

WALSALL METROPOLITAN BOROUGH COUNCIL – ADULT SOCIAL CARE Market Sustainability Plan 2022-2025

Introduction

This plan contains an assessment of the current state of the Adult Social Care provider market in Walsall. It identifies the key issues facing the market and the Council, now and in the future, outlines the overall strategic direction the Council is taking to market sustainability, with detailed plans and intentions for the coming years 2022-2025 where available, and an outline of the future work plans as part of the Councils Re-imagining Care project which sits within the Council-wide PROUD Transformations Programme.

This document demonstrates the Councils commitment to establishing a robust market sustainability plan and use of the Fair Cost of Care (FCOC) exercises to inform future fee rate setting and more sustainable fee rates. It should be read in conjunction with the 2023/24 ASC Commissioning Intentions and Market Position Statement.

This assessment and plan consider the DHSC four key components of market sustainability:

- Demand, sufficiency, choice and diversity of supply
- Quality of Care and Performance
- Fee Rates paid for care
- Providers and the workforce

This plan presents whole market as well as disaggregated sector assessments to include; Care Homes for the Over 65s and Home Care for the over 18s, in line with DHSC guidance for the nationally mandated sectors, as well as summaries of other key market sectors, appended, in order to consider themes and address challenges common to all.

This plan is to be refreshed further during 2023/24 as part of our market sustainability work.

Section one – Assessment of current market position

Demand, sufficiency, choice and diversity of supply

All market sectors across Walsall comprise a diversity of organisations, from individual family run to regional and national organisations. They offers a range of services by type and location, but there are some gaps in respite, help at home, help in accessing the community and support for those with complex needs.

Many providers are geared up to reflect and accommodate the cultural diversity of Walsall and the needs and aspirations of those accessing services; albeit not in every district of the borough or for every complex need. At present all sectors appear able to cope with ongoing demand pressures, although there is concern how the current 2023/24 uplift will impact on providers' ability to recruit and retain staff and deliver services.

Quality of Care and Performance

67% of domiciliary care and care home providers in Walsall who have been rated received a CQC rating of good or outstanding. This is lower than neighbouring authorities (range 69% to 76%). Key concerns, predominantly in Care Homes include; falls and medication errors.

Fee Rates paid for care

The Council operates set fee rates for care home and home care markets, but actual paid rates are often considerably higher in care homes. The FCOC exercise highlighted the need for a new set of rates to account for this and address the potential funding gap suggested by both national and local FCOC exercises providing more transparent and consistent fee rates.

The annual spend on adult social care in Walsall is £88.61m.

Providers and the workforce

Since the pandemic, providers are finding it increasingly difficult to recruit staff in the Borough; particularly for Home Care. This has been exacerbated by a post-Brexit reduction in EU workers, wage inflation and competition with other lower wage sectors.

Whilst the Workforce Recruitment & Retention Fund provided some benefits in terms of providing short term financial inducements to retain staff, it provided no further benefits to recruitment. At 20.5%, Walsall domiciliary care providers have a vacancy rate double that of our neighbours. Given hourly pay rates for staff are comparable, this suggests a significant labour market deficit within Walsall.

There is evidence, however, of strong word of mouth recruitment in the Borough and through communities showing a real strength in how providers recruit and progress with international recruitment by key homecare agencies funded by providers.

Walsall commissioners have worked with Skills for Care and West Midlands Care Association in Provider Forums to flag available training and support for workforce development and on request are exploring opportunities for more in-house training.

Section 1A - Assessment of the current Care Home for the over 65s market

Profile

Walsall Council has 701 commissioned placements in 62 bed based providers, of which; 24 are Residential, 13 Nursing Care Homes, 21 Learning Disabilities; and 4 Mental Ill Health.

Demand, sufficiency, choice and diversity of supply

Growth in demand for bed based care has fallen over time in Walsall (Draft Adults Needs Analysis, 2023) with a peak pre-Covid and a slower increase since the pandemic. The ability to source placements has deteriorated slightly since before Covid. Generally many homes are old and not suitable for upgrading to meet modern care standards, restricting their capacity to meet the needs of complex individuals.

