

## Market engagement review & analysis of the Gloucestershire care market

### Introduction

We undertook a comprehensive and focused review of the care market to better understand the initial and ongoing impacts that the Covid-19 pandemic has had on the care sector and the opportunity for providers to propose solutions and suggestions on how we as an integrated care system can further support providers to aid sustainability and recovery

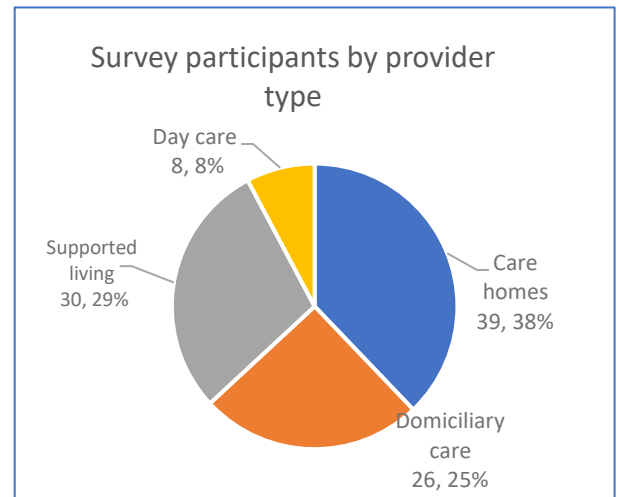
Care sector providers were given the option to complete a market engagement survey via our engagement 'have your say' portal which was open for 6 weeks.

Providers were also given the opportunity to attend a virtual focus group session to engage further in discussion regarding the impact of the initial and ongoing impact of the covid-19 pandemic.

The survey and focus groups gave options to evaluate and discuss the type and scale of impact, with particular focus in the following areas: Business Model, Staffing and Recruitment, Infection, Prevention Control, Testing and Vaccinations, the survey also included a 'other' option to give opportunity for providers to tell us of any areas they felt were not covered but had been impacted.

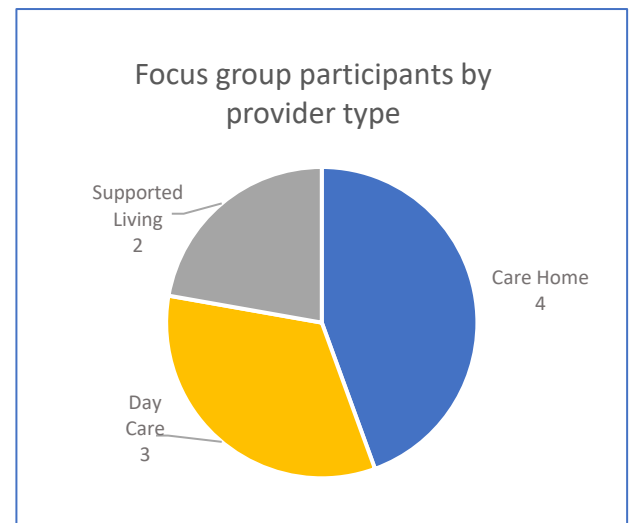
### **Survey Response Rate**

- The survey ran from the 14<sup>th</sup> of December 21 until 23<sup>rd</sup> January 22 (40 days)
- We had 103 respondents to the survey
- We had responses from Care Homes, Day Care, Supported Living and Domiciliary Care



