



# Market Sustainability Plan - London Borough Tower Hamlets

London Borough of Tower Hamlets

01/03/2023



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

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

#### Market overview

Tower Hamlets spends £13.5 million on residential/nursing care placements per annum.

There are currently approximately 380 Service Users in residential/nursing care placements.

The latest ASCOF data shows the people aged 65+ moving to residential/nursing care in 2020/21 was recorded as 317 per 100,000, which is lower than the London rate of 371. Tower Hamlets has a young age profile. It is the only local authority area where less than 6 per cent of residents are aged 65+ compared to 12 per cent in London and 18 per cent in England.

The council currently commissions from five residential Providers which offer support to 65+ age group, two of which offer nursing provision and four of which are large scale Providers. The council also procures a significant number of out of borough placements (47 per cent). Residential Care occupancy levels are running at comparatively high rates at 87 per cent and nursing at 80 per cent.

These figures demonstrate that local market capacity is an increasing issue for the council and there is limited choice for residents. The council is currently updating its Housing and Care Strategy to look at care estate needs over the next 10 years and beyond to address these issues.

The council is also in close dialogue with other neighbouring Boroughs over future residential care provision as Tower Hamlets is a small geography and there may be benefits in looking at these market sufficiency challenges on a sub-regional basis. Land prices are high in the council's area which can deter new entrants.

#### Current Service Arrangements

The council holds a block contract with one Provider for 58 beds, which provides the lowest placement rate and equates to only £1.992m per annum (15 per cent of spend). The remainder of placements are spot placements, equating to spending of £11.554m per annum (85 per cent of spend).

During 2022/23 an additional residential Care Home offering 41 places has increased local capacity.

The council has little intelligence on the current known self-funder market in its area. The level of self-funders is comparatively low and are estimated to make up 11 per cent of the residential 65+ market. It is not expected that this group currently have a significant impact on the local market prices or capacity.

## Key Market Risks

There are a range of emergent market challenges that will need careful attention and management:

**Workforce and Cost of Living Increases** - Staffing costs represent the single highest cost to Residential Care Providers. All Providers expect operating costs to increase in the short term with significant pressures arising from food, energy, and staff costs in the context of the pressures arising from the cost-of-living crisis. The staff vacancy rate in Tower Hamlets nursing and residential provision was recorded as just under 13 per cent (2020/21) representing 50 jobs.

**Unit Costs** - The council received Fair Cost of Care Returns (FCOC) from 4 of the 5 Commissioned Providers (80 per cent). The council has carefully considered and analysed these returns. FCOC returns suggest an extra £213 per week (30 per cent) to sustainably fund for Residential Care and an extra £143 (19 per cent) per week for Nursing Care. This equates to a potential cost pressure of £4.0m per annum at 2022/23 prices.

There is notable cost variance between the maximum and minimum costs submitted across commissioned residential provision, which seems to indicate very significant variability in the running costs of different Providers.

Comparisons of costs with other neighbouring London Boroughs suggest the council is also paying significantly more than other councils. This may be a result of market dynamics of higher operating costs within the Borough.

**Quality** - There are some quality risks identified within this market with 2 of the 5 Providers rated by CQC as 'Requires Improvement'. ASCOF adult social care related quality of life score sits at the London average. There have been a number of safeguarding concerns raised within residential provision and together with the supply side challenges identified above this is an ongoing challenge and concern for the council.

**Culturally Appropriate Provision** - Residential and Nursing Care Homes must be able to provide services that are appropriate to the ethnic diversity and population profile of Tower Hamlets. The Borough's social care workforce has a large under representation of White British ethnicity in comparison to the individuals it supports and in relation to the population of the borough, 2 per cent of the workforce are White British when they make up 28 per cent of service users and 45 per cent of the borough. There is some over representation in the Black ethnicity, with a Somali workforce making up half of this figure at 11 per cent, with 3 per cent of people who use services Somali. The Borough's care workforce has a large representation of Asian ethnic background, with Bangladeshi making up 75 per cent of the Asian workforce and 39 per cent of service users. There is also an under representation of male carers.

