

Swindon Borough Council Market Sustainability Plan – March 2023

Introduction

The Market Sustainability Plan has been developed and published in response to the grant conditions of the Market Sustainability and Fair Cost of Care Fund and submitted to DHSC. The plan aligns with Swindon’s [JSNA](#) and Market Position Statement, which is currently in development. This plan sets out the following;

1. The current assessment of the 65+ care home market and the 18+ home care market;
2. The assessment of the impact of future market changes between now and October 2025;
3. Plans to address sustainability issues across the care home market and the home care market.

The plan has been developed through ongoing discussion with the care and support providers across Swindon. This process will continue going forward and will inform further updates to this plan.

The emerging Adult Services Strategy 2023 - 2025 sets out the vision of **Lives, Not Services** through increased choice and control for adults. The vision is underpinned by people being supported through community led commissioning and strength based practice where adults have a home, a friend and a purpose. The provider and community commissioned markets will be supported and enabled to transform in order to reflect this vision and wider system strategies. This will include:

- Embedding co-production with people being supported;
- increasing access to assistive technology;
- engaging with locality/community based commissioning;
- upskilling of the workforce to meet the changing needs of people supported at home;
- building on the strengths of our neighbourhoods to enhance community inclusion.

Section 1: Revised assessment of the current sustainability of local care markets
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a) Assessment of current sustainability of the 65+ care home market
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<u>Sufficiency to Supply, Quality and Diversity</u>
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The total bed capacity for Swindon is 1249 beds across 44 homes. The breakdown of the beds is as follows;

	Residential	Nursing	Total No of Beds
65+ care homes	9	13	1071
Care homes supporting people with neurodiversity needs (18+)	21	1	178
Total	30	14	1249

CQC ratings for care homes supporting people with a range of neurodiversity needs is as follows;

CQC Rating – Neurodiversity needs	Number of Homes	% of Homes
Outstanding	3	14%
Good	18	82%
Requires Improvement	0	0%
Inadequate	1	4%

Of the 22 care homes for people over 65 the current CQC ratings are as follows:

CQC Rating – over 65	Number of Homes	% of Homes
Outstanding	2	9%
Good	19	86%
Requires Improvement	1	5%
Inadequate	0	0%

94% of Swindon care homes for over 65s are rated Good or Outstanding by CQC; 100% of residential homes for over 65s are rated Good or Outstanding. This has increased from 21/22 and against England and South West where averages have both fallen; England from 82% to 81% and South West from 87% to 86%.

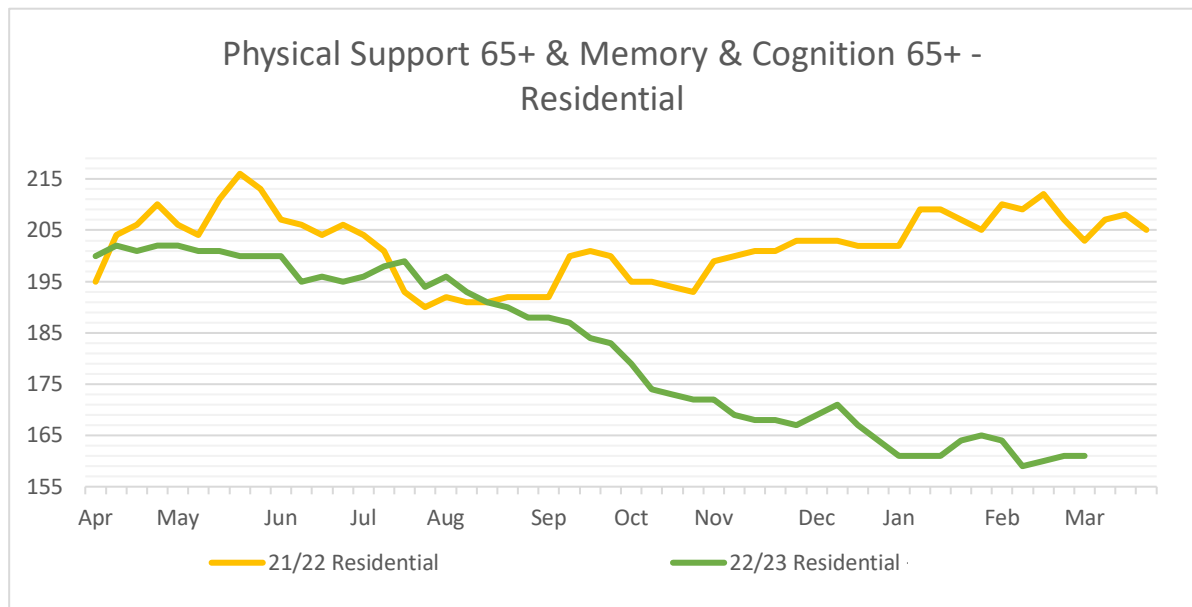
There is confidence in and close working with CQC in support of improvements required. Requires improvement and Inadequate rated homes are supported to improve through a closely monitored improvement plan, also supported by health and wider partners.