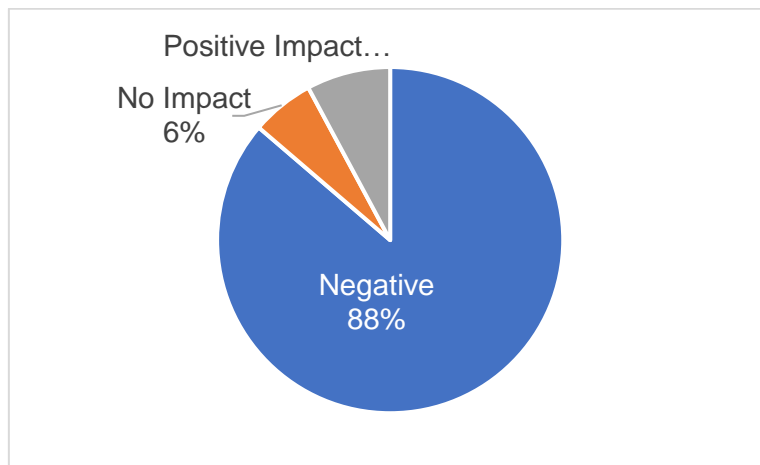
### **Focus Group Response Rate**

- 59 survey participants expressed an interest in attending a virtual focus group, 24 accepted an invitation but only 9 joined
- Care Homes, Day Care and Supported Living were represented in the groups. No one joined the Domiciliary Care session

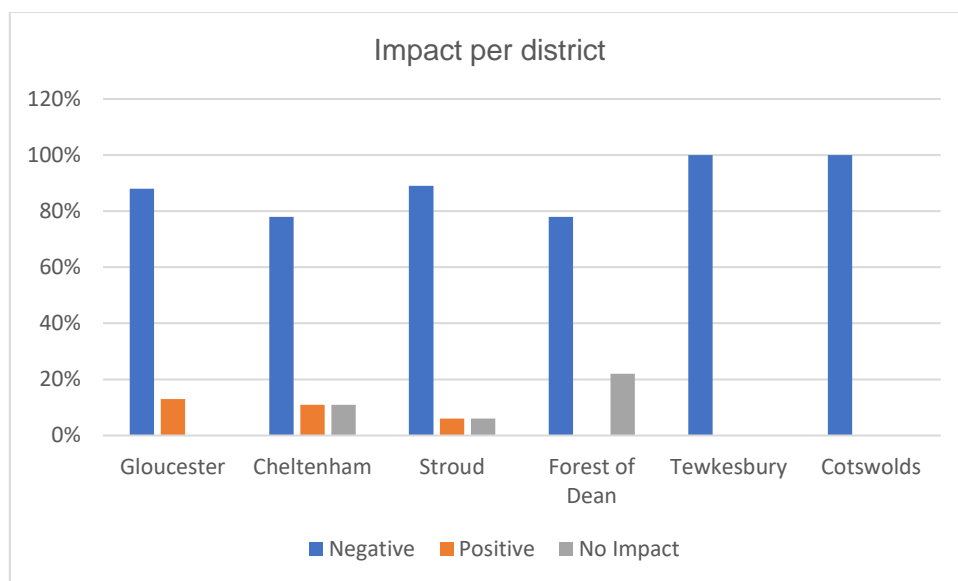


## Overall Impact

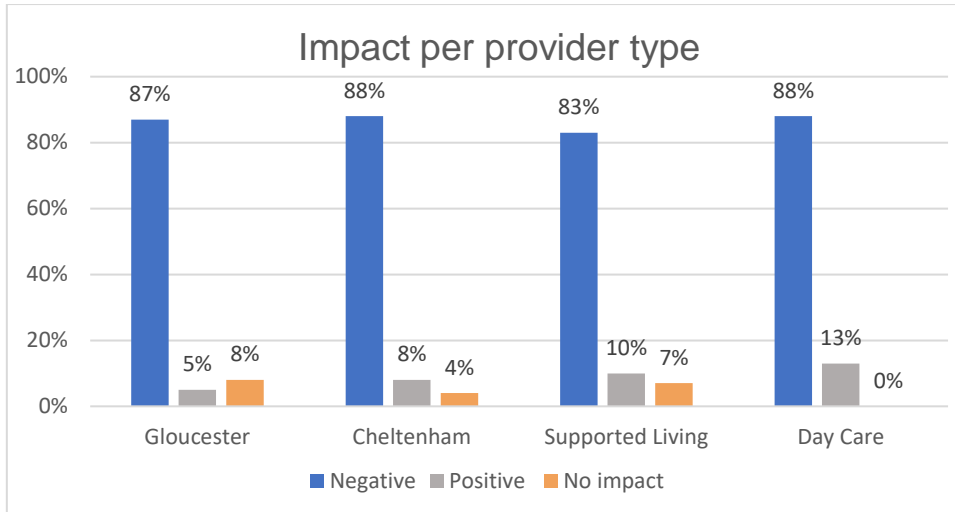
Out of the 103 responses and those that attended the focus groups, 86% of providers told us that the pandemic had negatively impacted their business.



