



Report to Policy Committee

Author/Lead Officer of Report:
**Catherine Buntten – Assistant Director Adult
 Commissioning and Partnerships**

Report of:	Strategic Director Adult Care and Wellbeing
Report to:	Adult Health and Social Care Committee
Date of Decision:	19 June 2024
Subject:	Adult Care & Wellbeing: Market Sustainability & Commissioning Update

Has an Equality Impact Assessment (EIA) been undertaken?	Yes	X	No		
If YES, what EIA reference number has it been given? 2632					
Has appropriate consultation taken place?	Yes		No	X	
Has a Climate Impact Assessment (CIA) been undertaken?	Yes		No	X	
Does the report contain confidential or exempt information?	Yes		No	X	

Purpose of Report:

The purpose of this report is to provide Committee with an update on Adult Care and Wellbeing Commissioning programmes in 2023/24, and priorities in 2024/25.

The report seeks to provide assurance on how we are delivering our market sufficiency responsibilities as set out in the Care Act 2014, covering achievements and planned activity to improve sufficiency, stability, and quality assurance.

Recommendations:

It is recommended that the Adult Health and Social Care Policy Committee:

1. Note outcome of commissioning strategy decisions made at Committee and progress with delivery on commissioning priorities at Appendix 1.
2. Approve Adult Commissioning Priorities for 2024 – 2026 at Appendix 2.
3. Approve a sleep-in rate for personal assistants of £77.95.
4. Note the development of a Living and Ageing Well Market Position Statement and Programme to bring together all commissioning and delivery programmes relating to Living and Ageing Well into one programme, inclusive of the care & wellbeing service development.
5. Note the work underway as part of all Adults Market Positioning Statement to market shape and to stimulate a diverse range of high-quality services both in terms of the types, volumes and quality of services and the types of provider organisation to ensure the market remains vibrant and sustainable.
6. Note how Quality Assurance will be assured in commissioned and in house provision and priorities for 24/25 including review and design of brokerage services and contracts to ensure quality, outcomes and safeguarding outcomes are met.
7. Requests that the Strategic Director Adult Care and Wellbeing continue to bring regular updates to the Adult Health and Social Care Policy Committee.

Background Papers:

- [Agenda item - Healthwatch Commissioning Strategy | Sheffield City Council \(moderngov.co.uk\)](https://moderngov.co.uk)
- [Adult Care & Wellbeing: Market Sustainability & Commissioning Update, March 2024](#)
- [Adult Care & Wellbeing Market Sustainability and Commissioning Update and Approval of 24/25 Care Fees, 13th December 2023](#)
- [Adults with a Learning Disability Strategy and Adult Future Options Transformation Plan, 20th September 2023](#)
- [AHSC Policy Committee Report: Market Sustainability: Adult Social Care Fee Rates 2023/24, 16th March 2023](#)
- [Home Care: Care and Wellbeing Service Contract & Discharge Provision, 20th September 2023](#)
- [Adult Care and Wellbeing Governance, Assurance, and Performance Framework, 14th June 2023](#)
- [Adult Care Providing Support, Market Sustainability Commissioning Plan 2023-2025, 14th June 2023](#)
- [ASHC Policy Committee Report: Transforming Care Homes for Citizens of Sheffield, 8th February 2023](#)
- [Market Oversight and Sustainability: Adult Social Care, 8th February 2023](#)

Appendices:

Appendix 1: Outcome of Commissioning Decisions

Appendix 2: Adult Care and Wellbeing Commissioning Priorities 2024/25

Appendix 3: Sleep in rate for PA proposal

Appendix 4: EIA

Lead Officer to complete: -	
1	<p>I have consulted the relevant departments in respect of any relevant implications indicated on the Statutory and Council Policy Checklist, and comments have been incorporated / additional forms completed / EIA completed, where required.</p> <p>Finance: <i>Laura Foster (11/06/24)</i></p> <p>Legal: <i>Patrick Chisholm</i></p> <p>Equalities & Consultation: <i>Ed Sexton</i></p> <p>Climate: <i>Catherine Bunten</i></p>
	<p><i>Legal, financial/commercial and equalities implications must be included within the report and the name of the officer consulted must be included above.</i></p>
2	<p>SLB member who approved submission: <i>Alexis Chappell</i></p>
3	<p>Committee Chair consulted: <i>Councillor Angela Argenzio</i></p>
4	<p>I confirm that all necessary approval has been obtained in respect of the implications indicated on the Statutory and Council Policy Checklist and that the report has been approved for submission to the Committee by the SLB member indicated at 2. In addition, any additional forms have been completed and signed off as required at 1.</p>
	<p>Lead Officer Name: <i>Catherine Bunten and Mubarak Darbar</i></p> <p>Job Title: <i>Assistant Director Commissioning, Partnerships and Adults Strategic Commissioning Programme Lead</i></p>
	<p>Date: 10/06/2024</p>

1. PROPOSAL

- 1.1 Our Adult Health and Social Care vision, set out in Sheffield's [Adult Health and Social Care Strategy](#), is that everyone in Sheffield lives in a place they can call home, in communities that care, doing things that matter to them, celebrated for who they are - and when they need it, they receive care and support that prioritises independence, choice, and recovery.
- 1.2 Securing sufficient care and support provision that meets the needs of our population is a statutory requirement for all Local Authorities. This duty, as set out in Section 5 of the Care Act 2014, recognises that "*high quality, personalised care and support can only be achieved where there is a vibrant, responsive market of services available*".
- 1.3 In addition, the [Health and Care Act 2022](#) gave the Care Quality Commission (CQC) new powers to allow an assessment of care at local authority and integrated care system level. The CQC will use a new [assessment framework](#) to assess how well local authorities meet their duties under the Care Act 2014. Theme 2: Providing Support, which covers market shaping, commissioning, workforce capacity and capability, integration and partnership working is particularly relevant for commissioning.
- 1.4 In fulfilling this duty and our regulatory requirements, local authorities must therefore ensure good oversight and understanding of the local care market. This covers both commissioned and non-commissioned services – including those used by self-funders. It also, contributes to the Council Plan outcome [People live in caring, engaged communities that value diversity and support wellbeing](#) and in particular delivery of high quality social care services.
- 1.5 The [Market Oversight Report and Plan](#) was provided to Committee in March 2024 and highlighted good progress made in ensuring delivery upon our responsibilities under Section 5 of The Care Act 2014 and with that delivery of high-quality personalised care. The follow up report and update will be reported to September 2024 Committee for assurance regards delivery on the plan.
- 1.6 This report provides Committee with assurances on our progress to a sustainable, diverse, and quality market and with that our trajectory to ensuring that not only are we meeting our statutory duties, but we are also focused on the delivery of positive experiences and outcomes for citizens, carers, providers, and our workforce.
- 1.7 The Care Act 2014 sets a requirement to ensure that the authority has, and makes available, information about the providers of services for meeting care and support needs and the types of services they provide.
- 1.8 Since launch of the [Sheffield Directory](#) in 2023, this has been used to provide and make public information about the provision of services for meeting care and support needs.

2 Sufficiency and Stability - Commissioning Updates and Priorities

- 2.1 There continues to be considerable progress in improving our local offer and delivering upon these ambitions. Together with our partners, we have supported and delivered several key activities in 23/24 to continue to secure and improve the provision of care and support.
- 2.2 Sufficient and Quality Market: - Adult Market Position Statements