There are 18 (82%) providers of 65+ care homes who have homes outside Swindon some of which are national providers, and 4 (18%) providers with care homes only in Swindon. The larger providers support 941 (88%) beds and local providers support 130 (12%) of the beds in Swindon. Some providers with homes outside Swindon have reported that their wider portfolio of homes supports the financial sustainability of Swindon homes.

Two residential homes have closed in Swindon in the last two years with a loss of 54 beds from the bed base. An expansion of the in house residential home reduced this to a net loss of 25 beds.

The occupancy rate of homes is between 90% and 93% and this has enabled the Swindon system to meet the demand for placements for over 65s with an average vacancy rate of 11%.

Whilst there is currently sufficiency to meet the demand across the system in Swindon, there has been a reduction in the demand for residential placements and an increase for nursing support over winter 2022/2023 as indicated in the graphs below.



Through demand profiling commissioning identified a reduction in residential support due to increasing care at home capacity however this has resulted in people with higher levels of care and nursing needs requiring more nursing residential support. This is causing a current pressure in the local market, as the demand for nursing placements in the last 18 months has been higher than expected. The health and care system is reviewing the nursing care pathways to ensure that the current configuration of nursing and residential care meets current and future needs.

Integrated Care Alliance

The Swindon Integrated Care Alliance (ICA) is a Board of local leaders from Health, Local Authority and the community and voluntary sector, it is currently chaired by the Chief Executive of Swindon Borough Council. The ICA is exploring a range of community based intermediate care options. There are 20 step down beds funded by ICA/ICB, which supports the acute hospital pathways; this can support onward assessment in a care home on a temporary basis. The beds are spot purchased from across the market and where the person is assessed as needing a permanent placement, it is highly unlikely that a further care home move is required.

The ICA/ICB fund up to 4 step up beds in care homes to avoid people having to be admitted into the acute hospital; these can also support short-term community crises. They are commissioned on a spot purchase basis and provide an opportunity to assess the needs of the person along with GP support through the enhanced care home offer; again this reduces the risk of hospital admission whilst also maintaining

support in the community with a focus on returning the person to their home as soon as possible.

The BSW Coordination Centre hosted by the Great Western Hospital in Swindon provides a 24/7 response service to all care home providers in Swindon ensuring that they have an opportunity to discuss the management of clinical risks in service of avoiding hospital admission. This has enabled providers to feel supported and valued as part of the integrated system. In addition to this, a number of providers use RESTORE2/NEWS2, which enables them to have the evidence to inform clinical decision-making. All homes have received training in RESTORE2, however not all have yet embedded it.

The Better Care Fund also funds 11 reablement beds in Fessey House, a Swindon Borough council in house care home, which is supported by an integrated health and social care team this approach is strengths based and aims to support the person to return to their own home wherever possible.

The ICA recognises the importance of all partners' contribution to ensuring that residents receive the right care at the right time in the right setting. To this end health and social care have spent the last year working with registered managers through workshops and the enhanced care home offer to develop pathways, which are inclusive. This work has resulted in high engagement with the Coordination Centre, all care homes engage with the trusted assessor and a train the trainer model is being developed for RESTORE2.

The trusted assessor model is currently being extended to ensure 7-day cover across 52 weeks. Care homes have fed back that the role is supportive in facilitating timely and personalised safe discharge from hospital. The Red Bag scheme has recently been refreshed and provides an additional mechanism to ensure good flow of information between providers and the acute hospital.

Care homes in Swindon are increasingly moving to digital systems with 12 (55%) utilising national and local funding streams to do so. In March 2023, 12 (55%) care homes reported using digital social care records. One home has access to SystemOne/GPConnect.

There is evidence through monitoring of homes that the use of technology is varied and most likely linked to the use of equipment rather than being in support of independence, choice and quality of care. There is further work to do in support of technology-enabled care and the proof of concept of assistive technology currently underway in home care will inform further development going forward. A research post has been recruited to look at the use and success of assistive technology and the results of both of these initiatives will inform an Assistive Technology Strategy. This will provide an evidence base from which to support further developments across the system and commissioned market.