Analysis of the overall impact data across each district, recorded a similar picture with providers experiencing a negative impact ranging between 78%-100%



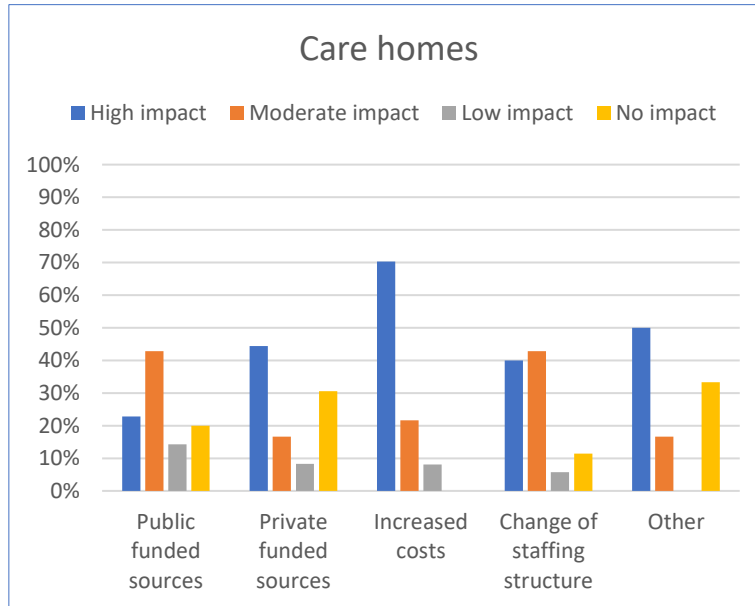
The data across provider type was also similar, with a negative impact ranging between 83%-88%

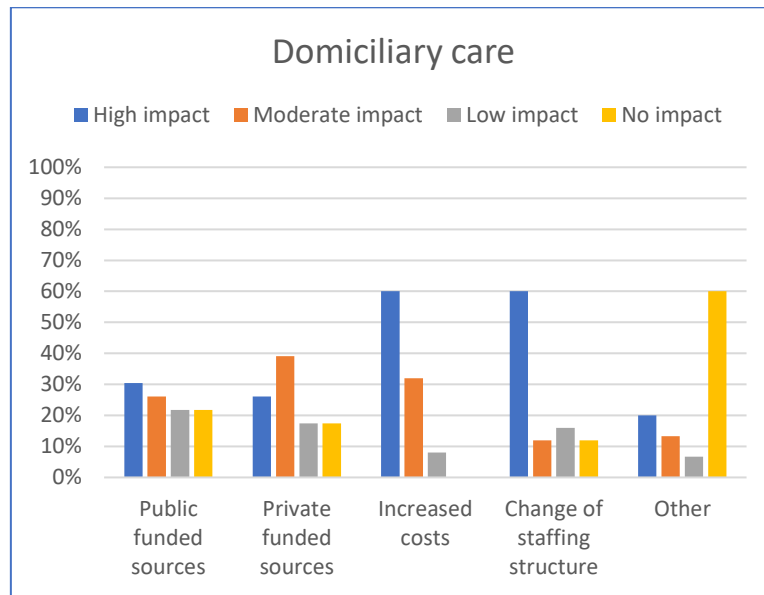


**Areas of Overall Impact**

**Loss of Income**

Providers told us that the loss of income had negatively impacted their business with 70% of providers telling us that this was a moderate-high impact. It is indicated that loss of income has come from increased costs in other areas of the business including staffing, and equipment. Providers also told us that the loss of resident income from both private and public funded sources has also negatively impacted their financial viability and business model. Some of the 'other' issues providers informed us of were relating to reduced occupancy and a fall in admissions to care homes, and other business-related costs such as utilities, and insurance.

