

Adults, Communities & Wellbeing



Transforming NNC Adult
Social Care Provider Services

Strategy and Case for Change

23 September 2022 v3.2

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Strategy for Transforming In-House Adult Social Care Provider Services



North
Northamptonshire
Council

Vision & Principles for In-House Adult Social Care Provider Services

Our Vision

“Delivering the highest quality assessment, re-ablement and enablement to support people to live their lives independently and be ambitious for their future”

Principles

- Our in-house regulated care providers will have enablement, re-ablement and developing independence at the heart of their approaches
- Our provider services will embed strengths and asset-based practice
- We will retain services to ensure capacity to be a provider of last resort should be required
- We will not compete where the independent care market is able to readily deliver support
- We will consider delivering services that we struggle to get from the independent sector





Independence & Reablement ... the right support, in the right place, at the right time

Enablement, re-ablement and developing independence will be at the heart of our in-house regulated provider services approaches. This will require a change in focus, culture and delivery, moving away from longer term provision, unless there is a need for a service that the wider care market is not able to deliver.

Investment in both the physical buildings, the terms, conditions, skills and career potential of our staff is key to delivering high quality provider services and retaining the best people to deliver better outcomes for people that have care and support needs in North Northamptonshire.

Efficient use of our resources and progression through re-ablement or enablement programmes will ensure that more people have access to the right support, in the right place at the right time.

By moving the focus of our in-house provider services to core aims of promoting independence and re-ablement will also put the council in direct control of delivering these outcomes that are key in positively managing demand faced by services and contributing to the longer-term financial sustainability of the council.

Achieving ambitions

Evolving the core purpose of our regulated in-house provider services creates fantastic opportunities to focus at key points in peoples lives and help them to explore and achieve their ambitions.

There are currently missed opportunities around a number of areas, particularly when working with younger adults. They include:

- Transitions from children's to adult services
- Transforming Care Programme (complex learning disabilities cases)
- Physical disabilities where people have had life changing events or degenerative

People with disabilities have the same ambitions as everyone else including having their own home, having relationships and families, travelling, working and taking up hobbies and pastimes they are interested in.

Sometimes this requires positive risk-taking and working with other stakeholders on understanding and mitigating risks where possible. This requires a change in culture and investment in skills to act in this enabling way.





Empowered, people-focused staff

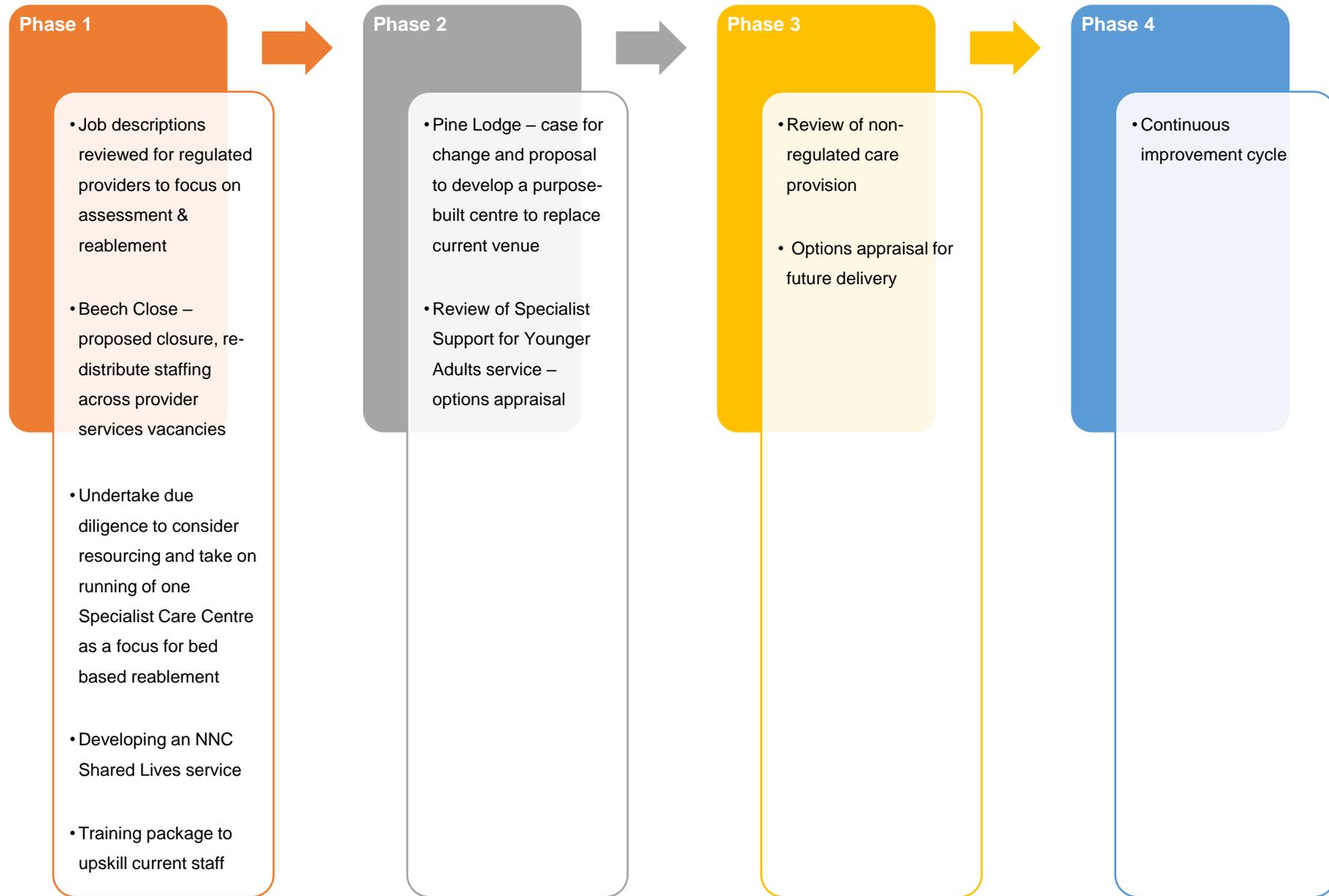
Our in-house care and support staff have been significantly affected by the uncertainty and financial challenges experienced in the previous Northamptonshire County Council.