Quality of Care

There are 132 CQC registered providers in Walsall with the following ratings:

- 3 rated 'Outstanding' & 72 'Good', 40 'Require improvement' and 2 'Inadequate'.
- There are 15 providers 'Not Yet Rated'.

Of the 62 bed based providers on Walsall's Framework, CQC ratings are as follow:

- 34 rated 'Outstanding' or 'Good'; 18 'Require Improvement', and 2 'Inadequate'.
- There are 8 providers 'Not Yet Rated'.

The quality of Walsall's bed based care could be better. There is a Quality in Care Board that oversees system quality with a focus at present on residential and nursing supported by a joint Quality in Care Team across the ICB conducting quality assurance. This team and the overall approach to quality assurance in the Borough is currently under review.

In terms of out of hospital discharge and performance, strong partnership working and clear processes through our 'Trusted Assessor' model, means Walsall generally performs well in maintaining low levels of delayed discharges.

Table: **Stated fee rates and rates paid**

AVERAGE PRICES Vs CURRENT PRICES	OP residential £/week	OP residential dementia £/week	OP nursing £/week	OP nursing dementia £/week	Care Homes average difference
Standard price	£523.85	£591.51	£614.06	£690.95	
Current average price	£588.75	£699.98	£690.06	£963.15	

Full FCOC exercise report for Home Care available at: web page xxx

Although published rates in Walsall are towards the lower range regionally, the actual rates paid off-framework and negotiated individually are closer, suggesting a lower level of divergence to the FCOC exercise. It should be noted that the data submissions for this sector, especially for nursing, were low and not always of good quality, therefore it is difficult to say with confidence how applicable these rates are across the market; requiring further work with providers.

The forecast 2022/23 spend on this care sector in Walsall is £36.60m.

Providers and the workforce

High provider vacancy rates are causing pressure in recruitment and retention impacting on occupancy levels or use of costly agency workers to maintain provision.

Section 1B - Assessment of the current Home Care for the over 18s market

Profile

There are 49 CQC registered home care providers in Walsall. There are 36 Home Care providers on Walsall Councils Framework of which:

- 17 are local, 17 are regional & 2 are national providers
- They support 1281 service users, delivering 22,810 hours per week (long term)
- 18 of those providers delivering 1,960 reablement hours per week (w/e 19/06/2022) in the community (Pathway 1) to 789 individuals during 2021/22
- The framework is a Joint contract with the ICB which allows joint call off access

Demand, sufficiency, choice and diversity of supply

There have been no provider failures over the past 12 months. One provider chose to focus on supported living stating financial unviability of domiciliary care rates. Some others are stating similar intentions reflecting the current uplift for 2023/24.

Between 2020/21 and 2022/23 there has been an 11% increase in complex care hours, a 9% decrease in Older People's home care and a 2% increase in Rapid Response to emergencies and keeping people out of hospital. The increase in complex cases may be due to increased diagnosis at GPs reflected in recording. Current capacity concerns relate to:

- A reduction in the ease and flexibility in obtaining new packages for complex adults, reflecting an increase in complex care needs, leading to more costly spot purchasing
- Increased complexity of need matched by an increase in the spot purchase rate(s)
- An exponential growth in demand for Crisis Intervention and Rapid response which is predominantly supported by 72 hours sits; proving a substantial drain on capacity
- Lack of capacity in specific post code areas of the borough where labour is limited.

Quality of Care

There are 49 CQC registered home care providers in Walsall with the following ratings:

- 33 rated 'Outstanding' & 'Good', 16 'Require improvement'.

Table: Stated fee rates and rates paid

AVERAGE PRICES Vs CURRENT PRICES	Home care £/hour
Standard price	£15.80
Current average price	£16.02

Full FCOC exercise report for Home Care available at: web page xxx

Walsall has one of the lowest fee rates for domiciliary care regionally and the quantity and quality of costing submissions indicated the current deficiencies in fee rates for this sector.

