



Report to Cabinet

Date:	4th January 2024
Title:	Adult Social Care Update
Cabinet Member(s):	Councillor Angela Macpherson, Deputy Leader and Cabinet Member Health and Wellbeing
Contact officer:	Craig McArdle
Ward(s) affected:	All wards
Recommendations:	Cabinet is asked to note the latest developments in relation to adult social care both locally and nationally
Reason for decision:	N/A

1. Executive Summary

1.1. This update sets out recent developments in adult social care, both locally and nationally, and plans for the next period. It includes updates on developments since May including the Next Steps to put People at the Heart of Care government White Paper and the findings of the Hewitt Review into Integrated Care Systems.

2. The National Picture

Growing demand on adult social care

- 1.2. Demand for adult social care continues to grow across the country due to rising life expectancy and the changing needs and preferences of service users.
- 1.3. According to NHS Digital, there were almost 2 million requests to councils for adult social care from nearly 1.4 million new service users in 2021-22. This amounts to 5,420 requests per day in England, up by 170 requests per day on the previous year. 58% of these requests came from older people and this is expected to rise by 26.1% in 50 years' time. And this demand is not just for adult social care but its related services - a recent national workforce survey by the Royal College of Occupational Therapists reported increased demand for OT services

within the past 12 months, with service user complexity increasing due to delayed interventions and lack of capacity elsewhere within the system.

- 1.4. Of the £27 billion spent on ASC in England in 2021/22 (up £5 billion from 2014/15) around half is on working-age adults, with the other half on people aged 65 years or over. For older people most spending (65 per cent) is for those who need physical support, while for working-age adults the majority (68 per cent) is for those with learning disabilities.
- 1.5. This demand is compounded by challenges in the social care workforce and pressures on many adult care service providers:
 - Around 1.52 million people worked in the adult social care sector in England in 2022/23, more than in the NHS. Around a quarter of the private sector workforce is on zero-hours contracts, including 54% of home care workers. Care worker pay is among the lowest in the economy in general and is falling behind other sectors such as retail. The March 2023 Care England survey reported that 92% of care providers cited workforce as the key pressure in their organisation.
 - Whilst councils are responsible for assessing people's needs and funding their care, most social care services are delivered by the independent sector, a mix of for-profit companies and charities. The rising costs of providing care (staffing, cost of living etc) is putting pressure on the financial viability of providers and the affordability of care for service users. In March, Care England reported that one third of adult social care providers had considered exiting the market in the previous 12 months.

Care Quality Commission State of Care Report

- 1.6. In October, the Care Quality Commission (CQC) published its latest '[State of Care](#)' report. The report highlighted the challenges faced by the health and care sector and the impact that these are having on people who need support.
- 1.7. The report noted that access to services is an enduring issue with insufficient capacity in adult social care continuing to contribute to delays in discharging people from hospital. Staffing and financial pressures are impacting the quality of people's care, and increasing demand and pressures are affecting staff mental health and wellbeing.

Skills for Care Report

- 1.8. Skills for Care, specialists in adult social care workforce, published its [annual analysis](#) of the adult social care workforce in October. The number of people working in adult social care is estimated at 1.52m, more than the 1.43m in the NHS, with nearly 1.8m posts in the sector. The size of the workforce has remained stable over the past three years but the estimated contribution to the economy has increased by 8.5% from 2021/22, to £55.7bn.

- 1.9. With care workers being added to the Shortage Occupation List and the Health and Care worker visa route, between March 2022 and March 2023 an estimated 70,000 people started roles in the sector through international recruitment.
- 1.10. However, staff turnover remains high at 28.3% during 2022/23 and the sector is particularly challenged in retaining younger staff. With population projections expecting an increase in the number of over 65s from 10.5m to 13.8m between 2020 and 2035, the analysis projects the need for a further 440,000 new posts by 2035.