The buildings in which they work have not had the right investment to support staff in delivering the best possible care and support. There have been historic challenges around pay, terms and conditions that have impacted on recruitment and retention that then means that staff are under additional stress when trying to deliver services as they have to complete overtime or work with agency staff that are not so familiar with the services.

Our aim in setting a new vision and focus for provider services is to address long-term problems such as the built environment but also in having a strong emphasis on developing skills, having clear career pathways and attracting and retaining great staff into roles that they are fairly rewarded for and that they enjoy as they are supporting to become more independent or are taking positive steps to meeting ambitions that will improve their lives.

Phase 1 will focus on this element for staff in regulated care settings, however phase 3 will explore this for staff in other services such as day care settings.

Phased transformation





Transforming In-House Adult Social Care Provider services

The Case for Change



Provider Services – Here and now

- Many of the physical care assets have not been invested in and the costs and difficulties in making those assets fit for the future are prohibitive and investing in newer facilities will enable us to provide the environments for our staff to deliver the best quality services
- Our own staff are poorly paid and their training and development has been minimal within previous organisations but we have a finite budget within which to work
- CQC ratings
 - Beech Close (CQC requires improvement)
 - Pine Lode (CQC requires improvement)
 - Specialist Support for Younger Adults (CQC requires improvement)
 - Reablement North (CQC Good)
- Retaining a workforce that can get behind the philosophy we want for provider services and significant improvement in physical space are two of the key factors at the heart of the CQC ratings for building based services such as Beech Close and Pine Lodge
- At the moment it is difficult to compete with other sectors that reward people better for work that carries less responsibility, less unsociable hours and lower levels of stress

Relevant factors

Poor condition of facilities mean even to meet significant investment required to return them to an acceptable level of quality. Even then the environments would not be ideal for the people that now need supporting in them

Beech Close

- Bedroom sizes below minimum standards
- No en-suite facilities
- Full replacement of heating systems required
- Bathrooms unfit for undertaking hoisted transfers
- Whole areas out of action reducing occupancy to circa 50%

Pine Lodge

- Similar challenges
- Circa 60% of home has been out of action due to damage to property by people being supported in that environment
- Lack of de-escalation space and low arousal environments



Other Assets

Sanders close or Patrick Road – potential to re-develop as “New Pine Lodge”

The case for change

- The local authority **should not be competing as a provider** in a market where the independent sector is active and there is capacity
- There is a role for the local authority in **delivering services that we struggle to get from the independent sector**
- It is beneficial for the local authority to retain some services in order to **enable it to be a provider of last resort should that ever be required** e.g. following provider failure
- Having **direct control over re-ablement** and re-focusing all our in-house regulated care providers to have enablement, re-ablement and developing independence at their core of their ethos puts us in the best position to:
 - understand the return on investment in providing re-ablement
 - deliver cost reductions in long term care budgets
 - improving working conditions for our staff
 - Support people to maximise opportunities through more independent living