Rates, Cost of Care and Delay to Charging Reform

There are some challenges in meeting more complex residential and nursing needs, particularly to meeting later journey dementia needs. The market has not yet

adjusted to the increased level of need and supported the development of their workforce. Whilst there are four care homes supporting more complex needs, there is not always the capacity to meet the demand, which results in a higher level of out of area placements. The more complex placements can cost up to £3000 per week and due to the unpredictability of needs can quickly create a budget pressure for the Council.

Of the 50 (11%) people placed in care homes outside of Swindon at the end of February 2023, 29 of these (58%) were placed in the adjacent local authorities of Wiltshire or Gloucestershire. Of those placed beyond adjacent local authorities it is likely to be as a result of choice by people and their families.

All care home beds are spot purchased through individual service contracts and all care homes supply to the integrated health and social care system. The care home framework is being reshaped to ensure alignment with the Adult Services Strategy together with wider system strategies. The rates for care homes are published annually and negotiated with providers beginning in the preceding autumn, with some open book visibility.

Rate 22/23– Exclusive of FNC	Weekly Rate
Standard rate	£596.01
Enhanced rate	£640.03
Complex rate	£667.18
Outside rate based on individual need	Personal budget

The % breakdown of beds purchased within rates is shown below for 22/23 to date;

	Standard Rate	Enhanced Rate	Complex Rate	Individual Rates
Residential	16%	38%	32%	13%
Nursing – ex FNC	7%	69%	3%	22%

The breakdown demonstrates an increase in rates this reflects the complexity of needs that the provider market now has to meet, along with the recent significant increase in costs due to inflation, energy and food bill pressures along with additional workforce costs.

Benchmarking rates across the southwest highlights that Swindon rates are at the lower end of the range. The rates of the closest four SW local authorities indicates the range paid for residential care is £596 to £878 per week, residential enhanced ranges from £640 to £968 per week and nursing £640 to £1020 per week.

The cost of care median rates below demonstrates a significant difference in fees and it can be assumed that there is an overall likelihood of reliance of providers on the self-funding market. Some of the larger, newer homes are more reliant on self-funders whereas some smaller older homes have proportionately fewer or no self-funders; some with residents who are nearly all council funded residents. There

are therefore a range of business models in Swindon with a lesser or greater reliance on self-funders and their financial sustainability.

The annual fee negotiations for 23/24 have not evidenced the requirement for the level of increases that were suggested through the cost of care exercise. The response from providers to the cost of care exercise was varied, with some smaller providers struggling to understand what was required. This has undermined the accuracy of the outcome of the cost of care exercise. Following the annual fee engagement with providers they have requested uplifts of 9% and 18% for 20/24.

	Fair Cost of Care –Median Rate – minus FNC	Difference	
Residential	£989.79	-£322.61	48%
Nursing	£1,022.38	-£382.35	60%

The link to the published [Annex B](#)

Our annual survey of care homes in March 23 indicates that self-funders purchase 29% of beds in Swindon. To date 15 of the 22 care homes have responded to the survey. All homes in Swindon support council commissioned placements with some homes largely only having residents funded by the Swindon system whilst others have much smaller percentages of commissioned beds. There is a risk that homes will preference self-funders at higher rates so they can increase income and maintain financial stability. This will reduce the ability for commissioners to shape the market to meet changing needs of local residents and could create further challenges managing the market.

Swindon has consistent capacity in the market and approximately 3% of capacity is used by other local authorities, this is often at higher rates than agreed in the local framework and can create challenges for local commissioners both in terms of negotiating fees but also in terms of shaping of the market to meet profiled future demand.

The delay in the charging reform will enable commissioners to have more time to engage with providers to ensure a consistent and supported approach to the cost of care model. Whilst the first national exercise highlighted a significant gap in the actual fee rate paid compared to the fee rate identified by the cost of care exercise, it is the opinion of local commissioners that further engagement work needs to take place with providers to enable a consistent and validated completion of a further cost of care approach. Further work to strengthen a cost of care approach locally will hopefully minimise variance along with achieving a more consistent outcome across all providers across the sector.

A market rate increase of 8% was included in the medium term financial planning by the council for 23/24. This has been possible due to the additional market sustainability grant funding received for 23/2, which allowed for a 2.25% increase in rates across the whole market. From negotiations with the market, it is anticipated the offer will increase to 12%. This will add a further £2m additional financial pressure to the council.