National policy

- 1.1. Following publication of the Government's [Next Steps to put People at the Heart of Care](#) white paper on adult social care earlier this year, in September the Council submitted a response to the Call for Evidence for the [Older Person's Housing Taskforce](#). The 12-month taskforce is expected to produce interim findings after 6 months.
- 1.2. The Department of Health and Social Care's Call for Evidence to inform a new career pathway for adult social care concluded in May and more information is due to be published by the end of 2023.
- 1.3. No further announcements have been made regarding the delay to implementation of the social care reforms which, in November 2022, were postponed to October 2025.
- 1.4. The Hewitt Review, established in 2022 to review integrated care systems (ICS), published its [report](#) and recommendations to the government in April 2023. The [Government's response](#) confirmed support for integrated care systems and that national targets would be streamlined with the number of national priorities reduced. The Government also agreed to a focus on prevention and confirmed that the Major Conditions Strategy would direct the prevention agenda for ICSs. In addition, a national review is considering expanding the scope of health services that can be covered by pooled budgets.
- 1.5. In November, the Department of Health and Social Care announced the launch of the Accelerating Reform Fund (ARF). The fund will provide £42.6m in grant funding between 2023 and 2025 to support innovation in adult social care. To secure funding, local authorities will need to form consortia with other councils in their integrated care system (ICS) geography. Applications need to relate to projects which will deliver the Government's [priorities for innovation and scaling](#). These 12 priorities relate to choice and control, quality and tailored care, and fairness & accessibility. Buckinghamshire Council is working with Oxfordshire and the Berkshire West authorities to agree projects, one of which is required to focus on unpaid carers.

1.6. An increase in the national living wage (NLW) from £10.42 to £11.44 per hour was announced in the 2023 Autumn Statement. It will also be applied to staff aged 21 and 22. Whilst the pay rise will be welcome for care staff concern has been raised about the impact on providers and the ability of council and NHS commissioners to fund providers sufficiently. The impact of this in Buckinghamshire has been assessed as placing an additional £2m pressure on the adult social care budget.

Care Quality Commission Assurance

1.11. The Health and Care Act 2022 introduced CQC assurance of how councils are discharging their statutory adult social care duties. Councils were last subject to CQC assurance of adult social care in 2010. Buckinghamshire County Council was inspected in 2008 with an outcome of 'good'.

1.12. The CQC has published [interim guidance](#) which sets out its approach to local authority assurance. In August, the government published guidance on the [intervention approach](#) to be applied when a local authority's performance is unsatisfactory. The guidance is broadly similar to interventions in Children's Services, except there is no legislative provision for setting up independent trusts to take over council responsibilities. The approach will be reviewed in April 2024 and local authorities have been invited to contribute to the review.

1.13. The CQC undertook five pilot assessments in summer/autumn 2023. Of the five, four authorities – Birmingham, Lincolnshire, North Lincolnshire and Suffolk – received a 'good' rating. Nottingham Council was rated as 'requires improvement'. Learning from the pilots has been shared and the Council is taking these areas into consideration as it plans for the future inspection in Buckinghamshire:

- the importance of understanding waiting lists
- the experience of carers
- direct payments
- reflecting the needs of all sections of the community
- understanding what providers say about the authority, and
- understanding staff vacancies, including trends.

1.14. Although originally planned for 2023, the CQC is yet to publish the programme of formal assessments. However, the Council is prioritising ongoing preparations to ensure readiness for the future CQC assessment in Buckinghamshire.

1.15. The CQC has a parallel responsibility for assurance of Integrated Care Systems (ICS). It published its [interim guidance for ICS assurance in](#) June 2023. Like local authority assurance, the approach is currently being piloted.