- 2.2.1 As set out in the Commissioning update at Committee in June 2024, the [Adults Market Position Statement](#) (MPS) is in process of update to reflect the updates and progress since implementation in 2022.
- 2.2.2 In the last two years there has also been the development of the South Yorkshire Accommodation with Care Market Position Statement, Mental Health Market Position Statement and a Care Homes Commissioning Statement.
- 2.2.3 An updated Adults Market Position Statement (MPS) along with the updated Adults Future Options, Mental Health and Living and Ageing Well commissioning intentions will be brought to September 2024 Committee for approval.
- 2.2.4 The Adult MPS is being redeveloped as a web document so that it can be regularly updated as the market evolves, and areas of the sector develop. It also means that the MPS will be accessible to individuals, carers, partners, stakeholders, providers, and developers.
- 2.2.5 The market shaping statements will also include how we can stimulate markets where people purchase their own services and are empowered to be effective consumers, for example by helping people who want to take direct payments and individual service funds and make informed decisions about employing personal assistants.
- 2.3 Commissioning Strategy Decisions Outcomes and Contract Register
- 2.3.1 Over the past two years, the priority and focus has been on implementation of the [Market Oversight Report and Plan](#), building a contracts register and ensuring the stability, sufficiency and quality of provision across Sheffield.
- 2.3.2 This included a review of current contractual arrangements including end date and their alignment to our [Living the life you want to live Sheffield's adult social care vision 2021 to 2030](#) and the Adults Target Operating Model and delivery of a person led quality care.
- 2.3.3 Following on from the reports to Committee in December 2023 and March 2024, an update is provided in Appendix 1 of the outcome of all commissioning strategy decisions made by Adults Health and Social Care Policy Committee which relate to duties of adults under Care Act 2014.
- 2.3.4 This update provides assurance to Members and the Public that decisions have been implemented. In addition, as a further assurance the contract register will be updated to include key information and links to policy decisions, and will be published as part of the Sheffield Directory and on SCC Website alongside the Market Position Statement.
- 2.4 Commissioning Priorities 2024 to 2026
- 2.4.1 The priorities for 24/25 were set out in the [Providing Support and Market Stability Commissioning update](#) to the Committee in March 2024.
- 2.4.2 The commissioning priorities for 24/25 have since been updated to reflect learning from recent workshops held during March 2024, review of the contracts register and wider learning from conversations with our teams and partners.
- 2.4.3 Accordingly, the priorities have been updated to reflect a focus on enhancing support to people experiencing mental ill health, people who have a sensory impairment, people with a disability and older adults. In addition, to continue to reflect our priority and focus on co-production and design and in partnership with integrated commissioning ensuring stability of changing futures programme.

2.4.4 The priorities also highlight a review that will be undertaken of all contracts to ensure all contracts are reflective of:

- Our Strategic Ambitions – enable delivery on our I Statements set out in the strategy.
- Our Quality Ambitions – ensure and enable delivery of good and outstanding levels of care across all commissioned provision, supported through collaboration across the sector and quality assurance.
- Safeguarding Responsibilities. This was following our annual safeguarding self-evaluation which identified a need to embed and ensure a focus on safeguarding throughout all our contracts.
- Our Workforce ambitions - and enable delivery workforce strategic ambitions, including our equality and diversity ambitions. the strategy and a confident, well trained and valued workforce.

2.4.5 The contract review objectives are to establish if the stated outcomes can be achieved for individuals, carers, care sector workforce and communities. The review may identify work with providers and commissioning partners to establish processes to ensure that contract objectives are delivered, including risks, resources, and any flexibility in how outcomes are achieved using performance indicators and monitoring measures.

2.4.6 The updated priorities are at Appendix 2 for Committee approval.

2.5 Adult Future Options: Transformation Programme

2.5.1 With the introduction of a dedicated Adults Future Options Service, a refreshed commissioning programme has been developed to bring all commissioning, and operational projects relating to Adults Future Options into one plan.

2.5.2 It aims to provide a clear road map for the next five years and set out what good looks like, inform commissioning the direction of travel, improved quality assurance standards, operations, and finance overview and what needs to be enacted to have a sustainable and healthy marketplace. It's planned to bring the Adults Future Options transformation programme and Market Position Statement to the September 2024 Committee for approval.

2.5.3 The [Adults with Disabilities Commissioning framework](#), which was approved at Committee in September 2022, has continued to be developed through working in partnership with people we support, unpaid carers, providers, and the Learning Disability Partnership Board to achieve our aims.

2.5.4 A proposal is at Committee in June 2024 to build our Emergency Overnight Short Breaks, Specialist Accommodation with Care, Shared Lives and Enhanced Supported Living provision capacity.