The grant received for 22/23 was passed in full to providers as a one off sum to support through the winter. Due to the lack of confirmation regarding ongoing funding from central government and the pressures for the Council to deliver the medium term financial plan an ongoing commitment to increase funding could not be agreed at the time the grant was released.

Workforce

Whilst providers use agency to ensure workforce sustainability and CQC compliance, they are reporting lower use of agency and improved retention rates. The nurses' recent series of industrial action posed no issues for homes with full coverage maintained. Workforce costs are still the largest component of care home budgets, as highlighted in this year's round of fee rate negotiations.

The cost of agency and continual recruitment campaigns continue to be a challenge for providers. The lead provider for home care has managed a recruitment service [icarecareers](#), which was funded by the council from 2020, this supports Swindon providers and council recruitment. Whilst it was initially successful, aligning to the national recruitment campaign, its impact has significantly reduced and providers report receiving little to no benefit.

Commissioners are working with providers to help address the recruitment challenges by looking towards recruitment from local communities across Swindon and in doing so enable the workforce to be more representative of the communities they serve. The ambition is to create a local workforce that is able to respond to the diversity of resident needs such as language, diet and spiritual beliefs.

A provider with three homes in Swindon has highlighted the success of international recruitment. Following early investment, alongside dedicated resources, the initial cost is starting to be recouped, along with improving the quality and retention of staffing. This learning has been shared across the wider market and will support the southwest ADASS regional international recruitment project.

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

Sufficiency to Supply, Quality and Diversity

Swindon has a ten-year lead provider contract held by First City Nursing Services (FCNS) and jointly commissioned with health to deliver care at home from 2018. There is an in-house reablement service in Swindon that works in tandem with the lead provider to support intermediate care. The lead provider has a brokerage function and monitors quality and performance of the sub-contractors. The lead provider extends its brokerage service to the self-funder market.

CQC Rating	Number of Providers	% of Providers
Outstanding	1	4%
Good	19	73%
Requires Improvement	4	15%

Inadequate	0	0%
Not rated	2	8%

77% of home care providers in Swindon are rated Good or Outstanding. First City Nursing Services (First City) have maintained an outstanding rating since soon after the start of the contract and all but one of their CQC rated subcontractors are rated good or outstanding. There have recently been new small home care providers in Swindon that are not yet rated by CQC.

The lead provider directly delivers approximately 30 – 50% of home care support. This has provided ongoing market stability even when the market is under significant pressure such as during winter with increased demand from the acute hospitals. This also provides additional protections and flexible capacity if a sub-contractor experiences provider failure.

The lead provider has maintained the capacity to meet the demand from both the acute and the community with response times that have averaged between 12 and 48 hours over the term of the contract. There have been no waiting lists for homecare over the contract term, but for single figure exceptions. The exceptions are on the borders with Oxfordshire where it is harder to secure staff who are willing to travel. The lead provider has had some success in working with providers in Oxfordshire to become sub-contractors to support the delivery of these packages, however the small numbers and limited demand pose challenges and a more sustainable solution needs to be co-designed.

The lead provider has contracted with between 13 and 17 sub-contractors over the course of the contract and these have ranged from small local providers to larger national organisations, some of whom operate under a franchise. The lead provider has supported the sustainability of the sub-contractor market and worked closely with the wider market, particularly the providers only supplying to self-funders, to broker processes to ensure the continuity of care on restart packages, in particular on discharge from hospital.

There are 10 providers who provide home care packages to self-funders and work collaboratively with Swindon Borough Council and the lead provider. Several of the self-funder providers are now working to support the lead provider contract being aware of the future charging reforms and the importance of ensuring consistency and quality of services.

