Staffordshire County Council

Market Position Statement

Care in the Home

August 2023

Foreword

Welcome to Staffordshire's Market Position Statement for Care in the Home. Our hope is that all care providers will find this a valuable resource, whether you currently work with us or not.

We are only able to support people who draw on care and support thanks to the huge range of providers who work across Staffordshire. Care providers have been at the heart of our response to COVID-19, and we continue to thank you for the care and support you provide to people with health and social care needs.

As we look ahead in this Market Position Statement, we hope that we will not have to experience anything like the turbulence and challenge presented by the pandemic, but we can expect that we will all have to adapt to other challenges – including some changes that we can already identify, and others that may be less immediately evident. The challenges of social care reform, workforce, a changed landscape for integration and improving personalised and strength-based approaches will undoubtedly form part of our journey over the coming years. And, as we have learned over the last two years, the pace of change in areas such as digital and other technologies might also give us opportunities – and challenges ¬ - in ways that we are not even aware of yet.

We would like to understand your challenges as well as your ideas about what we could improve together, and we want to hear from your teams and the people whom you support as well.

We are clearly entering into a difficult economic period in the country, and we know that the challenge will be to continue to commission services in a tough financial context, even though we have prioritised investment into these services. Some of the solutions will come from technology, but most will come from people – all of us, working together, building on best practice and testing new and innovative solutions. I hope that you find this Market Position Statement a helpful element of how we achieve that

Dr Richard Harling
Staffordshire County Council Director of Health and Care

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1. Our vision and strategic objectives

In adult social care, we support the County Council's vision of being an **ambitious, innovative, and sustainable county**, where **everyone can prosper, be healthy and happy** – including people who draw on care and support. We support the Council's priority outcome that **everyone in Staffordshire will be healthier and independent for longer**, with a priority to **encourage good health and wellbeing, resilience, and independence**. These outcomes and priorities increasingly shape our approach to strength-based working, integration, prevention, and community services.

For the care in the home and supported living sector, the more successful we are in achieving these outcomes and priorities, the fewer people (as a percentage of the whole population) will enter long term care. Therefore, the quality of their care and their eventual outcomes will remain hugely important. The average complexity and extent of care needs of people who require care in the home will continue to increase over time, and this will continue to have implications for the physical environment, skills within the care teams, and links with primary, community care and other services. These will all continue to grow in importance over the coming years.

Our strategic objectives for the whole of the Council's Health and Care Directorate are to:

- **Promote good health and independence**, and encourage and enable people to take personal responsibility for maintaining their well-being
- **Ensure effective and efficient assessment** of needs that offers fair access to services
- **Maintain a market** for care and support that offers services at an affordable price
- **Ensure best use of resources**, people, data, and technology

Specifically for commissioning care in the home, our strategic objectives are:

- **Ensuring timely access to care in the home** when required – including in response to rapid changes in their care needs, or following a hospital discharge
- **Improving access to step-up reablement services** and developing a stronger reablement ethos across our community-based services
- **Developing models of home care and commissioning processes** that are outcomes-focused and more able to respond to fluctuating needs, building on the role of care providers as trusted assessors.

2. Introduction

The Care Act 2014 places a duty on the Council to set out our understanding of the demand for care, and how that demand may change over time.

A key characteristic of Staffordshire is increasing demand for care services due to of its ageing population, which is growing in both size and average age with its older population growing relatively faster than the general population. The impact of this ageing trend is likely to see approximately 65,900 more people aged 65+ than there were 20 years ago by 2030, and it is anticipated that there will be 12,250 more older people aged 85+.

People have high expectations regarding independence and want high quality support built around their needs. The Council facilitates and shapes their market for adult care and support, to enable it to meet the needs of all people in its area who need care, whether arranged or funded by the state, by the individual themselves, or in other ways. The ambition is that this function will promote a sustainable and diverse range of care and support providers, continuously improving quality and choice, and delivering better, innovative, and cost-effective outcomes that promote the wellbeing of people who need care and support.

We want people of all ages to enjoy good health and wellbeing. This means preventing avoidable illness and tackling the root causes of poor health and wellbeing. Services will focus on helping vulnerable adults live independently, using technology to help keep people at home and focus on what people can do rather than what they cannot do.

It is our commitment to commission services that maximise independence, that enable self-choice by making full use of our communities' strengths and assets and enable people to live the lives they want to lead regardless of age or ability whilst remaining at home.

