

ADULT SOCIAL CARE MARKET POSITION STATEMENT

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|---------------------------|---|
| Committee name | Health and Social Care Select Committee |
| Officer reporting | Jan Major – Adult Social Care and Health Gary Collier – Adult Social Care and Health |
| Papers with report | Appendix 1: Draft Adult Social Care Market Position Statement |
| Ward | All |

HEADLINES

1. The purpose of this report is to give the Committee the opportunity to consider and comment on Hillingdon’s draft Adult Social Care Market Position Statement (MPS).
2. Local authorities with adult social care responsibilities are encouraged under statutory guidance issued under the Care Act, 2014, to develop one or more MPSs to inform an ongoing dialogue with providers of care and support services¹. This is intended to support local authorities in meeting their market shaping obligations under section 5 of the Care Act, the objective of which is to ensure a sufficient supply of quality services to meet the assessed adult social care needs of local residents. The draft Hillingdon document also reflects the Council’s commitment to support early intervention and promotion of self-help and independence for all residents.
3. An MPS is intended to:
 - Provide information about the current demand for care and support services and describe how this is being met.
 - Give projections of future demand; and
 - Consider opportunities for the to develop to provide the range and level of support that will be required.
4. Hillingdon’s draft Adult Social Care MPS is attached as **Appendix 1** and its content reflects the Council’s current intentions for the period 2024 to 2027, which is based on the information currently available. It is intended to be a live document that will be updated in response to evolving circumstances, such as changes in legislation and national or local policies. It does not represent a commitment from the Council to take a particular course of action.
5. The MPS is intended to be read by:
 - Existing providers undertaking regulated activities under the *Health and Social Care Act, 2008 (Regulated Activities) Regulations, 2014*, of health and social care services in Hillingdon and the North West London sector.
 - Service providers and organisations not currently providing services to Hillingdon residents.
 - Voluntary and community organisations (also known as ‘*third sector*’).
 - People currently in receipt of adult social care services.

¹ Para 52 [Care and support statutory guidance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/364222/care-act-2014-guidance-2014.pdf)

6. Officers are currently consulting with stakeholders on the content of the draft MPS to gather feedback prior to publication.

RECOMMENDATIONS

That the Health and Social Care Select Committee notes the content of the report and questions officers on any aspect.

SUPPORTING INFORMATION

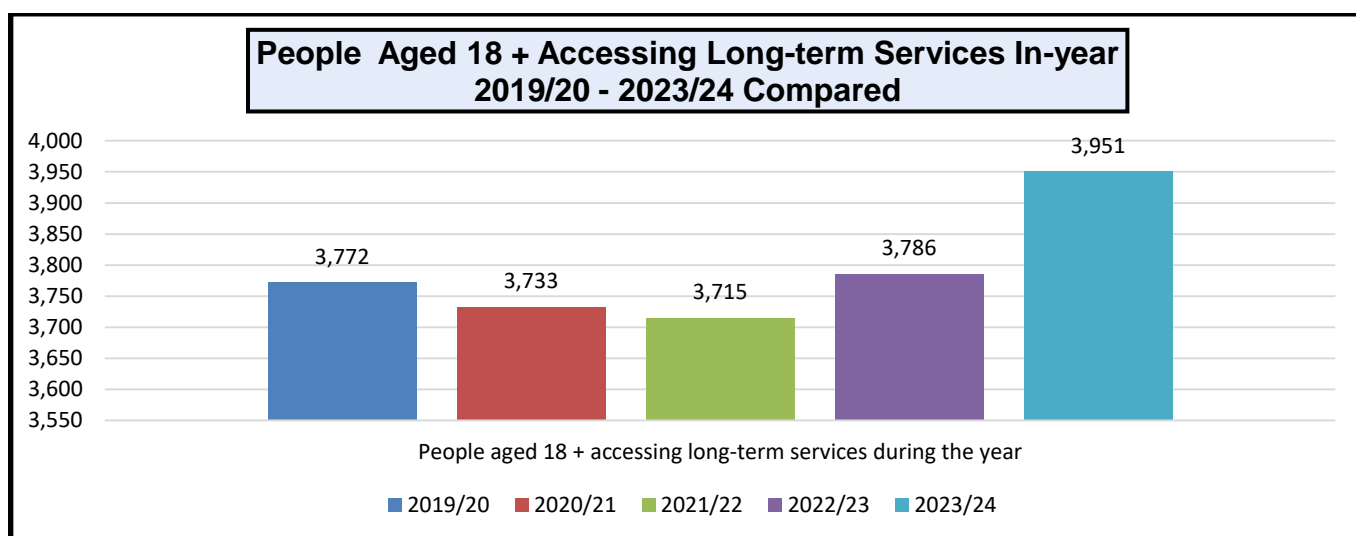
Strategic Context

7. The MPS must be seen within the context of the vision within the Council’s Adult Social Care and Health Plan, *Independent and Fulfilled Lives*, shown below.

Adult Social Care and Health Plan Vision

Care and support will be personalised and will prevent, reduce, and delay needs. Residents will be enabled to live independent and fulfilled lives, supported within and by their local networks wherever possible.

8. During 2023/24 3,951 people were supported with long-term services and of these 1,492 were aged between 18 and 64 and 2,459 aged 65 +. The chart below shows the trend over the last five years in the number of people aged 18 + accessing long-term Adult Social Care services. 87% of the increase in numbers of people receiving long-term care services in 2023/24 compared to 2022/23 was attributed to people aged 65 and over with personal care needs attributed to physical disabilities. Adults of working age with physical disabilities and people with learning disabilities accounted for the remainder. 2020/21 and 2021/22 were the pandemic years, which influenced the willingness of families to accept the support offer from the Council, e.g., staff from homecare agencies coming into their homes.



Source: Short and Long-term Service (SaLT) (LBH Digital & Intelligence 10.07.24)

9. The Committee is reminded that access to support from the Council in meeting assessed care and support needs is subject to a person meeting the requirements of the National Eligibility Criteria for Adult Social Care and on the outcome of a financial assessment, i.e.,

people with income or capital valued at £223,250 or more must fund their own care support services.

10. As with most other local authorities in England with adult social care responsibilities, approximately 80% of the Council’s ASC spend is on services provided by the independent sector, i.e., ‘for profit’ and ‘not for profit’ organisations. This reflects a trend that started in the 1980s.

Hillingdon’s People: Demand and Diversity

11. The chart below provides the Committee with information about the demographics of the borough that illustrates its diversity. Long-term projections are not due to be provided until 2025 but Hillingdon, as with many other local authorities, will be experiencing an expanding older people population. The percentage growth in the 65 + population referred to in the chart below was just over 7,200 people and the increase in the 55 to 59 age group nearly 5,000.

| | | | | | | | | | |
|---------------------------|---|----------------|--------|----------------|--------|---------------|---------|-------------|--------|
| Gender Mix | In 2021 the census showed that 50.6% (155,000) of Hillingdon's population was female and 49% (151,000) was male. | | | | | | | | |
| Age Breakdown | The age breakdown in 2021 was: <table border="1" style="margin-left: 20px;"> <tr> <td style="background-color: #fff9c4;">0 - 17</td> <td>71,372</td> <td style="background-color: #fff9c4;">65 - 79</td> <td>29,498</td> </tr> <tr> <td style="background-color: #fff9c4;">18 -64</td> <td>193,370</td> <td style="background-color: #fff9c4;">80 +</td> <td>11,680</td> </tr> </table> | 0 - 17 | 71,372 | 65 - 79 | 29,498 | 18 -64 | 193,370 | 80 + | 11,680 |
| 0 - 17 | 71,372 | 65 - 79 | 29,498 | | | | | | |
| 18 -64 | 193,370 | 80 + | 11,680 | | | | | | |
| Diverse Population | In 2021 48.2% of borough residents were of White ethnicity, 33.3% Asian, 7.8% Black, 4.4% Mixed and 7.8% other ethnicities. The Hayes and Harlington locality has the most diverse population and North Hillingdon the least. | | | | | | | | |
| Population Growth | 17.4% growth in 65+ population since 2011 and 27% growth in 90 + population. Highest growth in 65 + population in Hayes and Harlington locality. 34% increase in 55-59 population overall but 45% in Hayes and Harlington. 316,000 projected general population in 2025 & 46,683 65 +. | | | | | | | | |
| Languages | Our residents (aged 3+) speak at least 85 different languages; 77.9% of our residents (aged 3+) have English as their main language, followed by Panjabi (4.6%), Romanian (1.8%), Polish (1.7%) and Tamil (1.6%). | | | | | | | | |
| Faith | In 2021 39% of borough residents identified as Christian, 14.4% as Muslim, 10.8% as Hindu and 8.6% as Sikh. 19.4% of residents stated they had no religion. There higher proportions of residents aged 65+ with Jewish and Christian faiths, with higher proportions of younger residents with Muslim faith. | | | | | | | | |