Providers cite this as the reason for an inability to recruit or retain staff and not pick up new packages, although workforce data suggest comparable rates of staff pay compared to our neighbours. The forecast annual spend on this care sector in Walsall for 2022/23 is

£18.07m. Based on the FCOC exercise the potential additional cost to the Council could equate to £4.05m.

Providers and the workforce

It is proving increasingly difficult to recruit candidates; with longer and unsociable hours and poor terms and conditions and increasing responsibilities placed on carers such as medication management, peg feeds and catheter care, and more behaviours of concern, leading to higher levels of staff vacancies than previously and reduced capacity to take on new packages. This is a major concern which may be exacerbated by fee uplifts in 2023/24.

The Home Care/CBS Framework requires providers to roster its care staff to have sufficient time to travel without cutting down planned length visits below inflation uplifts may impact on providers' ability to budget for and factor in travel time into staff hourly rates.

Section 2: Assessment of the impact of future market changes 2022-2025

Demand, sufficiency, choice and diversity of supply

Financial implications of anticipated growth in demand across the Borough means the Council is having to consider radical changes across our communities and for the adult social care market. Growth projections by market sector based upon current practice are:

MARKET SECTOR	2023/24 growth	2024/25 growth
Care Homes over 65s and under 65s combined	Estimated between 160 (low) to 348 (high) additional beds across older people and younger adults beds/annum	Similar estimate but with a strategic target reduction in bed base by 5% per annum reducing growth estimate to between 152 (low) and 330 (high)
Domiciliary Care	+11% complex care +2% RR&Crisis +54% P1 Reable on current	11% complex care +2% RR&Crisis +54% P1 Reable on current
Supported Living	104 additional placements/annum	104 additional placements/annum
Day Opportunities	TBC	TBC
Shared Lives	TBC	TBC
Personal Assistants	TBC	TBC
Carers	TBC	TBC

Similar to other local authorities, we expect the general trend towards a higher level of complex needs presenting to Care Homes and Home Care requiring a better skilled workforce to manage those with increasing needs and behaviours of concern, creating greater overall cost for placements which will drive up fee rates further.

Commissioners have started to work with providers to develop and adapt to deliver new models of care based on meeting the range of needs (see Walsall's Adult Needs Analysis), utilisation of community assets and strengths based approaches incorporating the development and adoption of new technologies.

Quality of Care and Performance

It is noted that there will be additional quality and performance measures resulting from the implementation of social care reforms yet to be notified and to reflect the local review of quality and assurance.

Rates paid and FCOC provider costs based calculations – potential financial gap

Market Sector	£'
Domiciliary Care	5,854,202
Residential & Nursing over 65s	5,132,931
Residential & Nursing under 65's	458,027
Extra Care	499,230
Day Opportunities	7,931
Supported Living	3,386,381

Market Sector	£'
Direct Payments	1,994,240
Health Contributions (tbc)	-1,654,301
Total Risk	15,678,641

The calculations above identify a significant financial gap between current expenditure plans and that anticipated from the application of the FCOC exercises rates which would only be offset by approximately one quarter as a result of MS&I allocation.

Walsall is recognised as having some of the lowest fee rates in the west midlands. This is historical, but not sustainable going forward, as providers attempt to compete for staff in a very limited pool whilst funding increases in the National Living Wage. In the absence of salaries that are able to compete with other low wage sectors and offer rewarding roles and career pathways, providers will be unable to attract (the right) staff.

The Council is addressing this deficit, and in allocating MS&I grant in 2022/23 and 2023/24 is looking at options for further investment in 2023/24 and 2024/25 which will result in the achievement of sustainable fee rates by 2024/25. Having published preliminary uplift proposals for 2023/24, the Council is currently reviewing available budgets to enhance further the proposed uplifts in the home care market sectors for 2023/24 and will be liaising with providers to reach agreement over the coming week(s).