Integrated Care Alliance

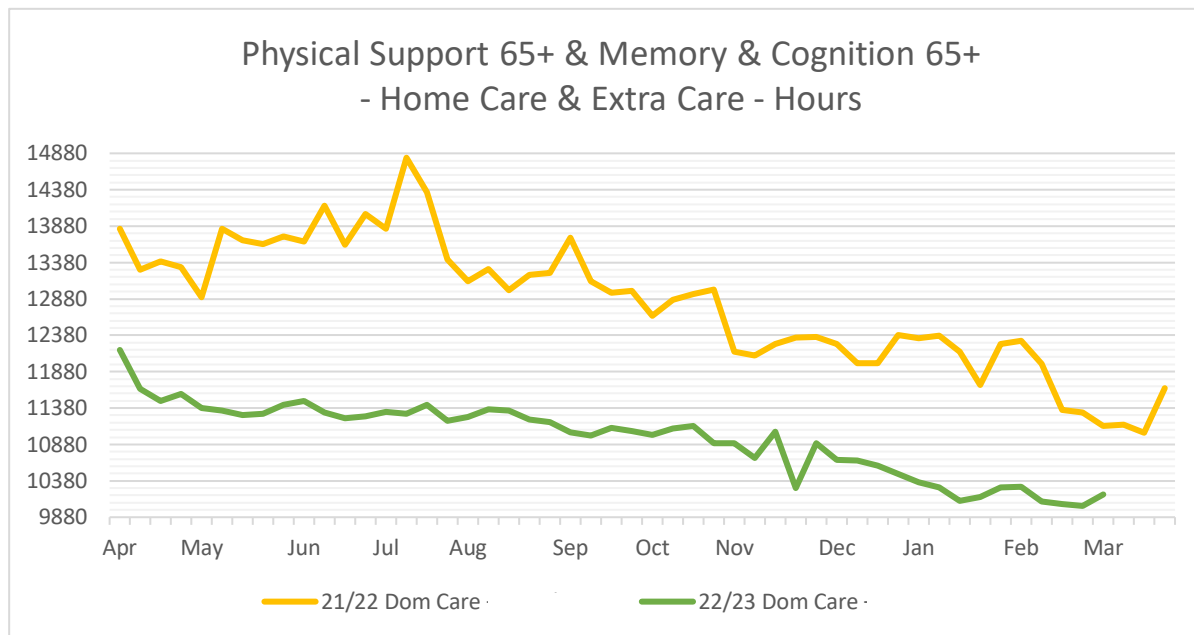
There have been fluctuating demands on the home care market over 2022/2023. At the beginning of April 2022, the demand on the lead provider contract was 12,200 hours, which has gradually reduced over the year. There is significant demand on homecare at the point of discharge from the acute hospital. The introduction of home first discharge model in December 2022 has impacted on homecare demand from the acute hospital and reduced the risk of over prescription. This has resulted in an overall reduction of homecare demand in December 2022 from 10,900 hours to 10,200 in March 23. This has significantly reduced No Criteria To Reside (NCTR) numbers at the hospital and improved outcomes for people being discharged.

The home first discharge model is supported by a multi-agency discharge hub, which includes our homecare lead provider. The hub operates 7 days a week where the lead provider is an integral member included and valued in the decision-making processes.

Workforce

The emerging challenge for the home care providers is not only recruitment and retention, but how to maintain a stable workforce with fluctuating and/or reducing demand. Some sub-contractors are moving to supplying self-funders to support the maintenance of their workforce and the volume of work flowing through their organisations.

The graph below shows a trend of reducing demand for homecare for 65+. The decrease in demand has been brought about as a result of several factors; discharge to assess, changes to charging, winter demand declining and reduction in the covid backlog.



The lead provider has been agile and responsive to meeting ongoing demand, particularly over winter, through increasing the number of sub-contractors, including those with a focus on international recruitment, and by bringing new providers to Swindon. This strategy has been of benefit in meeting winter demand, which peaked in November 2022 at 11,100 hours a week, however this has led to some challenges in the maintenance of continuity of care and support, as First City need to have oversight of an increased number of sub-contractors.

However, the investment in a quality oversight team in the Council will assist in creating a framework for quality that will include the voice of people with lived experience. Commissioners are working with providers, adult social care and people with lived experience and their families/carers to ensure co-production is central to

the design, development and delivery of commissioning and contract management moving forward.

The homecare market in Swindon has been challenged by the high employment rates (75% aged 16 -64). There is competition from retail, warehousing and hospitality businesses in the town that have been through a 'pay rate war' to secure sufficient staff; this has impacted on the home care workforce.

The lead provider has reported an increase of staff leaving the care sector rather than moving or progressing within it. National and local government needs to proactively address the recruitment crisis in care and whilst national recruitment campaigns initially assisted in promoting care as a career, due to lack of funding from central government Swindon has not been able to fund the home care sector to enable it to compete with other businesses across the Borough.

The lead provider and Swindon Borough Council are working together on a proof of concept for assistive technology, which will assist, with the workforce capacity issues along promoting greater choice and control for people who rely on care and support. The full impact and learning from each individualised package of support is being analysed and together with the outputs from the technology research post in Adult Services, will inform the Assistive Technology Strategy and the refresh of the market position statement.