Hillingdon’s Care and Support Market: Key Issues

12. Some of the key issues facing Hillingdon’s care and support market now and over the lifetime of the draft MPS include:

- Changing demographics and impact on demand for services, e.g., ageing population that is increasingly diverse.
- Cost pressures, e.g., wage inflation and increasing utility costs.
- Care Quality Commission (CQC) regulatory change and resource implications, i.e., moving away from key lines of enquiry to quality statements linked to what matters most to people who use health and care services.
- Workforce, i.e., recruitment and retention in a high employment area.
- Public expectations and tensions between personalisation, critical mass, and economies of scale.
- Opportunities and challenges presented by new technologies.

Adult Social Care Markets

13. The social care markets considered by the MPS include:

- Information, advice, and advocacy.
- Preventative and community services.
- Homecare.
- Supported housing.
- Care homes, i.e., residential care homes with and without nursing.
- Carer support

14. Spend on care homes, supported accommodation and homecare accounted for 83% of Adult Social Care expenditure in 2024/25.

Overarching Messages for Hillingdon's Care and Support Market

15. The overarching messages to the market include:

- **Mixed market:** There is currently a mixed provider market in Hillingdon that includes a combination of services that the Council delivers directly and those provided by independent sector companies comprising of both for profit and third sector, '*not for profit*' organisations. It is proposed that this mix will continue.
- **Partnership-based relationship with providers:** The Council is seeking relationships with providers based on mutual trust and risk sharing. This means changing assumptions about the willingness and/or ability of providers to deliver better services at reduced costs. It also means moving away from assumptions that costs can and will be borne by the Council.
- **Different approaches to ensure a diverse market of quality services:** Our approach to securing services to ensure that residents have choice and control over how their needs are met and access to a range of support to address cultural diversity will be flexible. Where tendering is the most appropriate route to comply with the council's legal obligations, this will be undertaken using the procurement portal. Different approaches also includes working with the West London Alliance (WLA) where this will provide cost effective solutions to addressing local need, e.g., by securing critical mass and economies of scale.
- **Smaller number of more strategic providers rather than large numbers of lower value contracts:** This aids more effective contract management that reduces risk to residents and therefore safeguards their interests as well as giving the strategic providers some consistency, builds relationships and trust and allows for innovation development. It is the preferred approach.
- **Integrated commissioning:** Over the period of the MPS providers can expect to see examples of integrated commissioning between the Council, other councils within the North West London (NWL) sub-region, and the NHS where this approach will lead to better outcomes for residents. For the Committee's information, the other councils within the NWL sub-region include Brent, Ealing, Hammersmith & Fulham, Harrow, Hounslow, Kensington & Chelsea and Westminster.
- **Preference for long-term contracts:** Long-term contracts, e.g. up to eight years, give providers financial stability and allow for longer-term planning, which in turn can help

secure better service quality for residents. This is the proposed approach that will be taken going forward unless there is a good reason not to.

Commissioning Intentions

16. The Council's proposed Adult Social Care and Health commissioning intentions for the 2024 – 2027 period of the MPS are detailed in **Appendix 1**. This section of the report provides examples of the range of commissioning intentions in the MPS for the Committee's consideration. The Committee is reminded that the intention is that new contracts offered to providers will be for a period of up to eight years, unless there is a good reason not to.

17. **Information and advice single point of access tender:** This is intended to combine a range of information and advice service contracts into a single service.

18. **Personal assistant (PA) market:** The Council will work with WLA partners to explore options for increasing the PA market to improve choice and control flexibilities for eligible people.

19. **Carer Support Service tender:** The model of provision for the single point of access for carers has been reviewed and will be tendered as required under procurement regulations.

20. **Supported housing strategy:** The Council will work with NHS partners and in liaison with users of services, their families, and service providers to develop a strategy that complies with requirements under the Supported Housing (Regulatory Oversight) Act, 2023.

21. **Nursing home provision:** The Council may explore options for directly managing a nursing care home.

22. **Care homes for people with learning disabilities:** The Council will develop two smaller care homes in compliance with updated CQC requirements to address limited local supply and provide in-borough solutions to addressing need.

Market Sustainability

23. This section of the MPS states the Council's commitment to the sustainability of the market through the introduction of rates identified through the Fair Cost of Care exercise undertaken in 2022/23. This links to the Council's Market Sustainability Plan submitted in 2023, which can be found via the following link [Market sustainability and fair cost of care - Hillingdon Council](#). The Committee may wish to note that the Council has allocated the £4,554k provided via the Government's Market Sustainability and Improvement Fund (MSIF) to supporting fair rates for providers to maintain service supply and quality of provision. This is in accordance with grant conditions.

24. This part of the MPS also addresses the Council's approach to managing our relationship with contracted providers, e.g. frequency of contact meetings, which is based on a combination of risk factors such as contract value and performance, including quality of provision.

PERFORMANCE DATA

Current Performance Information

25. Tables 1 and 2 below provide comparative current CQC ratings for care home and domiciliary care providers across NWL and enables the Committee to see Hillingdon's position in the context of other boroughs within the sector. The Committee may wish to note that at 44 Hillingdon has the third highest number of care homes in the sector but the second highest number of care home beds after Ealing.

| Table 1: NWL Care Homes CQC Ratings Compared (Percentage) | | | | | |
|--|--------------------|-------------|-----------------------------|-------------------|--------------|
| Borough | Outstanding | Good | Requires Improvement | Inadequate | TOTAL |
| Brent | 0% | 84% | 16% | 0% | 100% |
| Ealing | 0% | 60% | 40% | 0% | 100% |
| Hammersmith & Fulham | 11% | 78% | 11% | 0% | 100% |
| Harrow | 2% | 94% | 4% | 0% | 100% |
| Hillingdon | 0% | 84% | 16% | 0% | 100% |
| Hounslow | 14% | 69% | 17% | 0% | 100% |
| Kensington & Chelsea | 11% | 89% | 0% | 0% | 100% |
| TOTAL | 5% | 80% | 15% | 0% | 100% |

Source: CQC

| Table 2: NWL Domiciliary Care Providers CQC Ratings Compared (Percentage) | | | | | |
|--|--------------------|-------------|-----------------------------|--------------------|--------------|
| Borough | Outstanding | Good | Requires Improvement | Indadequate | TOTAL |
| Brent | 0% | 85% | 15% | 0% | 100% |
| Ealing | 2% | 76% | 21% | 2% | 100% |
| Hammersmith & Fulham | 8% | 64% | 28% | 0% | 100% |
| Harrow | 0% | 90% | 10% | 0% | 100% |
| Hillingdon | 0% | 85% | 15% | 0% | 100% |
| Hounslow | 4% | 70% | 24% | 2% | 100% |
| Kensington & Chelsea | 7% | 87% | 7% | 0% | 100% |
| TOTAL | 3% | 80% | 17% | 1% | 100% |

Source: CQC

RESIDENT BENEFIT

26. The MPS described in this report shows how the Council will ensure a sufficient supply of quality services to meet the assessed adult social care needs of local residents and prevent or delay the demand for more intensive care and support in more restrictive settings.

