

# **Adult Care and Wellbeing**

**Market Oversight Report &  
Sustainability Delivery Plan 2024/5**

**Quarter 3, December 2024**

# Adult Health and Social Care: Market Oversight & Sustainability Delivery Plan 2024/5

## Our Vision and Ambitions

Our vision, as set out in '[Living the life you want to live](#)', [Sheffield's adult social care strategy 2021 to 2030](#) 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'*. The vision is centred around delivery of five outcomes:

- 1 **Safe and Well**
- 2 **Active and Independent**
- 3 **Connected and Engaged**
- 4 **Aspire and Achieve**
- 5 **Efficient and Effective**

Securing a diverse and sufficient range of high-quality care and support is critical for us to deliver upon our vision, and to deliver upon our Care Act 2014 duties.

## What is Market Sustainability?

A sustainable market **operates in an efficient and effective way**, it is one which has a **sufficient supply of high-quality services**, and can deliver investment, innovation, and choice in care and support service provision. It

is a market with a **sufficient and skilled workforce** who receive a fair rate of pay and are supported with training to have the skills and knowledge to be able to meet the needs of people receiving care and support.

Market Sustainability is therefore indicated by:

- A sufficient supply of services to ensure continuity of care with minimal disruption in the event of provider exit from the market.
- A range of high-quality services for people to choose from.
- Sufficient investment in the workforce to attract and retain high-quality staff.
- Evidence of innovation and service diversity in order to evolve and meet changing user needs.
- Being attractive to new market entrants and able to manage the impact of future market changes.

### Provider entry and exit

Market sustainability does not mean that providers do not ever exit the market; it is normal for businesses to both enter and exit. This may be due to a decision to close, business failure, or managed exits by local authorities. A *sustainable* market means that where there is provider exit, there are sufficient

alternative care services so that continuity of care can be maintained for people.

## Our Commitment to Market Sustainability

It is only through having a sustainable market, that we can assure ourselves of quality provision and continuity of care for the people of Sheffield.

To that end, it is our ambition that we facilitate an efficient and effective market, leading to a sustainable and diverse range of care and support options. That we drive improvement and better outcomes for adults in need of care and support in the city whether arranged through the Council or purchased privately. An assessment of Market Sustainability considers:

- adult social care statutory duties
- analysis of strengths and risks facing the market (for example; CQC, sufficiency of supply and occupancy levels, people's experiences and outcomes – with an equalities focus, financial context, geographical context, workforce stability and sufficiency)
- an analysis of future market changes

# Statutory Duties and Regulatory Framework

## Local authorities' duties in Market Sustainability are covered in section 5 of the Care Act 2014:

A local authority must promote the efficient and effective operation of a market in services for meeting care and support needs with a view to ensuring that any person in its area wishing to access services in the market:

- a) has a variety of providers to choose from who (taken together) provide a variety of services.
- b) has a variety of high-quality services to choose from.
- c) has sufficient information to make an informed decision about how to meet the needs in question.

In performing that duty, a local authority must have regard to the following:

- a) the need 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.
- b) the need to ensure that it is aware of current and likely future demand for such services and to consider how providers might meet that demand.
- c) the importance of enabling adults with needs for care and support, and carers with needs for support, who wish to do so to participate in work, education or training.
- d) the importance of ensuring the sustainability of the market.
- e) the importance of fostering continuous improvement in the quality of services and the efficiency and effectiveness with which services are provided and of encouraging innovation in their provision.
- f) the importance of fostering a workforce whose members can ensure the delivery of high-quality services.

## The CQC, in its Single Assessment Framework, will also consider the sustainability of the market through four themes:

- [Theme 1: Working with people](#) - [assessing needs \(including unpaid carers\), supporting people to live healthier lives, equity in experiences and outcomes](#)
- [Theme 2: Providing support](#) - [care provision, integration and continuity, partnerships and communities](#)
- [Theme 3: How the local authority ensures safety](#) - [safe systems, pathways and transitions, safeguarding](#)
- [Theme 4: Leadership](#) - [governance, management and sustainability, learning, improvement and innovation](#)

# What Does Good Look Like?

*Measure of success for our delivery plan are set out below.*

## Sufficiency & Stability

- ✓ There is sufficiency of services to ensure timely provision and continuity of care.
- ✓ There is diverse range of good quality provision in the City, offering a choice in the type of support provided, and choice of who provides that care and support.
- ✓ Staff retention is high, with a low agency, vacancy and turnover rate.  
The workforce is supported by fair rates of pay and high-quality training and development.
- ✓ Oversight of the market picks up risks, and proactive support and activity ensures continuity of care.

## Quality & Outcomes

- ✓ All care provision is rated as 'Good' or better (by people with lived experience, their families, and carers, by the CQC and by SCC)
- ✓ Care provision reflects and meets the needs of people in Sheffield, and reflects the cultural diversity in the City
- ✓ Providers of care prioritise independence, using a strength based and personalised approach to maintain connections to communities and networks.
- ✓ Disproportionality in access, experience and outcomes is understood and actions to address are collectively owned and monitored.
- ✓ People and unpaid carers are integral to service planning and their views inform continued improvements.

## Value for Money

- ✓ We will have the right balance in cost and impact of service delivery, managing our resources effectively to respond to changing demands.
- ✓ Rates are 'fair', covering costs, aligning with quality, delivery best value for public money and support investment, innovation, and quality.

## Leadership & Governance

- ✓ Strategic leaders, commissioners and providers work together, and evidence joined up visible and effective leadership around a shared vision and plan.
- ✓ Staff, Adults, Carer and Partners feel confident about the support, leadership, and plans in place.
- ✓ Information to support people in receipt of or purchasing care to make informed decisions and information to support providers to respond to changing needs is accessible, current, consistent, and clear.
- ✓ Oversight of the market is comprehensive and identifies risks early. SCC and partners work collectively to deliver the improvements and mitigations to stabilise care

# Quality Assurance

Quality Assurance is overseen by Adult Care and Wellbeing Commissioning and Partnerships Service as a 'whole market approach', i.e. both internal and external provision is measured against the same standards in our [Care Quality Framework](#)

Sheffield Adult Care and Wellbeing Quality Assurance team lead on the quality assurance of the market working together with the Commissioning and Partnerships service, operational teams, the ICB and other internal and external partners to ensure effective oversight of care provision in the City.

The purpose of our performance monitoring and quality assurance arrangements is to ensure that people in Sheffield are receiving consistently high-quality care across a diverse choice of provisions in a stable and sufficient market.

The Team act on intelligence received regarding all providers, with or without a contract with the Council. This includes providers who are delivering a service via a direct payment, self-funded arrangements, or through spot purchase or direct awards.

We monitor provision using the following quality assurance tools:

- Quality Assurance Framework for Care Homes
- Quality Assurance Framework Provider Services (QAF)
- Provider Service Quality Assurance Activity
- Organisational Safeguarding Criteria
- Early Indicators of Concern

## Provider Visits & Monitoring

Visits to providers include checking documentation such as training for staff, accidents and incidents, care & support plans as well as observations of practice and delivery of support and care where appropriate. We speak to individuals using the service to gain their views and input.

