



Adults & Health Overview and Scrutiny Sub-Committee

Title	Commissioning approach for care homes in Barnet
Date of meeting	6 th March 2024
Report of	Executive Director, Communities, Adults and Health
Wards	All
Status	Public
Urgent	No
Appendices	None
Officer Contact Details	Sam Jacobson, Head of Care Quality and Customer Finance Muyi Adekoya, Head of Commissioning for Older Adults

Summary

Barnet has a large and diverse care home market. This report summarises how the Council commissions care placements within care homes, and how across health and social care we support our local care homes to deliver high quality, sustainable care services.

The report covers:

- An overview of our care home market
- Our approach to commissioning sustainably
- Support available to providers through our Care Quality function
- An overview of our local workforce and how locally and regionally we seek to support providers
- An overview of our North Central London (NCL) Market Management programme and relevant initiatives for care homes
- Our enhanced health in care homes programme and clinical support available to care homes locally.

Recommendations

1. Committee is asked to note our approach to care home commissioning and support available to providers.

1. Commissioning approach for care homes in Barnet

1.1 Overview of the market

Barnet has one of the largest care home markets in London. There are 80 care homes in Barnet, with 2939 beds. This is the largest care home market in North Central London (NCL).

Compared to the England average Barnet's care home market has higher than average CQC ratings. 85% of registered care homes in Barnet are rated 'Good' or 'Outstanding' (1 care home rated outstanding); compared to 81% in England (as of 1 February 2024).

Given the size and variety of operators within our local care home market, the number of general residential and general nursing beds is broadly sufficient in line with local need and demand; however, there is a relative under-provision of more specialist older adults' care home services for people with dementia and / or mental health conditions.

Largely as a result of the size of our care market, most of our residential and nursing placements are made in Barnet. 76.9% of older adult residents who are placed in a care home by Barnet council are living in a care home within the borough. 68.9% of all care home residents placed in a care home by Barnet are living in a care home within the borough. Barnet is the 6th highest of the 31 London boroughs for the largest proportion of placements made in borough (there is no available benchmarking specifically looking at the proportion of older adults placements made in-borough).

1.2 Transparent approach to setting prices

With a view to maintaining the financial viability of the sector, the Council's commissioning approach to care home placements is predicated on calculating a 'minimum sustainable price' for placements in borough, which the council will not go below, but will commission above. This is an ethical, evidence-based approach which ensures that the Council does not commission placements at rates that are unsustainable.

For the last 5 financial years, the Council has worked with Care Analytics to calculate a minimum sustainable price for providers to deliver care home services, based on industry standards around capital costs, staff costs and staffing and management structures in the area, and using the assumption that all residents in a given home are placed at the council's rates. The model also includes a small percentage of surplus/operating return for the provider. The council does this work in partnership with the other 4 north central London boroughs which regularly make placements in Barnet. In addition, we also use information from London wide analysis and modelling of care home prices and costs, carried out through the London Association of Directors of Adult Social Services (ADASS). Our minimum sustainable prices for 2023/24 are as below (these will be uprated in line with inflation for 24/25 in due course). The cost per week of nursing placements is provided net of Funded

Nursing Care (FNC), a flat rate the NHS pays towards the nursing care component of nursing home fees.

Category of placement	£ Cost per week (excluding FNC)
Residential	£693
Residential EMI	£735
Nursing + Nursing EMI	£753.81

This price point does not represent a single set fee for all placements. The Council determines fees with providers on a home-by-home basis either via individual spot contracts or block arrangements, in order to reflect the fact that provider costs will vary in line with their operating model. The fees paid are quoted by providers and based on a mutually agreed negotiated fee. Our minimum sustainable price reflects the lowest point we consider it reasonable to pay for placements in the context of these provider-by-provider negotiations to maintain the integrity of the market.