FINANCIAL IMPLICATIONS

27. There are no direct financial implications arising from this report.

LEGAL IMPLICATIONS

28. There are no direct legal implications arising from this report.

BACKGROUND PAPERS

None.

Adult Social Care Market Position Statement 2024-2027



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1. Introduction

1.1 The Purpose

This Market Position Statement (MPS) describes the current market for care and support services in Hillingdon and the council's intentions to support the early intervention and promotion of self-help and independence of all residents, including those with adult social care needs. The content of this MPS reflects the council's intentions over the 2024 to 2027 period based on the information currently available. It does not represent a commitment from the council to take a particular course of action, which may need to change in response to national and local drivers, such as new legislation or market developments.

1.2 Who the Market Position Statement is for

This MPS is intended to be read by:

- Existing providers undertaking regulated activities under the Health and Social Care Act, 2008 (Regulated Activities) Regulations, 2014 of health and social care services in Hillingdon and the North West London sector.
- Service providers and organisations not currently providing services to Hillingdon residents.
- Voluntary and community organisations, also known as 'third sector' organisations.
 - People currently in receipt of adult social care services, sometimes referred to as 'eligible residents' or 'eligible people', and also people who may use adult social care services, including unpaid carers.

The sections in this document describe current demand and capacity as well as our expectations of future requirements and commissioning intentions.

This document is structured in sections addressing each market specialism in Hillingdon.

1.3 Engagement with Providers

The council has set out an overarching strategy for supporting residents and some key components of this include how residents will be supported to be safe, in strong communities; living in a thriving economy; thriving healthy households; in a green and sustainable borough that is digitally enabled, modern and well run.

Providers of social care services or third sector support to residents engage with the council to establish and build partnership arrangements, gain support and help with market shaping.

Engagement takes place through a variety of ways, including:

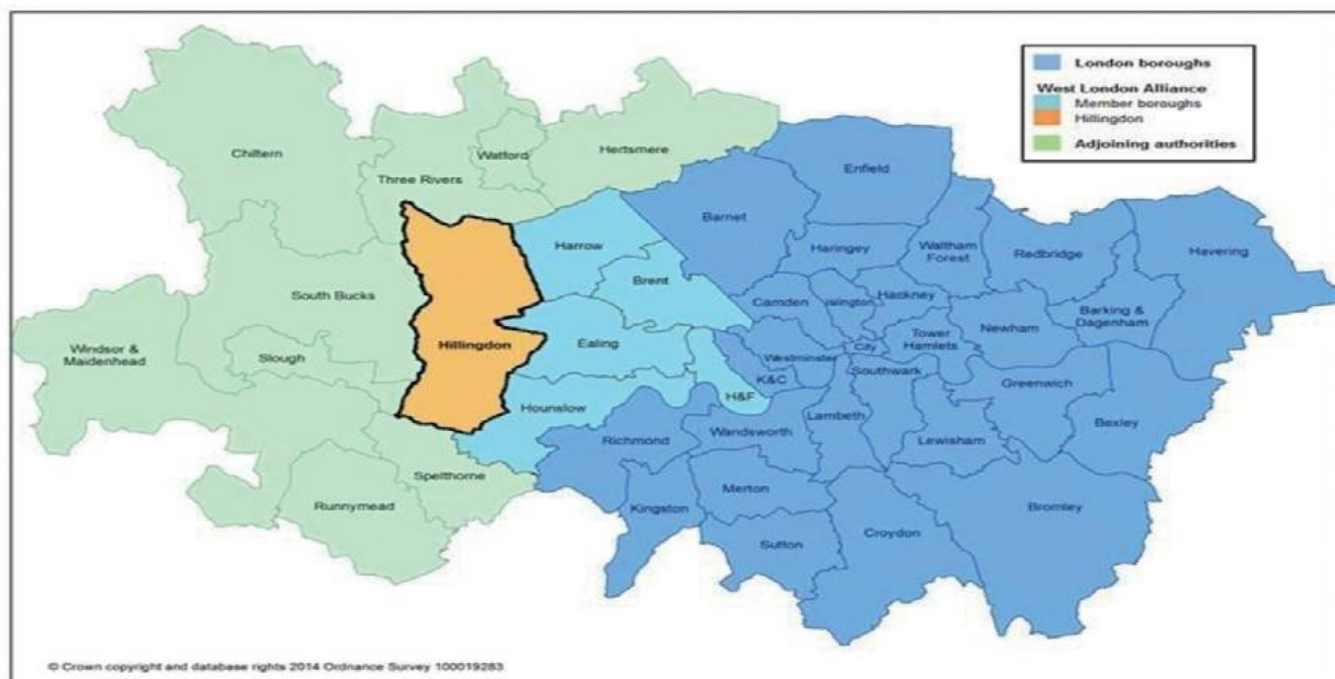
- Care Home Managers Forum
- Domiciliary Care Forum
- Supported Living Forum
- Registered Care Managers Group (includes reps from Skills for Care and CQC)
- Quarterly provider newsletter

Additionally, the Supplier Relationship Team will be hosting two provider events in 2024 to promote the council and social care priorities for the coming 12 months. This will be replicated for each year of this MPS.

The council currently uses Capital E-Sourcing as its procurement portal platform. This is used to publish Prior Information Notices (PINs), Invitations to Tender, communications with registered providers and auditable document exchanges.

1.4 About Hillingdon

Hillingdon is the second largest of London's 32 boroughs geographically and is home to an estimated population of 305,900 (Office of National Statistics (ONS) 2021) residents. It is the third least densely populated of the 32 London boroughs. The map below shows the location of Hillingdon in the context of its neighbours. This shows that the borough is the most westerly London borough. It adjoins London Heathrow airport to the southwest of the borough and East Berkshire to the west. Major transport links cross the borough; motorways, i.e. the M4, M25, and M40 (A40), rail services, including HS2 construction, and London Underground routes: the Metropolitan, Piccadilly, Elizabeth, and Central lines.



Hillingdon is part of a commissioning collaborative with other London boroughs called the West London Alliance and the map above shows the local authority members of this group.

Hillingdon is divided into three localities. In order of the proportion of the borough's population that live there, these are Hayes and Harlington (36%), North Hillingdon (33.3%), and Uxbridge and West Drayton (30.7%). Hillingdon's localities, wards, and the dissection points of the M4 and A40 are illustrated in **Appendix 1**.


As of December 2023, Hillingdon's adult social care service supported 2,963 adults with long-term care needs. Approximately 354 had a support reason of memory and cognition, 709 residents with learning disabilities, 1,544 residents with physical and sensory disabilities and 347 residents with mental health needs. We assess and review around 6,531 residents per year.

1.5 Hillingdon's Adult Social Care and Health Plan - Independent and Fulfilled Lives


Our vision for Adult Social Care is that care and support will be personalised and will prevent, reduce, and delay needs. Residents will be enabled to live independent and fulfilled lives, supported within and by their local networks wherever possible.

