Annex C: Sunderland City Council: Market Sustainability Plan

Section 1: Revised assessment of the current sustainability of local care markets

a) Assessment of current sustainability of the 65+ care home market

Position as of February 2023

There are 50, 65+ care homes across the City of Sunderland. We have well established, positive relationships with our care home Providers. We will continue to work in a collaborative and coproductive way with our care home Providers, which has formed our approach to the development of our Market Sustainability Plan (MSP).

In February 2023, information shared from the 50 care home Providers (via an agreed established council process) indicated there were 2,229 beds available, of which 2,070 were occupied, giving an average occupancy of 93%, which is consistent with previous months.

24 care homes (48%) provide both residential and nursing care (including dementia). There are 1,213 beds available and 1,102 occupied (91%). 3 homes are operating at 100% full, with the lowest occupancy at 86%.

26 care homes (52%) provide residential care and/or residential care with dementia. There are 1,016 beds available and 968 occupied (95%). 8 homes are operating at 100% full, with the lowest occupancy at 86%.

- 1 care home has occupancy of 69%
- 1 care home has occupancy of 71%
- 11 care homes have occupancy between 80% and 90%
- 26 care homes have occupancy between 91% and 99%
- 11 care homes have occupancy of 100%
- 32 Provider organisations operate 50 care homes, with 10 Providers operating more than 1. 3 care homes, previously operated by 2 national Provider organisations, are currently under Administration

Excluding the 3 care homes in Administration - there are 2,078 beds available, and 1,944 beds occupied (93%):

- ➤ 10/47 (21%) care homes are operated by 9 Providers who just work in Sunderland, offering 16% (327) of the overall available beds. Average occupancy levels are 96%. 8 of the 10 homes provide residential care and/or residential care with dementia and 2 provide both residential and nursing care (including dementia).
- ➤ 14/47 (30%) of care homes are operated by 9 Providers who work across the region, offering 33% (688) of the overall available beds. Average occupancy levels are 92%. 7 of the 14 homes provide residential care and/or residential care with dementia and 7 provide both residential and nursing care (including dementia).
- ➤ 23/47 (49%) of care homes are operated by 12 national Providers, offering 51% (1,063) of the overall available beds. Average occupancy levels are 94%. 11 of the 23 homes provide residential care and/or residential care with dementia and 12 provide both residential and nursing care (including dementia).

Of the 3 care homes under Administration 151 beds are available across the 3 homes which is 7% of the overall beds available across all 50 care homes. Occupancy levels across the 3 homes are averaging 88%, with 129 beds occupied in total. Whilst there are no plans to close these homes, this is a risk for the Council, as occupancy levels are so high across the remaining care homes in the market.

With a healthy and balanced mix of local, regional and national Providers we are not reliant on any one Provider for care home provision in the City. We do, however, recognise that 20% of the care home market is operated by two national Providers and acknowledge the risks associated with this.

The number of local authority admissions to permanent care in an older persons care home in Sunderland from 2020 to date is:

Year	Nursing Care	Residential Care	Total
2020/2021	167	525	692
2021/2022	92	531	623
April 2022-Jan 2023	80	412	492

Note: for 20-21 and 21-22 the data also includes some NHS Funded Admissions – this is due to process changes/data recording on Council systems. These are the figures which we submitted for our Statutory Returns

The Council has a contract with the care homes for the provision of Personal Care and Nursing Care within a Care Home. The contract is due to be renewed in 2024, however we are intending to extend the contract whilst we undertake consultation with the care home market about future contracting requirements and arrangements.

Social workers arrange placements directly with the care homes at the agreed negotiated fee rate. In some circumstances, additional 1:1 care is commissioned to support with specific assessed needs. To support the hospital discharge process, beds are currently block booked in 12 homes at rates agreed with the Providers. Market fee rates are agreed on an annual basis via a negotiation process between the Council and Providers considering factors such as National Living Wage Costs and the Consumer Price Index (CPI) measure of inflation.