The Council block purchases 164 beds across 10 homes (9 of which are in Barnet, one is in Brent). 89 of these beds are nursing or nursing dementia, 55 are residential or residential dementia. Our average rates are as below. The Council is in the process of reviewing its block arrangements, with a view to increase general residential, residential dementia and nursing dementia capacity.

Category of placement	Average Block Bed £ Cost per week (excluding FNC)
Residential	£775
Residential (dementia)	£820
Nursing	£802
Nursing (dementia)	£820

1.3 Support to the market

Beyond our approach to price, the Council provides a significant amount of support to our providers which we consider a core component of our commissioning approach.

Barnet has a Care Quality function which manages our operational relationship with providers. This is a unique service which is not replicated elsewhere in London. Every care home (and contracted CQC registered homecare, extra care + supported living provider) has a linked Care Quality Advisor who:

- Visit homes at least once a year (more frequently as required) to undertake quality assurance checks in line with CQC standards
- Ensures care providers receive relevant information and advice in a timely manner
- Coordinate the process through which we manage quality concerns and safeguarding risks within a care home and associated improvement planning work with providers, this includes working closely with CQC and other professional agencies, and following best practice and embedded policy and procedures to manage risk and maintain a safe environment for residents, with key triggers points for action and escalation

- Supports the coordination of wider health and care in-reach and support to the sector, including on outbreak management, vaccination programmes and wider public health interventions
- Runs and / or coordinates targeted training and support initiatives (e.g. mental capacity act awareness, person centred support planning etc)

In addition, the Care Quality function also:

- Manages our planned care and support plan reviews for care home providers. The location of the service within Care Quality ensures that:
 - o Decisions on prioritising annual reviews of residents in care homes can be made proportionate to risk, based on feedback from Care Quality Advisors, and;
 - o Feedback from reviews can be used to triangulate intelligence on the quality of care provided in Barnet
- Arranges a series of provider engagement and networking events throughout the year to support sector development and build communities of practice.
- Works in partnership with the Provider Safeguarding Team who oversee the operational management of resident safeguarding.

1.4 Care Home Workforce

Barnet's care home providers are significant contributors to the local economy. Based on latest NHSE Capacity Tracker data (February 2024) there are 827 care staff employed across homes in Barnet, 256 non-care staff and 83 registered nurses.

As is the case nationally, in Barnet and across North Central London as a whole, vacancy rates within the sector are high, with 11.7% vacancy rates across the care sector on average in North Central London. In addition, Barnet and North Central London have an ageing care workforce, with 29% of care staff over 55.

To address some of these challenges there is a significant amount of support available for care homes and all care providers across North Central London and provided locally by the Council.

As part of our a collaborative NCL ASC Programme which Barnet Council is a member, a key strand of work is a programme of initiatives to support provider sustainability through supporting recruitment and retention. These initiatives are for the benefit of the care sector in NCL as a whole, but of particular relevance to care homes are the following projects:

- Student placement pathways - work with local colleges and providers to develop good placements to design placements to incorporate true understanding of roles in Social Care
- Staff recruitment - continue to resource Proud to Care North London (our regional recruitment platform for Adult Social Care) and work with London ADASS on a London wide site and listen to Providers around workforce issues and collaborate to resolve as far as possible.
- Princes Trust project – work with the Princes Trust to recruit a target of 75 young people (60 sustained outcomes over 3 months) into health and social care roles
- Development of the NCL health and social care academy, which will deliver progression opportunities for staff already in the sector, bring new entrants into the sector and increase the number of people training in social care. Approximately £600,000 has been awarded to the health and care academy programme, with half supporting the social care workforce. The

programme has a target of 491 people into roles across Health and Social Care so far NCL have placed 165 people and with funding through May 2025 the hope is the target will be exceeded.