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

## Market overview

Tower Hamlets spends approximately £33.8m (p9 forecast – December 2022) per annum on Homecare packages (excluding s75 funding). There are approximately 2,000 adult service users with Homecare packages per annum. Approximately 83 per

cent is spent with commissioned providers and 17 per cent with non-commissioned providers.

Over 80 per cent of all social care support packages in Tower Hamlets are for Homecare which is significantly higher than the London average (67 per cent). This reflects the council's Adult Social Care Strategy which places a strong emphasis on independent living and staying at home where possible. It may also reflect the high level of need in the Borough due to deprivation, leading to people developing long-term conditions under 65, compared to more affluent areas.

There are currently 47 CQC registered homecare providers registered in the Borough. There are 5 commissioned providers of homecare, one working on a specialist cross-Borough services lot and a further 4 across locality lots. Other Providers provide support which is purchased on spot arrangements. There are a significant number of other smaller providers of extra care or live-in care. Not all the Registered Providers deliver services in the Borough, with some providing specialist services outside the Borough, such as live-in care.

There is limited market intelligence on the self-funder market. However, this is not thought to have a significant impact on the local market as the self-funder population is thought to be low and estimated to represent less than 15 per cent of the local market.

## Current Service Arrangements

The current commissioned Homecare arrangements are delivered on a locality model (4 localities) across the Borough. Each locality is covered by two Providers. The Borough implemented a Place Based Model in 2018, with integrated care teams operating within each locality, alongside services delivering across the Borough. This has facilitated the development of strong and effective partnership working. Homecare providers are expected to work strategically with the Borough as a full partner to meet service user outcomes. The current service delivery model is traditional with care packages defined by the council and allocated to providers based on the delivery of specified time-units to meet the needs of Service Users.

However, there are plans to transform and change this approach to an outcomes-based care and support plan in future years.

The ethnic diversity of the Tower Hamlets population means providers must have the appropriate understanding and language skills to provide an effective service.

The council is currently in the process of re-procuring its homecare arrangements and is making a number of significant and ambitious changes that seek to improve market sustainability (these are discussed in more detail in Section 3 of this plan) and outcomes for Residents. The council believe that there is currently a strong and competitive marketplace for homecare operating within the Borough. This is evidenced through a previously withdrawn re-procurement process in 2022, where the council had over 83 homecare Providers responding to the tender. This included numerous agencies registered in the Borough.

## Key Market Risks

There are a range of emergent market challenges that will need careful attention and management:

**Workforce and Cost of Living increases** - Workforce costs are the largest single cost to Homecare Providers. The steady rise in inflation is impacting on the local market; the uncertainty resulting from rising inflation presents a challenging financial and sustainability risk for the council and providers, impacting operational, staff and travel costs. The vacancy rate was 7.4 per cent for direct care roles (2020/21) representing 300 jobs and market dialogue suggests an increasing challenge, which has been confirmed by informal conversations with commissioned Providers who report recruitment challenges for both office and frontline staff roles.

**Unit costs** - The council has received FCOC returns from 4 of the 5 commissioned Providers and 6 spot providers of varying sizes (representing 25 per cent of the local Providers, or 80 per cent of the larger Homecare Providers). These suggest a 19 per cent uplift (or £3.65 per hour) in current rates is required to deliver a fairer cost of care. This equates to a potential cost pressure of £6.3m per annum at 2022/23 prices.

**Quality** - There have been significant quality challenges within the current market with a number of Providers de-commissioned over the course of the last contract (since 2017).

**Spot Purchasing** - Whilst the vast majority of Homecare commissioned hours (28,700 per week) are supported by the current contract, there was an estimated 3,400hrs/week of spot purchased hours (about 50 per cent in the area of Learning Disabilities) which the council is seeking to address in the new Homecare contract.

**D2A** - There is a current trend that individuals who come through the D2A pathway are provided with some of the highest costs of care. This is due to the increased complexity of care and support required on discharge, primarily 2-1 and 24-hour support care packages. These are currently being subsidised by s75 Integrated Discharge Hub Funding from the ICB, which currently amounts to a projected £2.47m spend in 2022/23, based on current discharges. However, this is one-off funding and will not be available from 2023/24 onwards, creating a risk to the sustainability of these care packages moving forward.