2022-2023 weekly rates are:

Residential Care (Personal Care) - £717.29 Residential Care (Dementia) - £741.73

Nursing Care (Personal Care) - £717.29

Nursing Care (Dementia) - £749.66

12 care homes, operated by 9 Providers, report that they charge a top up fee, which ranges from £15.00 per week to £263.71 per week.

Sunderland is broken down into 5 locality areas. The table below shows the CQC ratings for the 65+ care homes based in each of the 5 locality areas.

Care Home CQC Ratings within locality areas

CQC Overall ratings (50 care homes providing 2,229 beds)						
Locality Area	Number of Care Homes	Outstanding	Good	Requires Improvement	Inadequate	Not Rated
Coalfields	12	0	10	1	0	1
East	9	2	6	0	0	1
North	11	1	10	0	0	0
Washington	6	0	5	1	0	0
West	12	0	12	0	0	0
Total	50	3	43	2	0	2
Total (%)	(100%)	(6%)	(86%)	(4%)	0%	(4%)

- ➤ 46/50 (92%) care homes are rated as Outstanding or Good.
- > 3/50 (6%) care homes are rated as Outstanding.
- > 43/50 (86%) care homes are rated as Good.
- > 2/50 (4%) care homes are rated as Requires Improvement.
- > 2/50 (4%) care homes have not yet been rated; Both are new to the market
- There are no care homes rated as Inadequate.

There are no care homes with a CQC imposed embargo in place and no homes with warning notices or notices of proposal relating to breaches in regulations.

There are no care homes with a council-imposed suspension in place.

There are no care homes with a voluntary suspension in place.

There are no care homes operating under local Organisational Safeguarding procedures.

Market sustainability

• The outcome of the cost of care exercise is not intended to be a replacement for the feesetting element of local authority commissioning processes or individual contract negotiation. We do recognise that the cost of care exercise carried out was helpful in enabling us to understand how care Providers (who responded) operate and the costs they feel they incur. Whilst the median figure identified through this exercise cannot in isolation, form our future fees, it does enable us to undertake more focused discussions with our Providers during the fee negotiation process. As we conduct our fee negotiations, we will be discussing with Providers the impact of current inflationary pressures on stability and sustainability of the market.

In addition to inflationary pressures, the care home market is also faced with demands from the wider system which include:

- Placements from outside of the Sunderland area on Sunderland care home beds. These
 are typically made because of bed pressures faced by the placing authorities.
- The hospital discharge process has resulted in more beds being block booked to support
 people to leave hospital who are medically optimised but may not be well enough to return
 directly home to independent living.
- Capacity issues in the domiciliary care market and the inability to meet demand has
 resulted in people accessing a care home bed as a temporary place of safety until
 community support can be sourced.

Recruitment and retention of social care staff is a challenge for care homes; however, they continue to support existing residents whilst being able to accept new admissions. Some homes use agency staff to support with staffing issues, which can result in additional financial pressures.

Members of the North East ADASS are currently working together on a local recruitment and retention campaign which will target specific areas identified by each Local Authority. ADASS have identified the need for a workforce strategy that is inclusive of fair national care wages, training and career progression and greater support for informal carers. Sunderland wants to encourage more people to choose to work in the social care sector and to progress in the sector through clearly defined career pathways. We will work with Provider organisations, to develop a plan for the Sunderland social care workforce that positively promotes social care as a career of choice and subsequently improves the recruitment and retention position.

The delays to charging reform have had minimal impact on our ability to manage current pressures to market sustainability and we have retained our focus on working with Providers to support them with their sustainability plans.

Information about the wider social care markets can be found in Sunderland's Market Position Statement

b) Assessment of current sustainability of the 18+ domiciliary care market

Position as of February 2023

In Sunderland there are 41 locations that are registered with CQC to provide the regulated activity of personal care to adults aged 18 years+, delivered by 29 Providers.

