

Public Account and Public Administration Committee Care Home Commissioning Inquiry.

Response from Gwent Regional Partnership Board

Please find the response to the Public Accounts and Public Administration Committee 'Care Home Commissioning Inquiry' from the Gwent Regional Partnership Board including the five local authorities and Aneurin Bevan University Health Board.

The Gwent Regional Partnership Board welcomes the opportunity to contribute to a response to the Public Accounts and Public Administration Committee, following their request of Regional Partnership Boards across Wales to provide evidence to the Care Home Commissioning Inquiry.

Please note that this response is made in collaboration with the five local authorities in Gwent and the Aneurin Bevan University Health Board.

1. Measures to reduce complexity when accessing care homes for older people.

All local authorities that place older adults in care homes has a range of information available to them to provide a comprehensive 'Information, Advice and Assistance' service in line with the Social Services and Well-being (Wales) Act 2014. This can take the form of leaflets, on-line resources and direct support and discussion from professionals involved in their care.

The nationally available DEWIS resource is also available to individuals and families when considering a care home placement.

In the NHS care home placements for Continuing NHS Healthcare are generally made from acute hospital sites. Support in the way of information to individuals and families is similarly provided by professionals involved in the care of the patient.

As mentioned below a weekly care home vacancy list is produced on a local and regional basis and this is used by professionals when making placements in partnership with individuals. The list will also indicate if there is any reason why a placement should not be made in a particular home; for example, due to concerns about the quality of care available or if the home is in 'COVID incident.'

Monmouthshire County Council for example: has produced written material which aims to guide people through the process of choosing and accessing care homes for older people. It can often be a challenging time for people and their families when seeking to access a care home, sometimes this can be because of an accident or decrease in overall health/ability. This can often

bring great stress for families who are seeking a care home placement. People will be supported through this process by a social worker or together appropriate professional who will be able to advise and guide them.

It is however acknowledged that this is complex for people and their families, issues such as:

- Availability of places in care homes who accept the host authority's fees rate
- Third party payment where choice of home has fees above the host authority's rate
- FNC payments and LA payments
- Personal financial contributions

These measures are designed to ensure that the transition from home to care home or hospital to care home are made as simply and stress free as is possible. However, it must also be noted that the 'Choice Policy' remains suspended following the pandemic.

Finally, Data Cymru are developing on-line resource to provide an online Care and Support Capacity Tool which will provide detailed information for people who require a care home, and this is welcomed. It is envisaged that this will be formally launched in the Autumn of 2022.

2. Identifying and addressing root causes of any division between partners that could arise from differing public sector funding approaches for different aspects of care

In common with all areas in Wales and the UK, there are a range of prices paid by statutory agencies to fund care home placements for adults. This varies between local authority areas and between the local authorities and Aneurin Bevan University Health Board.

The process for seeking and determining a primary health need and entitlement to CHC can be complex, assessments can take time and decision making sometimes not quick despite the clear timescales set out in the Guidance. It is understandable that with budgetary constraints being a big issue for both partners there is caution when determining responsibility for funding. A greater understanding is needed of the legal basis on which local authorities can provide care and support, for example. However, lengthy delays in assessment and decision making can cause considerable distress for people and their families. It is important that local authorities and health boards come together to understand the new CHC guidance and arrange joint learning and training effort across Wales. This should serve to quicken the process.

There is also a variance in care home placement costs as local authorities are responsible for funding residential care and the Health Board is responsible for funding nursing care. These incur cost differentials for example in the staffing costs. Variation in expenditure will also sometimes reflect the nature

of the care being provided, for example for very complex placements, the care and clinical staff ratio is higher due to the level of need and complexity of interventions required. Operating costs may also vary between localities due to more local factors such as land values. Therefore, there is not at present, a single rate for care home fees in the region, although the fee methodology work mentioned below has this as a future aspiration.

As stated below in Gwent a regional fee methodology has been developed and agreed. However, this approach does not at this stage apply to CHC funded placements. The Health Board has its own methodology for Continuing NHS Healthcare care homes fees.

As working practice begins to return to more normal ways of operating attention will turn more so to the rebalancing care this will feature as part of our partnership development programme.