The Council also needs to make sure the services provided give best value, so people can get the most from the available resources, which is critical when developing transformation plans. We need a more diverse range of good quality care and support services to meet people's highly individual needs and ensure real choice is affordable and accessible. We want to make a positive difference in the lives of people and carers.

Throughout the life of this market position statement, as our commissioning intentions change, this document will be updated.

3. What is a market position statement?

A market position statement aims to cover all potential and actual users of services in the local area and not just those accessing state funds. It should be a product designed to help providers to develop effective business plans that:

- Helps capture and share market intelligence.
- Articulates current demand and supply and possible future trends.
- Explains the local authority's priorities based on an evaluation of the data and evidence.
- Brings together material from a range of sources such as joint strategic needs assessments, surveys, contract monitoring, market reviews and statistics.

4. Demography

Older people in Staffordshire

The table below shows the projected needs of older people living in Staffordshire[1]

Table 1: Projected needs of older people in Staffordshire 2021-2040

	2021	2025	2030	2035	2040	% Change 2020 - 2040
Population aged 65 and over	197,600	209,800	229,600	247,500	257,000	30%
Limiting long-term illness	100,600	108,800	119,100	128,300	135,100	34%
Unable to manage at least one self-care activity on their own	56,000	60,700	67,000	72,100	75,900	36%
Unable to manage at least one domestic task on their own	56,500	61,500	67,800	72,800	77,100	36%
Number of falls in last year	52,200	56,000	62,200	67,400	70,500	35%
Number of hospital admissions due to falls	6,200	7,000	8,000	8,500	9,100	46%
Dementia	13,600	15,000	17,000	18,800	20,400	50%

- Around 51% of people aged 65 and over in Staffordshire are estimated to have a limiting long-term illness. Between 2021 and 2040, this is projected to increase to 53%, which would equate to 34,500 additional people
- Around 28% of older people are unable to manage at least one self-care activity on their own. This is projected to increase to 30% or 19,900 additional people by 2040. In addition, around 29% of older people are unable to manage at least one domestic task independently
- National research indicates that around seven in ten people aged 65 and over who are admitted to hospital due to a hip fracture require post support and care. In Staffordshire around 52,200 people aged 65 and over are estimated to have fallen at least once in the last 12 months which is predicted to increase by 35% to 70,500 people by 2040
- If the prevalence of dementia remains the same, the ageing population means that the total number of people aged 65 and over with dementia in Staffordshire is projected to rise from around 13,600 in 2021 to 17,000 in 2030; an increase of 25% and to 20,400 by 2040; an increase of 50%

[1] Numbers and percentages may not add up due to rounding. Source: Projecting Older People Population Information (POPPI); Dementia UK: update, © Alzheimer's Society 2014; 2018-based population projections, Office for National Statistics, Crown copyright

Adults aged 18-64 in Staffordshire

Based on 2018-based population projections, the number of Staffordshire residents aged 18 to 64 is predicted to remain static between 2021 and 2040[2].

Table 2: Population projections for those aged 18-64 in Staffordshire 2021-2040

	2021	2025	2030	2035	2040	% Change 2020 - 2040
Population aged 18-64	518,100	520,300	519,300	518,000	521,300	0.6%
Learning disability (18 and over)	3,400	3,500	3,500	3,600	3,600	6%
Mental health conditions	97,800	98,200	98,100	97,900	98,500	1%
Autism spectrum conditions	7,000	7,200	7,400	7,600	7,700	10%
Moderate personal care disability	21,700	22,000	21,600	20,900	21,000	-3%
Severe personal care disability	4,700	4,800	4,700	4,600	4,600	-2%
Impaired mobility	30,200	31,100	30,600	29,200	29,100	-4%

- The number of people aged 18 and over with a moderate or severe learning disability (who are therefore likely to require care) is estimated to increase from 3,400 to 3,600
- The number of people aged 18-64 with a mental health condition is estimated to increase slightly from 97,800 people in 2021 to 98,500 in 2040
- The number of people aged 18-64 estimated to have a moderate or severe personal care disability is estimated to fall from 26,400 people in 2021 to 25,600 in 2040

[2] Source: Projecting Adult Needs and Service Information (PANSI), Adult Psychiatric Morbidity Survey 2014 (APMS 2014), NHS Digital, Copyright © 2016, Health and Social Care Information Centre. NHS Digital is the trading name of the Health and Social Care Information Centre, 2011 Census, Office for National Statistics, Crown copyright and 2018-based population projections, Office for National Statistics, Crown copyright