- 12 of the 41 are extra care schemes
- 8 of the 41 provide supported living schemes
- 22 of the 41 operate domiciliary services that support adults with personal care within their own home (1 Provider included in this offers both supported living and domiciliary care support and is also included in the supported living figure above)

20 of the 22 Providers who support adults with personal care within their own home are commissioned by the Local Authority. 7 of these 20 Providers are commissioned via a contract at the rate of £16.72 per hour. This contract is now into its final year, however it is our intention to extend this contract to able us to work with the care market to transform how we provide domiciliary care services in the future, as the market is currently not sustainable in its current form.

The remaining Providers have been commissioned to deliver care packages to meet demand and/or a specific service user choice or need. These arrangements have been set up through either the Councils Flexible Procurement Agreement for the Provision of Personal Care and Support and Auxiliary Services, via our agreed brokerage process or commissioned directly by Social Workers on an individual basis. Fee rates range from £16.72 per hour to £27.26 with an average of £19.81.

2/22 Providers are not currently commissioned by the Council.

In addition to the 20 commissioned Providers who are located within the Sunderland Local Authority area, we commission a further 4 Providers who are located outside of Sunderland. These arrangements have been commissioned on an individual basis directly by Social Workers in response to either service user choice or to meet a specific service user need. Fee rates range from £16.88 per hour to £18.89 with an average of £17.52.

As part of our domiciliary care offer, we commission an overnight response service, for people who require a planned visit during the night. There are 3 Providers delivering this service with hourly rates ranging from £16.72 to £23.26 with an average of £18.90. Demand for this service fluctuates and there are no obvious patterns or trends identified through data analysis. The number of Providers delivering this type of service is sufficient, but workforce capacity and the model of commissioning may be contributing to the current demand pressures faced by the Providers.

The domiciliary care Provider market in Sunderland is balanced with a mix of local, regional, and national Provider organisations (this is based on the 22 Providers whose location is registered with CQC in Sunderland for the provision of Personal Care):

- 17 Providers (77%) are local Providers with registered locations only in Sunderland. 1 organisation is a Charity and 1 is the Council's Local Authority Trading Company.
- 4 (18%) are national Providers.
- 1 (5%) is a regional Provider and is an employee-owned Co-operative.

As at 8 February 2023, the volume of assessed care and support hours (including the overnight response service) commissioned from the 20 Providers was 17,259 per week.

The demand for domiciliary care over the last 3 years from referrals received into our Brokerage Team has been:

Period	Number of Referrals	Volume of Assessed Hours	Average Hours/Referral	Average Referrals/Month
2020/2021	2,781	38,184	13.73	231.75
2021/2022	3,175	35,299	11.12	264.58
2022/2023 (1/4/22- 13/2/2023)	1,814	21,144	11.68	164.91

The number of Providers in Sunderland has remained stable, but the recruitment and retention of staff has proved to be an ongoing challenge for our Providers as has the longer-term impact of Covid on staff sickness. The demand for domiciliary care remains high and referrals are currently inclusive of support for day opportunities, separate visits for medication prompts and domestic support.

As at 9 February 2023, there were 128 care package referrals outstanding where we had not been able to secure a Provider, equating to 1,449.50 hours of care. The longest waiting time for an outstanding care package was at 281 days with an overall average waiting time of 59.51 days.

It is worth noting that people waiting for a care package to start may be having their needs met by alternative means such as informal carer support or by a personal assistant accessed via a Direct Payment.

CQC Ratings for 18+ Domiciliary Providers based within each of the 5 locality areas

				Providers located		
Locality Area	Number of Domiciliary Care Providers	Outstanding	Good	Requires Improvement	Inadequate	Not Rated
Coalfields	2	0	2	0	0	0
East	6	0	3	2	0	1
North	13	1	9	1	0	2
Washington	1	0	1	0	0	0
West	0	0	0	0	0	0
Total	22	1	15	3	0	3
Total (%)	(100%)	(4%)	(68%)	(14%)	0	(14%)

Most of the domiciliary care services in Sunderland are rated Good by CQC. Of the 22 Providers there are no quality concerns from the Council's perspective that would impact on the sustainability of services or the market:

- 16/22 (72%) are rated as Outstanding or Good.
- 1/22 (4%) is rated as Outstanding.
- 15/22 (68%) are rated as Good.
- 3/22 (14%) are rated as Requires Improvement.
- 3/22 (14%) are Not Yet Rated; 1 is newly registered Provider, 1 has had a change in Provider, 1 is currently being inspected.
- There are no services rated Inadequate.