There has also been a trend towards very substantial packages of care including 24-hour packages of care which has resulted in a substantial financial impact to the council.

For this reason, the council has negotiated significantly reduced prices for all current 24-hour packages and will do so for all future packages until the forthcoming homecare contracts commence in December 2023.

### **Inflationary pressures**

Like many other local authorities, the current inflationary pressures have caused providers to seek further efficiencies. In addition, there has been one request for an in-year uplift based on the provider's uncommonly low hourly rate, while most other providers have been awaiting the council's decision on how to apportion the fair cost of care grant. Tower Hamlets is an ethical care charter signatory as well as a London Living Wage council. Within the current homecare contracts is an annual uplift based on the increase in the London Living wage plus 11 per cent oncosts. The new hourly fees reflecting the 90p increase in the London Living Wage will take effect from April 2023. In-year apportioning of a one-off payment to commissioned providers of the market sustainability grant will be issued before the end of Q4 2022/23.

## **Provider Issues Raised in Engagement**

Over the last few years there has been a significant rise in the number of care worker staff who work for multiple homecare agencies. The phasing out of block contracts in favour of hourly payments, often leads staff to have less than expected hours due, for example, to the cared for person suddenly going into hospital or dying. To ensure staff meet their required weekly hours and have the security of constant work, they have therefore signed up with multiple agencies.

This has led providers having issues of workforce supply. This in turn causes providers to be less efficient in rostering, increasing travelling time between visits. Rather than working in a particular region for one provider, staff are often working borough wide for multiple providers. Providers estimate that between 20 per cent and 60 per cent of their staff work for multiple agencies. This has caused providers to often have to double the amount of care staff to provide the same number of hours covered, compared to previous arrangements when the majority of staff were deployed full-time. In turn this leads to an increase in training and supervision costs.

Post COVID pandemic, staffing recruitment has become more difficult. More staff are looking for part-time work, often around the same times. People often see care work as something they can do part time to supplement their income, rather than as a full-time career. Providers stated that they have noticed recently they are recruiting care staff without any experience, meaning that they have to invest increased resources and training to meet the providers' care worker requirements.

Most providers have different forms of incentives in order to retain staff, including financial and non-financial benefits. However, the situation remains difficult. With increasingly complex care packages, staff and individuals are often attracted to other roles e.g., service industry or warehouse work which pay similar rates. Additionally, providers are under additional financial pressure with indirect costs increasing e.g., insurance and the end of free PPE funding.

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

### **Residential and Nursing Care Home Market**

The council has carried out a thorough analysis of changing demand over the next 3 years as part of its MTFP, including the likely impact of the Care Reforms. This includes growth anticipated by:

- Population growth and resultant additional service user financial implications
- Changes as a result of the changes to D2A funding
- Changes as a result of the Care Reforms: Fair Cost of Care and Charging reforms including Section 18 (3); and
- Cost of living increases/indexation.

<b>Additional spend per annum due to demography and funding changes</b>	<b>2022-23</b>	<b>2023-24</b>	<b>2024-25</b>	<b>2025-26</b>
Population growth 65+ age group - per cent increase on 2022-23		4.2 per cent	8.3 per cent	12.2 per cent
Population growth - financial impact on 65+ Residential and Nursing Care Homes		£612,645	£1,035,657	£1,648,302
Changes to D2A funding - financial impact on 65+ Residential and Nursing Care Homes		£191,572	£363,986	£519,159
	-	<b>£804,217</b>	<b>£1,399,643</b>	<b>£2,167,461</b>

<b>Additional spend per annum against Market Sustainability and FCOC Grant</b>	<b>2022-23</b>	<b>2023-24</b>	<b>2024-25</b>	<b>2025-26</b>
FCOC uplifts - financial impact on 65+ Residential and Nursing Care Homes	£4,038,201	£4,220,830	£4,398,325	£4,627,210
Charging reforms incl. Section 18(3) - financial impact on 65+ Residential and Nursing Care Homes	-	£62,195	£199,024	£62,195
	<b>£4,038,201</b>	<b>£4,283,025</b>	<b>£4,597,349</b>	<b>£4,689,405</b>

## Homecare Market

The council has completed a thorough analysis of changing demand for Homecare over the next 3 years as part of its Medium-Term Financial Plan (MTFP), including the likely impact of the Care Reforms. This includes analysis of anticipated:

- Population growth and resultant additional service user financial implications
- Changes because of the changes to D2A funding
- Changes as a result of the Care Reforms: Fair Cost of Care and Charging reforms including Section 18 (3); and
- Cost of living increases/indexation.