We give feedback on the day of the visit, and we send a written report with an action plan for follow up where appropriate. We undertake risk assessments following our visits and have a monitoring plan for incidents and safeguarding concerns ensuring we can identify problems early, preventing escalation and supporting identification of organisational issues.

We build positive relationships with providers and staff to effectively support good practice and challenge poor practice to drive improvements.

Should a provider be escalated into risk management process (this is a joint Sheffield City Council/South Yorkshire Integrated Care Board process for Care Homes), we visit the provider and meet every 4-6 weeks to monitor the improvement plan. We work collaboratively with the provider to ensure that changes are made to sustain positive practice going forward.

Home Care providers on our Care & Wellbeing Service Contract have quarterly meetings to review service delivery and any improvement actions.

Care Homes are monitored together with the Nursing Quality Teams at SYICB to oversee all provision, and to ensure improvements are on track for those providers on the embargo and restrictions list.

Supported Living Service providers and Care Homes are visited at least once a year. Those providers in escalation are reviewed every 14 weeks as a minimum.

Providers are able to contact the LA using the following process: [Provider Escalation Flowchart](#)

### Out of Area Provision

We also maintain oversight of people for whom care is provided out of the city, with:

- CQC rating (refreshed at least monthly)
- Information received through the host local authority – restrictions, embargoes, safeguarding concerns etc
- Information following visits and reviews completed by social work teams
- Information from social work / brokerage to explain why each person has been placed out of area

Where there are safeguarding concerns, the host authority would lead on investigations but as the placing authority, we would conduct an urgent visit and attend safeguarding meetings as required.

## Market Sustainability Delivery Plan

**Ambition:** Adults in Need of Care and Support benefit from an efficient and effective market, leading to a sustainable and diverse range of quality care and support, delivering choice, and driving improvement and better outcomes.

**Context:** A sustainable market is a critical part of delivering excellent social care services.

**Accountable Officer:** Strategic Director Adult Care and Wellbeing  
**Lead:** AD Commissioning and Partnerships

**Accountable Committee/ Board:** Adult Health and Social Care Policy Committee

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Theme / Indicator	Milestone/action	Update	By when	RAG
A sufficient supply of services to ensure continuity of care with minimal disruption in the event of providers exiting from the market.	A provisional market sustainability plan to be submitted to Department of Health and Social Care outlining assessment of the sustainability of Sheffield's local care market in relation to 65+ care home services and for 18+ domiciliary care services. The provisional market sustainability plan will: <ul style="list-style-type: none"> <li>consider the results from the cost of care exercises.</li> <li>consider the impact of future market changes over the next three years, particularly in the context of adult social care reform.</li> <li>set out an outline action plan to address the issues identified and the priorities for market sustainability investment.</li> </ul>	A Market Sustainability Plan was approved by Committee in Feb 23 ( <a href="#">17. Appendix 1 Market Sustainability Delivery Plan Jan23.pdf (sheffield.gov.uk)</a> ) and included Fair Cost of Care analysis and market changes over time. Fee rates have been increased for years 23/24 and 24/25.	Completed	COMPLETE
	A final market sustainability plan to be submitted in February 2023, once budgets are agreed following the publication of the Local Government Finance Settlement 2023 to 2024. This plan to include how the Sheffield will improve fee rates.		Completed	COMPLETE
	Undertake a full assessment of Market Sustainability including adult social care statutory duties, CQC information and returns; local data and intelligence; sufficiency and diversity in the market for different types of care, and different geographical areas; occupancy levels; equalities data and information; the financial context – including current rates of care; and workforce stability and development.	An update to the Market Oversight and Sustainability Plan is provided quarterly to Committee. Key developments include implementation of the Care & Wellbeing Contract, Care at Night Contract, Advocacy & Healthwatch Contracts, Supported Living & Day Activities Contracts. In addition, further analysis of mental health and housing with care markets. A review of impact of new contracts, local data and intelligence, sufficiency will be undertaken during 2024 to update Market Position Statement for 25/26	1 <sup>st</sup> April 2025	Delivery priority for 24/25.
	Undertake a programme of engagement to cover Social Care Reform and Market Sustainability to ensure the market is prepared and enabled through the change and is able to inform Sheffield's commissioning strategies to meet the needs of adults needing care and support in the City.	Reforms postponed	No Longer Required	
	We will be undertaking a "cost of care" exercise to include Adult Future Options and Mental Health markets to support a transparent and clear model for costs and standards of provision.	Care Cubed has been purchased to enable a cost of care exercise in Adult Future Options and Mental Health to be completed in 24/25. This has been used to support uplifts for nonstandard provision in 24/25, and to support purchasing at a fair rate for all new placements. A project has been developed to review and inform placements in Adult Future Options in the final half of 24/25, and a Brokerage & Payments workforce change embeds the use of care cubed going forward.	24/25 Priority	IN DELIVERY
	Work collaboratively at a regional level to develop outcome-based care standards, providing greater consistency for care providers and launching Sheffield's Care Quality Standards to support effective and 'whole market' contract management and quality assurance	Care Quality Standards approved at Committee in February 2024.  Joint Quality Assurance Framework for Care Homes refreshed with SYICB, this has been used as a template to develop a Supported Living Quality Assurance Framework and Home Care Quality Assurance Framework following the launch of the Adults With Disabilities Framework and Care and Wellbeing (Home Care) Service Contract respectively. By end of 24/25, we will have aligned our toolkits and processes.	24/25 Priority	IN DELIVERY
	Redesign of Adult Care and Wellbeing Brokerage service to offer personalised brokerage and improved oversight of supply and demand	Redesign underway and aligned to new contracts and the Adult Care and Wellbeing Target Operating Model. Implementation planned for Qtr 4, 24/25.  Following the refresh of the Brokerage & Payments Workforce change, the team will oversee brokerage and value for money across all ACW provision.	24/25 Priority	IN DELIVERY
	Establish Monitoring Advisory Board and governance processes to provide assurance on Market Oversight and Quality	Monitoring and Advisory Board implemented and will be fully established in 24/25.	24/25 Priority	Priority for 24/25

