

# **North Somerset Council**

## **REPORT TO THE ADULT SERVICES AND HOUSING POLICY AND SCRUTINY PANEL**

**DATE OF MEETING: 12 APRIL 2018**

**SUBJECT OF REPORT: DOMICILIARY CARE UPDATE**

**TOWN OR PARISH: ALL**

**OFFICER/MEMBER PRESENTING: GERALD HUNT HEAD OF  
COMMISSIONING**

**KEY DECISION: NO**

### **RECOMMENDATIONS**

- i. That the Panel notes the current position with regards to domiciliary care performance.

### **1. SUMMARY OF REPORT**

- 1.1 This report updates Members with regard to current domiciliary care performance.

### **2. POLICY**

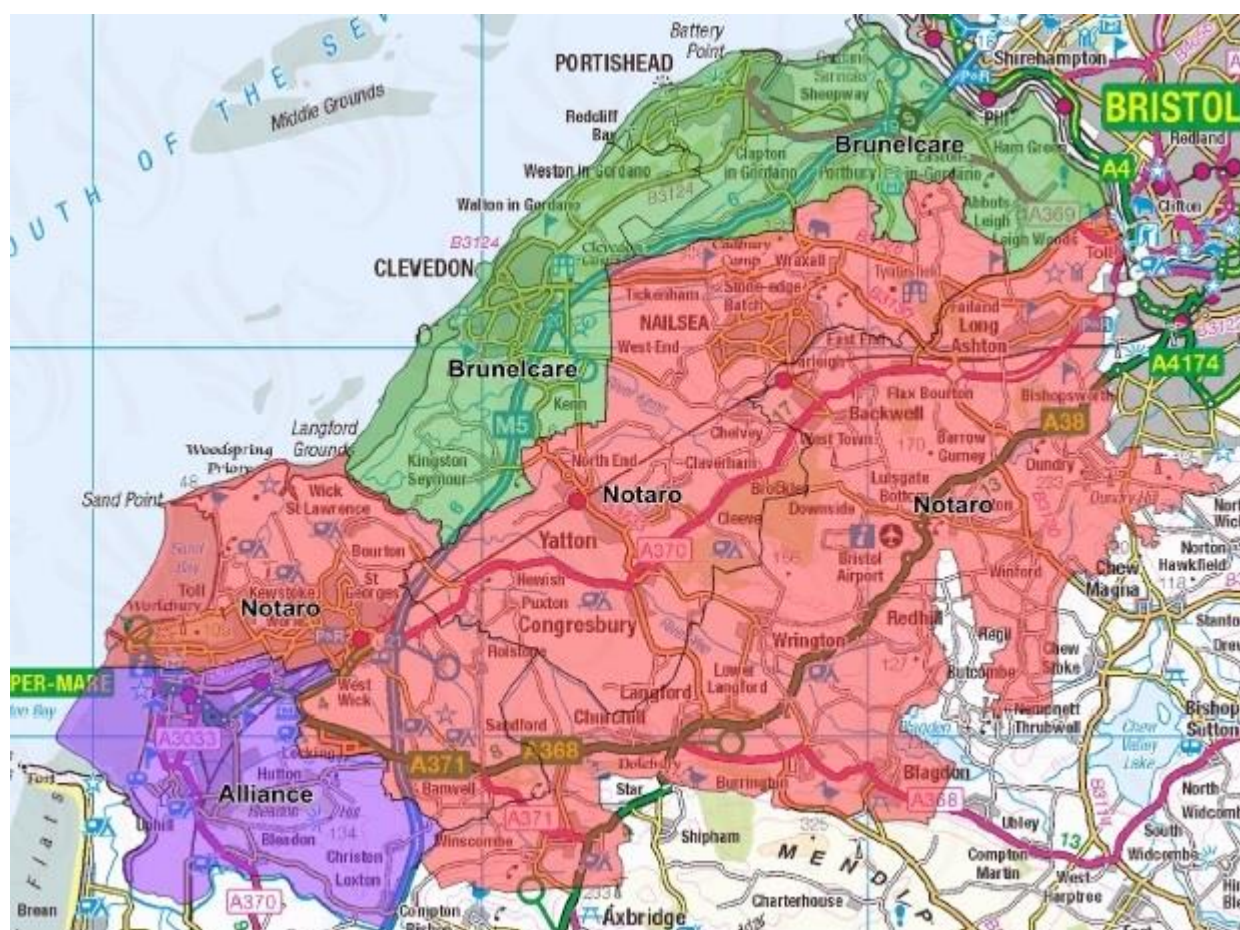
- 2.1 The People and Communities Directorate Statement for 2018-19 lists the following as two of its aims:
  - Manage the care market to ensure sufficient capacity and quality at an affordable price for domiciliary care and care homes
  - Support and enable vulnerable adults to live independently
- 2.2 The North Somerset Corporate Plan 2015-19 considers various areas of key focus. The following listed under “Wellbeing” relate to the re-commissioning of domiciliary care:
  - Enable residents to make healthy choices and promote active lifestyles which reduce ill health and increase independence
  - Commission or provide quality health and care services, which deliver dignity, safety and choice

### 3. DETAILS

#### Overall position

- 3.1 North Somerset Council currently commissions approximately 400,000 hours each year of care and support from domiciliary care agencies that is delivered to approximately 1200 people across the district. A similar amount is delivered to support housing support schemes and complex LD/MH health cases, these are delivered under different specialist frameworks. This activity will be subject to further recommissioning and a proposed commissioning plan presented to Executive in April 2018.