2.6 Living and Aging Well Programme Update

2.6.1 With the introduction of a dedicated Living and Ageing Well Service, a refreshed Living & Ageing well programme has been developed to bring all commissioning and operational projects relating to Living and Ageing well into one delivery programme.

2.6.2 This aims provide a clear road map for the next five years and set out what good looks like through quality assurance standards, commissioning and operations, and financial resilience. It will include what needs to happen to have a sustainable and healthy marketplace. It is planned to bring the Living & Ageing Well programme and Market Position Statement to the September 2024 Committee for approval.

- 2.6.3 Having a single programme of work will support delivery on the *White Paper People at the Heart of Care: Adult Social Care Reform 2021* which states it is central and fundamental priority 'for older people, having a home that sustains safe, independent living that can help prevent ill-health, reduce the amount of care and support they need, and delay or avoid altogether the need for residential care'.
- 2.6.4 In particular, the programme will focus on ensure that housing related care needs of older people are addressed in Sheffield, and to give priority to developing an adequate marketplace of quality existing provision including new forms of care and support such as Care Suites and new and innovative housing related support models with colleagues across support providers and housing associations.
- 2.6.5 Care Suites is a model of care and support for people 65 years and over, intended to be a home. The people who would be living in Care Suites may have physical disability, frailty and/or early dementia, and this would provide an alternative to living in residential care provision.
- 2.6.6 The difference with residential models, is that Care Suits are based on a tenancy model, designed so that people are able to maintain their independent living as long as possible and as far as possible in an 'age-friendly' way providing varying degrees of care and support both in a planned and unplanned way. The model will also draw on other income funding streams such as housing benefit and DWP that would fund hotelier and other accommodation related cost.
- 2.6.7 Localised data will be one of the deliverables of the Living & Ageing Well Programme that will inform the need for people of Sheffield and offer the range of solutions across all type of accommodation related needs.

3 Quality Assurance and Continuous Improvement Update

- 3.1 We aim to foster continual improvement in the quality of services and the efficiency and effectiveness with which services are provided, together with encouraging innovation in provision. To do this our focus has been on five main areas: -
- Commissioning programmes as set out in section 2 and in particular our Care and Wellbeing and adults with a disability framework.
 - Development and support to our workforce across the sector
 - Redesign of brokerage and payments and care quality assurance services.
 - Embedding personalisation and a focus on outcomes focused practice.
 - Implementation of a monitoring and advisory board and joint quality committee with NHS to ensure robust governance and assurance regards quality of care.
- 3.2 Personalisation
- 3.2.1 In June, the Council joined the Social Care Futures movement which is a community of local authorities, social care personalisation experts and people who draw on care and support. The community aims to change the public story about social care, about the lives of those of us who draw on its support today, and the valuable role it could play in improving all of our lives. The membership enables us to learn and develop social care practices that enhance everyone's lives.
- 3.2.2 Significant activity and progress continues within the programme, particularly with the development of the Individual Service Fund offer with several providers signing up to working in this way. Training sessions have been provided for staff and providers together. It is aimed to launch in 2024/2025.
- 3.2.3 Many people who use Direct Payments have been involved in helping us design a less bureaucratic way of monitoring Direct Payments as part of our key commitment to co-producing our developments with people.