<b>Additional spend per annum due to demography and funding changes</b>	<b>2022-23</b>	<b>2023-24</b>	<b>2024-25</b>	<b>2025-26</b>
Population growth 18+ age group - per cent increase on 2022-23		1.6 per cent	3.0 per cent	4.3 per cent
Population growth - financial impact on 18+ Homecare		£1,081,090	£1,831,196	£2,666,508
Changes to D2A funding - financial impact on 18+ Homecare		£2,466,427	£4,686,212	£6,684,018
Transitions - financial impact on 18+ Homecare		£470,020	£978,682	£1,527,867
	-	<b>£4,017,537</b>	<b>£7,496,089</b>	<b>£10,878,393</b>

<b>Additional spend per annum against Market Sustainability and FCOC Grant</b>	<b>2022-23</b>	<b>2023-24</b>	<b>2024-25</b>	<b>2025-26</b>
FCOC uplifts - financial impact on 18+ Homecare	£6,207,312	£6,408,329	£6,547,804	£6,703,122
Charging reforms inc. Section 18(3) - financial impact on 18+ Homecare				£444,079
	<b>£6,207,312</b>	<b>£6,408,329</b>	<b>£6,547,804</b>	<b>£7,147,201</b>

### Cost of living increases

In addition, the market is currently subject to high inflation levels. The largest cost in homecare is staffing. The London Living Wage for 2023/23 will rise by 8.14 per cent from £11.05 and hour to £11.95. However, some providers have also considered the need for an interim increase in pay rates. These are all expected to exceed the council's 2023/24 budget provision for contract inflation.

### Funding impact

There is a significant gap between the additional spend that would be required to move towards the calculated Fair Cost of Care and the funding available through the Market Sustainability and Improvement Fund. The delay to charging reform means that the additional costs associated with operation of the charging reforms, which are outside the scope of the Market Sustainability and Improvement Fund, begin to impact from 2025/26.

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

### (a) 65+ Residential and Nursing Care Homes market

The councils strategic intention is to move away from an historic overreliance on residential based care packages, in line with its strategic intentions to support people to live independently, by investing in other models of care and supporting people to live independently at home where possible.

The council is actively developing its future market strategy for bed-based care and expects the new strategy to be in place by April 2023. This new strategy will seek to directly tackle the market sustainability issues and risks outlined above. Key changes are likely to include:

**Paying a fairer cost of care** - The council understands the cost pressures arising from the FCOC work and is in the process of reviewing funding arrangements and has set out a funding plan below. This funding plan will seek to provide an increase in the weekly prices the council pays for Residential and Nursing Care, in line with its local approach to market contracting. The council believes that this is a major step towards delivering a fairer and consistent cost of care for this market which provides high quality services in Borough.

**Sustainable workforce** - Strategy work on Housing with Care will address approaches to a sustainable and well-supported workforce, looking at training, development, progression and working with Providers at values-based approaches to attracting and retaining new entrants. This is a critical area of concern for the council at present and over the medium to long term.

**Addressing the mix of bed-based provision in the care estate** - The council fully expects that the trend over the last 12 months and the strategic imperative to keep people living independently is likely to mean that the council will continue to develop supported living, extra care and Shared Lives options and investment to support people in the community. There will be ongoing developments in support to enable people to live in their own homes such as DFGs, assistive technology, reablement and support for informal carers. However, the strategy work will also consider the future requirements for Residential and Nursing Care. It is also likely that there will be increasing joint planning with neighbouring authorities to seek to ensure that sub-regional provision meets forecast care needs.