Theme / Indicator	Milestone/action	Update	By when	RAG
A range of high-quality services for people to choose from	Commissioning a new Mental Health Independence and Support Framework to strengthen provision for people needing care and support in their own tenancies or accommodation through three levels of support: <ul style="list-style-type: none"> <li>Helping people to help themselves - Universal Services and Resilient Communities.</li> <li>Help when needed - Targeted Help (including crisis and reablement).</li> <li>Helping people to live their lives - Ongoing Care</li> </ul>	Mental Health Independence and Support Framework to place and implemented.	Completed	COMPLETE
	Commissioning a new Adults with Disabilities Framework that covers Supported Living, Enhanced Supported Living and Activities outside the home. The framework will build in supports to the workforce, provide longer contract terms to promote market stability and sustainability, increase choice and diversity in the activities outside the home market and strengthen our contract management and quality oversight mechanisms.	Completed and approved in September 2023. The Framework is now in place and continually update via a dynamic purchasing system.	Completed	COMPLETE
	Contract award and implementation of Care and Wellbeing (Home Care) service	Complete, and into year one of implementation	24/25 Priority	IN DELIVERY
	Commissioning a new model of care based on the Extra Care Model; "Care Suites" for people over the age of 65. The Living and Ageing Well programme will work with partners to develop the Care Suite concept and bring it to the market.	Following the approval of the Care Suites at the Adult Health and Social Care Policy Committee in October 2024, the key milestones intend to cover over the next 12 months are: <ul style="list-style-type: none"> <li>Collaboration and engagement work to design the specification with key partners such as people with lived experience, unpaid carers, care and support providers &amp; housing providers and the ICB.</li> <li>Finalise the commercial method of the contract, the terms &amp; conditions in preparation to tender.</li> <li>Advertise the contract, responding to clarification queries and questions as part of the bidding process and award the contract.</li> </ul>	December 2025	IN DELIVERY
	The development of Individual Service Funds (ISFs) in accordance with the Personalisation and Direct Payments Strategy will pilot and test out ISFs in Sheffield with a small group of people and providers.	ISF pilot to go live with ongoing monitoring and evaluation over 12 months period. The milestones are set out over the next 12 months: <ul style="list-style-type: none"> <li>Going live with the pilot in January 2025</li> <li>Working with the University of Sheffield in evaluating the dedicated ISF toolkits and resources to support Local Authorities with the uptake and growth of ISFs.</li> <li>Training and awareness sessions to continue jointly between additional interested providers and social care workers to raise further awareness of the ISF model.</li> <li>Building upon the pilot, expand and further develop the ISF offer for wider roll-out with different service areas, ensuring ISFs are a viable and sustainable option in Sheffield.</li> </ul>	December 2025	IN DELIVERY
	Scoping of market support for development of micro-providers and micro-enterprises which will offer hyper personalised and responsive services for people who direct their own support, help to build stronger, resourceful resilient communities and improve outcomes for people.	<ul style="list-style-type: none"> <li>Joined the national 'Building Community Capacity' network of local authority and ICB commissioners/ practitioners committed to Personalisation and Asset Based approaches to care and support.</li> <li>Begun reviewing tools and resources produced by the network and how these might be applied in Sheffield.</li> <li>Project plan to be developed with implementation by December 2027.</li> </ul>	December 2027	IN DELIVERY
	Deliver transformation of Care Homes programme for Living and Ageing Well. Our aim is to work collaboratively with the sector and partners to develop our provision and specifications for different service models, including enhanced and complex care, building on soft market testing, and learning from other areas and partnership arrangements. The key milestones are: <ul style="list-style-type: none"> <li>Joined up planning to design the specification with key partners such as people with lived experience, family carers, care and support providers and the ICB.</li> <li>Understand and shaping demand and supply through contractual arrangements and capacity building in the market and finalise the commercial method of the contract, the terms &amp; conditions in preparation to tender</li> <li>Advertise the contract, responding to clarification queries and questions as part of the bidding process and award the contract to the successful provider subject to meeting the specification.</li> <li>Quality control, performance and standards oversight, including through contract management, sustainability and cost of provision, fees and uplifts.</li> </ul>	Standard Care Home contract is in place and to date we have 27 providers with 48 care homes on the standard framework with new providers recently qualified to join following the opening of the standard framework contract in August 2024  The next phase of the programme is to develop services for people with more Enhanced and Complex Care and Nursing needs as agreed at the Adult Health and Social Care Policy Committee in October 2024. This will cover both Older People, and Adults with Disabilities and Mental Health residential provision.	December 2025	IN DELIVERY



Theme / Indicator	Milestone/action	Update	By when	RAG
Sufficient investment for development of the workforce and to support retention and recruitment of high-quality care staff	Working at a system level to develop a workforce strategy.	An Adult Care Workforce Strategy was developed in March 2023 and an updated <a href="#">Workforce Development Strategy Delivery Plan</a> was provided to Committee in October 2024	Completed	COMPLETED
	Deliver workforce project within Care and Wellbeing Service - outcome focused care and support that supports workforce stability and moves towards improved terms and conditions for staff, including a test of change for shift-based work. Development of 'Trusted Reviewer' model	Service went live in June 2024, workforce workstream is aligned with wider ACW workforce strategy.	December 2025	IN DELIVERY
Evidence of innovation and service diversity in order to meet changing user needs	Develop and delivery Adult Future Options Transformation Programme, with a focus on accommodation planning to deliver improved outcomes for people in the City. Programme will support creativity and flexibly in the development of services, led by people in Sheffield and the sector, with a collaborative approach with Children's services and transitions.	Amended to note innovation programme could not be added as a lot to the Framework and focus now on transformation of AFO Transformation Programme approved at Committee in November 2023 aligned to approval of the Learning Disability Strategy.	December 2025	IN DELIVERY
	Agree Digital Strategy, including programme for TEC	A Digital Strategy was approved and an ongoing programme for Technology Enabled Care development in place. A development programme is being implemented in 23/24 and 24/25 including tests of change to support workforce development, Hospital Discharge, early identification of issues and support to stay at home. Latest update to Committee in December 2023.	December 2025	IN DELIVERY
	Commissioning a new model of care based on the Extra Care Model; "Care Suites" for people over the age of 65. The Living and Ageing Well programme will work with partners to develop the Care Suite concept and bring it to the market.	Following the approval of the Care Suites at the Adult Health and Social Care Policy Committee in October 2024, the key milestones intend to cover over the next 12 months are: <ul style="list-style-type: none"> <li>• Collaboration and engagement work to design the specification with key partners such as people with lived experience, unpaid carers, care and support providers &amp; housing providers and the ICB.</li> <li>• Finalise the commercial method of the contract, the terms &amp; conditions in preparation to tender.</li> </ul> Advertise the contract, responding to clarification queries and questions as part of the bidding process and award the contract.	December 2025	IN DELIVERY
	As we procure, new contracts set out clear processes and approaches to fee increases to support providers in their financial planning.	New contracts in place for Mental Health Support and Independence at home Standard Care Homes, Supported Living, Day Activities and Overnight Short Breaks which set out in terms and conditions the model and process for annual fee uplifts. Further, a process has been developed for all fee increase requests outside this process to support consistency and market management.	Completed	COMPLETE
Being attractive to new market entrants and able to manage and offset the impact of future market changes	Commissioning strategies that promote longer term contracts where appropriate to encourage investment in Sheffield, develop longer term partnerships with providers, provide more stability and ability to plan: <ul style="list-style-type: none"> <li>• Care and Wellbeing Service (home care)</li> <li>• Working Age Adults Framework</li> <li>• Accommodation with Care (residential care homes)</li> </ul>	Over last year commissioning intentions and strategies have focused on longer term arrangements as follows: - <ul style="list-style-type: none"> <li>• Care &amp; Wellbeing is a 10-year contract (7 + 1 + 1)</li> <li>• Healthwatch is a 10-year contract,</li> <li>• Advocacy is a 7-year contract with option of extension.</li> <li>• Supported Living, Day Activities, Extra Care are 7-year contracts with option of extension.</li> </ul>	Completed	COMPLETE
	Improving charging models to allow providers to plan care and provision, and use their expertise to invest in and develop best practice	The implementation of the new Care & Wellbeing Service contract includes payment on planned hours for providers, this supports longer term and outcomes focused planning, streamlines invoicing and payment procedures and support the financial viability of the sector.	Completed	COMPLETE

# Market Oversight & Sustainability 2023/4

## Sufficiency & Stability

- We will ensure that we have a diverse range of good quality provision in the City, connected to support networks and communities, promoting choice and able to deliver personalised care and meet the needs of Sheffield's changing population profile

## Quality

- Services will provide care and support that meets the standards we would expect: effective, safe, well led and sustainable, where people have a positive experience and say that their personal outcomes are met

## Value for money

- We will have the right balance in cost and impact of service delivery, managing our resources to support investment in preventative services and to respond to changing demands.