Locally, to supplement the NCL Workforce Programme and the support already provided to the sector through our Care Quality function, the Council have recently appointed x2 officers with dedicated responsibility for supporting the care sector workforce – a ‘workforce development lead’, focused on managing a programme of activities to support recruitment into ASC jobs in Barnet and supporting our care providers as employers, and a ‘provider support lead’, focused on working with providers to better understand and support their training and development needs. These roles have been in place since July 2023, and their achievements in that time include:

- Running a successful job fair at Colindale’s Royal Air Force Museum
- Establishing a rolling programme of individual recruitment and profile-raising events for individual providers, in partnership with BOOST, DWP and Ingeus (‘CAIR’ (Career, Information, Advice and Recruitment Events)).
- Establishing a programme of training and support for nominated individuals of CQC regulated services (e.g. owners / board chairs with overarching compliance responsibilities for their services) on CQC expectations

1.5 NCL Care Market Programme

As part of a collaborative North Central London Adult Social Care programme which Barnet Council is a member, there is a joint programme between the five NCL councils and the NCL ICB, focused on supporting a sustainable care market at a sub-regional level, which can meet current and future demand for care home placements. This includes the following priorities:

- Exploring how to stimulate development of additional care home capacity in NCL, with a particular focus on increasing nursing capacity.
- Paying a consistent rate to care providers based on host borough rates.
- Aligning approaches to inflationary uplift processes to promote sustainability.
- Collaborating on quality assurance offers to provider to raise quality levels.

Barnet Council are committed to working with care home providers to develop shared solutions to meeting future demand for care home placements, building on our current approach to paying a sustainable cost of care. To support this the NCL ASC Programme have established a co-production forum for care home managers, in partnership with NCL ICB, that meets monthly and includes representation from Barnet Council. This forum gives care home managers an opportunity to shape our priorities and the strategic direction we take in NCL. The group is currently focusing on how to increase capacity to meet the needs of residents with complex physical and mental health needs at present.

1.6 Enhanced Health in Care homes / Digital Programme

The Enhanced health in care homes (EHCH) model is a framework for improving the health and wellbeing of people living in care homes. It was introduced by NHS England in 2019 as part of the NHS

Long Term Plan. The model aims to provide proactive and personalised care for care home residents, their families and staff, through collaborative working between health, social care and voluntary sectors.

Barnet care homes can access clinical in-reach support from the One Care home team (part of Central London Community Healthcare Trust (CLCH) which currently supports 68 care homes with 2499 beds across Barnet. This multidisciplinary team includes community matrons, geriatricians, psychiatrists, occupational therapist, a rehab support worker, technical instructor and trusted assessors work alongside 2 Primary Care Network (PCN) pharmacists and the wider Central London Community Healthcare Trust (CLCH) workforce to undertake holistic geriatric assessments, sign post or deliver the identified support to care home residents.

The ICB and North London Councils have also developed a joint digital social care programme over recent years that has embedded evidence based digital innovations in partnership with care providers. The programme is an enabler to support the care sector to meet new national expectations around digital maturity, including using digital care records. The digital care home programme aims to work with care homes to increase their access to digital tools which can improve care, whilst also working alongside care home staff to provide training. The support provided will enable care home staff to:

- Meet key data security standards and improve information governance standards
- Support the delivery of quality care through the use of digital tools and increase connectivity

Barnet care homes have access to remote monitoring, digital social care records and acoustic monitoring (falls prevention tool), with each of the schemes evidencing positive outcomes for residents and care providers. NCL's work has been recognised in a UN report on healthy ageing as a model of best practice (<https://www.decadeofhealthyageing.org/find-knowledge/innovation/reports-from-the-field/detail/technology-improve-care-home-covid19-uk>)

Other schemes supporting residents in bedded settings in Barnet include:

Programmes	Homes engaged
Neuro response: digital system to support the detection of UTI and correct treatment	Sydmar Lodge, Appletree and Cantalowes
111 path way via Whzan, 15 min call back from clinical if NEWS score 4 or above.	Sydmar, Appletree and Cantalowes
Care home champions, supporting the digital programmes	Deputy Appletree Manager for extra care retirement Jewish care
Bite size training high number of home care (DOM care) providers from Barnet attending	