There are no services with a CQC imposed embargo in place and no services with warning notices or notices of proposal relating to breaches in regulations.

There are no services with a council-imposed suspension of referrals in place.

There are no services a voluntary suspension in place.

There are no services operating under Organisational Safeguarding procedures.

Feedback from the domiciliary home care Providers operating in Sunderland suggests there are issues linked with marketing, recruitment and retention which have impacted on the capacity of the Providers to meet the current demand and have contributed to the number of care packages that we are unable to currently source provision for.

Extra Care

There are 5 Providers registered with the CQC for the provision of personal care in Sunderland operating 12 extra care schemes and the Local Authority commissions the care and support in to all 12 schemes.

- > 9/12 schemes (75%) are operated by 3 national Providers
- 2/12 schemes (17%) are operated by 1 regional Provider, which has a contract with the Local Authority
- 1/12 scheme (8%) is operated by 1 a Provider who is only registered with CQC in the Sunderland area

As at 10 February 2023, the LA commissions weekly block care and support hours of 5,225 and fee rates for care and support at £16.72 per hour across all 12 schemes.

Across all schemes, at the end of January 2023, there were 848 apartments available and there were 814 occupied, giving average occupancy levels of 95%. 3 schemes were reporting 100% occupancy.

Whilst there are no apparent issues with recruitment and retention of staff in the extra care schemes, we are aware that they face similar challenges to the domiciliary care Providers.

Extra Care CQC Rating within each of the 5 locality areas

Locality Area	Number of Extra Care Providers	Outstanding	Good	Requires Improvement	Inadequate	Not Rated
Coalfields	2	0	2	0	0	0
East	3	0	3	0	0	0
North	2	0	2	0	0	0
Washington	2	0	2	0	0	0
West	3	1	2	0	0	0
Total	12	1	11	0	0	0
Total (%)	(100%)	(8%)	(92%)	(0%)	(0%)	(0%)

Extra care services in Sunderland are rated as Outstanding or Good by CQC. Of the 5 Extra care Providers there are no quality concerns from the Council's perspective that would impact on the sustainability of services or the market:

- 12/12 (100%) are rated as Outstanding or Good.
- 1/12 (8%) is rated as Outstanding.
- 11/12 (92%) are rated as Good.
- There are no services rated as Requires Improvement.
- There are no services that are Not Yet Rated.
- There are no services rated Inadequate.

We don't feel that the median figure identified through the FCOC exercise can in isolation, form our future fees. As we conduct our fee negotiations, we will be discussing with Providers the impact of current inflationary pressures on the stability and sustainability of the market.

It is evident to us that demand remains at levels which are not sustainable from a Council or a Provider supply perspective and we need to work in partnership with our Providers to develop our markets and our service offer so that people's needs and outcomes can be met in a number of ways across a range of services.

Information about the wider social care markets can be found in Sunderland's Market Position Statement.

Section 2: Assessment of the impact of future market changes between now and October 2025, for each of the service markets

Over the next 2-3 years, we anticipate a change to the service offer currently available to people who are currently accessing 65+ care homes and 18+ domiciliary care. We will be working with Council and Provider colleagues to reform and develop a range of services and increase the availability and accessibility of the assistive technology offer. We will be looking at different models of care in both the care home and home care sector and the commissioning arrangements that need to be in place

to enable services to be flexible and responsive. Our focus on prevention will be strengthened through plans to implement a new Front Door model to Adult Social Care, which will be a multi-disciplinary team approach to first contact to ensure the person is provided with the most appropriate service based on a strength-based approach. We intend to work with Providers to build on and develop Trusted Assessor options that can help with capacity and time management of accepting new referrals and completing review documentation on behalf of the Council. We will be expanding our reablement offer and adopting a reablement approach to domiciliary care, which will be explored further through discussions with Providers. New developments that the Council will take forward will be considerate of new extra care schemes with different models of care and a flexible service offer that would have the potential to reach out into the local community. Discussions with Integrated Care Board (ICB) colleagues will be pursued in relation to developing a joint commissioning strategy that will support joint working across the health and social care system.