3. Buckinghamshire Health and Social Care Integration

- 1.16. In addition to the statutory integration arrangements that were described in the last 6-month update to Cabinet, local public health and care sector organisations have established the Buckinghamshire Executive Partnership (BEP). The partnership brings together senior executives from the Council, NHS providers and the Integrated Care Board to focus on key priorities and ensure strategic alignment, best use of resources and operational oversight of integrated care across the Buckinghamshire health and care system.
- 1.17. A key element of this work is overseeing delivery of the Buckinghamshire Health and Care Integration programme. The programme's focus is to support speedy discharge when a person is fit to leave hospital and to provide rehabilitation and therapy support to enable people to regain as much of their former independence as possible reduce the likelihood of readmission. There are three core work streams:
- A new model of community-based beds for people who for people who cannot be discharged straight home: Five temporary discharge bed sites have been established in care homes across Buckinghamshire, known as 'Care Home Hubs', together with a new intermediate care centre (Chartridge ward) in Amersham Hospital for people who need intensive rehabilitation.
 - Transfer of Care Hub (ToCH) and Integrated Discharge Team: Social workers and hospital staff are working with individuals and their families on discharge planning, from the point of hospital admission. The new approach provides strong oversight of length of stay and will enable delays to be escalated and dealt with quickly.
 - Trusted Assessors: This is being piloted across the Fremantle Trust Care Homes, the largest care provider in Buckinghamshire. Trusted assessors work with residents admitted to hospital from Fremantle care homes and manage the information flow between the patient, the care home and the ward, to ensure people move through the system quickly and effectively. If the pilot proves effective, the approach will be rolled-out to other care homes.
- 1.18. The impact of these changes are that by winter 2023/24:
- There will be greater capacity in care homes across Buckinghamshire. 140 care home beds have been released through this approach, creating much needed capacity in care homes for residents requiring long-term care.
 - No-one will be waiting in hospital to start their assessment for their long-term care needs (compared to approximately 40 people waiting on any given day in winter last year).
 - Individuals and their families are engaged in planning for their discharge – the new integrated discharge team will ensure the person's views are captured and fed into the decision-making process for their onward care.
 - There will be stronger integrated decision-making at twice-daily meetings of the transfer of care hub, meaning that people have the right plan for onward care after discharge
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- People with complex needs placed in the care home hubs while their assessments are finalised will be there on average 28 days (compared to over 100 days last winter)
- Fewer people will be readmitted to hospital within one month of returning home (10% compared to 15% last year)

1.19. The Better Care Fund pooled budget between the NHS and the Council provides additional opportunities to utilise joint resources for the benefit of local residents. In 2023/24 the fund totals £47,253,000 and is being used to supporting delivering of the integration programme described above and a range of services such as Home from Hospital, dementia support and support to carers through Carers Bucks.

1.20. Primary Care Networks (PCNs) form an important part of the NHS infrastructure at the local level. PCNs are groups of GPs working together with a range of local providers to offer more personalised and co-ordinated health and care to their populations. Adult social care continues to develop close working with the 13 Primary Care Networks which encompass the 47 GP practices in Buckinghamshire. An identified Head of Service leads on engagement with PCNs, considering opportunities to strengthen connections for better outcomes for clients. For example, the social care locality teams are developing links with social prescribers in GP surgeries which can potentially unlock support where an individual does not meet the social care threshold but would benefit from some time-limited low-level support.

4. The Buckinghamshire Care Market

Services

1.21. Buckinghamshire has a diverse care home market. In October 2023, there were 128 care homes in Buckinghamshire, 44 of which provide nursing care. 27% of care homes have less than 10 beds, 52% have 10-60 beds and 21% over 60 beds, and the Council currently commissions beds from 118 care homes. There are also 128 registered locations for community-based support such as supported living, home care and extra care housing.

1.22. Compared with many areas, the care market in Buckinghamshire includes a greater number of smaller and independent providers with less provision delivered by larger national chains. Of the five largest national care home providers, only three operate in Buckinghamshire and have low numbers of local authority clients. This means that many of our providers have a strong local connection but limited organisational infrastructure.

1.23. A key issue for Buckinghamshire quality of provision. The table below show that for both care homes and community care locations, Buckinghamshire providers benchmark lower than both the England and Southeast ADASS averages.



Table 1: Proportion of Care Homes and Community Care Locations Rated Good or Outstanding (October 2023)

Care Homes, Good or Outstanding	%
England	79
Southeast average (ADASS Region)	78
Buckinghamshire	64
Community Care, Good or Outstanding	%
England	63
Southeast average (ADASS Region)	61
Buckinghamshire	46

- 1.24. To tackle this issue, the Council has developed an effective approach to managing the quality of providers in the care market. This includes a working with partners to gather intelligence about providers and proactively engaging with CQC in these discussions, as this organisation is responsible for the registration of providers. As part of the support provided to the market, the Council also provides a training programme for private and voluntary sector partners. Uptake is good and all courses are running at full capacity.
- 1.25. Where there are concerns about a service, the Council may suspend the provider, meaning that no further referrals are made from the authority. Where a suspension is in place, the Council provides tailored input to support improvement. Between August 2022 and August 2023, 30 Buckinghamshire care providers received a suspension. Within that same time period, 17 of these providers showed sufficient improvement for the suspension to be lifted, with the majority of others making good progress with support from the Council. The Council received positive feedback from a number of providers and from the Care Quality Commission.