1.6 Overarching Messages for the Market

- **Mixed market:** The council supports the continuation of a mixed provider market in Hillingdon that includes a combination of services that it delivers directly and those provided by independent sector companies comprising of both for profit and third sector organisations. Approximately 70 per cent of Adult Social Care spend is on independent sector provided services.
- **Partnership-based relationship with providers:** The council wishes to have relationships with providers based on mutual trust and risk sharing. This means that we want to move away from assumptions being made that all costs will be borne by the council. Equally, we will move away from assumptions about the willingness and/or ability of providers to provide better services at reduced costs.
- **Different approaches to ensure a diverse market of quality services:** To ensure that residents have choice and control over how their needs are met and a range of support to address cultural diversity, our approach to securing services will be flexible. Where tendering is the most appropriate route to comply with the council's legal obligations, this will be undertaken using the procurement portal.
- **Smaller number of more strategic providers rather than large numbers of lower value contracts:** This is the council's continued preference as it aids more effective contract management that reduces risk to residents and therefore safeguards their interests as well as giving the strategic providers some consistency, builds relationships and trust and allows for innovation development.
- **Integrated commissioning:** Over the period of the MPS providers can expect to see examples of integrated commissioning between the council and the NHS where this approach will lead to better outcomes for residents.
- **Preference for long-term contracts:** The council recognises that long-term contracts, e.g. up to eight years, give providers financial stability and allow for longer-term planning, which in turn can help secure better service quality for residents. This is the approach that will be taken going forward unless there is a good reason not to.

The council has a register of Adult Social Care contracts. This shows what contracts we have in place and when they are due to expire. This information is publicly available and can be accessed at  www.hillingdon.gov.uk/fair-cost-of-care

1.7 Care and Support Directory

Hillingdon's local care and support directory covers council services and those provided by the independent sector, as well as local support groups. It can be accessed at  careandsupport.hillingdon.gov.uk

2. Information, Advice, Guidance and Advocacy

Access to information and advice is critical to empowering residents to understand the options available to them and to make informed decisions about their care and support needs. Advocacy services ensure that the voices of those less able to make their wishes known are heard.

2.1 Current Position

Information and Advice

The council has an information and advice contract with Hillingdon and Ealing Citizens Advice Bureau (CAB). A contract is also in place for the provision of information, advice, guidance, and wellbeing support with Bell Farm Christian Association based in Yiewsley.

Many third sector organisations provide information, advice, and guidance as part of a broader range of services that they are delivering. Organisations providing information, advice and guidance include the H4All third sector consortium, which comprises Age UK (Hillingdon, Harrow, and Brent), Carers Trust Hillingdon, Disablement Association Hillingdon (Dash) and Hillingdon Mind.

A specialist welfare benefits and debt advice service for people with mental health needs is provided by CAB through a contract that they have with the council.

Information, Advice and Guidance Explained

Information: Providing factual, current, and impartial information to our residents.

Advice: Presenting facts and ideas in an accessible form for our residents to consider and recommending a course of action.

Guidance: Defining and providing routes support which assist our residents to reach their requirements.

Advocacy

The council has a contract with POhWER for an Integrated Advocacy Service until 31 March 2025. This includes provision of the following statutory services: Independent Mental Capacity Advocacy (IMCA), Relevant Person's Paid Representative Service (RPPR), Independent Mental Health Advocacy (IMHA) and Care Act Advocacy (CAA). The Integrated Advocacy contract also includes non-statutory advocacy provision for residents with mental health issues, learning disabilities and/or physical disabilities. POhWER also deliver an advocacy service to support people making complaints against the NHS. This is under the pan-London NHS complaints advocacy consortium contract that ends in March 2025.

The council has a long history of supporting the Metropolitan Police in situations where they have a vulnerable person in custody and require the presence of an Appropriate Adult to comply with requirements under the Police and Criminal Evidence Act, 1984 to enable them to interview the person. A contract is in place with the Appropriate Adult Service that ends in March 2025. The provision of this service for adults is not statutory.

2.2 Issues

A key issue for residents is that they must go to different places to access information and advice about different things. It is often difficult for residents to know where to go to get what they need.

2.3 Commissioning Intentions

- **2024/25:** The council will tender for an information and advice single point of access. It is not expected that this would include carers, which will be subject to a separate contract.
- **2024/25:** The council will re-tender the Integrated Advocacy contract.
- **2024/25:** Appropriate Adult provision arrangements will be reviewed.

3. Preventative and Community-based Services

The Care Act, 2014 places a duty on local authorities with adult social care responsibilities to arrange for the provision of services, facilities, or resources to prevent or delay the need for care and support.

3.1 Current Position

There are a range of services that the council has in place intended to support the wellbeing and independence of our residents and prevent, delay, or reduce the need for care and support services.

Home-based Intermediate Care Services

The council contracts with Comfort Care Services to deliver its Reablement Service. Reablement is a short and intensive service, which is designed to help people progress their recovery after illness or disability, by learning or re-learning the skills necessary for daily living, whilst promoting maximum independence. This service works closely with the Community Rehabilitation Service provided by the Central and North West London NHS Foundation Trust (CNWL) and is generally provided for a very short period. Service users often meet their goals within the first four weeks, with an optional further two weeks if their aims and goals are achievable. The service supports approximately 900 people a year, 33 per cent of which are from the community. The other 67 per cent are people discharged from hospital. The contract for this service is in place until April 2026, but with the option to extend for up to two further years.

Assisted Independent Living

The council is part of the Pan-London Community Equipment Consortium, which includes 22 London boroughs and aligned Integrated Care Boards, and currently has a contract in place with NRS Healthcare Limited to deliver a community equipment service to support residents to live as independently as possible in their own homes. The service is funded jointly by the council with the ICB and the contract is in place until March 2028, but with the option to extend for up to two further years.

The council identifies the use of Assistive Independent Living Technology in the form of telecare as fundamental to maximising the independence of vulnerable residents in the community.

Telecare is basically a range of sensors, detectors and alarms linked to a control centre through the telephone system. Since 2018 the council has installed 50 to 70 units per month to our residents and there are currently 7,680 users of the service, 69 per cent of which are aged 75 and above.

Telecare is supported by an emergency responder service for people who do not have a family member or friend who can act as a first responder, or who may not be available when a crisis occurs, and this is delivered by Comfort Care Services. The equipment is purchased through a government framework agreement and the control centre is provided by Anchor Housing.

Wellbeing Services

The council has a contract in place with Age UK to deliver a wellbeing service to older residents until March 2025. This includes support to access community resources to address loneliness that can be associated with social isolation. In addition, the service seeks to assist older people in keeping active in the area where they live, and this can be through pursuing volunteering opportunities.

Hillingdon Mind delivers an early intervention and prevention programme service under contract with the council. The focus of this service is applying the Mental Health Recovery Star approach to wellbeing, i.e. managing mental health, physical health and self-care, daily living skills, social networks, relationships, responsibilities, identity and self-esteem, etc. This contract is in place until March 2025.

Access to and retention of employment is a key factor in supporting the wellbeing of people with mental health needs. There is a contract in place with CNWL to deliver an employment support service and this is in place until March 2025. There is an emphasis on building relationships with local employers and employment agencies. The service includes occupational therapist interventions during access to or return to work processes e.g. around stress management, self-management at work and managing concentration difficulties. The service is also part funded by CNWL.

Day Opportunity Services

The council seeks to support residents with adult social care needs to make best use of community assets and funds outreach support, where appropriate, to address personal needs when required to facilitate access to these services. However, where more specialist providers are required to meet assessed need then provision is spot purchased. The council is currently spot purchasing with 29 providers. This approach reflects the council's current and future direction.

The council retains one in-house specialist service to provide meaningful activities for people with learning disabilities and autistic people with complex needs and this is the Queens Walk Resource Centre.

Self-directed Support

With Direct Payments (DPs) the council's financial contribution to meeting assessed social care needs is paid directly to the eligible person usually in the form of a pre-paid card. DPs give the eligible person more flexibility and control to directly employ their own care workers or a personal assistant who will, for example:

- be the same person and be available when required
- speak the same language
- understand cultural and/or religious needs.

This is particularly pertinent to people living in the parts of the borough with more diverse populations, e.g. the Hayes and Harlington Locality (see **Appendix 1**). There are currently 618 people (including carers) in receipt of DPs.

To provide advice and support to people considering DPs about issues such as pay roll and rights and responsibilities as an employer, the council has a DP Support Service recommended list in place. Companies on this list have been checked by the council. Providers on the list are not in contract with the council and eligible residents are able to go to other companies for DP support if they wish.