By having a range of services that can be accessed at the right time, we anticipate seeing a reduction in bed placements in residential care homes and a reduction in the number of domiciliary care hours delivered.

Section 3: Plans for each market to address sustainability issues, including fee rate issues, where identified.

Note: As part of these plans local authorities should also demonstrate how they complement other strategic documents, such as, but not limited to their Market Position Statements and demonstrate how they have worked with local Providers to develop the plans in this section.

65+ Care Home Market and Domiciliary Care Market (including extra care)

Our approach to developing the Market Sustainability Plan has been to engage with our Providers and agree a set of guiding principles for the reform and sustainability of the care market in Sunderland. This was done at the start of the market sustainability and Fair Cost of Care exercise. We believe that the fee rates paid to Providers are one element of creating a sustainable market and we need to address a wider range of issues to ensure we have a high quality, vibrant and responsive market.

Our ultimate outcome is that people will experience an outstanding level of care and support, which supports their choice, control, and independence, that they feel they are cared for in a kind and compassionate way, respected and treated well. Based on our guiding principles, we will work with our markets to achieve this by:

- Ensuring that our Commissioning Strategy and Market Position Statement give a clear, strong, and consistent message about the types and quality of Provider organisations that are needed to support Sunderland people. We will be clear that Providers who deliver services in Sunderland should have a clear and strong value base and a positive organisational culture that will benefit staff and the people they support.
- Engaging with the North East Association of Directors of Adult Social Services (ADASS)
 who are currently working as a collective on a local recruitment and retention campaign. In
 Sunderland we will be working with partners, including Provider organisations, to develop a
 plan for the local social care workforce that positively promotes social care as a career of
 choice and with the aim of improving recruitment and retention.
- Working collaboratively with Provider organisations to improve and maintain the quality of their services, develop innovative and flexible services to meet local need and supporting them to be sustainable by having clear and strong commissioning strategies and plans.

Our approach to the development of the Market Sustainability Plan has informed our vision for Sunderland's social care market, which is to have a vibrant and diverse social care market that delivers outstanding quality services and better outcomes for people. People will have continuity of service, choice over who provides their support and how their support is provided.

This approach is key to informing our Market Position Statement and ensuring the successful implementation of our Commissioning Service Plan which sets out the requirements:

1. To identify and understand the need and demand for social care and support services through analysis of data, feedback from Providers and engagement with users of the services and colleagues from Adult Social Care.

- 2. To shape the social care market by working in collaboration with Providers to build capacity and develop innovative, responsive, and flexible services based on need and demand. This will be done through planned engagement forums and 1:1 contact with Providers.
- To commission services in the most effective way to meet need and demand using data and feedback from service users and Providers to ensure they are fit for purpose and responsive in terms of growing and changing demand.
- 4. To ensure that there is sufficiency of supply of a variety of services to meet people's care and support needs and outcomes in the most effective way. This will be done through Provider forums, routine engagement with Providers, regular feedback from users of services and colleagues who work with them and, the implementation of the Quality Assurance Framework that relies on intelligence from a range of partners involved in the person's care. We will also be considerate of commissioning arrangements that are flexible and inclusive of a wide range of Providers who can respond to the changing demand.
- 5. To maintain oversight of the social care market to ensure people receive outstanding quality care and support services. The Quality Assurance Framework and the strength of the relationships with Providers and health and social care colleagues in Sunderland will support the delivery of this function.
- 6. To lead and champion the reform and sustainability of the social care workforce and market in Sunderland by establishing relationships with educational establishments such as schools, colleges, and the university so that the profile of social care can be raised and celebrated at an early stage in someone's career pathway.
- 7. To achieve better outcomes for people by working in partnership with those who receive a service and those that deliver services so that a co-productive approach to good, sustainable, person-centred care can be taken.