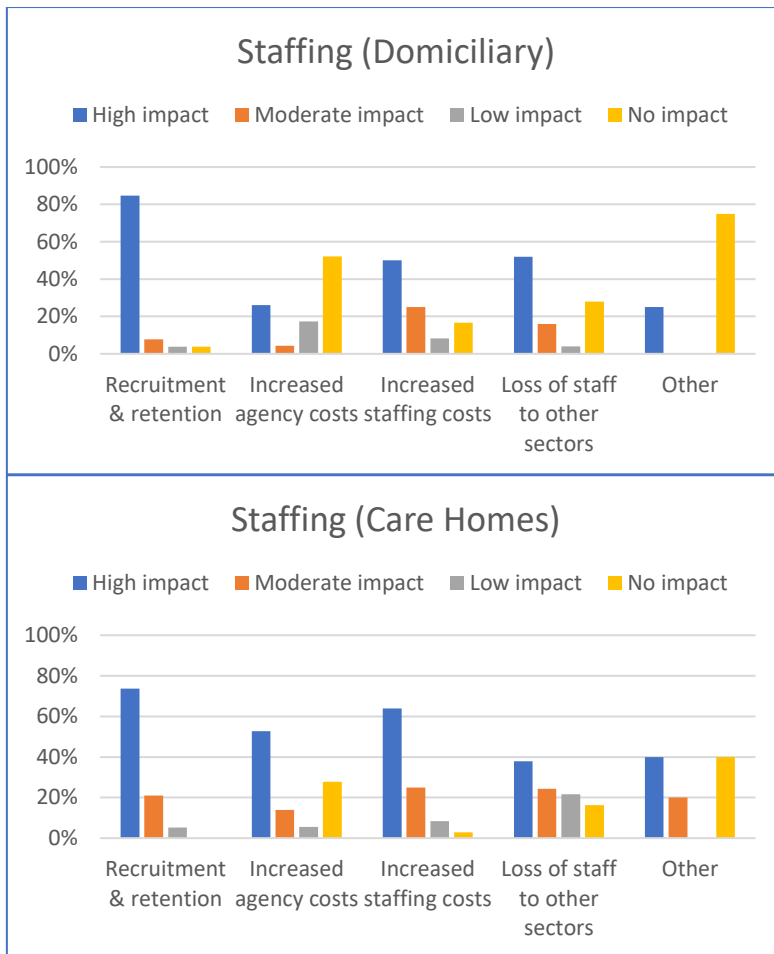




### Staffing and Recruitment

Recruitment, and retention of staff was seen as a key challenge across the entire care market, with a particular focus around nursing staff a trend we have seen reflected at a national level across the health and social care sector, however the geographical position of Gloucestershire seems to have exacerbated the staffing shortages particularly in the border areas of the county. Providers stated that the biggest impact was the loss of staff to other sectors, hospitality, retail, logistics with over 80% of providers rating this as a moderate-high impact. Providers gave the following reasons for staff leaving:

- Lack of pay or low pay rates
- Long hours
- High pressure work & stress levels
- Increased responsibility
- Low morale and lack of appreciation
- Feeling undervalued
- A move to agency working increased flexibility with higher rates of pay
- Uncertainty of the service remaining open/being sustainable
- Mandatory vaccinated
- Insufficient time to have meaningful engagement and deliver added social value



### Workforce disparities

Providers told us that they and their staffing teams felt undervalued and that there appeared to be a lack of recognition at a national level for the independent care sector workforce when compared to those working in public sector Health & Social Care. Little recognition of their roles in supporting the wider health and social care system. All of which had been strengthened by the messages being promoted during the pandemic. The mandatory vaccination of care home staff in November 2021 is thought to be an indication of this and was a further challenge for providers as staff losses of approximately 30% as they entered winter again had a detrimental impact.