5. Financial context

- The net Health & Care budget for adult social care in 2022/23 is £243.3m
- The Council spent £210m (net) on adult social care in 2020/21 compared to a net expenditure of £208m 2018/19 and £200m in 2017/18, indicating increasing pressures on budgets. The spend on adult social care is over 41% of the overall Council spend
- In 2021/22 we issued around £29.8m in support grants to our care providers, **£15.8m** of which to home care providers.
- In addition to savings previously agreed, the Council needs to make ongoing further savings of £19.7 million by 2026-27. We want to work with providers in addressing this challenge.

6. Challenges and Opportunities

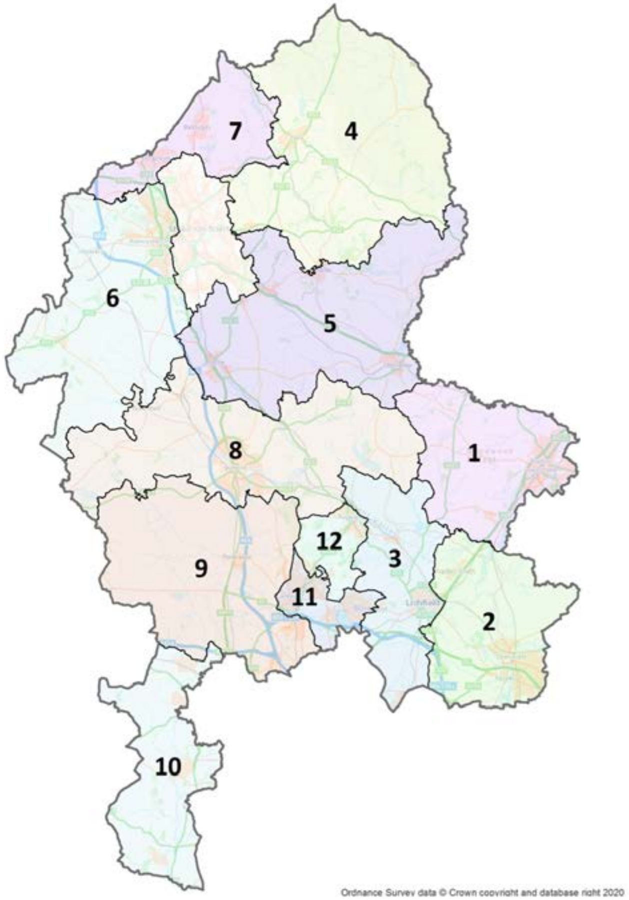
- There are several challenges across the sector:
  - People are living longer with increased complex needs
  - People want and deserve high quality care
  - People want a choice in the care they receive
  - Retention and recruitment of a skilled workforce
  - Uncertainty of long-term funding
- The opportunities are:
  - Increased co-working and multi-disciplinary approaches to support people with complex needs
  - Support for quality improvement, sharing best practice, and setting out clear actions plans for services where quality concerns are identified
  - A commissioning approach which encourages several providers in each local area
  - Collaborative working to set out support for our social care workforce, including better support for people's journey into work, promoting and valuing the role of social care workers, improving awareness to support for wellbeing, and a better co-ordinated approach to training and development
  - Setting out the case, with other partners, for improved long-term certainty of funding

7. Covid19

- The impact of COVID19 has been an unprecedented challenge which has resulted in an increase in spending growth in 2020/21 compared to previous years. This has also had an impact on our providers and other organisations who are all confronting these challenges but strive towards positive outcomes for those they serve. Providers have worked with the Council to ensure that care had been delivered and looked at new ways to undertake the delivery of care whilst continuing to support the people they care for.
- The Council will work in partnership with care providers to develop a diverse and vibrant care market, sharing challenges and co-producing outcomes, looking at joint solutions and shared outcomes. The Council and providers know that there will be current and future challenges and we need a service that can be flexible to meet both demand and changing needs.