**New market models** - The council will be bringing a number of new bed-based care contracts to market over the next two years and will seek to introduce a range of new market models which should help Providers to innovate, take more control of their cost base and to improve efficiency as well as providing new benefits to Residents. This is likely to include:

- grouping and/or extending contract lengths to provide better market opportunity and income stream certainty;
- moving to coproduced and outcome-based contracts;

- working with Providers to drive up quality of service, develop capacity and seeking to ensure fair pay and career development opportunities for carers;
- introduction of payment incentives to align Providers and council objectives;
- using technology more effectively to improve the efficiency of delivery models;
- working more closely and collaborative with Providers and using “open book” accounting to increase transparency and partnership working.

Engagement with our in-borough care home providers took place during March 2023, their feedback indicated:

## Workforce

Providers have established workforce recruitment, development and retention initiatives, however support to facilitate and increase international recruitment would be supported. Tower Hamlets will be making a North East London (NEL) wide partnership bid (led by the London Borough of Havering) on behalf of all ASC providers in this sub region. This will include a request for funding for an education, training, induction, and social integration programme to ensure that any workers are equipped to manage their new life in the UK and understand how ASC operates here.

## Training

Providers appreciate the training that the local authority providers. A suggestion is that training is provided on site at the care home, this would enable providers to manage staff cover, minimising the need for agency cover.

Providers also suggested that the council could directly employ a dedicated trainer who could provider train the trainer expertise to care home management and deliver tailored training.

The council will continue to promote and support care homes to develop their care home managers core competencies by encouraging participation in the My Home Life programme or other similar programmes will investigate the potential for this to support our in-borough care homes in sustaining quality in care.

## Quality improvement

Providers understand the need for contract monitoring, however on-site meetings that are collaborative to discuss issues and inform working practices between the council and the care homes will take place in addition to this.

### **(a) 18+ domiciliary care market**

The council is actively adapting its approach to Homecare and the new contract is expected to be awarded towards the end of 2023. This new contract has been developed to enable the councils strategic intention to support individuals' independence and stay at home for as long as possible. The new Homecare arrangements seek to directly tackle the market sustainability issues previously outlined. Key changes include:

**Paying a fairer cost of care** - The proposed new Homecare arrangements will substantially increase the price the council pays for standard and specialist Homecare services to support its ambition to shift towards promoting independence and helping people to live at home. The council understands the cost pressures arising from the FCOC work and is in the process of reviewing funding arrangements and has set out a funding plan below. This funding plan will seek to provide an increase in the hourly prices the council pays for Homecare. The council believes that this is a major step towards a fairer cost of care. This approach has been viewed positively by the market.

**Improving market opportunities** - The council has also made important changes to the Homecare delivery model, extending the number of providers operating in each locality from 2 to 4 and setting up a DPS which will allow for small and medium size providers to be onboarded over the course of the contract. The council believes these changes provide greater local market opportunity.

In 2023 we intend to issue a tender for a new model of homecare which is planned to improve the quality of homecare to service users while at the same time providing a model which supports the local homecare market. With this aim the tender will set standard hourly prices for general, specialist and overnight support, increase the number of small and medium size local providers as well as increase the minimum contracted hours homecare providers are required to offer homecare workers. Finally, while there will be a framework for 80 per cent of the packages, a DPS will be set up for the remaining 20 per cent of the packages, thereby formalising the current use of spot purchase packages and allowing for increased control and monitoring.

**Higher quality provision for service users with learning disabilities, mental health and complex medical needs** - The new contract proposes requirements of higher levels of training for Providers in relation to service provision for people with learning disabilities and mental health need. The number of service users with complex medical needs is growing, which is projected to continue. The new arrangements require providers to offer safe and effective services to people with these needs, potentially using nursing staff.

**Assisting Providers to innovate and improve operational efficiency** - The council is moving to a coproduced monitoring framework. The council is also committed to looking at how technology can improve the efficiency of service delivery including the more effective use of assistive technology. This provides the opportunity for Providers to take more control of their cost base and to enable efficiency improvements, to work collaboratively with other Providers and community organisations as well as providing the potential to deliver better outcomes for Residents.

**Improving partnership working and transparency** - The council continues to place importance on developing partnerships with and has developed plans for greater collaboration. Specific measures include a commitment to “open book” accounting and a Provider development programme. The council has also recently changed Provider payment processes to seek to ensure a more transparent and consistent payment regime.