3. Measures to improve performance information relating to health and social-care commissioning to determine whether policy aims are being achieved, well-being goals delivered and to provide evidence of the impact on service-user outcomes

From a regional perspective several measures are in place to ensure that a robust overview of commissioning activity and challenges are in place. This includes:

- a weekly vacancy reporting system which monitors the vacancy rates across the region, the level of occupancy and the degree of financial risk associated with high vacancy levels as well as placements that are unavailable due to provider performance and/or escalating concerns. In addition, Data Cymru are leading a project to provide an online 'Care and Support Capacity Tool' which will provide detailed information for those accessing a care home. This is welcomed.
- Weekly or fortnightly regional webinars with all care home operators and commissioners
- A standardised approach to contract management and quality assurance was being developed in a co-productive manner, however this was interrupted by the pandemic. In addition to this there is a pre-existing joint monitoring contract compliance process, which was adapted through the pandemic response, but has recently been reintroduced as normal working practices return.
- Care homes that have been identified as having concerns are managed via the Provider Performance or Escalating Concerns process with regulatory and partner organisations

4. Ensuring that pooled-fund arrangements for care home commissioning are delivering the intended benefits

The Gwent Regional Partnership Board agreed a Section 33 Pooled Fund Arrangement which commenced on 1st April 2018 and remains extant. The

Agreement is made under Section 33 of the National Health Service (Wales) Act 2006. The information provided via the pooled fund arrangement is a useful overview of activity and expenditure of the care home accommodation market for older peoples' accommodation services in Gwent. The fund is managed within Torfaen County Borough Council as the host Authority for the five Local Authorities and the Health Board. Whilst the current process is useful, further work is needed to understand how best to maximise this arrangement. At this stage the pooled fund serves as a tool to record and monitor financial and non-financial data on each partner, consolidated on a regional basis

5. Considering whether Regional Partnership Boards are working as intended in respect of care home commissioning, in the context for example of statutory guidance

The Regional Partnership Board has worked hard over several years to ensure that the region meets its obligations under Part 9 of the Social Services and Well-being Act (Wales) 2014. This is reflected in the following areas:

- Pooled Fund Arrangements – Section 33 Arrangement for accommodation services for older people in Gwent
- Regional Framework Agreement – a framework agreement was negotiated between all six statutory partners, the providers of residential and nursing care and their representative bodies
- Regional Fee Methodology – this was negotiated and agreed in 2019, however, the pandemic arrived just prior to planned implementation and this is now being reviewed due to the significant changes post pandemic, the workforce issues and the cost-of-living crisis.
- Regional Approach to quality assurance – this process was also begun in a co-productive approach with the providers and commissioners working together and significant progress made prior to the pandemic. Unfortunately, the pandemic has interrupted this work and an opportunity to restart this work in currently being sought.
- Market Stability Report – the MSR is drafted and is out for consultation prior to publication on 1st June. This has been a useful exercise which has brought together in one place the collective issues and challenges that face health and social care commissioning organisations in the region.
- PNA and Action Plan – the PNA is now published and some of the findings link to the MSR. All actions required will be picked up and brought forward to the Area Plan work during 2022/23.

Therefore, significant progress has been made across the region in meeting the obligations under Part 9 of the SSWB Act. The common contract and contract monitoring approach has been in place for some years now. Care home operators report this has simplified matters for them. As stated, the development of the regional fee methodology approach was affected by the

onset of Covid 19. The work has now resumed with a view to having a final methodology ready for adoption for 2023/24.

6. Understanding the reasons for the variation in expenditure on residential care continuing healthcare costs that suggest inequitable application of policy across Wales

The Local Health Board provides the following explanation: the variation in expenditure will be provider and individual need specific, however for very complex placements, care and clinical staff ratio is higher due to the level of need and interventions. A group home provider tends to be less expensive than an individual singular run home. This is also further influenced by the care home facility and location; the variances in property costs across our regions and localities will impact on the care delivery cost of our provider organisations.

7. Consideration of the ‘potentially perverse incentive’ for local authority commissioners of care that may arise from the charging cap on service user contributions is different for care-home placements compared to people supported in the community.