Providers and the workforce

In addition to an anticipated increase in the number of working age adults in Walsall, it is also recognised that there are significant numbers of working age adults not currently in formal employment. These predominate around certain communities within Walsall. The development of a place based focus will allow for a better understanding and development of better strategies to engage with and recruit from these communities working in partnership with health and the voluntary sector.

Section 3: Plans for each market to address sustainability issues identified, including how fair cost of care funding will be used to address these issues

Utilisation of Market Sustainability & Improvement Grant

The Council has fully invested all MS&I allocations to support the markets through general and targeted uplifts in 2022/23 and 2023/24. Discussions with providers will ensure funds are directed to those priority cost areas, in particular towards the recruitment and retention of staff as well as general inflationary pressures.

These funds have been allocated to each market sector as follows:

Sector	2022/23 £'	2023/24 £'	Total £'
Domiciliary Care	553,830	687,311	1,241,141
Care Homes (>65)	412,652	466,582	879,234
Care Homes (<65)			
Supported Living		702,904	702,904
Day Care		56	56
Shared Lives		44,898	44,898
Direct Payments		484,623	484,623
TOTAL	966,482	2,386,374	3,353,856

Strategic commissioning context to the FCOC Exercise and Market Sustainability Plan

Walsall Council is committed to working towards sustainable fee rates using the Fair Cost of Care exercises to help support and inform future fee setting processes. This can, however, only be undertaken as part of the broader strategic aims being developed through the Councils Re-imagining Care project. This project aims are to support people in Walsall to live

their lives as healthily, fully and independently as possible through a strengths-based approach to commissioning and to care and support across the life course, age ranges and needs. The Project:

- Seeks to re-imagine care and support for Walsall citizens with use of community assets, as the initial means of support, supplemented by short and longer-term place based adult care and support services, where needed
- Sets out where Walsall is now and co-create a vision for change with citizens, partners and providers and develop a delivery plan to get there together to 2024/2025 aligned to delivery of this Market Sustainability Plan and beyond
- Sits within the ASC Directorate Continuous Improvement Plan under our corporate PROUD Transformation Program and is also a key contributor to wider system transformation as part of the Walsall Together Partnership.

The role of Re-Imagining Care is to co-design and co-deliver a range of outcomes focussed offers to prevent and delay dependency on statutory services aligned to embedding a Strengths Based approach in practice and Integrated Care Board (ICB) development of 'Place'. Where statutory services are required, they will be commissioned as outcome focussed, maximising independence, achieving set standards with good quality and value for money meeting the needs of diverse individuals and communities across spectrums of need and life course.

The overarching objectives of the Re-Imagining Care Project are to:

1. Co-design a vision for Adult Social Care shaped around 'I' and 'We' statements and support people to live a full and independent life; and commissioning intentions for the next 3 years in Walsall (linked to MSP and informed by the Fair Cost of Care exercises)
2. Co-design and build a Single Commissioning Framework ready for 2024/2025 to provide a platform for the terms, conditions, outcomes and criteria that providers need to demonstrate and accept, in order to deliver services for customers on behalf of the Council and ICB. The Framework will cover a range of third-party services including Home Care, Supported Living and Residential & Nursing placements and a new 'Lot' for VCSE services
3. Re-specify care and support for key contracts and associated pricing strategies (working with providers to get a more robust response to their open book accounting, number and quality of returns) to inform LA rate setting process (2024/25 aligned to existing framework and contract time lines) based upon clear budgetary priorities and envelopes with aligned investment and savings prioritising Home Care and Supported Living market sectors
4. Shape and deliver shorter-term tactical changes that fit the vision and intentions and to engender cultural and enabling changes to equip the Council and ASC for change such as cessation of CM2000 call monitoring for home care.