### Increased Costs

Increased costs have had an impact on providers, and the following key areas are where providers told us they have had the biggest impact:

- Agency costs
- New equipment
- Additional staff members
- Sickness costs
- Overhead Costs
- Training costs

Providers have told us extra staff have been necessary to be able to support with enhanced IPC measures and additional tasks that have been necessary during the pandemic. Such

measures also increase the need for adequate, and suitable storage, and PPE stations in line with government guidance have contributed to increased costs.

Providers reported an increased reliance on agency staff., This is largely due to the loss of staff from the sector, increased sickness levels due to covid-19 and self-isolation requirements. As a result, providers are often required to be 'block book' agency staff to attempt to keep continuity and reduce the risk of staff working in multiple settings. However, providers told us that this is challenging, and can often increase pressure further due to the time needed to induct, and support agency staff. Providers also told us on occasions agency staff although booked in advanced will often not arrive for their shift.

### Payments

There were several areas where providers felt that payments have impacted their business these including the following:

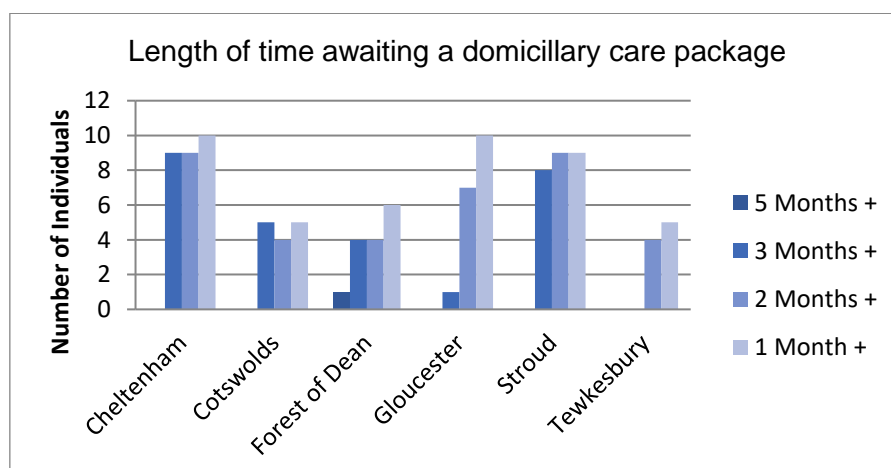
- Low rates from health & social care system.
- Payment lead-times
- Lack of gross funding
- Negative relationship with council regarding payments

Providers did acknowledge and appreciated the support off one off funding pots and several grant agreements that have been made available which have supported the care sector during the pandemic and aided them to remain to some extent sustainable, yet funding is due to end March 2022. While the extra streams of funding were vital to providers the additional administration tasks required to obtain several grants has been tough along with the further very strict conditions attached to them.

### Domiciliary Care Overview

Individuals wishing to remain in their own homes for as long as possible, with an increased drive for independence has grown. Many individuals with care and support needs are more likely to stay in their own home and receive support rather than going into a residential placement. Therefore, the need for domiciliary care has risen, along with the need for these providers to have a sustainable, and upskilled workforce to be able to respond flexibly to demand, and to care for the number of individuals living at home with complex conditions.

We have found that in certain areas of Gloucestershire it can be particularly challenging to procure a suitable package of care, the average wait time for a provider to pick up a package of care is 2 months, with many individuals waiting anything up to 5 months for a package of care from referral.



Review of the market engagement feedback has further demonstrated the additional pressures and challenges providers are facing due to the negative impact the pandemic has had on their business and staffing structures resulting in them becoming less sustainable and impacting on the support they are able to provide in promoting independence and community care and increasing dependence on residential beds in the short term.

Geographic location is another crucial challenge when procuring packages of domiciliary care. Identified areas in Gloucestershire are continuing to be problematic, locations that are more remote often add additional travel time for providers.