3.2 Issues and Challenges

The following are among the issues and challenges identified:

- **Assistive living technology modernisation:** New digital technology is available that impacts on what is currently provided, as well as providing greater opportunities for supporting the independence of residents in the future. This also has to be linked to the prevention offer at a Neighbourhood Team level. There is a new project underway to review the current offer, i.e. telecare equipment and out of hours support. To inform this project the council has been

successful in a match funding application for Proactive Care Funding to start a pilot with the provider of 'Intelligent Lilli', an interactive assessment tool that monitors a resident's daily habits in their home environment to produce a 'pattern of life'.

- **Queens Walk Resource Centre:** The facility is under-utilised, and we would like to work with third sector and other partners to ensure best use of this resource, including evening and weekend usage.
- **Personal assistant market:** The availability of people willing to be personal assistants in Hillingdon is limited, which results in many eligible people on DPs having to go to established care agencies.
- **Personalised solutions and critical mass:** It is not always possible to meet the needs of eligible people in the way that they would wish where there is low volume demand. The council recognises that in a difficult market the absence of critical mass can make it uneconomic for suppliers to develop and provide what may be requested. There may, however, be a market development opportunity with neighbouring boroughs to address this.

3.3 Commissioning Intentions

- **2024/25: Assisted living technology pilot** – A trial will be undertaken using the Intelligent Lilli interactive assessment tool to determine its effectiveness and inform Hillingdon's future assisted living technology model.
- **2024/25: Wellbeing services** – The scope of the current wellbeing services will be reviewed and the future model determined. The outcome of the review will inform future provision options, which may include a competitive tender for a longer contract or contracts.
- **2025/26: Personal assistant (PA) market** – The council will work with its West London Alliance partners to explore options for increasing the PA market to improve choice and control flexibilities for eligible people.
- **Ongoing: Market development opportunities** – The council will identify a mechanism for capturing data about service preferences of eligible people that the local market has not been able to satisfy and explore with West London Alliance (WLA) partners scope for collaborative approaches to market development.

4. Homecare

Good quality homecare is a vital component of the care and support needed to enable residents to live independently in their own home. Homecare agencies must be registered with the Care Quality Commission and assist people with the tasks of daily living.

4.1 The Hillingdon Care Market

There are 60 registered providers in Hillingdon delivering (according to Capacity Tracker) approximately 337,642 hours of care a week. In February 2024, Capacity Tracker tells us that they were doing this with 2,740 staff.

The market comprises of a diverse range of providers with an overwhelming presence of single branch operations. Except for one small franchise, none of the national brands have a presence within the borough. The nature of the local market is such that there are companies with their registered offices in neighbouring boroughs that deliver homecare to Hillingdon residents. This is predominantly to self-funders and operates across boundaries with Ealing, Harrow, and Hounslow. There is no evidence of similar cross-borough activity on Hillingdon's western border.

The CQC ratings for borough-based providers are shown in the table below.

| Hillingdon Based Homecare Providers CQC Ratings | | | |
|---|-----------------|-------------|---------------------|
| Rating | Provider Number | % Inspected | National Comparison |
| Outstanding | 0 | 0% | 4% |
| Good | 40 | 85% | 81% |
| Requires Improvement | 7 | 15% | 14% |
| Inadequate | 0 | 0% | 1% |
| Not Inspected | 13 | N/A | N/A |
| Total | 60 | 100% | 100% |

From the above table it can be seen that the Hillingdon market is performing above the national average performance. It should be noted that the council's homecare contracts include a requirement for providers to have an overall CQC rating of a minimum of 'Good' for placements to be made under normal circumstances.

4.2 Commissioned Services

The council commissions approximately 1 million hours of homecare a year and expects this to remain reasonably static during the period of this MPS. To meet this demand, the council has put into place the following portfolio of commissioned homecare and outreach services to address the needs of our residents:

- **Lead Providers** – There are two lead providers - one covers the north of the borough and the other the south, with the A40 broadly being the dividing line. They are expected to accept 70 per cent of all new referrals within their area of operation, are paid a fixed fee for the service they deliver and are not block contracted service. They have a strategic relationship with the council due to the levels of demand expectations placed on them.
- **Dynamic Purchasing System (DPS)** – This is a framework of 10 providers that started in January 2023. Referrals to providers on the DPS are made electronically.

| Council Contracted Homecare Providers | |
|---|--|
| Lead Providers | DPS Providers |
| North: Comfort Care Services South: Care Outlook | <ul style="list-style-type: none"> • AMI Homecare • Kamil Education • Lalis Direct Care • London Quality Care Services • Oasis Care (OCTA) • Oasis Group London • Sahan Cares • S.C.S Hotline • Support Direct (Opportunity for All) • Thames Homecare |

The council also contracts with Comfort Care Services to deliver a Bridging Care Service to support early discharge from hospital as soon as possible after a person has been identified as no longer meeting the Criteria to Reside. Funding streams within Hillingdon's Better Care Fund pay for 500 hours care a week for an intended five-day length of stay in the service pending referral onto the Reablement Service, ongoing care or alternative support arrangements where ongoing care is not required.

4.3 Market Challenges

The following are among the issues faced by providers that they have reported to us:

- Challenges in the recruitment of new staff and are using the Health and Social Care Visa to recruit staff, which is now a significant focus for homecare providers.
- There are direct costs associated with international recruitment, for example, the cost of the sponsorship licence, skills surcharge, etc. There are also costs that can come from staff time managing the administration, providing pastoral support and support with other difficulties, such as finding accommodation.
- Hillingdon is also a high employment area with competition coming from retail and Heathrow Airport.

4.4 Commissioning Intentions

- **Annually:** We will continue to review uplift requests based on evidence of increased costs.
- **Ongoing:** We will continue to use electronic call monitoring systems (ECM) as the basis for payment based on actual hours provided rather than hours commissioned.
- **2025/26:** We will review the option to extend the Lead Provider (North) contract for up to two further years from April 2026.
- **2026/27:** We will review the option to extend the Lead Provider (South) contract for two further years from July 2027.

5. Supported Housing

'Supported housing' is an umbrella term and covers situations where accommodation is provided alongside support, supervision, or care to help people live as independently as possible in the community. Accommodation is under a lease or tenancy. Where accommodation is provided with care this is often referred to as supported living. The different types of supporting housing offer a range of options for addressing need that are less restrictive than moving into a care home.

5.1 The Hillingdon Market

Since 2012, the council has had an extensive supported accommodation programme that has included schemes it has developed itself as well as those developed with the independent sector. The council is now seeking to maximise the benefit of existing supported housing stock by ensuring that service users can step down to less supported environments and is open to considering benefit share options to incentivise this outcome.

Sheltered Housing (Rent)

There are currently 41 sheltered housing schemes in Hillingdon supporting a minimum of 1,484 people mainly aged 60 and above. Twenty-one schemes are owned and run by the council and support 840 tenants. The other 20 schemes are owned and run by a range of housing associations and support 644 tenants. Although there is some variation in service models across provider, generally all schemes have a scheme manager who will help with advice, information, or assistance including arranging for a GP to visit or putting tenants in touch with other local services.

Sheltered Housing (Leasehold)

In addition to sheltered housing for rent there are also six leasehold schemes in the borough owned by six housing associations and supporting a minimum of 247 people aged mainly over 60.