8. Staffordshire County and Commissioning Zone Boundaries

Zone Ref	Name
Zone 1	East Staffordshire
Zone 4	Moorlands North
Zone 5	Moorlands South
Zone 6	Newcastle
Zone 7	Newcastle North
Zone 8	Stafford
Zone 2	Tamworth
Zone 3	Lichfield
Zone 9	South Staffordshire North
Zone 10	South Staffordshire
Zone 11	Cannock South
Zone 12	Cannock North



9. For adults in Staffordshire, we will:

- Support and encourage people to access mainstream facilities in the community.
- Offer information, advice, and support- providing help at the right time to prevent and reduce the need for more intensive support.
- Improve digital access to services making better use of technology, innovation, and on-line services
- Actively promote direct payments to give people the greatest freedom and flexibility to meet their needs,
- Continue to work with the market to ensure the availability of good care in the home services
- Develop services that help avoid unnecessary admissions to hospital or residential care and enabling people to return home safely from hospital,
- Support people with complex needs to live as independently as possible, with choice and control over their lives and the services that they access.

10. For providers in Staffordshire, we will:

- Work with all providers to improve the way we engage with the market helping us to better understand the providers perspective.
- Work creatively with all our partners to develop cost effective solutions that can both prevent and reduce the need for formal care and enable people to get the right service at the right time when they do need care and support of this nature.
- Provide a quality assurance and quality improvement team to support providers by helping them to improve and sustain the provision of service quality.
- Help support providers to have access to the best information about the Council so that they can develop robust business plans and implement sustainable business models.
- Work with providers to ensure any external funding can be identified and passed on (e.g., COVID-19 grants).
- Test models of commissioning and service provision that are more clearly focused on outcomes and able to respond more effectively to fluctuations in care needs
- Support providers to improve their retention, recruitment and skills development of staff through a new social care workforce strategy
- We have re-tendered the Home Care Including Respite and Sitting Services, which initially end in 2025; this is a flexible Agreement with options to extended until 2028.

11. What the People of Staffordshire are Telling Us

- What we know – People drawing on care and support:
  - Would prefer to choose their own provider and delivery times.
  - Want care to be delivered in a way that meets their needs rather than a prescriptive approach.
  - Only want to pay for the actual care that is delivered.
  - Want continuity of care in terms of the same carers to build up a rapport, and at the same times.
  - Sometime want a choice over the gender of their carers.
  - Want their carers to stay for the full duration of their visit.
  - Want to be able to contact the provider of their care in a timely and convenient fashion.
  - Want to be treated with respect and dignity.
  - Want good quality care from an agency that is registered 'good' or better.
  - Want a timely assessment and fairer charging so that the cost of care is known.
  - Want a single point of contact and to know how to make a compliment or complaint.
- While we understand what people drawing on care and support are asking for:
  - We cannot always guarantee a choice of times, however we would work with the provider to enable them to have the time of their choice later wherever possible
  - We cannot always guarantee a choice of provider, however if the provider is not delivering a satisfactory service we work with providers and service users to improve the situation or agree a change to another provider.
  - We work with providers to support them to improve their quality if they are not rated as at least "Good" by CQC
  - We take complaints seriously and investigate fully, communicating the outcome of these investigations to all parties concerned. There is an expectation that the provider gets the opportunity to respond to the complaint first, as part of their CQC registration. We ensure that lessons learned are incorporated into processes and services

12. Demand

- Staffordshire is a county of contrasts and is home to a distinctive blend of urban and rural areas, with green areas, housing developments and traditional market towns.
- There are also large contrasts in the resident population in terms of deprivation and employment. Annual average earnings are still below the national average, although life expectancy has fallen for both men and women, as have rates of fuel poverty, although demand for adult social care services has increased. It should be noted that recent increases in fuel prices nationally may reverse this reduction in fuel poverty.
- Staffordshire has a population of approximately 871,000 people and there are more people aged 65 and over in Staffordshire compared to the national average. The overall population of Staffordshire was projected to increase between 2017 and 2027 by 2% with a significant growth in people aged 65 and over (18%) and aged 85 and over (39%).
- The impact of this ageing trend is likely to see approximately 65,900 more people aged 65+ by 2030, and it is anticipated that there will be 12,250 more older people aged 85+. There is an Increasing demand for acute services and healthy life expectancy is 63 for men and 65 for women, which are both below the current retirement age
- For more information, please refer the Staffordshire Joint Strategic Needs Assessment Annual Update 2020 and the Staffordshire Local Authority Data Pack.
- We are currently supporting approximately 3,300 people with social care needs via care in the home. This is likely to increase as life expectancy increases as adults are living longer but healthy life expectancy is still below the current retirement age, which in turn can lead to more complex needs and support. This could translate into as many as 500 additional packages of care by 2025.
- In addition, the number of adults that left hospital with a care package and required support was 382 in 2021.
- It is expected that we need to grow the use of community led support, and it is expected that there will be increased demand for home care following the Covid 19 pandemic, although at this stage (August 2021) it is difficult to predict what this might look like.

