public Health Team). • Further build the local evidence base of what works by establishing a Nottinghamshire Adult Social Care data and evaluation hub for prevention. • Increase the use of coproduction and engagement, including lesser heard voices, to better understand what works to support the outcomes that matter to people and carers.
Growing the Prevention Offer: we will scale up and embed evidence-based preventative support, promoting the practices, behaviours and interventions that will help people to live well.	• Promote and build on our early help offer in Adult Social Care, ensuring this is aligned and draws on the wider Council offer. • Increase the strengths-based and prevention focus within commissioning with and our provider partners, investing in support which demonstrates the greatest evidence of impact. • Develop and promote digital information, advice, guidance and self-serve options to enable people to manage their health and wellbeing and stay independent for longer. • Explore inclusive and accessible prevention support for people who fund their own care, ensuring equity in information and availability.

Ambition	To do this we will...
The Right Support When You Need It: we will invest in the intervention points and cohorts where preventative activity can have the most impact, working with our partners to ensure a joined-up approach.	• As part of the Thriving Communities corporate programme with our voluntary and community partners, identify and work with key cohorts of people who would most benefit from proactive prevention approaches, designing and evaluating interventions to ensure maximum impact. (Initial cohorts identified). • Establish an 'Early Help into Adulthood' offer and work with Children's Services to support the development of a multi-disciplinary Adolescence Team. • Work with partners to develop and build on a nine-month pilot of integrated frailty hubs, providing targeted pre-emptive health checks and support for people at risk of increased frailty and falls. • Invest in proactive prevention to help people manage their mental health, stay well and avoid crisis, including reshaping mental health reablement support and developing a mental health discharge hub.
Workforce: we will ensure that prevention is everyone's business, continuing with our journey to embed therapy-led, strengths-based approaches, and empowering the Adult Social Care workforce to connect people to support.	• Continue to embed strengths-based, therapy-led, neighbourhood approaches across our social care workforce. • Increase awareness of the prevention offer across the Adult Social Care workforce, to promote the practices, behaviours and support that help people to live well, including: o training the Adult Social Care workforce in the Making Every Contact Count approach o continue to promote TEC first approach o increasing the use of DP to enable creative and preventative support for maximum independence o with our Provider Strengths-Based Champions to identify good prevention practice and models to share. • Optimise the use of Occupational Therapy as a high-impact preventative resource in social care. • Evaluate and explore the best use of current preventative navigator/coordinator roles across the system to ensure a joined-up approach.
Community and Place: we will work with people, carers and partners to develop communities which promote and support wellbeing and independence.	• Work with Place Based Partnerships and communities to agree local priorities, build on existing support and scale up what works. • Develop our community hub approach, including mental health community hubs. • Work with partners to promote the importance of improving community links, including exploring what an accessible, age friendly and dementia friendly Nottinghamshire would look like. • Identify groups most affected by social isolation and grow support to address this, particularly exploring options for building informal networks and support. • Explore a coproduced response to the When I Get Old (WIGO) movement.



July 2025 working draft

Version 1

DP6P 84960