For non-residential care there is a charge cap of maximum £100 per week, dependant on a person’s ability to pay. This cap has remained at £100 per week for over 3 years, and before the SSWB Act 2014 was established, previously it was dealt with under Fairer Charging where the weekly cap in 2013 was £150. In Monmouthshire for example, in the past 9 years the cap has been reduced by £50 per week, despite increases in service provision costs for local authorities and the current cost of living crisis. Conversely, for a person receiving residential care, there is no cap, and if a person has high income and/or assets above £50K may have to fund the care themselves and not eligible for any Council financial support. If you have two comparisons, a person having 24-hour care in their own home, the most they will pay is £100 per week, but if they were admitted into a care home may have to pay themselves, therefore the Council is in a position where increased care is provided in a person’s home/community which the local authority has to subsidise rising costs.

In Newport City Council for example (as with other local authorities) assess an individual based on their eligible social care needs and within the parameters of the Social Services and Well-Being (Wales) Act 2014. The relevance of charging policy is negligible to that assessment process as it is primarily focused on individual need.

8. Regional Partnership Board’s reflections on the overall stability and quality of care home provision for older people across Wales.

The region has recently been focusing on the Market Stability Report which is due to be published on 1st June 2022. The following is a summary of the section that deals with Adult Care Homes in Gwent:

- High levels of voids in residential and nursing care are a concern as is the lack of supply of specialist EMI nursing care in some areas.
- Rising costs of staff as well as recruitment and retention are challenging for the care sector as a whole
- Residential and nursing care homes face infrastructure issues. Older buildings may require repair and modernisation, along with significant impact of rising utility costs.
- The cost-of-living crisis across the whole economy
- Funding challenges in both the short and long term.
- The onset of COVID and its effects over a two-year period has raised questions about longer term market stability of many homes.
- Occupancy levels remain well below pre-COVID levels circa 80% average. This position is very mixed with only a few operators being at very low levels i.e., < 40%/50%. It is difficult to see how providers will be able to continue to operate at such low levels if no sustained increase in admissions is forthcoming.

These systemic challenges may have an impact upon the longer-term stability of the market, but at this stage it is difficult to foresee what that might be.

9. Comments regarding the Auditor General's national summary report for North Wales.

The findings of the Auditor General's national summary report for North Wales are noted and receiving consideration.

A locality-based perspective: The Auditor's report based on their findings in North Wales highlights a range of issues that are applicable to the nation. The report emphasises the need for a more streamlined set of funding arrangements amongst partners. While any improvement to the funding systems is welcome, particularly in respect of access to CHC funding, there needs to be significant additional investment in the care sector to ensure sustainability of services. The report also recommends the development of a framework for outcome-based performance reporting. While this may have its merits, recruitment, and retention of care home staff, as well as rising costs on an unparalleled scale, remain the gravest issues facing the sector.

10. Agreed weekly care home fees for 2021-22 and 2022-23 for each local authority area, split between residential and nursing home care, and differentiating between the basic care and mental health enhancement fees

Fees 2021/22

Commissioner	Res Care	Res Care MH	Nursing Care	Nursing Care MH
Blaenau Gwent	£626.00	£690.00	£718.00	£732'00
Caerphilly	£633.53	£694.49	£633.42	£698.63
Monmouthshire	£670.00	£747	£708	£734
Newport	£596-£617	£686-£750	£693-£760	£750-£789
Torfaen	£689.64	£757.19	£729.31	£763.34

Fees 2022/23

Commissioner	Res Care	Res Care MH	Nursing Care	Nursing Care MH
Blaenau Gwent	£719.90	£793.50	£825.70	£841.80
Caerphilly	£725.64	£791.72	£722.10 (inc. social care element of FNC)	£796.44 (inc. social care element of FNC)
Monmouthshire	£725	£810	£766	£794
Newport	£661-£722	£761-£886	£790-£909	£836-£952
Torfaen	£806.88	£885.91	£944.31	£952.31

NB: Not all local authorities in Wales have published their rates for 2022/23 at the time of writing.

11. Agreed Continuing Health Care Home core weekly fees for 2021-22 and 2022-23 for your area (being the standard rates paid by the Health Board).

The Aneurin Bevan University Health Board has not yet published its CHC rates for the period 2022 – 2023.

The Gwent Regional Partnership hopes that the Senedd Committee will find this response both helpful and informative. Should you require any further information please contact Mark Saunders, Gwent Regional Partnership Team
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Ends.