We have a long-standing history of positive and productive working relationships with our Providers, one which we intend to build on to deliver our Sustainability Plan. We will continue to work collaboratively with our Providers to achieve our collective vision for a high quality, vibrant and sustainable care market.

In developing our final Market Sustainability Plan we have engaged and consulted with our local 65+ Care Home market, our 18+ Domiciliary Care market and our Extra Care markets. The consultation process we followed included the following actions:

- We shared our Draft Final MSP with our Provider Colleagues
- We informed our Provider Colleagues that we were arranging a series of daily virtual meetings and subsequently:
- > We met as a collective with the Council and the rest of the Provider market
- > We confirmed that our Provider Colleagues had received the draft final MSP
- We shared a PowerPoint presentation at the start of each daily session that clearly set out the background to the draft MSP and reform plans for the next 2-3 years
- We encouraged our Provider Colleagues to work co-productively with us and provided an opportunity to influence our reform plans
- We listened to the views of our Provider Colleagues and their feedback on the draft final MSP
- We saw a number of Provider Colleagues attend the daily sessions over the course of week.
- We also offered opportunities for Provider Colleagues to engage and feedback directly to the Council on an individual basis through phone calls, emails and 1:1 meetings.
- The PowerPoint presentation was sent out to all our Provider Colleagues, including those who had been unable to attend any of the daily sessions.
- We have reflected on the feedback that we received throughout the consultation period, which was overall supportive of the approach and the plans set out in the MSP. The feedback received did not result in any changes being made to the Market Sustainability Plan

The grant allocation for the 65+ care home market for 22/23 is £704,297. This funding was used for fee increases and workforce supply which was shared across the 65+ care home Providers to support and enhance each individual Provider's approach to marketing and recruitment of staff and allow for further progress to be made in respect of the local element of the ADASS Workforce Strategy.

Our plans for the next 3 years to address the market sustainability issues we have identified for the 65+ care homes market are:

- Progress with open and transparent fee negotiation discussions with 65+ care home Providers to agree the fee for 2023/2024 before the end of April.
- We will continue to work with the market to gather accurate information regarding self-funders, so that we are in a position to fully assess the impact on Providers of any potential future funding reform.
- We will continue to utilise our established market oversight mechanisms for example, Relationship Management meetings, care home visits; Provider Forums; analysis of activity data; intelligence from Social Workers and our health partners to understand current and future demand for care homes. We will use this information to inform future strategic plans that will be developed with Provider input.
- Continue to engage with and support Providers to identify any specific challenges to sustainability and work with them to develop a plan to address these.
- Review the contract for Personal Care and Nursing Care within a Care Home (overarching care home contract) to ensure it remains fit for purpose and reflective of the changing needs of the people who require this type of care and support. This will be done in collaboration with Providers.
- Consider different models of care that could be delivered in different care homes that could more effectively support people with complex needs that typically require additional 1:1 support.
- Consider how assistive technology can be utilised more effectively to support people within a care home setting
- Consider how we can reduce or delay the demand for care home beds by reviewing and
 developing a model of domiciliary care and other community based provision that effectively
 prevents/delays the need for permanent care either as a single provision or as a suite of
 services that wrap around the individual enabling them to remain living in the community for
 longer. This will ensure that people are supported by the right service(s) at the right time to
 best meet their needs and outcomes, whilst aiming to balance demand across the whole social
 care market
- Raise the profile of extra care as a safe and appropriate option for people to consider who have long term and complex needs and who may think that a move to a care home is the only avenue available to them. This will include a review of current extra care provision and consideration of any future extra care models in line with the aim of alleviating some of the pressures on care home demand.
- Review and expand other service models such as Shared Lives and live-in care, which could provide viable options for people to consider as an alternative to a care home placement.
- Continue to work with ICB colleagues in respect of a robust and fit for purpose community health
 offer that can enhance the service delivered by the care home and reduce the potential of the
 Provider supporting people with complex needs without the appropriate support and guidance.
- Work with the market and other health and social partners in respect of sourcing or developing
 any additional training requirements that have been identified by the care homes or that would
 add value to their current training offer.
- Support the Providers to engage with national partners such as Skills for Care in relation to marketing, recruitment and retention strategies and accessing available resources that would support Providers to develop a positive staff culture and the delivery of good quality care.