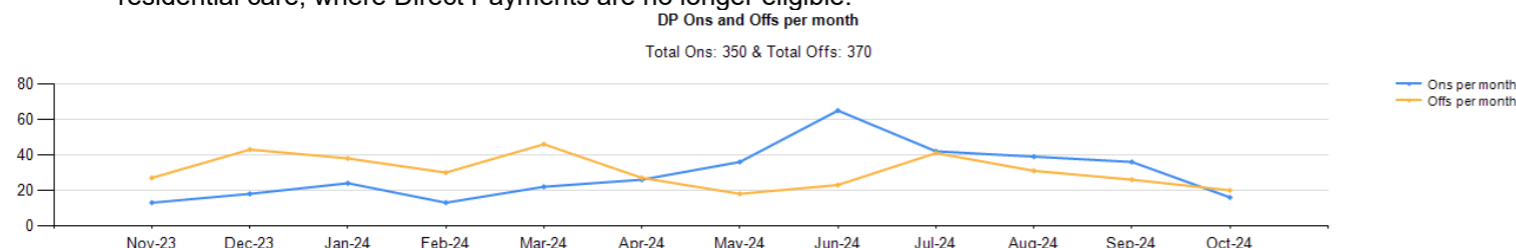
# Self-Directed Support

## SUFFICIENCY

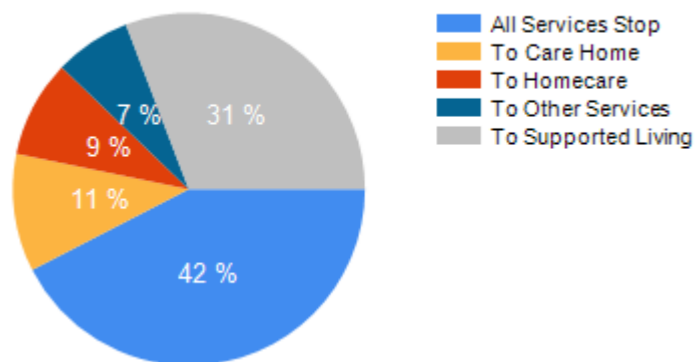
### WHERE ARE WE NOW

#### DIRECT PAYMENTS

- 1874 adults have a Direct Payment in Sheffield, arranging and purchasing their own support from the open market. This represents 28.3% of people receiving long term support from Adult Social Care.
- Between November 2023 – October 2024 we have seen 343 people taking a Direct Payment and 367 people coming off Direct Payments. These changes are due to 3 main themes:
  - **Care & Wellbeing Implementation** – we saw a spike in new Direct Payments in June as a result of the implementation of Sheffield’s new home care contract, which saw a change in contracted provision. Some people chose to move to a Direct Payment to remain with their existing home care provider.
  - **Supported Living Implementation** – the past 12 months have seen 114 people move from a Direct Payment to a Council-arranged supported living service. A new commissioning strategy and much improved offer of Council-arranged services has resulted in greater choice in providers for people. Some people who may have not chosen a Direct Payment if they had a greater variety of council-arranged options at the time, have now opted to move from a Direct Payment.
  - **Other reasons for ending Direct Payments** – In addition to some people moving from a Direct Payment to a Council-arranged service, analysis of ended Direct Payments shows 42% are where people have stopped all social care services. This could be due to people passing away or deciding to make private. There are also some people who have moved into residential care, where Direct Payments are no longer eligible.



#### Ended DP By Closure Reason Nov-23 to Oct-24



- People use their Direct Payment to purchase a variety of difference support options (often in a combination) as categorised below:
  - Activities – 593
  - Carers - 35
  - Contingency – 576
  - Equipment & Technology - 6
  - Financial Fees (e.g. payroll and money management companies) - 1233
  - Home Support – 499
  - Personal Assistants – 853
  - Short Breaks - 15
  - Supported Living – 94
  - Transport - 118
  - Other - 48
- Direct Payments are accessed by people funded by each of the different service areas as below:
  - Learning Disabilities – 653

### ACTION PLAN

#### SERVICE DEVELOPMENT OF SUPPORT SERVICE FOR PEOPLE ACCESSING DIRECT PAYMENTS

- The contract for the externally commissioned Direct Payment Support Service came to an end in August 2024, and new in-house service within Commissioning & Partnerships has been mobilised. A service development plan aims to improve the accessibility of the service, as well as improving our ability to analysis interactions with the service to make wider changes to the Self-Directed support offer.
- Peer-support, coaching and mentoring element of the in-house Direct Payment Support Service to be developed and procured.

#### DIRECT PAYMENT MARKET DEVELOPMENT ACTIONS

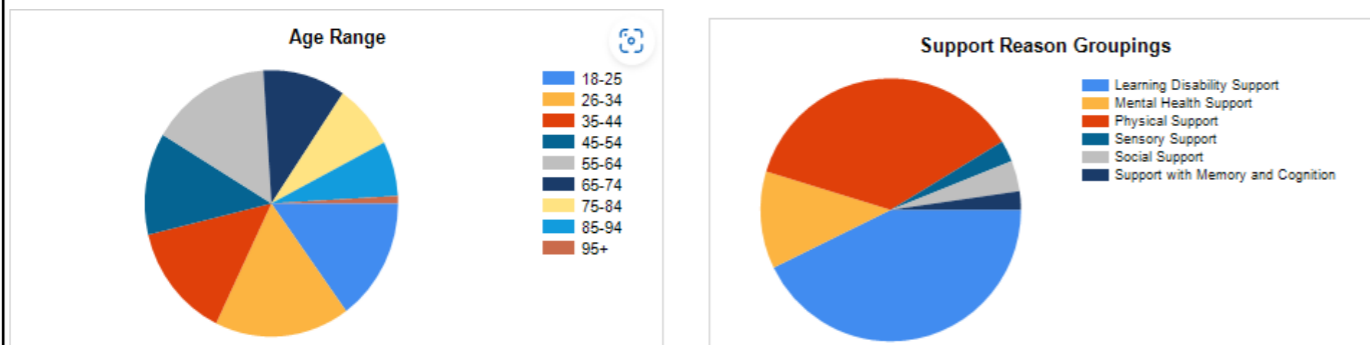
- Following Personalisation Week in November 2024, we will develop a Direct Payments Provider Forum to support market shaping, improve communications, and to share key messages from people with lived experience with the market.
- Direct Payment Provider Rates Tool to be reviewed after testing and accompanying guidance produced before being rolled out across Adult Care and Wellbeing social care teams.
- Options appraisal and recommendations for a contracting arrangement for PA Register.
- Scoping of market support for development of micro-providers and micro-enterprises.