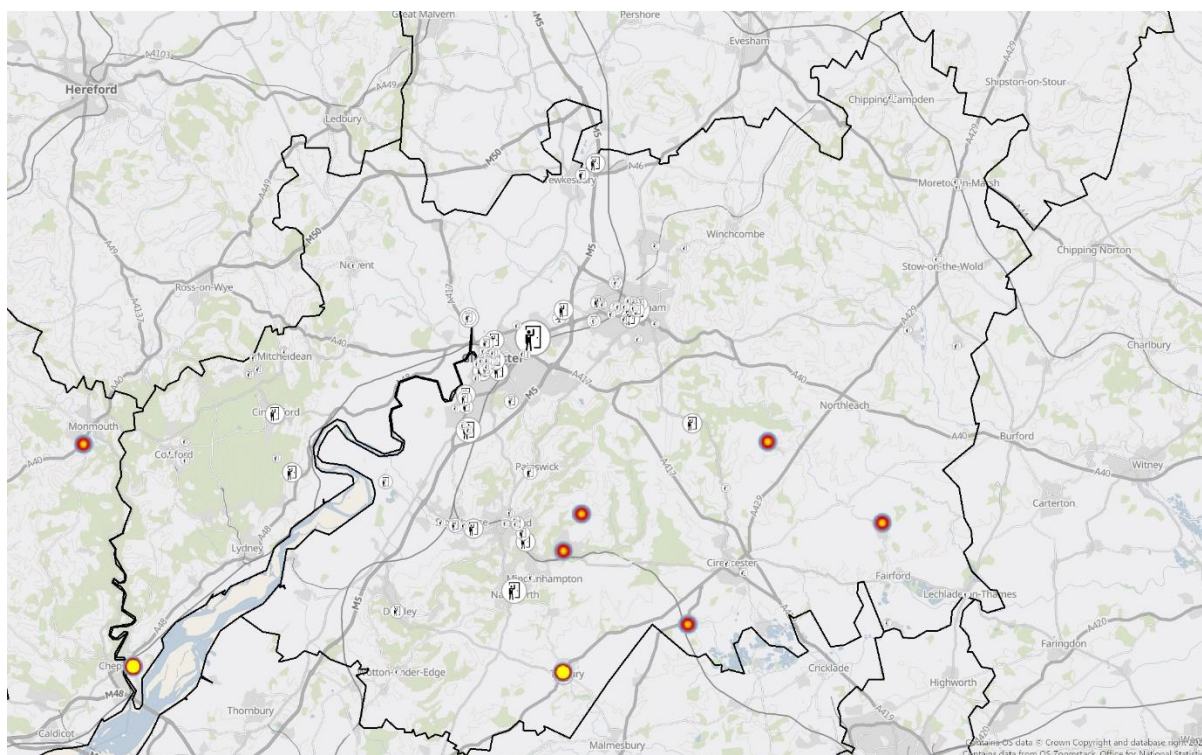
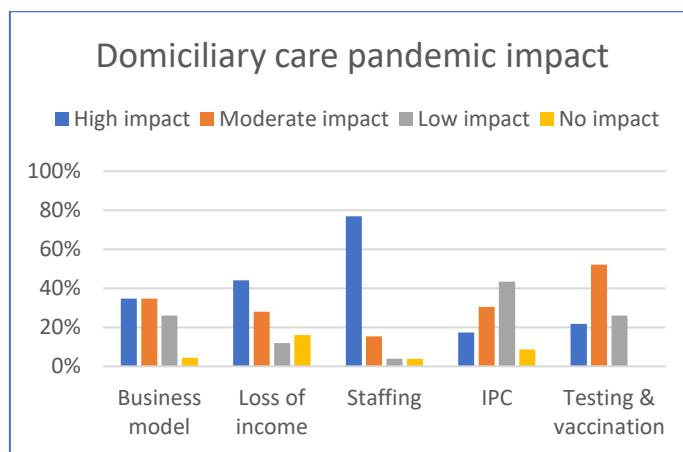


Figure 1 Dom Care Provider Locations (Spots for areas where provision is hard to source) (see full sized map Appendix 1)

Recruitment and retention in the health and social care sector has been a continuing challenge for some time and has been further exacerbated by the pandemic.