(b) 18+ domiciliary care market

The grant allocation for 18+ domiciliary care market for 22/23 was £301,452. This funding was used for fee increases and workforce supply which was shared across the 18+domicilary home care market to support and enhance each individual Provider's approach to marketing, recruitment and training of staff and allow for further progress to be made in respect of the local element of the ADASS Workforce Strategy.

Our plans for the next 3 years to address the market sustainability issues we have identified for the domiciliary care market are:

- Progress with open and transparent fee negotiation discussions with 18+ domiciliary home care Providers to agree the fee for 2023/2024 before the end of April.
- We want to ensure that people are supported by the right service at the right time to best
 meet their needs and outcomes, aiming to balance demand across the whole social care
 market. We will consider new models of domiciliary care as part of a new Keeping Well
 service offer that is broader than home care but will positively influence our challenges with
 supply and demand and have an impact on our current waiting list.
- We will embed an outcome focused, reablement ethos into future commissioning arrangements of home care and develop an approach that Providers will embrace and adopt.
- We will also consider mapping out different pathways of support (e.g., End of Life pathway, dementia pathway) and commission Providers to deliver against the different pathways; we welcome discussing all these options as part of our ongoing discussions with Providers over the oncoming months.
- We will review our extra care and day service provision to establish innovative options of support that may make a positive impact on the demand pressures in the domiciliary care market and would be included in our Keeping Well menu of services.
- We will enhance and expand our offer of assistive technology to promote independence and reduce the reliance on formal support. Assistive technology may be accessed as a stand alone service offer or as part of a blended community care offer.
- We will review our current model of brokerage so that Providers can easily access accurate
 information about new packages of care and make informed decisions on their ability to
 pick them up and deliver them successfully. We have already started working with our
 contracted Providers to implement better information management systems to make the
 current brokerage process more efficient and effective.
- We will work with our procurement colleagues to understand the changes in the
 procurement regulations and how we can develop contracting arrangements that are
 flexible enough to meet the needs of individuals and ensure there continues to be a
 responsive, flexible, and sustainable social care market.
- Review and expand other service models such as Shared Lives and day services, which could provide viable options for people to consider as an alternative to a home care package or as a means of reducing the volume and frequency of a home care solution.
- We are considering reintroducing retention payments for Providers when someone is admitted to hospital. This supports Providers to retain staff, supports provider sustainability and supports timely hospital discharge.
- Continue to engage with and support Providers to identify any specific challenges to sustainability and work with them to develop a plan to address these.
- We will review the current model for commissioning overnight responsive visits to ensure it is both fit for purpose and responsive to changes in demand.
- In doing all of the above, we will involve Providers by utilising our established market oversight arrangements for example, Relationship Management meetings, Provider Forums, Contract Review Meetings, analysis of activity data and, intelligence from Social Workers.
- We are using Adult Social Care Discharge Fund to support Providers with recruitment and retention of staff by commissioning a training and support package from Skills for Care for Providers. By engaging in this, we hope there will be longer term, sustainable benefits for Provider organisations.

We recognise the challenges faced by our 65+ care home and our 18+ domiciliary home care markets and the impact they may have on quality and sustainability. We remain committed to working in partnership to support the markets going forward and we are appreciative of the positive outcomes that continue to be achieved for the people who are supported by our Providers.