#### INDIVIDUAL SERVICE FUNDS (ISFs)

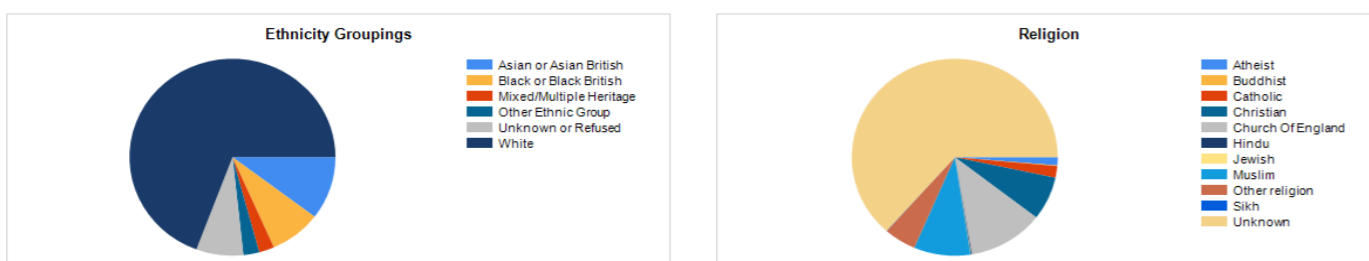
- Our commitment to develop ISFs is set out in our Personalisation and Direct Payments Strategy.
- We are delivering a pilot in 2024 to test out ISFs in Sheffield with a small group of people and providers
- Training and awareness sessions have been carried out jointly with interested providers and social care workers.
- Sheffield is part of the EQUALD ISF research project (University of Sheffield) and has been involved in developing and testing out dedicated ISF toolkits and resources to support Local Authorities with the uptake and growth of ISFs.

- Older People – 553
- Physical Disabilities – 384
- Mental Health – 203
- 18-25years – 172
- Continuing Healthcare fully funded – 44

- Direct Payments are available and accessed by people of a broad range of ages and with different primary support reasons – the highest proportions being people with a learning disability at 43% and people with a physical disability at 37%.



- The breakdown of people accessing Direct Payments by ethnicity and religion can be seen in the charts below.



- The Direct Payments commissioning team leads the market development and shaping for Children’s services and Adults’ services and also works in partnership with the ICB to deliver Personal Health Budgets. There are currently 422 children and young people who have a Direct Payment.

**Provider/agency market:**

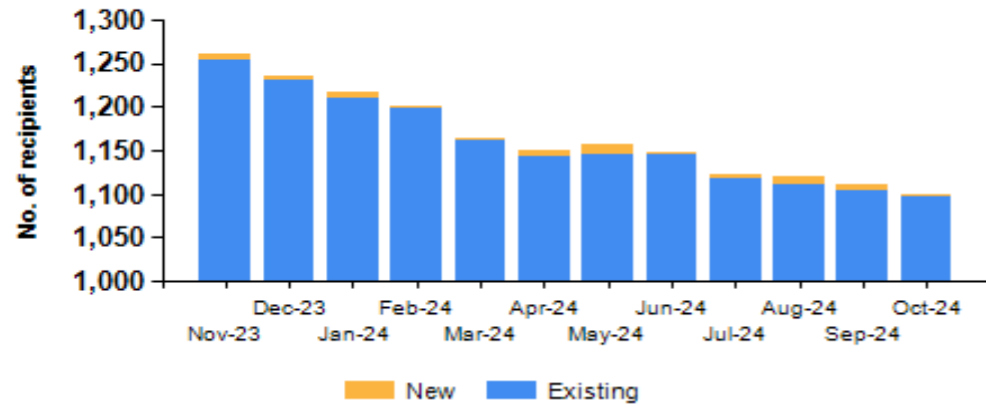
- Much work has been undertaken to develop greater insight and understanding of the current market for people who use Direct Payments and/or self-direct their own support. 143 providers have shared information about their services and have joined the Direct Payment mailing list, so they are kept informed about updates and changes e.g. annual increases to Direct Payment budgets, how to propose fee increases with the people they support.
- 61 providers so far have advised they want to work with us and join our Direct Payment Provider Forum which will support market shaping and development based on the needs and wants from people who self-direct their own support.
- Intelligence has been built up about service offers and the private fees charged by providers in the open market. A prototype Direct Payment Provider Rates Tool has been developed and is being tested with several social care teams to support decision-making in relation to reasonable preferences and top-ups.

**Personal Assistant (PA) market:**

- Development and improvement of the PA market has been influenced by our PA Rates Decision Making Tool which supports social care workers and the PA employer to identify an appropriate rate of PA pay, based on needs and requirements.
- Sheffield PA Register (hosted by Disability Sheffield) has been redeveloped and was launched in October 2023. This was co-produced with people with lived experience. Currently there are 253 Individual Employers, and 318 Personal Assistants registered. 478 introductory links have been made in the first year.
- We have awarded a contract to Embrace Wigan & Leigh to employ two local PA Champions to lead promotion and awareness raising of the PA role within the social care sector in Sheffield.
- We have purchased ILG-PA employee support packages which PA employers can share with their PAs as a way to support and recognise the workforce.

- The Direct Payment Support Service (DPSS) provides support to people with their Direct Payment, for example, when they are deciding which providers/agencies they wish to purchase support from and how the process works or providing support to people who are individual employers to recruit effective and suitable PAs.
- Information, advice and ongoing support offered by the DPSS has resulted in more people feeling confident and have gained the knowledge and/or skills they need to be able to manage their own Direct Payment. Over the past year, we have seen the number of managed account services reducing by 158. This constitutes an increase from 33% of people holding and managing their Direct Payment budget themselves to 41.3% in the past 12 months.

**Number of recipients with managed accounts**



- Money Management Companies on our Recognised Provider List (RPL) are quality assured on an annual basis to ensure they meet the minimum standards and expectations. All providers are currently meeting these standards. During 2024, one of our RPL Money Management providers was unable to meet the minimum standards despite commissioning support and was removed from the RPL. An exit plan was implemented so that people were able to make alternative arrangements for their care and support – this is now completed.
- PA Register guidance and registration process is recording information requested by individual employers and PAs.
- Training and Development programme for Individual Employers and PAs development is provided by Disability Sheffield.

- The terms and conditions of our Money Management Company Recognised Provider List to be refreshed and updated to further improve quality.
- Exploring the retirement of the legacy Recognised Provider List (RPL) and plans to co-produce future model for assurance and quality of provision in the open market – matches what people are looking for e.g. reviews akin to trust pilot, google reviews.

## VALUE FOR MONEY

### WHERE ARE WE NOW

The projected annual Direct Payments spend for Adults in 23/24 is £49m.

The way people are spending their Direct Payment budget can be broadly broken down by service type:

Direct Payment Service Type	23/24 Spend
Activities	£8,054,642
Carers	£59,128
Contingency	£651,552
Equipment & Technology (ongoing)	£9,906
Financial Fees	£1,181,115
Home Support	£11,539,209
Personal Assistants	£19,622,564
Short Breaks	£55,748
Supported Living	£6,366,055

The spend for Direct Payments is split against the following service areas:

DPs by Service Area	23/24 Spend
Adults Future Options	£2,425,078
Learning Disabilities	£18,697,555
Older People	£6,728,487
Physical Disability	£9,038,828
Mental Health	£3,883,568
18-25 years	£5,101,000
CHC Fully Funded	£3,053,281
Reablement Frontline	£4,940

### ACTION PLAN

- Direct Payment Provider Rates Tool to be reviewed after testing and accompanying guidance produced before being rolled out across all ACW social care teams.
- Monitoring of spend for DPs and average packages costs and outcomes to be included in Personalisation Board programme
- Work to explore standardised rates for managed account and payroll services.