The Council is already progressing a number of its intentions as follows:

- Review of practice and adoption of best practice and national approaches
- Review opportunities to streamline services e.g.: front door and provide better continuity of care
- Work on alternative models of care; strengths based approach and resilient communities through closer work with VCSE organisations to build their capacity to continue delivering and growing local prevention and early intervention services
- Embed understanding and expectation of our resilient communities (including digital) offer; change the narrative from care to 'Wellbeing and Independence'
- Develop alternative models of contracting, commissioning and delivery
- explore the potential for preferred provider and or partner relationships
- Move to outcomes delivery to give providers greater flexibility providing realistic support plans, engaging providers in the process of review and re-assessment

- Build on strength based practice, outcomes based commissioning, place based brokerage
- Integrate the provider(s) electronic care management system into the review process, in line with the Integration White Paper
- Social care professionals to better manage customer expectations and create realistic deliverable care plans and care time and improve communication with providers
- The move to outcomes delivery will give providers greater flexibility providing realistic support plans, engaging providers in the process of review and re-assessment.

Demand for out of hospital, community-based and home care services which support the home first principals and strengths-based practice will be developed such that the balance shifts from bed based more to home based care and the use of community assets/resilient communities, with appropriate changes reflected in allocation of resources.

Further details are provided under sector specific sections below.

Quality of Care and Performance

In recognising the relatively poor CQC rating profile of Walsall providers, the Black Country ICB Walsall Place is undertaking a review of quality which will inform a reset of the priorities for quality in the context of a sustainable market, focusing on; leadership and the processes and tools needed to maintain and continually improve quality. The approach for the review recognises that quality is everyone's business and builds on existing Quality infrastructure.

The Council has developed a risk stratification process as part of a new Quality Assurance Framework.

The Council will undertake an up to date assessment through an Equality Impact Assessment as to the cultural needs of service users and a stock take on how providers currently meet these needs to further influence the redrafting of the home care and other service specifications.

Providers and the workforce

To recruit and offer best practice training models to ensure care and support staff have the most up to date training and are confident and fully skilled to meet the needs of people they are supporting. Complex care also requires appropriate remunerations to address the limited workforce within Walsall. To that end, providers will need to look beyond the National Living Wage to ensure they can attract and retain the right people. This cost will need to be recognised by the Council and ICB system in future years fee rate setting.

As part of our Commissioning Intentions and new service models our workforce planning will need to support recruitment & retention; promoting care as a career of choice with robust and accredited training/education pathways and enhanced training across partners to improve the effectiveness of care. This too needs reflecting in the fee rates paid to providers.

Current workforce initiatives include: Anchor institutions and mutual support with training programmes, working alongside The Walsall Partnership OD work stream and workforce programme lead; Skills for Care and West Midlands Care Association to promote and engage Walsall providers in various workforce related projects and initiatives and co-production on new models of care that sustain and pipeline workforce.

The Council works closely with the Walsall Together partnership workforce lead; actively promoting the West Midlands Combined Authority brokerage system, moving levy allowances between organisations and promoting links to the Government portal for levy opportunities. We intend to track unspent funds and look to ensure these are used by our local providers through a proposal currently being discussed with providers who think and plan in this way.

We support Skills for Care Midlands promoting ASC workforce Data Set as a way to support funding applications and how they can be used to support staff training and qualifications. There are a series of local workshops between March and November 2023.

At present, there are nurse led programmes that support home care and care home staff in learning health related skills to perform more complex tasks in care settings. It is notable that we have a low take up of specialist training amongst our provider workforce which will need to be addressed going forward.

Consideration is to be given to working with the health partners on international recruitment, resource utilisation and sharing through our Place Based Walsall Together partnership.

Engagement and involvement of local market sector providers and partners

As part of the FCOC exercise, a monthly cross adult social care market sector provider forum was established which together with the Councils 'Reimagining Care' project promoted the national exercise and started to have honest and open discussions with providers about their issues, their aspirations and how we could work better together.

In subsequent meetings, as well as concluding the national exercise, the local FCOC exercise and the content of this MSP have been discussed and deliberated.