13. Finance

- The annual gross expenditure by the Council on Adult Social Services was more than £400m in 2021/22, with 87% of this spent directly with the care market. The Council's budget for 2021/22 includes additional income from the 2% adult social care precept of £11.1m.
- Adult Social Care is expected to find a saving of £6.8m during 2022/23, £50,000 of which is expected to come from care in the home provision.
- Over the last four years Adult Social Care has had to make savings in the region of £41 million and has plans to make further savings of £2.4million in 2021/22.
- The actual costs of delivering services during COVID-19 have increased, but have been met, to date, from additional COVID-19 grant funding provided by the government. For Adult Social Services, the additional costs associated with managing the COVID-19 pandemic, come on top of a rising demand for social care and the need to change and adapt services to meet people's needs and support them to stay independent, where they can.
- All of this is set against a backdrop of settlement funding allocations beyond the current year (2022/23) being unknown and key reforms to local government funding including the Fair Funding Review, Business Rates localisation, and reform of adult social care funding being repeatedly delayed.
- Despite this uncertainty, the Council remains committed to its vision – to support people to be independent, resilient, and well.

14. The Impact of Covid-19

- The COVID-19 pandemic and the public health measures taken to contain it have delivered one of the largest shocks to the UK economy and public finances in recent history.
- Data from the ONS shows that while the summer saw the UK economy move towards recovery, it still must make up nearly half of the GDP lost since the start of the pandemic. The Office for Budget Responsibility has predicted that the UK's deficit is likely to be between £263bn to £391bn this year, significantly higher the £55bn predicted at the budget in March.
- In responding to Covid-19, the Council has taken action to maintain the delivery of vital services across all areas of its operations. These include supporting the NHS and health system through enhanced hospital discharge processes to free up capacity, protect vulnerable people, support businesses, and ensure the safety of all staff delivering this vital work. While the impact of the pandemic has reduced in 2022, there remains a possible that it may represent a significant challenge for public finances.
- We work closely with NHS partners to seek alternative and best value solutions that deliver better outcomes.
- We will continue to support the people of Staffordshire and will work with providers to look at ways this can be achieved.
- We want to work with all partners to ensure these challenges are addressed.

15. Recruitment and retention/ workforce pressures

- A job in the care market needs to be appealing and to be held in high regard by society. Key to a properly functioning, high quality and sustainable adult social care market is a workforce that is well trained, professional, caring, appropriately paid with progression opportunities and with satisfaction with both their jobs and employers. The latter point is telling, as many carers who leave caring roles move to different care jobs, indicating greater satisfaction with the caring role than their employer. Where these positive factors do not fully exist, this is manifested in a high turnover of staff.

- Diversity in the care market can provide resilience in the workforce, especially if a high percentage of workers are reaching retirement age and the profession is not appealing enough to new workers.

- Information from the 'Skills for Care Workforce Minimum Data Set' highlights social care staff turnover rates during 2020/21 of 22% for direct care staff in CQC registered non-residential care roles. 24% of direct care staff are aged 55 and over and therefore likely to leave the workforce within the next 5-10 years.

- The latest employment overview data from Skills for Care shows that in Staffordshire 49% of non-residential direct care workers were employed on zero-hour contracts, or 2,700 jobs. In comparison CQC non-residential services across England had an average of 53% of all workers employed on zero-hours contracts or 270,000 jobs.

- For the most up-to-date information please visit the Skills for Care website.

- We are developing a new workforce strategy which includes joint actions to promote social care as a career and to encourage all staff within the sector to take advantage of the training, development, and apprenticeship opportunities available to them to advance their career in care.

16. Impact of Covid19 on the social care workforce

- In an already stretched care sector, the impact of care workers having to isolate and not being able to work due to showing COVID-19 symptoms or receiving a positive test result is significant. It should be noted that guidance remains under continual review alongside monitoring prevalence of COVID 19.
- Engagement with providers highlights that recruitment since Covid 19 has become increasingly difficult, and providers struggle to recruit a consistent workforce with the right values base. The average hourly rate for non-residential direct care workers in March 2021 was £9.18, and Staffordshire is working with partners to support the sector via the Future Social Care Workforce Strategy

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