- 3.2.4 We continue to develop and promote the Personal Assistant (PA) workforce. The PA Register has launched and is proving popular with increased numbers of PAs and Individual Employers placing adverts. Improvements continue to ensure accessibility to all. Having a platform in place to be able to advertise roles will enhance and simplify our work to promote the role.
- 3.2.5 As a partnership approach with Embrace Wigan & Leigh, we will establish the role of a PA Champion. This 1-year paid role open to PAs or employers of PAs will promote the role in the job-seekers market. It will also support existing PAs opportunities to connect.
- 3.2.6 Our PA Rates Decision Making Tool launched in 2022 has supported fair rates of pay, as rates of pay are now determined by the skills, knowledge and experience required. The tool has created interest from other local authorities wanting to introduce similar methods.
- 3.2.7 The next stage of the work, which seeks approval from Committee, extends to recognising the difference in requirements of a PA working a 'waking night,' i.e. those required to stay awake and alert during the night and those working a 'sleep-in', i.e. PAs who may need to offer some support but can also sleep. A decision in the Court of Appeal now allows us to pay a set rate for a sleep-in rather than hourly rate, thus acknowledging the difference between being active and alert all night compared to sleeping with up to one hour disturbance.
- 3.2.8 We propose to move to a sleep-in rate of £77.95. This rate has been determined by comparing existing pay for sleep-ins across social care. A proposal based on research, findings and a plan for introducing this model are in Appendix 3.
- 3.2.9 Waking nights will continue at an hourly rate determined by the outcome to the Tool. Once approved guidance and communications will be produced.
- 3.3 Continuous Improvement – Promoting and Enabling Culturally Appropriate Care
- 3.3.1 In April 2024, a 7-year contract to deliver advocacy services in Sheffield was undertaken following a tender exercise and the contract was awarded to Sheffield Advocacy Hub with the new contract commenced from 01/05/2024.
- 3.3.2 Sheffield Advocacy Hub is a partnership made up of 3 voluntary sector organisations, Citizens Advice Sheffield, Disability Sheffield & Cloverleaf Advocacy. As part of the re-tendering process SACHMA [SACMHA Health & Social Care](#) joined the partnership, with a particular focus of increasing advocacy numbers in under-represented communities.
- 3.3.3 SACHMA will continue to ensure that our care workforce reflects the diversity within our City and that we continue to engage with communities in the delivery of our care and support provision to meet the needs of people who live in the City. This work will continue to inform our future priorities and commissioning intentions. The advocacy services provide a voice for people from all backgrounds, supporting all the residents of Sheffield to get the support they want from social care and health services, as well as participating in discussions about issues that affect them and their communities.
- 3.4 Workforce
- 3.4.1 The Care Act 2014 sets out the importance of fostering a workforce whose members can ensure the delivery of high-quality services.
- 3.4.2 A Care Sector Workforce Strategy was agreed in March 2023 to support this alongside undertaking our commissioning programmes to enable and create foundations for a stable and supported workforce.

- 3.4.3 Another key deliverable is the development of a Sheffield Care Academy, following approval to commission in January 2024 at Health and Social Care Policy Committee.
- 3.4.4 The development of the Sheffield Care Academy will support our goals to develop a sustainable care workforce in Sheffield which is ready for the future.
- 3.4.5 The academy, which is being developed by Sheffield City Council in collaboration with partners across the health and care system, will focus on 5 key areas of activity:
- Pipeline** - more people coming into the care sector, employees are skilled and qualified.
 - Recruitment** - more effective, values based and collaborative recruitment approaches.
 - Retention** - employing the right people in the right roles and supporting them to grow and develop.
 - Development** - developing staff at all levels through continuous professional development.
 - Innovation** - understanding best practice and testing new approaches to prepare for the future of adult care.
- 3.4.6 Work is underway to procure and develop the Sheffield Care Academy. We are anticipating that the Academy will be launched by September 2024.
- 3.4.7 Currently 49% of staff across the care sector have completed a care certificate with an additional 18 percent in progress, which is a positive direction of travel.
- 3.4.8 In addition to this, Sheffield City Council commissioned activity to develop an advanced dementia training certificate for care providers in the City. In 2023/24 over 400 care staff completed the training certificate. For 2024/25 we will be reviewing the training offer for the care sector. We will:
- Continue to deliver advanced dementia training certificates.
 - Launch advanced tech enabled care and digital solutions training in association with the TSA
 - Reviewing and deliver Mental Capacity Act training for care workforce.
 - Launch Oliver McGowan training for the care workforce
- 3.4.9 An updated report will be brought to Committee in September 2024 with progress against delivery on our workforce ambitions and outcome of the Care Academy tender.