Rates, Cost of Care and Delay to Charging Reform

The lead provider annual uplift is agreed through a series of negotiation meetings including visibility and discussion of open book costings. The lead provider then replicates this with the sub-contractors. The significant cost pressures in the market are staffing costs in line with increases to national living wage, fuel and overhead costs. Providers report profit margins reducing over the year to date.

2018/19 LP Rate	2019/20 LP Rate	2020/21 LP Rate	2022/23 LP Rate
£17.76	£18.20	£19.68	£20.68 increased to £21.00 (July 22)

The rate was increased in July 22 in recognition of the increasing cost of fuel. The increase for 23/24 has been agreed at 12% in recognition of the national living wage and general inflation increases. The medium financial planning of the council could only identify 8% of the uplift needed and therefore this has resulted in a significant financial burden to the council of an additional £1m. This level of pressure on the council's budget is not sustainable year on year.

It is recognised by the lead provider that at this point of the contract they need to review learning, reflect on innovation across care and develop a five-year transformation plan, which will ensure they are able to deliver quality-personalised services within the agreed rate framework. The transformation will also create financial efficiencies and stability as well as align to the council's vision and strategies. The lead provider will pass on the 12% increase to sub-contractors and support them to transform their services and business models.

The Swindon system is supportive of continuing to work with providers to create a consistent and mature approach to working within a cost of care model. Commissioners recognise that this approach is new for local providers and as such needs ongoing support to enable all providers to be confident in using the tool and for commissioners to be confident that it accurately reflects the local market.

This will also enable commissioners to engage with providers to develop and maintain sustainability of services which will support quality and consistency of care along with choice and control enabling people to live safe and independent lives for as long as possible in their own homes. Whilst the lead provider rate is lower than adjacent authorities, Swindon does not have the challenges of rurality and distances that would incur and justify increased rates.

The grant received for 22/23 was passed in full to providers as a one off sum to support through the winter. The council made the decision to treat the grant as one off because at the time without confirmation of on-going funding and due to the ongoing and increasing pressures for the Council in delivering the medium term financial plan no further commitment to extend the funding into 23/24 could be made.

The table below indicates the cost of care comparisons.

	Median Rate Paid	Cost of Care – Median Rate	Difference
Home Care	£21.00 per hour	£28.00 per hour	-£7.00 per hour 25%

The link to the published [Annex B](#)

The annual fee negotiations with providers have not reflected the outcome of the cost of care exercise. The lead provider informed us that they required 15.4% increase, however through open book discussions the fee uplift has been agreed at 12% for 23/24. This has cast doubt on the validity of the national cost of care exercise to accurately reflect the funding and fee position in Swindon.

There is some evidence that some providers are either expanding their services to deliver to both self-funders and council commissioned care or are intending to do so. This will create competition in the market, which may in turn impact on the availability of home care for packages which are commissioned through the council.

The delay in the charging reform will mean that providers will continue to charge self-funders premium rates, which can be up to £10 higher than that paid by the council. There is a risk that the charging reforms could destabilise the market locally if the budget gap is not reduced, however to enable the gap to be reduced additional central government funding would be required

Swindon are supporting the lead provider and the wider self-funder market to consider and plan for the changes ahead which include:

- Charging reform;
- The increasing demands from the acute hospital system to support timely and safe discharge;
- Population increase for over 65s and 80yrs;
- Increase in complexity of health and care needs;
- People's changing expectations of care and the desire to remain living at home.

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

Demographics and Projections

Swindon's JSNA records that of the population of 223,881 16.5% (36,873) are over 65 and increasing to 57,000 by 2040. The life expectancy of males is 80 years and for females 84 years.

The JSNA indicates that 1 in 14 people over 65 and 1 in 6 over 80 are likely to develop dementia. There are currently 2,400 people living with dementia in Swindon at the current time likely to rise to 4,000 by 2040.

Swindon is ranked 98 out of 152 for deprivation with 12 of 132 LSOAs being in the 10% most deprived in England. A female living in a deprived LSOAs can expect to live 8 years less than a female living in more affluent LSOAs in Swindon.

Included in the work of the BSW Academy are predictions for over 80s in Swindon.

1. >80s growth largest in Swindon (against Wiltshire and BANES)
2. In Swindon, the growth in frailty & dementia is below that of the >80 population due to long-term improvements in health.
3. Despite this, Swindon >80 population being the lowest in absolute terms means it has the greatest increase in frailty and dementia cohorts.

The over 80s population in Swindon is forecast to increase by 37% over the next 10 years alongside overall population growth rising by 4%. Swindon's over 80s population are forecast, through the BSW Academy's work, to have an increase of 27% in dementia and 25% in severe frailty.