Transport	£535,789		
Other	£857,028		

- The hourly rate for sleep in support (for PAs/providers/agencies) has been replaced by a single payment per night aligned to council arranged service offers.
- Return of unrequired, unspent monies in 23/24 following financial monitoring (annual audit) currently stands at £2.85m requested and £2.37m returned to Council budget.

# Living and Ageing Well

SUFFICIENCY	
WHERE ARE WE NOW	ACTION PLAN
<ul style="list-style-type: none"> <li>With a growing and aging population, Sheffield will need to plan for an increase in the number of older adults being assessed for and receiving long term packages of support. As people are supported to live in their homes for longer, providers will need to develop to support higher complexities of needs in community and residential settings.</li> </ul> <p>Providers report challenges with recruitment and retention of staff in all roles - as the pressures of the Covid pandemic, together with competitive pay rates in other organisations and careers impacts on workforce stability and wellbeing in the sector. High agency use.</p>	<ul style="list-style-type: none"> <li>An Adult Care Workforce Strategy was developed in March 2023 and an updated <a href="#">Workforce Development Strategy Delivery Plan</a> was provided to Committee in October 2024</li> <li>Development of Sheffield Care Association</li> </ul>
<p><b>HOME CARE</b></p> <ul style="list-style-type: none"> <li>Sheffield has a high number of Home Care providers, many of whom focus on privately purchased care and support.</li> <li>The Council procures Home Care to support approximately 2,350 people in their own homes</li> <li>Through our contractual arrangements, Sheffield City Council procure care with over 80 providers with approximately 1,200 care workers, 14 providers are contracted under our new Care and Wellbeing Service Contract, with others contracted through Direct Award arrangements.</li> <li>The number of packages waiting as of the 8<sup>th</sup> November 2024 was 12, with 7 people waiting over 4 hours. The longest wait dates from 4<sup>th</sup> November. We have seen a significant reduction in people waiting, and improved flow from performance in 2022.</li> <li>Between May 2024 to November 2024, 291 new hospital discharge packages were brokered to the Independent Sector. Of these 54% (157) were started within 48 hours.</li> <li>The independent sector continues to report capacity across the City</li> </ul>	<ul style="list-style-type: none"> <li>The Care and Wellbeing Service has been in live since June 2024, and services are stable.</li> <li>The first quarterly Provider Performance meetings having taken place for each provider.</li> <li>The Care and Wellbeing Service sees a further move towards personalised and outcome-led care, contracting with fewer providers who will benefit from improved payment terms – including payment on planned hours to support provider financial planning and longer contracts to support partnership and collaborative development work.</li> <li>Providers are working closely with Living and Ageing Well teams to support collaborative working across health and social care.</li> <li>The first tests of change on the developments within the Care and Wellbeing Service including Trusted Reviewer and Outcome focussed care, are taking place in January 2025.</li> <li>Contractual arrangements to support procurement of home care outside of the Care &amp; Wellbeing Service to be in place by April 2025</li> </ul>

<p><b>ACCOMMODATION WITH CARE</b></p> <ul style="list-style-type: none"> <li>• There are 100+ care homes in Sheffield, that range from small, single homes to large national organisations.</li> <li>• Occupancy rates have improved, though there is still an oversupply of residential beds. Low occupancy levels increase the risk of poorer quality provision and unsafe practices as the financial impact affects staffing, morale, and the risk of accepting residents whose needs cannot be met to increase income. There is a growing need to encourage more homes that can support more complex needs.</li> </ul> <table border="1" data-bbox="210 300 1032 558"> <thead> <tr> <th colspan="4">November 2024</th> </tr> <tr> <th>Vacancy Type</th> <th>Occupied %</th> <th>Occupied</th> <th>Vacancies</th> </tr> </thead> <tbody> <tr> <td>Dementia Nursing</td> <td>92%</td> <td>514</td> <td>47</td> </tr> <tr> <td>Dementia Residential</td> <td>92%</td> <td>1070</td> <td>98</td> </tr> <tr> <td>General Nursing</td> <td>79%</td> <td>589</td> <td>161</td> </tr> <tr> <td>General Residential</td> <td>86%</td> <td>843</td> <td>137</td> </tr> </tbody> </table> <ul style="list-style-type: none"> <li>• Procurement for a new framework contract for standard residential settings has been completed, with the contract live from February 2024. There are 25 providers covering 45 Older People's Care Homes on the Framework.</li> <li>• Our temporary care contractual arrangements are:             <ul style="list-style-type: none"> <li>➢ Somewhere Else to Assess: 12 care homes providing a combined total of 40 beds under block contract, with additional capacity from a further 11 homes</li> <li>➢ Emergency Residential Beds - 3 care homes providing a total of 3 beds in the city, with additional capacity from 9 other homes.</li> <li>➢ Planned Respite Beds - a total of 4 beds block contracted in 4 homes, with additional capacity provided by 11 more homes.</li> </ul> </li> </ul>	November 2024				Vacancy Type	Occupied %	Occupied	Vacancies	Dementia Nursing	92%	514	47	Dementia Residential	92%	1070	98	General Nursing	79%	589	161	General Residential	86%	843	137	<ul style="list-style-type: none"> <li>• The Commissioning programme for Accommodation with Care seeks to increase occupancy rates overall, with a focus on delivering a shift from general residential beds to increasing the number of providers that can support residents with more complex needs – specifically nursing and those with dementia.</li> <li>• Work to ensure sufficiency will also consider the needs and provision of short term and respite care as part of the health and care system and supporting people and families to keep well and be able to access the right support at the right time.</li> <li>• Invest time and support in quality improvement – focusing on achieving a stable and skilled workforce, drive up quality in the market overall through an integrated approach with quality assurance to support and hold homes to account for the care provided.</li> <li>• Renew our fee rates model to support projected needs in the City and ensure choice across a sustainable and innovative market</li> <li>• Continue to work with providers in Sheffield to join the Care Homes Framework. We are encouraging all older people's standard care homes (residential and nursing) to complete the application for the Framework. It is our intention that we will seek providers on this Framework first when procuring placements. This is to ensure that current and any future placements funded by the Council and Health (funded nursing care, FNC) continue to deliver the standards of care as set out in the required contract and service specification.</li> <li>• Developing new contract models to innovate and develop with Care Homes that want to work with us and share the council's vision. We will investigate the costs and benefits of different contract options for care homes (e.g. block contracts, longer term contracts, framework lots)</li> <li>• Review of S2A bed provision and specification</li> <li>• Increase understanding of equalities in our OP Care Homes – with improved data collection and analysis, and mapping of provision against an EAA</li> </ul>
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<p><b>HOME CARE</b></p> <ul style="list-style-type: none"> <li>• 86% of providers currently rated by CQC and are rated Good or Outstanding</li> <li>• Care &amp; Wellbeing Providers are all rated as Good or Outstanding</li> </ul>	<ul style="list-style-type: none"> <li>• The new Care and Wellbeing Contract will support consistent standards across Adult Social Care and Independent Sector provision and will seek to drive practice that is outcome focused, strength-based, community connected and person led so that <i>all</i> social care support is focused on enabling people to live independently, live the life they want to live and have positive experiences of care.</li> </ul>																								
<p><b>ACCOMMODATION WITH CARE</b></p> <ul style="list-style-type: none"> <li>• Routine quality monitoring of the 106 Care Homes in the City is undertaken by the Quality team. 101 routine quality monitoring visits have been carried out during the period January 2024 to October 2024, and through observations and conversations with residents and families the Quality and Performance Team evidence that Homes are meeting standards in a number of areas set out in our Quality Assurance Framework for Care Homes.</li> <li>• 84% of care homes in Sheffield have a CQC rating of good or outstanding which is better than the national average of 81%.</li> <li>• SCC Contract and Quality team monitoring has 5 homes in 'Amber' and 3 in 'Red' at end October 2024. These homes have increased monitoring with a focused improvement plan. The homes also have placement restrictions in place.</li> </ul>	<ul style="list-style-type: none"> <li>• We will continue our multi-disciplinary approach to quality improvement and support, maximising the benefits of a cross-service team with the ICB, so that when Care Homes identify, or are identified as requiring support to meet the standards we expect, the best support is available to them to deliver this.</li> <li>• We will improve our understanding of inequalities within care homes and prioritise work to reduce and address these.</li> <li>• We will review arrangements for how placements are arranged, purchased and monitored – considering the contribution that Brokerage can make to personalised care and support.</li> <li>• We will work with Care Homes to map digital infrastructure and capabilities and develop of partnership and collaborative plans to improve and maximise digital impact.</li> </ul>																								
<p><b>VALUE FOR MONEY</b></p>																									
<p><b>WHERE ARE WE NOW</b></p>	<p><b>ACTION PLAN</b></p>																								