Extra Care

The council has invested in the development of three extra care schemes for rent in the borough for people aged 55 and above, which is intended to avoid admissions into care homes. A fourth scheme, Cottesmore House, is owned by The Guinness Trust. A nomination agreement with The Guinness Trust grants the council 100% nomination rights in perpetuity. These schemes are summarised below.

| Extra Care Schemes in Hillingdon | |
|----------------------------------|----------------------|
| Scheme Name | Number of Apartments |
| Cottesmore House | 48 |
| Grassy Meadow Court | 60 |
| Parkview Court | 88 |
| Triscott House | 57 |
| Total | 243 |

Supported Living and Supported Housing (Learning Disabilities, Autism and Mental Health Needs)

Council investment has seen the development of three (Church Road, Glenister Gardens and Swan House) new self-contained supported living schemes for people with learning disabilities since 2013 and one (Sessile Court) new self-contained supported housing scheme for people with

mental health needs. The table below summarises the total provision in the borough. Building ownership is split between local authority and registered providers, including housing associations.

| Supported Accommodation for People with Learning Disabilities and/or Mental Health Needs Summarised | | |
|---|-------------------|----------------------------|
| Service User Group | Number of Schemes | Number of People Supported |
| Learning Disabilities | 23 | 170 |
| Learning Disabilities and Mental Health | 32 | 195 |
| Mental Health | 27 | 154 |

Seven of the schemes for people with learning disabilities and five of those for people with mental health comprise of self-contained apartments. All of the other schemes comprise of shared accommodation.

The council also owns and manages two supported living schemes for people with learning disabilities (Chapel Lane and Goshawk Gardens) and these are shared houses and support 12 people between them.

Hillingdon Shared Lives

The Hillingdon Shared Lives (HSL) scheme offers a long-term placement in a family setting in the community as an alternative to living in a residential care home, a supported living scheme with several other people, a hospital or to living alone, where they may be at risk of social isolation and the loneliness that can be associated with it. This scheme is intended for adults and young people aged 16 and above who have a learning disability, and/or who have a mental health need and are in recovery, and/or a physical or sensory disability. It can also support older people who would prefer to live in a family setting rather than the alternative. The scheme is currently supporting 22 people and in the last 12 months has provided 236 nights of respite to 11 people, which has enabled their carers to take a break.

5.2 Commissioned Services

The council has a range of block contracts in place with three providers for the provision of care and/or support in supported housing schemes in the borough, and this is summarised in the table below. The contracts are based on a core and flexi model.

| Building-based Block Contracts Summary | | | |
|--|-------------------|-----------------------------|-------------------|
| Provider | Number of Schemes | Service User Group | Numbers Supported |
| Comfort Care Services | 10 | Complex Learning Disability | 91 |
| Ability Housing Association | 3 | Mental Health | 43 |
| Support for Living (Certitude) | 6 | Complex Learning Disability | 45 |
| Total | 19 | | 179 |

Core and Flexi Model Explained

Core cost: Cost of meeting minimum safe staff required. This is subject to block contract.

Flexi cost: This additional cost for meeting assessed need over and above that met by core service.

The council also has a block contract with Ability Housing to deliver 350 hours a week floating support for people with mental health needs. An additional 32 hours a week has recently been commissioned to support the discharge from hospital to their usual place of residence of people with mental health needs. This is a pilot to test proof of concept and is funded through the Better Care Fund.

The council funds Shared Lives Carers and this is a cost-effective way of meeting need.

5.3 Demand

Between April 2023 and February 2024, there were 85 placements made in supported living provision made by the council's Brokerage Team and it is expected that there will be 100 placements by the end of 2023/24. Of placements made, 55 per cent were of people with learning disabilities and 45 per cent people with mental health needs. 49 per cent of placements were made in borough. Although some out of borough placements would have been appropriate to address specific need, there is an apparent mismatch between demand and supply.

The council does not currently have any plans to develop further supported living schemes comprising of self-contained flats for people with learning disabilities or people with mental health needs. However, provision of shared accommodation for people with complex needs in receipt of section 117 aftercare, i.e. 'dry house' for people alcohol and/or drug dependency, is insufficient to meet demand.

Projections suggest that the number of adults aged 18 to 64 living with moderate to severe (and including severe) learning disabilities will increase from approximately 1,506 in 2023 to 1,553 in 20301. New demand for Adult Social Care services will either come from people transferring from Children's Services or from new household migration into the borough.

5.4 Issues and Challenges

The following are among the issues and challenges identified:

- **Right support, right care, right culture guidance:** Under this statutory guidance the CQC has stated that it will not register new supported living services for people with learning disabilities or autistic people that have capacity for more than six people.
- **Supported Housing (Regulatory Oversight) Act, 2023:** This act will introduce the power for local authorities to introduce oversight regimes for supported housing schemes that are currently not part of a regulatory regime. It will also require local authorities to review supported housing supply and develop strategies. The publication of new regulations is awaited to provide clarity about the requirements for local oversight schemes and supported housing strategies.
- **Suitability of Shared Lives settings:** The council is seeking to recruit more Shared Lives Carers but one of the challenges is the mismatch between the needs of the people who would be suitable for the scheme and the accommodation that is available.

5.5 Commissioning Intentions

- **2024/25: Supported Living and Floating Support for people with Mental Health Needs** – The council will re-tender this contract to establish new arrangements for up to eight years.
- **2024/26: 'Dry house' for people alcohol and/or drug dependency** – The council will explore options for addressing current gap in capacity.
- **2025/26: Supported housing strategy** – Working with NHS partners and in liaison with users of services, their families, and providers we will develop a strategy in accordance with national requirements.
- **2026/27: Care and Wellbeing Service in Supported Living for Adults with Learning Disabilities and/or Autism and Mental Health Needs. Champion Close, Cedar House, Silver Birches, Sweetcroft Lodge, Thornhill Road** – The council will re-tender this contract to establish new arrangements for up to eight years.
- **2026/27: Care and Wellbeing Service in Supported Living for Adults with Learning Disabilities Church Road, Swan House, Glenister Gardens, Honeycroft Hill** – The council will re-tender this contract to establish new arrangements for up to eight years.

6. Care Homes

Feedback from our residents is that for most people admission to a care home is the option of last resort. Community-based alternatives to supporting independence in people's own homes means that future demand for care home placements is likely to be from people with higher levels of need. This impacts on the future shape of Hillingdon's care home market.

6.1 The Hillingdon Care Market

There are currently 44 active registered care homes providing 1,365 beds. There is a mix of small and national providers, both 'for profit' and third sector. The seven largest care home providers in the borough account for 45.9 per cent of all beds.

Of the current 44 active homes, 26 are Older People's Residential and Nursing Care homes and 18 are working age residential care homes (focused on mental health or learning-disabled residents). These are detailed in the following tables:

| Registered Beds – Older People Care Homes (65 +) | | | | | |
|--|-----------------|--------------|------------------|---------------|--------------|
| Type | Number of Homes | Nursing Beds | Residential Beds | Flexible Beds | Total |
| Dual Home | 8 | 249 | 160 | 31 | 440 |
| Nursing Homes | 7 | 330 | 0 | 0 | 330 |
| Residential Homes | 11 | 0 | 435 | 0 | 435 |
| Total | 26 | 579 | 595 | 31 | 1,205 |
| % | | 48% | 49% | 3% | 100% |

Source: Capacity Tracker

| Registered Beds – Care Homes (18-64) | | | | | |
|--------------------------------------|-----------------|--------------|------------------|---------------|-------------|
| Type | Number of Homes | Nursing Beds | Residential Beds | Flexible Beds | Total |
| Residential Homes | 18 | 0 | 160 | N/A | 160 |
| Total | 18 | 0 | 160 | | 160 |
| % | | 0 | 100% | | 100% |

Source: Capacity Tracker

Analysis in November 2023 confirmed a 2019 study that showed that 45 per cent of Hillingdon's older people care home provision was utilised by self-funders, thus leaving the remaining 26 per cent to be funded by other local authorities and the NHS.