3.5 Quality Assurance of Care

- 3.5.1 We have refreshed Sheffield's Adult Care and Wellbeing Monitoring Advisory Board, a Member-led board. It aims to improve outcomes for adults with social care needs in the city through maintaining an overview of commissioning and contracting monitoring activity within Adult Care and Wellbeing.
- 3.5.2 The Monitoring Advisory Board review and monitor sufficiency, quality and financial performance at provider level, provision type level, and whole market level against the Adult Care Strategy and delivery plan and Adult Care and Wellbeing directorate plan.
- 3.5.3 It does this by:
- Monitoring the provision of services in the City.
 - Ensuring progress against action plans as they relate to market oversight and assurance.
 - Reviewing quality and performance of all Adult Care and Wellbeing provision.
 - Recommending deep-dives / further action points / themed reviews.

- Monitoring and scrutiny of targets, objectives and outcomes.

3.6 Quality Position and Performance

- 3.6.1 Our strategic priority to ensure quality, continuity and sustainability of care is measured in the Adult Care and Wellbeing performance dashboard. Performance indicators show that the percentage of all adult social care providers in the City, rated good or outstanding by CQC has improved and increased to 85%.
- 3.6.2 This is higher than the core cities mean (78%), Yorkshire & Humber (80%), our peer group (79%) and the England average (82%).
- 3.6.3 There are 106 Care Homes in the City, of which 9 are in escalation. This means that we are working closely with these 9 care home providers around their improvement plan. Full embargoes have been put in place on 4 of the 9 care homes and restrictions on the remainder in terms of new admissions. All 9 care homes are monitored on a regularly basis as per our quality assurance framework escalation process.
- 3.6.4 Performance indicators and outcomes show that the number of home care providers in the City rated good or outstanding by CQC is at 83% slightly decreased from the last report. 83% is still above average compared to the core cities mean, which is 76%, the Yorkshire & Humber, which is 78%, our peer group which is 77% and the England average which is 80%.
- 3.6.5 There are no supported living schemes or mental health community providers that are in SCC's escalation process.
- 3.6.6 Performance indicators and outcomes show that the percentage of all adult social care providers in the City rated good or outstanding by CQC has increased to 86%. This is higher than the core cities mean which is 80%, the Yorkshire & Humber which is 83%, our peer group which is 81% and the England average which is 85%.

5 HOW DOES THIS DECISION CONTRIBUTE?

- 5.1 Market sustainability, alongside the Care Governance Strategy, and the Care Quality Framework are key to the delivery of the Council's statutory responsibilities for Adult Social Care including the following outcomes for the people of Sheffield:
- promotion of wellbeing
 - protection of (safeguarding) adults at risk of abuse or neglect
 - preventing the need for care and support
 - promoting integration of care and support with health services
 - providing information and advice
 - promoting diversity and quality in providing services
- 5.2 This proposal also meets the 'Efficient and effective' outcome set out in the Adult Social Care Strategy. Effective Market Shaping should ensure that people have a choice of good services that meet their needs and give them a positive experience regardless of their background, ethnicity, disability, sex, sexual orientation, religion, or belief.
- 5.3 It also contributes to the Council Plan Together We Get Things Done and in particular It contributes to the Council Plan outcome [People live in caring, engaged communities that value diversity and support wellbeing](#) and also to the overall Medium Term Financial Strategy.

6 HAS THERE BEEN ANY CONSULTATION?

- 6.1 Consultation is part of our commissioning cycle and is undertaken as required through the different stages of our commissioning strategies. This report is for update to committee on activities that have taken place.

7 RISK ANALYSIS AND IMPLICATIONS OF THE DECISION

Equality Implications

As a Public Authority, we have legal requirements under the Equality Act 2010. This includes the Public Sector Equality Duty, under which public authorities must, in the exercise of their functions, have due regard to the need to:

- eliminate discrimination, harassment, victimisation, and any other conduct that is connected to protected characteristics and prohibited by or under this Act.
- advance equality of opportunity between those who share a relevant protected characteristic and those who do not; and
- foster good relations between those who share a relevant protected characteristic and those who do not.