The majority of domiciliary care is commissioned under the support to live at home contracts which were recommissioning in phases during 2016/17. As an outcome we now have three strategic providers that cover the geographical areas across the district. This is illustrated in the map below.



- 3.2 Current usage against the Support to live at Home contracts for older people or complex cases based on actual hours delivered at month eleven.

Provider	Hours delivered
Notaro	11,859.00
Alliance Living	8,425.25
Brunelcare	5,765.25
Access Your Care	2,403.75
Residual Providers	5,161.25
Total	33,614.50

**Note:**

Access Your Care provide domiciliary service to support End of Life services for the CCG, and provide support across the District on capacity issues as well as provider a responder service for Care Link throughout the District. Residual providers relate to work yet to transfer to Strategic Providers or supporting specific complex cases, which are unlikely to change.

### 3.3 Activity and Unit Cost data

The recommissioning process has achieved significant reconfiguration of services from the transfer of reablement to the independent sector and the closure of the in house START service. The exercise has achieved significant cost savings and reduced unit costs overall, whilst attempted to ensure that independent sector remuneration is increased, and rates of pay have risen dramatically in the last two years. The difficulty has been the impact of National Living wage increase have also had an impact and recruitment and retention remains problematic.

Dom care & Reablement Year on Year Comparison							
2015/16		2016/17		2017/18			
Clients		Clients		Clients			
718	£ 6,476,222	700	£ 5,872,054	683	£ 5,705,588		
69	£ 1,259,168	21	£ 680,119	70	£ 453,139		
<b>787</b>	<b>£ 7,735,390</b>	<b>721</b>	<b>£ 6,552,173</b>	<b>753</b>	<b>£ 6,158,727</b>		
<b>Average weekly placement</b>	£ 188.51		£ 174.29		£ 156.86		

### 3.4 DOMICILIARY CARE PROVIDER CONCERNS

The difficulties experienced last summer with recruitment and scheduling difficulties by Notaro, which led to weeks of poor quality and disrupted care have largely passed. Quarterly safeguarding for the number of concerns per quarter illustrates for each provider.

	Alliance Living Care (Dom Care Agency)	Brunel Care Dom Care Agency	Notaro Dom Care Agency	Response 24	Grand Total
<b>2016/17</b>	<b>50</b>	<b>4</b>	<b>8</b>	<b>3</b>	<b>65</b>
Q1	4	2		1	7
Q2	10	2	1		13
Q3	10		3		13
Q4	26		4	2	32
<b>2017/18</b>	<b>39</b>	<b>9</b>	<b>165</b>	<b>3</b>	<b>216</b>
Q1	8	2	6	1	17
Q2	10	2	132		144
Q3	13	3	18		34
Q4 to date	8	2	9	2	21

## Capacity and Sustainability

Nationally the funding and recruitment of domiciliary care is recognised as challenging, and nearby authorities including Bristol, Gloucestershire and Somerset have experienced more severe problems with capacity and performance. CQC evidence to Health Select Committee in December 2016, that 57 per cent of Councils had seen providers give up on their contracts in the last six months.

Recruitment difficulties leading to over usage of agency will impact on quality and can led to a downward spiral of performance and service disruption as experienced last year. Notaro have addressed the performance concerns but as with all domiciliary care providers are challenged to compete effectively with alternative options for carers who can earn similar or greater wagers without the challenges of delivering care. Whilst North Somerset's Proud to Care initiative helps to address the negative perception of working in care, it is clear that without the resources to address this perception of care, retention and recruitment of care staff is challenging for all providers.

Currently whilst Delayed discharges of care from Acute Trusts are low and performance is in the top quartile nationally, there are delays in receiving domiciliary care in the community, particularly in the rural areas and towns such as Nailsea and Portishead.

Currently almost one hundred service users are awaiting a package of care (an element of this is the technical set up of a package), and whilst recruitment amongst the providers has improved moving into the Spring, the focus is on reducing these delays. An immediate solution

currently being implemented is to utilise spare capacity in North Somerset Community Partnership, but the long term solution is to ensure that strategic partners have the resources and support to develop sufficient capacity in their areas.

## **AUTHOR**

Gerald Hunt, Head of Commissioning  
gerald.[hunt@n-somerset.gov.uk](mailto:hunt@n-somerset.gov.uk)  
01934 634803

## **BACKGROUND PAPERS**

None