A Provider Peer Review Group was established to ensure a level of assurance was provided to the exercise. This has been superseded by a Provider External Reference Group which has a broader remit to drive continuous improvement, high quality and best value from providers through shared learning. This group informs and helps shape commissioning priorities and the transformation agenda embedded in the Re-imagining Care project. It is chaired by a representative of the West Midlands Care Association and its priority focus will be workforce recruitment and retention.

The Council is also resetting relationship across health and social care partners to embed providers on an equal footing to address the challenges and opportunities identified in this MSP. The Council will have a clear approach to how, when and what needs to be developed in unison with providers that engage with care management staff, service users and the public. This builds on the existing monthly ICB engagement monthly meetings.

Social care professionals will better manage peoples' expectations and create realistic deliverable care plans and adequate care time, and improve communication with providers.

Self-Funders

At present the Care Home market in Walsall has at December 2022; 380 Self Funders and Home Care; 644 self-funders. The Council recognises the need for reform, acknowledges the delay to implementation of Charging Reform and will continue to track numbers and fee rates in readiness for implementation. We anticipate an increase of self-funders coming into need for statutory support resulting from the economic climate with a commensurate budget impact. The Council will continue to track the self-funder market and assess the changing profile and implication for providers, fee rates and costs over the next two years.

Section 3A - Plans and intentions for Care Homes for the over 65s market

Demand, sufficiency, choice and diversity of supply - Growth in demand

There is a projected increases in demand for bed based care over time. Whilst the strategic intentions is less beds over time, whilst non bed based care grows, there will always be a need for residential and nursing care and particularly a need for more specialist dementia and complex care for over 65s. This is being considered now in the re-commissioning of the Residential and Nursing Care specification and contract for 24/25 and associated pricing.

Quality of Care and Performance improvement

Quality in Commissioning work is linked to our Commissioning Intentions which set out our plans to de-commissioning beds in homes of lower quality and commission beds to revised specifications and be more reflective of sustainable fee rates. Plans to address the required quality improvements will also form part of the overarching strategic direction the Council is taking whereby a re-evaluation of the overall demand for Care Home placements will indicate our reliance on these market sectors for our population and in so re-defining that demand, re-structure the market provision to reflect both the quality of placements as well as quantity to ensure market sustainability.

Provider Costs, future fee rates and the Fair Cost of Care

The Council aims to increase the standard and complex bed based care fee rates to accommodate a standard level of provision, eventually negating the need to enter into regular negotiation around levels of additional payments for EMI/ dementia care.

The Council recognises that the median operating costs generated by the FCOC exercises do not necessarily represent the cost of care for each provider and at the time it was acknowledged that for the nursing home sector in particular there had been an inadequate level of response and even residential home returns had some flaws in their data. As a result the Council could not be confident that the suggested rates generated by the exercise were valid. Notwithstanding that, the Council is providing a net 2% uplift across Over 65s bed based standard fee rates services in 2023/24 at a value of £466,582.

Future fee setting for this sector will as a result require further costing analysis and we will be requiring providers to work with the Council during 2023/24 to improve the quantity and quality of costing data and to align rates to match better the quality and complexity of services provided to reward enhanced care delivery and service user outcomes during 2023/24.

Providers, our workforce and recruitment and retention

It has been recognised nationally that there will need to be an exponential growth in the workforce, including for Care Homes, with an increasing skill set to manage the growing complexity and severity of needs. These numbers and skills development need to be encapsulated into a workforce strategy. There will need to be a workforce plan and pipeline of activity to mitigate the risk of a currently reducing care home workforce.

A provider is currently building a new nursing home within Walsall that will provide complex care for mental health, dementia and physical disabilities: It is scheduled to be completed by the summer of 2023.