- 7.2 The broad ambitions set out above are consistent with The Duty. These include envisaging a range of different types of provision (supported living, extra care, residential care, etc), including support for people with complex needs; aiming for preventative and community-based support, including for people with mental ill health.”
- 7.3 It is critical that Sheffield City Council ensures a sustainable market that enables access to appropriate provision, offers choice and control over the support individuals need to improve and better manage their wellbeing, and contribute to improved experiences and outcomes.
- 7.4 Older people represent majority of people who draw on Adult Care and Wellbeing. New models of care and support will offer customers more choice and control as well as prevent out of area placements when emergency placements are required often resulting from a crisis when existing care home for older people cannot manage. Further feasibility work is underway such as housing benefit and need assumptions, provider readiness, needs analysis and other macro factors such as trends and direction of travel for the care sector. This will be further explored in the modelling of innovated care models and the impact it may have and shared in the EIA when presented to the Sept 24 committee.
- 7.4.1 The Healthwatch Commissioning following to the committee paper in December 2023 and the retender and commissioning of the enhanced Advocacy contract awarded will strengthen the citizens voice and provide a network of supports reducing the risk of isolation.
- 7.4.2 The new standard Care Homes Framework Quality of care is now established however under funding can lead to reduced staff training, lower staffing levels, loss of trained staff to other sectors, and a lack of investment in the care provision. The programme will explore funding streams that could reduce the risk.
- 7.4.3 Lack of brokerage functions can lead to services and contracts commissioned with little commercial, quality outcomes and safeguarding outcomes met. The new review and design of brokerage functions will address this and reduce the risk of it happening.
- 7.4.4

The Adult Future Options development with respite care and other accommodation related person-centred models of care and support in the community will reduce isolation and support people to continue to live in the community with maintaining independence and dignity.

7.4.5 The Equality Impact Assessment can be found at Appendix 4.

7.5 Financial and Commercial Implications

7.5.1 All planned activity arising from this report needs to be delivered within the available budget. Projects identified in the Commissioning Priorities appendix will be assessed individually for their financial implications, with future activity needing to be managed within existing resources.

7.5.2 For 24/25, the gross budget for Direct Payments is c. £51m. The proposal to move to a fixed sleep-in-rate will need to be delivered within the available budget.

7.6 Legal Implications

7.6.1 The Care Act 2014 sets out the law around market development in adult social care. It enshrines in legislation duties and responsibilities for market-related issues for various bodies, including local authorities.

7.6.2 Section 5 of the Care Act sets out 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 and to promote efficient and effective operation of the adult care and support market as a whole.

7.6.3 The statutory guidance to the Act suggests that a local authority can best commence its market shaping duties under Section 5 of the Care Act by developing published Market Position Statements with providers and stakeholders. The proposals are therefore in line with the Council's legal obligations.

7.7 Climate Implications

7.7.1 The commissioning of care and support services for Adults in Sheffield can have a large impact on Sheffield's Climate Emergency. This was set out in the Climate Statement approved at Committee in January 2024. As set out in this report, workshops will be undertaken to involve providers in agreeing an action plan to respond to the effects of Climate Change.

7.7.2 Examples of practical actions which can come from the workshop are:
The care workforce is significant, and is required to travel across the city, working together to create better opportunities for 'active travel' can help to reduce emissions from transport. The energy efficiency of the buildings in which care is delivered (such as day services, or residential care) provides a significant opportunity to reduce our carbon emissions, and commissioning should encourage and enable improvements to environmental standards and promote renewable energy.

7.7.3 Climate Impact Assessments will be undertaken as a key element of our commissioning approach, and we want providers and partners to align with our Net Zero ambitions and will be looking to work with them to identify key areas of impacts in their activities and how we can reduce, monitor, and measure these.

8 REASONS FOR RECOMMENDATIONS

- 8.1 In fulfilling our Care Act 2014 duties, local authorities must ensure good oversight and understanding of the local care market, based on the evidence, will support a quality, flexible and sustainable market, providing choice to those who purchase care. The commissioning priorities provide focus for ensuring that these intentions are met.
- 8.2 Approving a sleep in rate for Personal Assistants will enable delivery on outcome of legal review and consistency in approach for people using direct payments.

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