Whilst life expectancy in Swindon is within average range, the length of time over 65 being in poor health is longer than the national average.

65+ Care Home Market

The data from Housing LIN indicates 45 nursing beds per 1000 population over 75 and 65 residential beds per 1000 population. The table below shows the projected need against the actual numbers of beds using the ONS 2018 population projections. We will complete further modelling in relation to the data predicted below and alongside the shift to increased use of homecare.

	2018	2022	2026	2032
Projected No of People Over 75	15,636	17,912	20,183	23,378
Projected No of Residential Beds Required	1,016	1,164	1,312	1,520
Variance - Actual No of Residential Beds	-622	-770	-918	-1,126
Projected No of Nursing Beds Required	704	806	908	1,052
Variance Against Actual Number of Nursing Beds	-27	-129	-231	-375

As previously referenced the ability of care home providers to understand and complete the national cost of care exercise varied. It is recognised locally that the market will require further training and support for the cost of care exercise to consistently capture costs across the full range of providers. That said commissioners do recognise that even with the discrepancies in the exercise there is a significant gap between actual rates and those identified in the cost of care exercise. This has been further compounded by the notable increases in inflation, food and energy costs. Moreover, the cost of care difference also indicates risk to the sustainability of care homes in Swindon when cross subsidy opportunities are no longer an option. The system has concerns that the combination of pressures will result in providers leaving the market and will lead to increasing demands on A & E and the wider hospital system.

Some providers have reported an intentional change to their business models to attract more self-funders to meet the increase in current costs and to ensure viability of their business model going forward. As yet, this has not been evidenced through the annual occupancy survey. To ensure a sustainable care home market moving forward commissioners are planning incremental increases to fees to try to stabilize the market however additional ongoing funding from central government will be required to achieve this.

The changing profile of need for care home placements to support people with more complex needs such as people with later life dementia needs will require more specialist staff skills and capacity along with environment adjustments. Commissioners will be factoring these developments into the refresh of the market position statement.

The council has a pledge that *“The Council will work in partnership with local businesses, residents and suppliers to develop a proactive carbon reduction agenda that helps the wider Borough of Swindon to reduce their emissions to Net Zero ahead of 2050.”*

The pledge sits under the council's [Carbon Reduction Strategy 2020](#). This will require commissioning to incorporate these targets into commissioning contracts and future plans. The care home estate across Swindon is a mix of new and Victorian build. This again poses significant costs for providers in meeting local and national targets to reduce carbon emissions. Due to the pressures on local authority budg-

ets to meet the fee uplift pressures Swindon looks towards central government either through capital or grant programmes to assist individual providers to be able to meet zero carbon requirements within the necessary timescales.

18+ Home Care Market

As described earlier the home care market is challenged in a variety of ways. Whilst the gap between the cost of care and the current rates are closer in home care, there is still a need to close the gap in advance of the charging reforms. This will ensure sustainability and ongoing continuous improvement to meet the needs and expectations of local residents.

In order to maintain a sustainable market and a range of sub-contractors the lead provider will need to transform the operational model to be more locality based this will reduce travel time and costs. This will result in a carbon reduction benefit for Swindon, which will align with the corporate strategy and targets.

Transformation of home care and the opportunities created by aligning care at home with community health care services will enable the upskilling of the workforce, along with the possibility of creating more integrated support for people, which is able to flex to meet their changing social and health care needs. This in turn could create a pipeline for recruitment into further social care roles.

The benefits of a ten-year contract will facilitate innovation across the duration of the contract, it will enable commissioners to engage with providers and other stakeholders to progress from a time and task approach to one that recognises the aspirations and priorities of the individual and in doing so deliver bespoke personalised support.

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

People at The Heart of Care and the Adult Social Care Reform White Paper provide the vision to support people to have increased choice and control in how their care and support is delivered. Strength based practice, including greater use of personal and community assets, along with greater focus of commissioning at a community level, will support us to meet the needs of an increasing population. This document highlights the importance of people having choice and control over their lives, in recognition of this Swindon intends to develop its commissioning and practice to enable more people to benefit from self- directed support, through direct payments and individual services funds.

Adult Services are in year 2 of a 3-year commitment to work with the National Development Team for Inclusion ([NDTi](#)) to grow and embed strength based practice and community led commissioning in line with the community led support principles. In response to this people will be able to access individual service funds, through a commissioned framework, access personal assistants who have been trained through a commissioned provider and also be involved in co-production and co-design of solutions to meet individual and community needs.