- Our 24/25 Home Care rate is £22.96 per hour. This rate – together with the move to planned care over a 7 years + 2 +1 contract and consolidation of the market will support our commissioning objectives and better outcomes for Sheffield people. We also anticipate that staff will see the benefit of an increased fee rate in their terms and conditions. SCC Home Care rates are comparable with regional averages.
- The Council currently commissions in the region of 2,000 residential and nursing beds across the city, including short-term beds, at any one time. This includes all beds for older people and younger adults. The cost of this is circa £98m, against a budget of £88m.
- SCC rates for Care Homes are lower than regional averages. We have provided above inflations uplifts in the previous two years to support market sustainability.
- Several homes use 'top ups' and higher rates for self-funders to 'balance the books.'
- Care homes tend to have significantly high energy bills - primarily caused by high energy consumption, which also has a damaging effect of the environment. Helping residential care homes to identify appropriate energy efficiency options will help to reduce energy bills and improve the comfort of their residents. By taking steps to improve energy efficiency, care homes and nursing homes could reduce their overheads and have more money to invest into their services. They could also reduce their carbon footprint and help with environmental sustainability.
- Since 2015, 5 homes have closed related to practice, and 13 for financial reasons. No new entrants in last year.

- We will work collaboratively with providers to set transparent and fair fees and rates, using our leverage to drive improvement in terms and conditions for the care sector workforce, and supported by a cost of care model.
- Engage with local Care Provider Association and others to agree process and partnership approach
- Complete analysis of the current and projected demand, against market and workforce pressures (inc self-funders and ICB funded information)
- Feed into this EAA analysis
- Review commissioning capacity and opportunities to support the system more effectively and efficiently.
- Review existing fee setting models and current contracts – exploring the benefits of an enhanced rate and standard rates for specialist provision.
- Climate impact and energy efficiency will be taken forward using assessment tools and ensuring that Care homes are well placed to apply for any financial or other support from national or local initiatives.

# Adults Future Options

SUFFICIENCY	
WHERE ARE WE NOW	ACTION PLAN
<p><b>SUPPORTED LIVING</b></p> <ul style="list-style-type: none"> <li>67 Supported Living providers are on our Adults with Disabilities framework and 46 providers are contracted through Direct Awards</li> <li>Some supported living framework providers work with a landlord (Registered Provider) to provide accommodation in a 'scheme' setting.</li> <li>There is a diverse range of small, local and larger national providers.</li> <li>Framework providers currently deliver around 29,149 hours of 1:1 support to 823 people per week; 405 of these people also receive 15,239 hours of 'shared' support per week.</li> <li>c1295 support workers are employed by supported living providers.</li> </ul> <p><b>ACTIVITIES OUTSIDE THE HOME / DAY ACTIVITIES</b></p> <ul style="list-style-type: none"> <li>There are 63 'day service' providers in Sheffield, 31 are now on the Adults with Disabilities Framework. 32 are not on the Framework but we are actively encouraging them to submit an application.</li> <li>We have a diverse range of providers from large building based to smaller community settings/outreach.</li> <li>We also have our in-house Sheffield City Council Provider Day service provision including 5 building based settings &amp; 3 community support services</li> <li>850+ adults with a disability receive 'day service' support, most have a learning disability and/or autism.</li> <li>c600 support workers are employed by day service providers.</li> </ul> <p><b>OVERNIGHT SHORT BREAKS (Respite)</b></p> <ul style="list-style-type: none"> <li>4 external providers, total of 5 respite buildings contracted via Direct Payments/Council Arranged</li> <li>There is in-house provision in the form of a large 12 bed building and one single occupancy building for complex needs</li> <li>A range of models of support from smaller 'supported living' settings to larger residential style.</li> <li>168+ adults with a disability receive an overnight short break, most have a learning disability and/or autism. Many have a physical disability.</li> </ul> <p><b>ENHANCED SUPPORTED LIVING FRAMEWORK</b></p> <ul style="list-style-type: none"> <li>Contract start date January 2023</li> <li>Framework re-opened in December 2023</li> <li>There are now 23 providers on the Framework – supporting people with complex support needs in the community instead of a more restrictive setting.</li> </ul>	<p>Commissioning activity and service development to deliver better quality services and outcomes based upon our co-produced Learning Disability Strategy. The priorities are:</p> <ul style="list-style-type: none"> <li>- Emergency Overnight Short Breaks - Developing capacity for emergency overnight short breaks, including improving the quality and variety of provision in the market.</li> <li>- Specialist accommodation with care. Developing an accommodation growth plan to promote independent living, reduce dependence on out-of-area placements and specialist residential accommodation and to review specialist care commissioning.</li> <li>- Direct Payments – Developing the Personal Assistant workforce in conjunction with our wider care workforce strategy and more flexible use of Direct Payments / Individual Service Funds.</li> </ul>
QUALITY	ACTION PLAN
WHERE ARE WE NOW	ACTION PLAN
<ul style="list-style-type: none"> <li>All Supported Living providers are currently rated Good or Outstanding, and are rated green through our market oversight</li> <li>The Quality and Performance team conduct quality visits to supported living, short breaks and day service providers throughout the year. A self-assessment tool has been designed for Enhanced Supported Living providers and outcomes are measured against our I statements.</li> <li>The areas explored during quality visits for supported living include: <ul style="list-style-type: none"> <li>- Person centred approach: support plans and observations and conversations with individuals where possible to ensure people are supported with "What matters to them", they are supported with dignity and respect; that there are opportunities for daily enjoyment and a good quality of life</li> <li>- Staffing: deployment, recruitment, retention and training</li> <li>- Quality assurance: incident and accidents; safeguarding alerts and complaints; managing client finances, client and family satisfaction / feedback, audits with clear action plans / follow up to make improvement</li> <li>- The quality domains for day activities include quality of life/independence/empowerment/ safety and social connections</li> </ul> </li> <li>Providers experience similar recruitment and retention challenges to the rest of the health and social care sector.</li> </ul>	<ul style="list-style-type: none"> <li>Outcomes focussed approach for all new monitoring arrangements</li> <li>Experts by experience will be involved in quality checking</li> </ul>
VALUE FOR MONEY	