The following table summarises the current position of CQC ratings for Hillingdon as of December 2023, whilst national statistics are taken from the State of Care report published in October 2023.

| Hillingdon Borough Homes Residential and Nursing Care Homes CQC Ratings | | | |
|---|-----|-----|---------------------|
| CQC Rating | Nos | % | National Comparison |
| Outstanding | 0 | 0 | 5% |
| Good | 38 | 86% | 74% |
| Requires Improvement | 6 | 14% | 20% |

| | | | |
|------------|---|---|----|
| Inadequate | 0 | 0 | 1% |
|------------|---|---|----|

| | | | |
|--------------|-----------|-------------|-------------|
| Total | 44 | 100% | 100% |
|--------------|-----------|-------------|-------------|

Source: CQC

6.2 Commissioned Services

The council currently has a block contract with two providers for 15 short-term nursing and nursing dementia beds across two settings to support timely discharge from hospital for people no longer meeting the Criteria to Reside. A tendering process is intended to establish longer-term block arrangements (see Commissioning Intentions below).

The council currently owns two care homes for people with learning disabilities that it manages directly. These are 3 Colham Road (13 beds) and Hatton Grove (20 beds) In December 2023, the council was spot purchasing 600 long term placements of which 361 (60 per cent) in Hillingdon and 239 (40 per cent) out of borough. Beds purchased in the borough represented 29 per cent of the bed-base for older people. In the period between April 2023 and January 2024, the council made 117 spot short-term placements to support hospital discharge.

6.3 Demand

The council expects demand from the self-funder market to expand due to the increase in the older people population and the fact that Hillingdon is a relatively prosperous borough as suggested by us being ranked 23rd most deprived out of London's 32 boroughs and at 77 per cent, high levels of owner occupation amongst the 65 and over population. Although ONS population projections based on the 2021 census will not be available until 2025, the census showed a 34 per cent i.e. 4,607 residents, increase (45per cent i.e. 1,943 residents, in the Hayes and Harlington locality) in the 55 to 59 age group, thereby indicating a significant increase in the older people population over the next 15 years.

The council anticipates that during 2024/25 it will purchase approximately 330 long term residential and 150 nursing home beds for older people and 50 long term beds for people of working age.

The development of options support people longer in the community means that the demand for residential provision for older people, i.e., without dementia, from the council is likely to continue to decline. There will be a continuing need for residential dementia beds but the greatest demand is likely to be for people requiring placements in care home settings registered to support nursing and nursing dementia needs.

6.4 Market Issues and Challenges

The following are among the issues and challenges identified:

- **High occupancy levels:** Capacity Tracker shows that the average occupancy level for Hillingdon Care Homes is 96 per cent. However, when taking into consideration the provision focussed on the self-funder market and specialist provision, i.e. retired actors and nuns, the occupancy level is higher. The average occupancy level across the NWL sector is 89 per cent and the average for London is 88 per cent.
- **Duration of placements** impacts occupancy levels and an analysis of council long-term placements undertaken in December 2023 showed an average length of stay across all bed types of 2.25 years and as expected, a shorter period of just under two years for provision supporting people living with dementia.

- **Proportion of older people care home beds owned by national providers:** 36 per cent of registered beds in care homes for older people in the borough are owned by national providers. As commercial decisions for homes owned by national companies will usually be made centrally, this leaves local managers with limited autonomy and impacts on the scope for bilateral discussions.
- **Care homes for people with learning disabilities/autistic people:** Limited existing capacity in the borough can necessitate out of borough placements. Changes to CQC requirements and the publication of their new guidance for registration in the spring of 2022 'Right Support Right care Right culture' meaning that new homes should be smaller in size and able to evidence services can provide person-centred care in line with current best practice. This means that the council needs to look at options to ensure that compliant capacity is in place.

6.5 Commissioning Intentions

- **Ongoing: NHS London Care Record (LCR)** – We will continue to work with the ICB to support care homes to complete the Digital Security and Protection Toolkit to ensure to maximise the number of homes able to access and utilise the LCR.
- **2024/25: Short-term nursing beds** – Working jointly with the ICB and the Borough-based Partnership, the council will tender for 15 short-term nursing beds located in the borough to support hospital discharge.
- **2024/25: Nursing home provision** – The council will explore options for directly managing a nursing care home.
- **2024/25: West London Alliance (WLA) Residential and Nursing Homes DPS** – The WLA has updated the contractual documentation used for its DPS which will be based on quality and this will become operational in September 2024.
 - **2024/27: Care homes for people with learning disabilities** – The council will develop two smaller care homes that are compliant with updated CQC requirements.

7. Carer Support

Carers say that supporting someone to live an independent life at home, in the community they know, can be very rewarding. However, the cost to carers in terms of their own health, financial situation, employment position and independence can be considerable. Not supporting carers can have a detrimental impact on their health and wellbeing as well as the people they are caring for and increase costs for the health and care system.

Who can be a carer?

In a nutshell: Anyone providing care and/or support to another person not under a contract of employment.

Types of Carers

- Young Carer: Aged under 18 caring for another person.
- Parent Carer: An adult caring for a disabled child.
- Adult Carer: An adult caring for another adult.

7.1 Current Position

The Carer Support Service contract is critical to the delivery of the local strategy for supporting carers. This includes access to information, advice, and guidance as well as facilitation of peer support groups and short break opportunities. The contract is currently held by Carers Trust Hillingdon as the lead organisation for the Hillingdon Carers Partnership, and through this model carers can access replacement care as well as specialist mental health support via Hillingdon Mind and the Alzheimer's Society. Carer's assessments under the Care Act are also undertaken on behalf of the council under the contract.

There are a range of options currently offered to carers in need of a break from their caring role these include:

- The council directly own and deliver a nine bedded respite service (Merriman's House) and a day resource service (Queens Walk Resource Centre) for adults with learning disabilities, physical disabilities, complex health needs and autism.
- The council spot purchases respite for older adults or people with disabilities within a registered nursing or registered care home setting (dependent on the cared for person's needs).
- Spot purchase of specialist building-based respite for those with very complex needs, such as challenging behaviour/autism.
- Home care provision for those wishing to remain within their own home.
- Day provision for older adults with dementia (Dementia Resource Service at Grassy Meadow Court extra care scheme).
- Direct Payments (DP): The council's identified financial contribution to meeting the needs of adult carers as identified from a carer's assessment undertaken as required under the Care Act in the form of a DP, which would ordinarily be paid through a pre-paid card. This would give a carer more flexibility about how a carer wishes to take a break, e.g. a holiday with support for the cared for person instead of a building-based service.

7.2 Demand

Unpaid carers represent both a source of demand for support services as well as a means of controlling demand from people who would otherwise need Adult Social Care services, or

increased levels of support from the council. The 2021 Census showed that 22,465 residents identified themselves as unpaid carers. The census showed 74 per cent of people identifying themselves as carers were aged between 25 and 64 and nearly 18 per cent aged 65 and over. Young carers aged five to 18 accounted for nearly 3 per cent of all carers and young adult carers aged 18 to 24 5.4 per cent. The age of carers is significant because it influences the type and nature of the support required to meet their needs.

Carers Trust Hillingdon is required to maintain a register of carers under the Carer Support Service contract. As of 30 September 2023, there were 1,287 young carers and 4,962 adult carers registered. In 2022/23, 3,970 carers were provided with respite or another carer service. This included bed-based respite and home-based replacement care funded and arranged via the council as well as that provided through the Carer Support Service contract and other third sector services. This suggests that the demand for carer support is much greater than the number currently accessing it, which provides opportunities for the market.

7.3 Issues and Challenges

The following are among the issues and challenges identified:

- **'Hidden' carers:** The number of people identifying themselves as carers in the 2021 census fell compared to the 2011 census and despite increases in the older people population expected to require the support of a carer. This suggests that there is an issue with people not identifying themselves as carers who may therefore not be aware that they can access support to assist in avoiding potential crises situations in the future
- **Bed-based respite and flexibility:** Bed-based respite for older adults is commissioned on a spot contract basis with external care home providers. This model of commissioning presents a challenge as providers are reluctant to support short stay respite due to the additional administration work and costs involved and will only accept respite stays of a minimum of two to four weeks. This does not provide flexibility and means that the council is not always able to source placements when carers need to take a break, which impacts on their wellbeing and that of the person or people they are caring for.