There are four strategic actions for 23/24 to inform place based commissioning moving forward:

1. Market Position Statement,
2. Housing and Care Strategy,
3. Co-production Strategy,
4. Adults Workforce Strategy.

The ICA has three priorities in its delivery plan for 2023/2024, informed by the JSNA.

1. Demand and capacity

- We will build capacity together to reduce length of stay in hospital for those that don't need to be there;
- We will work together to manage front door demand;
- We will shift more investment into prevention
- We will prevent crisis rather than support crisis.
- We will profile and signpost preventative health and care support

2. Care & Quality

- We will focus on early intervention.
- We will provide the right support when it is needed.
- We will ensure transition from child to adult is met.
- We will improve support offers & crisis interventions.
- We will reduce out of area placements
- We will improve autism diagnosis.
- We will develop post diagnostic services
- We will improve outcomes for CYP with SEND.
- We will listen and ensure a person-centered approach.
- We will tackle CYP health inequalities and manage transition.
- We will jointly commission services

3. Community Wellbeing

- We will reduce the life expectancy gap between areas.
- We will encourage healthy weight at reception year by addressing variation.
- We will reduce smoking prevalence in adults by addressing variation.
- We will tackle unequal health outcomes for carers.
- We will ensure carers receive assessments.
- We will support carers to better balance their caring role to protect their health and wellbeing
- We will create an integrated neighbourhood team model.
- We will listen to what neighbourhoods need from local services whilst managing expectation.
- We will deliver accessible and equitable services locally where possible.

The ICA is approaching its second year and developing trust to enable it to work effectively together. The ICA and ICB have good representation of voluntary sector and regulated providers at all levels, including the lead provider for home care. There is an ambition to jointly commission services beyond the existing arrangements for the commissioning of the voluntary sector through the pooled budget in the section 75 agreement. The ICA is currently reviewing how it can further embed an integrated commissioning approach which focuses on the Swindon £ and

how collectively we can maximise the impact of resources to address health inequalities and promote social inclusion.

(a) 65+ care homes market

There is evidence already outlined that the care home market is changing and could be at risk of charging outside of published rates. The continued close working with providers is critical in understanding the ongoing challenges. Swindon as a system is committed to offering above inflation rates in support of market sustainability.

Workforce supply to care homes will be supported and promoted through the ongoing learning and funding for international recruitment. The upskilling of the workforce will be built on through the team around the home/enhanced care framework and supported with training and embedding of further skills, such as RESTORE2/NEWS2, through co-design with providers and their wider organisations.

There will be a need to work with homes to review all of the building stock and the capacity to renovate in response to the changing needs of residents along with zero carbon targets; this too will be completed in collaboration with the care home market.

The care home framework will ensure quality and a co-production with people and communities. It too will fully embrace the voice of people with lived experience and that of providers in the commissioning cycle and further developments.

(b) 18+ domiciliary care market

As indicated above, there will be support of the lead provider to shape a transformative five-year strategy covering the remainder of the contract term.

The workforce development of homecare will be supported through the ongoing learning and implementation of the BSW Academy plan and through the wider Adult Workforce Strategy and plan, which will include that of the wider Adult social care provider workforce.

The BSW Academy has been working across the home care markets in Swindon, Bath and North East Somerset and Wiltshire to understand the delivery models used in each local authority/place, to assess the workforce skills and capacity needed to meet the growth in population and to plan and support a way forward. The current recommendations to be taken forward are;

1. Develop BSW strategic workforce plan
2. Develop client engagement groups for co-production and co-design.
3. Pursue AI and technology innovation to improve client experience, improve workforce productivity
4. Professionalise Care; make it more inclusive, and accessible as a career for people living in our communities

5. To share and evaluate recruitment processes
6. To build a joint locality Induction programme with Skills For Care to provide pastoral support and improve retention
7. To broaden scope; to include Social Workers and Social Worker Associates.
8. Evaluate impact of training secured in 22/23
9. Embed BSW Academy work programmes

The upskilling of staff to meet lower level clinical needs is being scoped with a pilot expected in Swindon this will be delivered in partnership with community health and the lead provider.

Swindon system has increased its rates for 23/24 by 12% for both the care home market and the home care market. This is significantly beyond the planned rate increase of 8%, which was factored into the council's medium term financial plan. The rate increase being paid is not met fully through the funding grant received for 23/24. In order to continue to close the gap on the cost of care and keep at pace with inflation, the council will require an increase in grant funding to have any chance of maintaining a sustainable local care market beyond 2024.