WHERE ARE WE NOW	ACTION PLAN
<ul style="list-style-type: none"> <li>• The budget for Supported Living in 23/24 was £39.8m, for day services was £6.2m, and for Short Breaks was c£1.2m.</li> <li>• We have a revised payment system for supported living, with a shift from geographical hourly rates now rationalised into community or discounted rates</li> <li>• Hourly rate for sleep in support has been replaced by a single payment per night</li> <li>• Care Cubed is supporting our understanding of value for money in this area</li> </ul>	<ul style="list-style-type: none"> <li>• Fee increases have been set out in the new contract.</li> <li>• Invoice verification process in place, to verify commissioned hours against 'actuals' in supported living. <ul style="list-style-type: none"> <li>- Ensure accurate and timely payments are made to Framework providers</li> <li>- Verifying, and where necessary challenge providers on support hours submitted</li> <li>- Resolve complex payment queries and historical reconciliations.</li> <li>- Escalate concerns or queries regarding care hours delivered.</li> <li>- Build/Maintain positive working relationships with providers and new social work team</li> <li>- Track TUPE premium payments.</li> </ul> </li> <li>• Brokerage of supported living packages ensures that vacancy and void costs are minimised.</li> <li>• Work with providers to review support packages to ensure that individual outcomes are being met appropriately, identifying where there could be a reduced dependence on paid services.</li> <li>• Consider whether other providers could meet some of the needs of the individuals, for example, shopping and cleaning services.</li> <li>• Framework providers involved in pilot for Individual Service Funds</li> </ul>

# Adult Mental Health

SUFFICIENCY	
WHERE ARE WE NOW	ACTION PLAN
<p><b>SUPPORT – COMMUNITY BASED</b></p> <ul style="list-style-type: none"> <li>12 Mental Health Independence providers are contracted under current framework. There are approx. 8 providers who offer support and are purchased via a direct payment or direct award.</li> <li>The framework is three tiered and focuses on enablement/reablement</li> <li>There is a diverse range of small local to larger national providers</li> <li>Framework providers currently deliver around 1,692 hours of support to 372 individuals</li> </ul> <p><b>ACCOMMODATION &amp; SUPPORT – COMMUNITY BASED</b></p> <ul style="list-style-type: none"> <li>There are three supported accommodation schemes with a total of 63 self-contained units which are commissioned directly</li> <li>There are four providers on the Mental Health Independence framework who offer supported accommodation alongside outreach support. There are approx.65 individuals living in these units.</li> <li>There are three providers of mental health supported accommodation who are not commissioned directly or via the Mental Health Independence framework and house approx. 45 individuals.</li> </ul> <p><b>ACCOMMODATION &amp; SUPPORT – RESIDENTIAL</b></p> <ul style="list-style-type: none"> <li>There are 10 specialist mental health residential homes. These homes offer a total of 144 bed spaces.</li> <li>There are 7 mixed nursing home which support individuals with mental health needs. Currently 32 individuals under the age of 65 reside in these homes.</li> <li>Diverse range of providers from large national provider to smaller local providers</li> <li>Commissioning views an over sufficiency of residential services catering for low level needs. Currently these provisions are holding 15%-20% voids</li> <li>3 beds are currently commissioned on a block contract to support hospital discharges</li> </ul> <p><b>PROMOTING INDEPENDENCE PROGRAMME</b></p> <ul style="list-style-type: none"> <li>The programme strives to support individuals to move on from residential environments to more community-based environments</li> <li>Over the past 12 months it has support 23 individuals to transition out of residential environments</li> </ul>	<ul style="list-style-type: none"> <li>Development of multiple disadvantage supported accommodation for individuals with need around substance misuse and a serious mental illness</li> <li>Development of the specialist mental health support market</li> <li>Creating a service specification for an internal enablement service to continue current residential stepdown work, expanding the service remit to include stepdown from supported accommodation and prevention</li> <li>Development of the residential market towards a more specialist and function based role</li> <li>Deregistration of residential placements currently underutilised to lower level supported living environments which are in demand</li> <li>Development of a supported accommodation framework</li> <li>Development of discharge to assess pathway from Mental Health wards alongside SHSC and ICB</li> <li>A further move towards personalised and outcome-based support</li> <li>Longer contracts to provide stability support innovation and co-production</li> </ul>
QUALITY	
WHERE ARE WE NOW	ACTION PLAN
<ul style="list-style-type: none"> <li>Out of the 12 support providers on the Mental Health Independence framework, 9 providers have active packages of support. The average satisfaction with support rate currently stands at 80%.</li> <li>A very low number of complaints are reported, with 6 complaints in Q3 of 2023</li> <li>Robust risk assessments and contingency plans have been seen during monitoring visits and regular evidence of positive impact from the support shared by providers in monitoring meetings</li> <li>Over the past 12 months we have had to remove one provider from our framework due to quality issues and financial sustainability concerns</li> <li>We are currently addressing training gaps in services that have been transferred from housing in the past 12 month</li> </ul>	<ul style="list-style-type: none"> <li>Outcomes focussed approach for all new monitoring arrangements</li> <li>Involving experts by experience in quality checking</li> <li>Expanding quality measures to recent services transitioned from SCC Housing</li> <li>Promote the use to assistive tech during quality visits</li> <li>Measuring outcomes for individuals supported by the Promoting Independence Program</li> </ul>
VALUE FOR MONEY	
WHERE ARE WE NOW	ACTION PLAN
<ul style="list-style-type: none"> <li>For 23/24, the spend on directly commissioned mental health supported accommodation and outreach framework £2.35m</li> <li>For 22/23, the spend on mental health residential services is approx. £8.48m</li> <li>ICB contribute £1.4m via s117 agreements towards mental health supported accommodation, outreach and out of city residential. ICB pay in city residential directly</li> </ul>	<ul style="list-style-type: none"> <li>Brokerage of mental health independence ensures marketplace equity</li> <li>Work with providers to review support packages to ensure that individual outcomes are being met appropriately, identifying where there could be a reduced dependence on paid services.</li> <li>Expanding the remit of the enablement team will promote the stepdown of individuals from residential and supported living. This ensures good use of existing resource, rather than developing new</li> <li>Consider whether other providers could meet some of the needs of the individuals, for example, shopping and cleaning services.</li> </ul>