**Attracting & Retaining staff** - The council is committed to redefining its relationship with Providers and providing an exciting working environment for care workers. The new specification retains the requirements for Providers to be fully signed up to the ethical charter to ensure that carers are paid the London Living Wage as a minimum. Providers face a competitive recruitment market against other sectors which needs to

be considered ongoing. The contract also enables Providers to work in more person centred and strengths-based ways, with broader specialisms and greater links with community-based organisations.

Tower Hamlets has co-produced with internal and external stakeholders Tower Hamlets Together: Health and Social Care Workforce Strategy 2021-2024. The aim of the strategy is to address significant shortages in key roles across the NHS and social care. To meet rising demand as our population grows and their health needs become more complex, more people are needed to work in our local health and care system and retention levels improved. The high-level priorities of the strategy are:

1. Improve Capacity and Supply
2. Commitment to ensuring Equality, Diversity and Inclusion
3. Leadership and Organisational Development
4. Enabling Systems Working

In addition, we will maintain our adherence to the Ethical Care Charter and ensure all providers (both contracted and non-contracted) pay the London Living Wage.

**Other linked Tower Hamlets projects:** A workstream of the Adult Social Care Transformation Programme (ASCTP) is the Technology Enabled Care project. It's first priority is technology for people who need social care, to support people to maintain their independence and using technology to achieve their goals. One of the outputs of this priority is to delay the individuals' need for homecare, thereby maintaining their independence while allowing the council to better manage budgets. Two other projects within the ASCTP are Information, advice and early help and Direct Payments, in relation to homecare these projects will allow providers to advertise themselves on the Tower Hamlets Connect website, allowing individuals to purchase services via direct payments or self-funding.

### **(a) & (b) Funding Plan for Residential/Nursing and Homecare Markets**

The results of the Fair Cost of Care exercise points to a major cost increase on the current rates paid by the council of an additional £10.3m per annum. The councils grant allocation to support the move towards a Fairer Cost of Care is currently indicated at £3.662m per annum, which leads to a £6.638m funding gap each year.

#### **Firm funding plan for 2022/23**

A minimum of 75 per cent of the Market Sustainability and Fair Cost of Care Grant should be allocated to Providers. Of the available allocation the split between Residential and Nursing Care Homes and Homecare Providers was agreed to be 33.3 per cent and 66 per cent respectively. The council has estimated the implementation activities, capped at 25 per cent of the total grant funding.

The following tables show the impact of the 2022-23 grant allocation

	Fair Cost of Care and Market Sustainability Grant	Fee Increases for 18+ Homecare	Fee increases for 65+ Care Home places without nursing	Fee increases for 65+ Care Home places with nursing (net of FNC)	Implementation activities (internal and external)
Allocation of grant 2022-23	£988,851	£527,561	£150,629	£63,448	£247,213
Impact on 18+ Homecare rate per hour		£19.95			
Impact on Care Homes fees p/w			£726.30	£789.28	
Fair Cost of Care rates		£23.28	£922.60	£900.04	
<b>Distance from Fair Cost of Care rates 2022-23</b>		<b>£3.33</b>	<b>£196.30</b>	<b>£111.12</b>	

Provisional funding plan for 2023/24 and 2024/25

	Market Sustainability and Improvement Fund	Fee Increases for 18+ Homecare	Fee increases for 65+ Care Home places without nursing	Fee increases for 65+ Care Home places with nursing (net of FNC)
Allocation of grant 2023-24 to 2024-25	£3,439,459	£2,479,191	£669,333	£281,935
Impact on 18+ Homecare rate per hour:		£21.27		
Impact on Care Homes fees p/w			£774.44	£841.60
Fair Cost of Care rates		£23.28	£922.60	£900.04
<b>Distance from Fair Cost of Care rates 2024-25</b>		<b>£2.01</b>	<b>£153.70</b>	<b>£60.38</b>
<i>Proposed 18+ Homecare rate per hour under new model</i>		<i>£21.98</i>		

London Borough Tower Hamlets – March 2023