Specialist Care Centres - Background

- Shaw Private Finance Initiative (PFI), circa 7 years left on PFI, ownership of properties revert to public sector organisation at end of that period (NNC is freeholder of both Thackley Green and Spinneyfields)
- Properties are under 20 years old and have been maintained by Shaw through the PFI period
- WNC have approached NNC about potentially running a Specialist Care Centre In North Northamptonshire
- WNC have been unable to run Thackley Green at full capacity (51 beds in each), due to the current staffing budgets not enabling WNC to staff the services to that level. If the council were to take on the running, we would need to invest to deliver a different type of service, for example with more intensive staffing, not try and deliver the same service within the same budget envelope
- We currently purchase around 4.5 beds from the independent sector market every week due to not being able to utilise SCC beds at the level of complexity required

Thackley Green Specialist Care Centre

CARE HOME WITH NURSING

Off Lewin Road, Great Oakley, Corby, Northants NN18 8JS

📞 Contact Northamptonshire County Council on (01604) 368910



Opportunities

- Re-invest financial and people resources from Beech Close into other provider services
- Change focus of residential and domiciliary care away from longer –term provision to one that delivers assessment, enablement and re-ablement as part of maximising opportunities for individuals, and promoting independence and positive risk-taking
- Develop a capital strategy to invest in a younger adults service to build a purpose built 16-20 bedded unit that provides flexible assessment, transitions matching and Transforming Care Programme repatriation of people that are currently supported out of area. Respite would continue to be provided to people that currently use it or as part of an emergency assessment, possibly including a community hub for e.g. health checks, carers assessments etc
- Re-distribute all revenue funding from Beech Close whilst re-grading roles to take on greater responsibilities including providing re-ablement
- Re-deploy care staff from Beech Close – reducing recruitment challenges, increasing job satisfaction and increasing retention
- Reduce spend in independent care sector through:
 - not purchasing D2A beds at inflated market rates,
 - achieving better re-ablement – leading to reduced length of stay/later admissions to residential care
- Consider opportunities to base therapy and reablement staff from Reablement North in a reablement hub that implements a “pull model” to move people through bed based and community reablement and out efficiently and with confidence. Successful models regularly see length of around an average of 21 days significantly increasing available capacity through efficiency

Risks

- Closure of residential/relocation of care homes attract significant attention, however showing how this will benefit residents and staff in the medium to longer term will be key
- Uncertainty for staff – can be managed through engagement and clear comms plan
- Assumption we can redeploy staff from Beech Close to take up roles in domiciliary care roles at Re-ablement North or Specialist Support for Younger Adults or, if due diligence supports the recommendation, at an SCC run by North Northants Council
- Risk around CQC ratings becoming worse for Beech CI and Pine Lodge (reputational damage)
- There is a risk in not doing anything – e.g. being unable to access the types of services required from an SCC in the North geography, or not having direct control over re-ablement delivery and outcomes

Anticipated outcomes

- If due diligence supports the recommendation to take on the running of an SCC, we could end up with a higher quality building with 51 beds to be used flexibly dependent on current need around admission avoidance, assessment, respite and re-ablement
- We end up with a new build purpose built younger adults resource that will focus on reducing costs for LD younger adults through flexible use of space around enablement, re-ablement, matching, assessment and transition
- Reduce risk around physical environment at Beech Close and Pine lodge impacting on CQC ratings and improving the places of work for staff by investing in newer facilities
- Investing in our own staffing so we become a care employer of choice with well trained staff that sensitively and competently support people to develop or regain their independence

Financial case for change – activities being undertaken and due diligence

1. Model cost of increasing care staff pay in regulated services as a result of re-focusing core activity on delivering reablement activity
2. Model cost of running Thackley Green Specialist Care Centre with enhanced staffing to run at 51 beds occupancy with care staff pay in line with point 1 above
3. Consider and model any impacts for supervisory roles
4. Determine additional capacity created by more efficient running of a specialist care centre
5. Determine any efficiencies through better outcomes delivered in SCC as a result of us running the service
6. Determine any efficiencies that can be made as a result of the following parameters
 - a. less people going into Res vs current avg per month
 - b. People delayed going into res vs current avg
 - c. Impact on double handed care package reduction through more appropriate bed based reablement
 - d. Reduction in avg cost of new starters for domiciliary care as a result of better outcomes
 - e. Reduction in avg costs as part of a review
 - f. Financial benefits of admission avoidance as a result of preventing people going into hospital and improved outcomes
 - g. Increasing shared lives provision through an NNC team and model associated cost savings

Indicative timeline of activities required for each phase