2. Alternative Options Considered and Not Recommended

2.1	N/A
3. Post Decision Implementation	
3.1	N/A
4. Corporate Priorities, Performance and Other Considerations	
	<p>Corporate Plan</p> <p>4.1 The priorities in this report align with the corporate plan theme ‘live well’</p> <p>Corporate Performance / Outcome Measures</p> <p>4.2 Other relevant strategies include:</p> <ul style="list-style-type: none"> - Barnet’s market position statement - Barnet’s market sustainability plan <p>Sustainability</p> <p>4.3 There are no direct environmental implications from these recommendations</p> <p>Corporate Parenting</p> <p>4.4 In line with Children and Social Work Act 2017, the council has a duty to consider Corporate Parenting Principles in decision-making across the council. There are no implications for Corporate Parenting in relation to the recommendations in this report.</p> <p>4.5 Care experienced adults may go on to develop care and support needs and draw on council adult social care support. The services and initiatives described in this report are relevant and accessible to care experienced adults.</p> <p>4.6 Risk Management</p> <p>There are no direct implications arising from this report. Quality of provider services, risks relating to provider failure, and financial risks relating to adult social care demand, are</p> <p>4.7</p> <p>Insight</p> <p>4.8 There are no insight recommendations stemming from this report</p> <p>Social Value</p> <p>4.9 There are no social value recommendations stemming from this report.</p>
5. Resource Implications (Finance and Value for Money, Procurement, Staffing, IT and Property)	
5.1	Care Home placements financed by LBB are funded from within the overall placements budget – £112.4m (net) in 2023/24. The placements’ budget is forecasting an overspend of £16.686m for Q3 as reported to Cabinet on 6 February 2024.
6. Legal Implications and Constitution References	
6.1	The terms of reference (ToR) for Adults and Health Overview and Scrutiny Sub-Committee are set out under Section 13 (2B) of the Barnet Constitution: COMMITTEES (moderngov.co.uk)

- 6.2 The committee's ToR includes that the Sub-Committee shall perform the overview and scrutiny role and function in relation to, inter alia, all matters as they relate to Adult Social Care, and also of policy proposals which may have an impact on health, public health, social care and wellbeing in the London Borough of Barnet.
- 6.3 The Care Act places duties on local authorities to facilitate a diverse, sustainable high quality market for their whole local population, including those who pay for their own care; promote an efficient and effective operation of adult social care; and to support the care market as a whole. There are also duties in the Act in respect of continuity of care.

7. Consultation

- 7.1 N/A

8. Equalities and Diversity

- 8.1 Decision makers should have due regard to the public sector equality duty in making their decisions. The equalities duties are continuing duties they are not duties to secure a particular outcome. The equalities impact will be revisited on each of the proposals as they are developed. Consideration of the duties should precede the decision. It is important that Cabinet has regard to the statutory grounds in the light of all available material such as consultation responses. The statutory grounds of the public sector equality duty are found at section 149 of the Equality Act 2010 and are as follows:

A public authority must, in the exercise of its functions, have due regard to the need to:

- a) Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- b) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:

- a) Remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
- b) Take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it;
- c) Encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

The steps involved in meeting the needs of disabled persons that are different from the needs of persons who are not disabled include, in particular, steps to take account of disabled persons' disabilities.

Having due regard to the need to foster good relations between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:

- a) Tackle prejudice, and
- b) Promote understanding.

Compliance with the duties in this section may involve treating some persons more favourably than others; but that is not to be taken as permitting conduct that would otherwise be prohibited by or under this Act. The relevant protected characteristics are:

- a) Age
- b) Disability
- c) Gender reassignment
- d) Pregnancy and maternity
- e) Race
- f) Religion or belief
- g) Sex
- h) Sexual orientation
- i) Marriage and civil partnership

Advice on completing Equality Impact Assessments (EIAs) can be found [here](#).

9. Background Papers

9.1 None