Workforce

- 1.26. In 2022/23, providers in Buckinghamshire considered recruitment to be in a state of crisis. High vacancies and recruitment challenges made it harder for the Council to source care and competition in a scarce market meant many providers were finding it hard to attract staff.
- 1.27. During 2023/24, providers remain focussed on improving recruitment and retention, including making use of the Government's addition of 'care workers' to the immigration's 'shortage occupation' list where necessary to supplement the local recruitment market. National data ([Skills for Care, July 2023](#)) indicates some improvement in the overall recruitment and retention position across the sector and highlights the role that overseas recruitment has played in bolstering capacity, particularly in home care.

1.28. As with the wider care market, the recruitment and retention of adult social care workers remains a challenge for Buckinghamshire Council. However, a continued and strong focus on implementing a range of initiatives is providing results, with voluntary turnover reducing from 16.4% at the end of 2022/23 to 13.3% in June 2023. This compares well with the Council's corporate target of 12-16%. The 'grow-our-own' approach to support career development for staff is also slowly reducing reliance on more costly agency workers and six new staff members have been recruited following the launch of the 'Return to Social Work' programme in June 2023.

Development of housing and accommodation to meet Buckinghamshire's needs

- 1.29. The Council has undertaken a market analysis for accommodation-based adult social care provision over the next 20 years, which is being used to develop longer term approaches to developing the market. A workshop with local care providers looked at responding to the changes in demand, which include:
- A likely reduction in the need for standard residential care, but a growing need for care beds for dementia, nursing and managing increasing complexity.
 - An expected increase in the need for supported accommodation for people with learning disability and/or autism and accommodation for people with poor mental health. Ideally this increased demand could be addressed by making better use of mainstream housing where appropriate.
 - An expected increase in demand for home care. With a local and national drive to enable people to live in their own homes for longer, having a stable home care market will be a vital element of Buckinghamshire's health and care provision.
- 1.30. One area being explored is the potential of expanding the currently small Shared Lives scheme in Buckinghamshire. Similar to foster care for children and young people, Shared Lives is an approach by which, rather than being supported in an institution, people with care needs are supported in a homely environment by a carer and their family. This approach has been shown not just to improve the lives of those with care needs, but also those of the hosts.
- 1.31. A cross-council Specialist Accommodation Group has been established to bring housing, planning and property specialists together with children's and adult social care services, to co-ordinate internal strategies and opportunities to expand accommodation-based services in line with need.

5. Buckinghamshire Council Adult Social Care Service

- 1.32. The Council's [Better Lives Strategy](#) is the framework for the transformation and delivery of adult social care services in Buckinghamshire. Aiming to reduce the number of people needing long-term services by enabling more people to live independently at home, this approach is a vital element in helping improve long-term outcomes for residents.

1.33. It is increasingly important that people are able to find the right advice at the right time and many residents use the Care Advice Bucks (CAB) webpages on the Council's website. Between June and August 2023, 5,486 visits were made to the pages, of which just over 3,350 were from new visitors, a 58% increase in visits. However, feedback is regularly monitored and, with interested residents, the Council is reviewing and revising the pages to ensure the content continues to be accessible and relevant to residents' questions.

Demand for adult social care in Buckinghamshire

1.34. Continuing to mirror the national trend, and despite the success of the Better Lives approach, demand for adult social care services in Buckinghamshire is increasing. Between April 2021 and October 2023 the number of long-term clients in residential and nursing care increased from 1,380 to 1,505. Over the same period, the number of people helped through home care, direct payments, day opportunities and clients in supported living accommodation rose from 3,530 to 3,992.

1.35. Approximately 3,400 contacts are received by adult social care each month, totalling 40,000 contacts each year. This is a significant increase since 2020/21 when the council received an average of 2,090 contacts per quarter. Of the contacts in 2023/24 from people not receiving services from adult social care:

- 65% were supported with information and advice (tier 1 of the Better Lives Strategy)
- 28% received universal or reablement services (tier 2 of the Better Lives Strategy)
- 7% entered long term support (tier 3 of the Better Lives Strategy)

1.36. This increasing demand on long-term services translates directly into pressure on the Council's budget. The top drivers of this are:

- Increases due to demographic growth and an ageing population
- Increases in the number of people who have been funding their own care but who have depleted their funds, and
- Increase in the cost of new packages of care due to inflationary pressures on care providers.