7.4 Commissioning Intentions

- **2024/25:** Review the respite offer to carers, including provision in bedded settings, replacement care and short break opportunities outside of the home. What is needed to support individual carers will be influenced by the age of the carer.
- **2024/25: Carer Support Service contract service model** – We will review the current service with carers, the current provider, and partners.
- **2024/25: Carer Support Service contract** – Working in partnership with the ICB and Borough- based Partnership, the council will re-tender this contract for a period of up to eight years.

8. Market Sustainability

8.1 Market Sustainability

The council has moved towards the Cost of Care rates identified from the Fair Cost of Care exercise undertaken in the summer of 2022 to ensure the ongoing financial sustainability of its providers.

Responsibility for managing the interface between providers and the council sits with the Supplier Relationship Team. Under the council's supplier relationship process all providers are allocated to one of three tiers based on a combination of spend, risk and performance. Providers may transition between tiers depending on circumstances. The regularity and basis of contact with a provider will be determined by their tier allocation:

- **Tier 1** - Quarterly meetings with an annual review involving a cross functional team e.g. Finance, Quality Assurance, Brokerage, etc.
- **Tier 2** - Six-monthly meetings involving a cross functional team.
- **Tier 3** - Annual contact which may be face to face or via telephone (this is mainly for transactional providers).

8.2 Quality Monitoring

A key objective of the council is to work with providers and the CQC to address quality issues where they arise. Support to achieve this can come from the council's own Quality Assurance Team and/or specialist advice and/or training via local NHS partners. Intelligence about quality and performance issues comes from a variety of sources, including:

- complaints or concerns from services users and/or their relatives
- safeguarding alerts/concerns
- reports from care managers or other professionals
- Healthwatch Hillingdon
- CQC reports
- other councils
- West London Commissioning Alliance
- outcomes of visits by the council's Quality Assurance Team
- customer/service users' satisfaction surveys
- elected members of the council.

The quality aspect of service provision is overseen by the Provider Risk Panel who report to the Care Governance Board, chaired by the Corporate Director Adult Social Care and Health, which meets monthly.

8.3 Workforce

The care sector generally in Hillingdon and the social care sector specifically face similar issues to those experienced nationally, i.e. recruitment, retention and attracting younger people into the field.

As illustrated in the table below, in care homes since March 2022 the total number of staff employed has increased by 23 per cent, but the number of agency staff has increased by 153 per cent. The significant increase in the numbers of agency nurses being employed is extremely concerning.

| Care Home Staffing Non-Agency v Agency | | | | | |
|--|------------------|------------------|------------------|------------------|-------------------|
| Staff | Mar 2022 | Jan 2023 | Jul 2023 | Jan 2024 | Percentage Change |
| Nurses | 127/19 | 133/29 | 141/33 | 164/48 | 29%/100% |
| Carers | 1,040/98 | 1,042/123 | 1,137/127 | 1,165/144 | 12%/46% |
| Non-Care Staff | 429/11 | 423/26 | 430/30 | 471/32 | 10%/190% |
| Total | 1,596/128 | 1,607/178 | 1,708/190 | 1,800/324 | 13%/153% |

Skills for Care (SfC) data for all Adult Social Care staff in Hillingdon identified that workers aged over 55 represented 27 per cent of all care staff. Given this age profile, approximately 1,500 people will be reaching retirement age in the next 10 years. This indicates the need for an Adult Social Care Workforce Strategy.

SfC also highlighted that the average pay rate for care workers in the borough was £9.58 per hour, which is below the regional rate of £9.70 per hour. This is a particular issue in Hillingdon, which is a high employment area with retail and the presence of Heathrow Airport in the south of the borough presenting alternative employment options.

Data from the NHS Capacity Tracker recorded that in February 2024 domiciliary care agencies in Hillingdon employed 2,740 staff. It should be noted that this data does not include data for those providers who deliver their Hillingdon contracts from operational branches outside of the borough, a notable absence being one of the Lead Providers.

Their performance data supplied to the council identified that they employed approximately 100 staff in the borough.

The Lead Providers (Comfort Care Services and Care Outlook) have reported challenges in the recruitment of new staff and were using the Health and Social Care Visa to recruit staff, which was a significant focus for home care providers. During 2023, the Home Office identified issues with recruitment using this route, including the potential for abuse. This has resulted in increased regulatory scrutiny from UK Border Force and increased bureaucracy that is deterring providers from using this recruitment channel. The council has developed an Adult Social Care Workforce plan, the focus of which is initially about securing and maintaining a sufficient level of suitably qualified staff to deliver adult social work responsibilities and directly provided services. It is intended that the scope will be expanded during the period of this MPS to include the wider Adult Social Care market.

9. Conclusion and Feedback

The trajectory for meeting the social care needs of adults in Hillingdon set out in this document shows that there are many commercial opportunities for providers during the period 2024/25 onwards. This is expected to be a live document that will be subject to amendment to reflect evolving circumstances.

The council will advise providers of changing priorities and new opportunities through the engagement routes identified in section 1.3 but also via the Capital E-sourcing portal.

Any feedback on the content of this document would be welcome, and any comments or queries should be sent to:

✉ Jan Major, Assistant Director, Direct Care and Business Delivery, Adult Social Care and Health,

Civic Centre, Uxbridge,

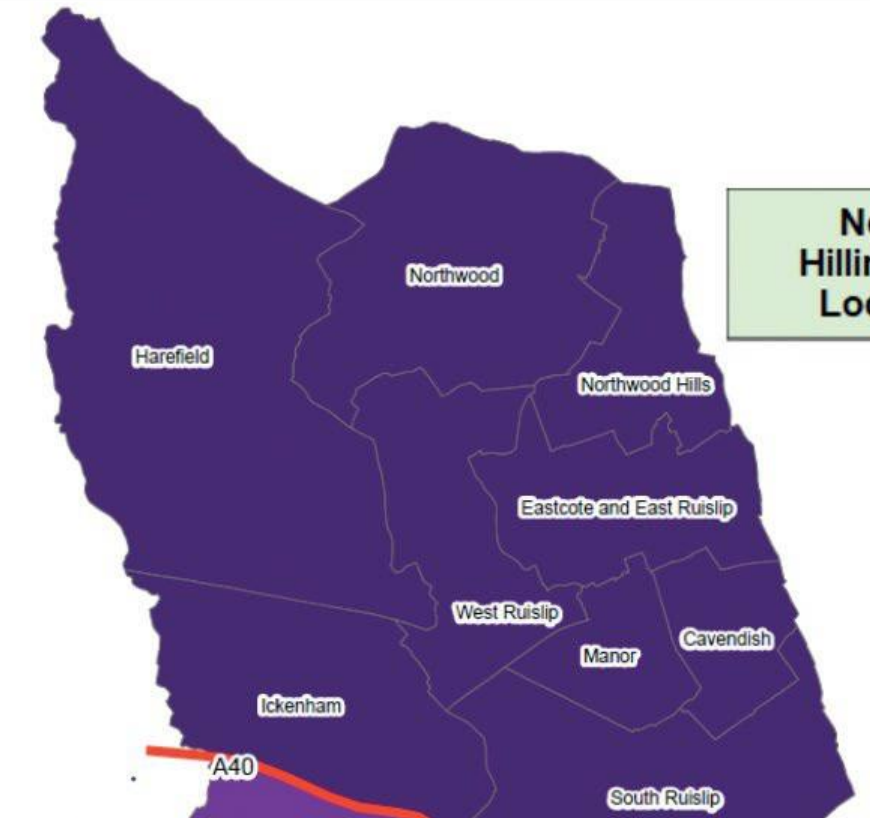
UB8 1UW @

jmajor1@hillington.gov.uk

Appendix 1: Hillingdon's Geography (Localities and Wards)



North Hillingdon Locality



Uxbridge & West Drayton Locality



Hayes & Harlington Locality