Section 3B - Plans and intentions for Home Care for the over 18s market

Demand, sufficiency, choice and diversity of supply - Growth in demand

The anticipated growth in demand for home care packages will reflect the activities associated with the Reimagining Care work project and is being addressed in the following ways:

- Develop a new Home Care model with partners over the next 18 months
- Streamline and remove waste across community services; therapy services, End of Life, Palliative Care & Care Agencies
- Establish improved step up/down, reablement pathways and long-term services
- Strengthening existing reablement offer to support early intervention and prevention and delay the need for long term care
- Move to a block contract for Rapid Response & Crisis Intervention to enable timely delivery and guarantee provision and support flow from hospital; attracting staff dedicated to deliver reablement and allow providers to create a specialist workforce focusing on promoting independence not dependence

- Review appropriateness of service delivery and outcomes of the current in-house Provider of Last Response (POLR) and assess options for external provision
- Target provider development to address capacity gaps in areas within the borough
- Encourage new providers to the local market including VCSE to provide help at home and shared care packages of care.

There is currently a review of the current homecare model through our Re-Imagining Care Project. This identifies key areas for transformation including the need to cease use of call monitoring and payment by minute (Walsall now pays on planned hours and is currently seeking the next move to an outcomes-based model); need to re-draft the service specification to be more re-ablement and strengths based and to performance manage and quality assure differently based on outcomes.

Based on an analysis of current usage of different provision 'Lots' on the homecare contract, commissioners are currently devising the strategy for the new model with some areas like rapid response and crisis support likely to come under a block arrangement to better guarantee supply and a re-apportionment of the home care budget to different Lots to best meet identified demand.

Quality of care and Performance improvements

The Council has already undertaken a range of actions to deliver service improvement:

- Commissioned an 'End of Life' service to support users to die at home
- Established provider of last resort arrangement
- Flexible approach to 'Pay to Plan' rather than actuals
- Widened provider borough locality zones to increase provider flexibility/capacity
- Currently remodelling home care specification, contracts and model ready for April '24

Provider Costs, fee rates and the Fair Cost of Care

In recognising the need to increase the standard home care fee rates to better reflect and start to move towards sustainable fee rates, the Council is providing a 4.06% uplift to the home care market in 2023/24 at a cost of £687,311. In addition, and in recognition the need for additional funding to support long term market sustainability the Council is urgently reviewing available budgets to make available enhanced uplifts for this key sector. Additional resources will also be identified for 2024/25 for deployment into this sector.

Providers, our workforce and recruitment and retention

The Council needs to remodel its home care to meets the variety of needs presenting; to sustain a skilled workforce and provide more integrated care through multi-disciplinary teams with health and care professionals and other community based resources. The aim is that this emulates a Health and Wellbeing Team approach and move to a Buurtzorg type model over time. This reimagining and remodelling of home care is a key deliverable within the Councils Re-Imagining Care Project:

- Develop the new Home Care model with partners through the new Home Care Business Relationship Team over the next 18 months
- Cease Call Monitoring as it does not align to ASC's principles of Strength Based Practice and Outcome Focussed Commissioning; it is task and time focused. This will afford opportunity to explore solutions to streamlining, potentially digitalising and improving efficiencies in brokering and commissioning all third-party services and support the implementation of the new Home Care, Residential & Nursing and Supported Living contracts (Spring 2024).
- Locality based, integrated models of health and social care to ensure people can be cared for at home as much as possible.

- Support for carers and reducing care breakdown; working with the new Walsall Carers Strategy.

APPENDICES: LOCAL MARKET SECTOR ANALYSIS

Summary of the Care Home for the under 65s market

Walsall Council has 139 commissioned bed placements across 13 Residential and Nursing Care Homes in Walsall, including; 91 residential, 48 nursing placements.

Demand, sufficiency, choice and diversity of supply

There is a good supply and choice of under 65s care homes in Walsall. The Council does, however, experience difficulties in regard to highly specialised complex provision to support those requiring placement following hospital discharge or admission avoidance.

A large supply of residential supported living has led an over-reliance on bed-based support and too high a proportion of people in such settings rather than living independently.

We will aim to address future demand and complexity of need in the following ways:

- Re-focus on independent living as first choice/reduce reliance on care homes
- Review the way The Council commissions Home Care for Complex adults and Children’s providers across community services to attract skilled staff to respond to and deliver care which achieves outcomes with the focus on promoting independence
- Pilot of CareCubed costing tool to support further market analysis and cost reductions
- Link improved fee rates to improved quality of re-commissioned care homes.