Safeguarding

1.37. A significant area of demand into adult social care relates to the number of safeguarding referrals. During 2022/2023 Adult Social Care received 12,124 safeguarding concerns (an increase of 702 from 2021/2022). In 2023/24, the referrals represent a 9% increase on 2022/23 and accounted for 38% of all contacts in August.

1.38. Benchmarking indicates that the Council receives almost double the number of safeguarding concerns compared with the average for Southeast councils. As only approximately 15% of

these referrals progress to a formal safeguarding enquiry, priority work is taking place to reduce the number of inappropriate referrals from partner agencies. This includes looking at what happens in other authorities in the local area and reviewing our approach at the adult social care 'front door'. The work will ensure the Council's delivers timely responses to those most at risk.

- 1.39. Despite the high level of safeguarding referrals, the systems and processes put in place during 2022 have improved the timeliness of responses, with 75% of safeguarding eligibility decisions made within 48 hours in 2023/24. The Council's performance in relation to reducing or removing risks for individuals is comparable with other local authorities.

Co-production

- 1.40. Working with service users, a co-production framework has been introduced within adult social care. The approach was developed through direct engagement with service users and residents as well as learning from complaints and compliments and other sources of feedback. Service users are currently helping to re-shape the care assessment and review process and 'co-production champions' in teams will be used to embed co-production across services.

Autism Strategy

- 1.41. Following the launch of the new national autism strategy, the Council has been working with partners, including Talkback UK, to develop an all-age autism strategy for Buckinghamshire.
- 1.42. Talkback UK, an autism and learning disability charity, held surveys and a series of workshops for people with autism and their carers and family members to inform the strategy. The Council also ran an open consultation, receiving over 350 responses. All of the feedback has been used to shape the strategy and its associated action plan. Detailed information on the feedback is [here](#).
- 1.43. The new strategy will have 5 priorities which will be delivered through a multi-agency group and action plan:
- improving awareness and understanding of autism
 - tackling health and care inequalities
 - developing a needs-based approach – so that autistic children and young people get the best start in life
 - developing better support for employment and meaningful activities
 - ensuring more autistic adults maintain their independence.

Adult Social Care Improvement programme

- 1.44. The adult social care improvement programme is key to delivering the outcomes of the Better Lives Strategy. The programme is currently delivering five major projects:

- Community prevention: improving the provision of community-based prevention services to delay or prevent needs escalating, and reduce the number of people contacting the Council where no statutory care support is required
- Enablement and reablement: reducing the number of avoidable hospital admissions and providing effective short-term interventions to help people regain their independence
- Community opportunities: maximising the use of the Council's day centre buildings and improving the offer of community opportunities for adults with learning disabilities
- Better homes: increasing housing available in the county to meet the needs of adult social care clients and reduce demand triggered as a result of unsuitable housing
- Transport: reduce the need for Council-commissioned transport where better value alternatives exist for the client and the Council.

1.45. In addition, a set of continuous improvement projects are under way, monitored as part of the improvement programme. These include CQC assurance preparation, support for carers, hospital discharge, transitions between children's and adult social care, and direct payments.

1.46. A number of projects in the improvement programme provide opportunities to deliver savings, which will be built into the future savings programme for adult social care.

6. Compliments and Complaints

1.47. Between April and November 2023, adult social care received 151 compliments about its services. This compares with 42 statutory complaints and a further 41 concerns which were resolved informally. The complaints primarily related to delays, challenges to decisions made and funding. The average response time for responding to complaints is 21 days, below the 28 day standard for the organisation.

1.48. The senior management team regularly monitors compliments and complaints to ensure that all improvements needed are embedded within services.

7. Financial Performance

1.49. At the end of quarter 2 of the current financial year, adult social care was projecting a year end overspend of £3.3m on a £185.0m budget. This represents a 1.8% overspend. This position includes the delivery of savings and portfolio actions plans of £7m.