Quality of Care

There are 32% of bed based rated providers care homes in the borough rated as Requiring Improvement. This is higher than other LA areas and will form a key part of our quality in commissioning work programme detailed in the main report. Promoting new build schemes in Walsall will be paramount to ensure future quality of tenancies for independent living.

Table: **Stated fee rates, rates paid and FCOC provider costs based calculations**

AVERAGE PRICES Vs CURRENT PRICES	£/week
Current average price	TBC

Due for completion April 2023

Only one provider engaged with the local FCOC exercise, meaning we are unable at this point to generate an FCOC rate. The Council will require full engagement in future exercises.

The forecast 2022/23 annual spend on this care sector in Walsall is £11.44m.

Providers and the workforce

Further work will be required to better understand the skills and qualifications associated with this sector to ensure optimal delivery of care and outcomes.

Summary of the Supported Living market

- There are 29 providers currently providing commissioned services supporting 267 service users, delivering 20,640 hours per week (long term).
- The framework is structured in Lots focused on individual specialised needs; Autism, Learning Disabilities, Mental Health (Functional/Dementia) Physical and CYP.

Demand, sufficiency, choice and diversity of supply

There have been no provider failures over the past 12 months. There have been cases where providers have withdrawn from the framework owing to below cost fee rates set by themselves at the beginning of the framework contract (uplifted annually). There are some difficulties with identifying suitable provision for highly specialised complex care needs.

We will aim to address future demand and complexity of need in the following ways:

- Review and re-specify the commissioning of Supported Living provision
- Pilot approaches to integrated teams with specialist skills to manage complex behaviours in the context of supported living re-specification
- Development of a 'complex' Lot
- Development of banded pricing strategy
- Small Supports Organisations market shaping initiative

Quality of Care

There are 21 CQC registered supported living providers in Walsall with quality ratings showing 8 as good or outstanding, 6 requiring improvement and 7 awaiting a CQC rating. There has been a deterioration in overall satisfaction with services which needs addressing.

Table: **Stated fee rates, rates paid and FCOC provider costs based calculations**

AVERAGE PRICES Vs CURRENT PRICES	Supported Living £/hour
Current average price	TBC

Due for completion April 2023

Walsall operates provider specific rates based upon their tender submission for the framework. 7 providers contributed to the FCOC exercise representing 24% of the market.

The forecast 2022/23 annual spend on this care sector in Walsall is £16.99m.

Providers and the workforce

Further work will be required to better understand the skills and qualifications associated with this sector to ensure optimal delivery of care and outcomes.

Summary of the Day Opportunities market

There are 26 Day Opportunities providers in Walsall, supporting circa 200 service users.

Demand, sufficiency, choice and diversity of supply

Market feedback during the FCOC exercise demonstrated a disconnect between Day Opportunity providers and The Council resulting from the decision 10 years ago to fund Day Opportunities through Direct Payments, causing loss of market oversight and development. Although relationships have improved over recent years, there is a need to review the rationale and effect of the Council not having a more direct relationship with this market to support its move towards a strengths based home and community first approach.

Quality of Care

As a non-commissioned market there is no current information relating to the quality of service provision for this sector.

Table: **Stated fee rates, rates paid and FCOC provider costs based calculations**

Walsall does not operate a set fee rates for Day Opportunities but has undertaken a local FCOC exercise as part of its overall approach to market sustainability across all sectors. The FCOC exercise highlighted an overall gap between rates paid and costs reported by providers of 26% leading to providers using short term grants or cross-subsidies to support commissioned provision, and the need for greater consistency of rates by specialism.

The estimated 2022/23 annual spend on this care sector in Walsall is £2.66m.

Providers and the workforce

Given the community basis for this sector there will be opportunity to engage and develop workforce development opportunities going forward.