1.50. This adverse variance mainly relates to growth in care packages carried forward from 22/23 which was above the budget agreed by Council. This was due to a combination of factors including the impact of closure of discharge-to-assess (D2A) beds at the end of 2022/23, which was difficult to quantify at the time, winter pressures, and the number of self-funders who approach the Council as funds run out.

1.51. During recent years, pressure on the NHS has resulted in people being moved from hospital into residential care settings on a temporary basis to release much-needed hospital beds.

Where people are able to access therapy during this time, they are supported to regain their independence. Unfortunately, many people were unable to access the right support at the right time, due to lack of available therapy & reablement support, and became deconditioned to the point that returning home was no longer an option. The long-term costs of these placements has put additional pressure on the adult social care budget.

1.52. Self-funders with depleted funds have risen from 6% in 22-23 to 9% in 23-24 in residential care settings and from 4% in 22-23 to 10% in 23-24 in nursing care settings. Provision has been made in the Council's medium term financial plan to address these baseline pressures.

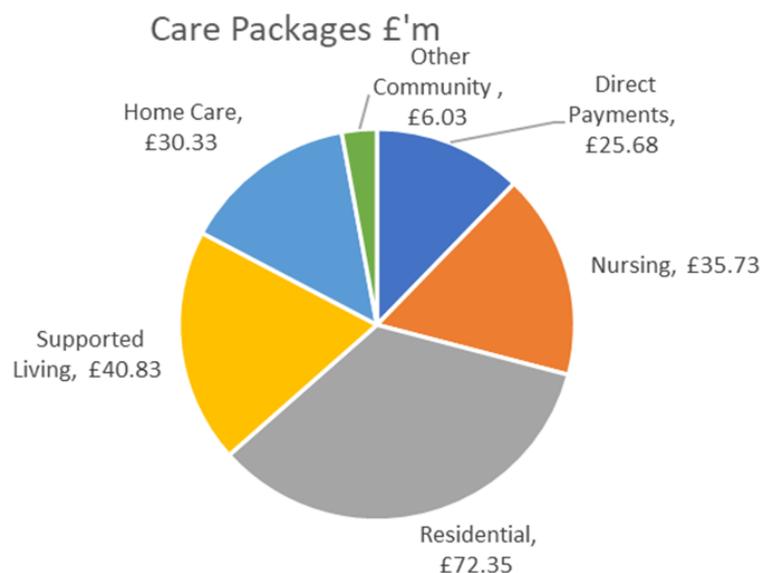
1.53. Demand for services since April continues to outstrip the budget for growth. The adverse variance has reduced since quarter 1 due to eligible grant expenditure, and the increased delivery of savings and the portfolio action plan.

1.54. Detailed mitigations include:

- Weekly monitoring of spend, which is currently in line with the revised growth forecast.
- Bi-weekly tracking of management actions by the senior management team within adult social care. So far actions have overdelivered existing savings by £1.3m as well as the portfolio action plan of £1.1m
- Revising the Scheme of Delegation. Thresholds for authorisation have been lowered to provide greater management oversight of packages of care.

1.55. Although progress is being made, there are still significant risks associated with the adult social care budget, including further increases in demand, provider failure and inflationary pressures.

1.56. The vast majority of the adult social care budget is spent on the cost of social care for residents as illustrated in the chart below:



8. Other Options Considered

8.1. N/A

9. Legal and Financial Implications

9.1. There are no legal and financial implications as this report is for information only. The Director has read and approved the report.

10. Corporate Implications

1.1. Adult social care services are a statutory service and also support the Council's delivery of its corporate plan priority of 'Protecting the Vulnerable.' The update provided has identified implications for the Council.

11. Local Councillors & Community Boards Consultation & Views

1.2. This report does not require consultation with local councillors or Community Boards.

12. Communication, Engagement & Further Consultation

1.3. No specific communication or engagement is required in relation to this report.

13. Next steps and review

13.1. N/A

14. Background papers

14.1. N/A

15. Your questions and views (for key decisions)

If you have any questions about the matters contained in this report, please get in touch with the author of this report. If you have any views that you would like the cabinet member to consider, please inform the democratic services team. This can be done by email to democracy@buckinghamshire.gov.uk.