Domiciliary care providers rated staffing as having the greatest negative impact on their business, along with loss of income and business model. Recruiting staff locally is often not possible, this increases time spent travelling travel and can reduce the amount of capacity and care time providers are able to deliver. Without the staffing resource providers are unable to support new clients, which is impacting on a loss of income and existing business model.

We are frequently utilising care home beds for individuals who have been assessed as needing a package of care in their own home. This is due to the lack of sufficient domiciliary care provision in Gloucestershire, and our responsibility to support in assisting hospital discharge flow and keep individuals safe. The utilisation of these care beds in the absence of domiciliary care, can bring about an increase in dependency and reduce individuals' wellbeing and quality of life.

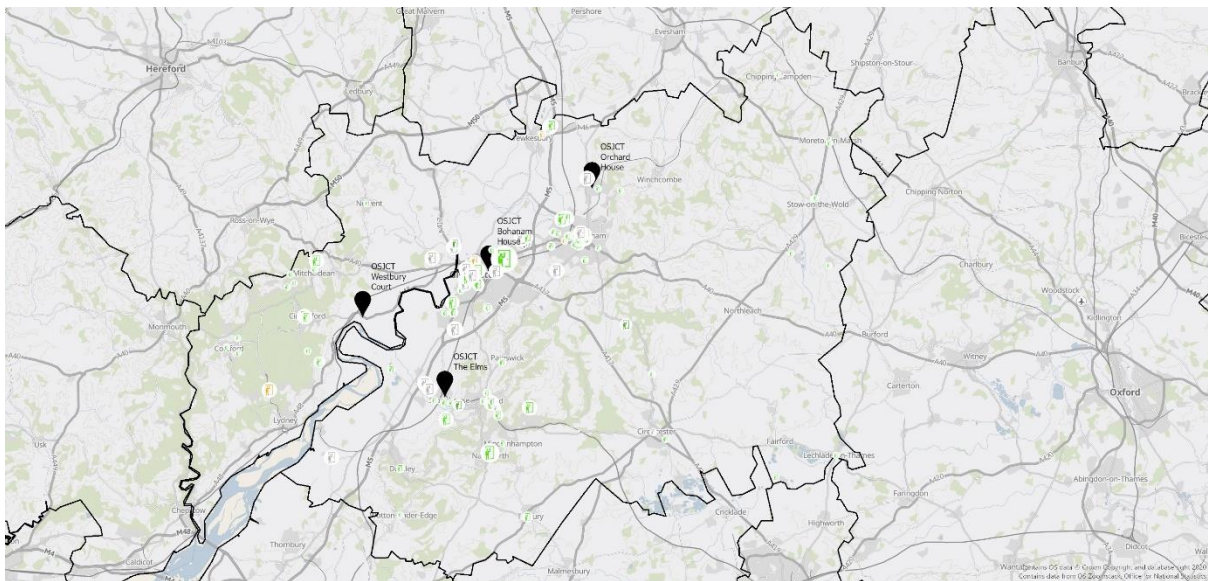


Figure 2 -Dom Care provider locations in Gloucestershire (see full sized map Appendix 2)

The rise in the number of individuals able to remain in their own homes for longer has increased the need for more complex domiciliary care packages or packages with increased numbers of visits and hours. This also requires staff to be up skilled, and competent to care for these individuals and adds a greater responsibility for the home care providers' work force.

## **Care Homes**

In Gloucestershire it has been identified that we have an excess of care home beds, then what are necessary to support the needs of individuals requiring a residential or nursing placement in a care home.

Market analysis has also evidenced that the spread of care beds across the county are not evenly distributed with most of the care homes in the two urban districts, Gloucester & Cheltenham.



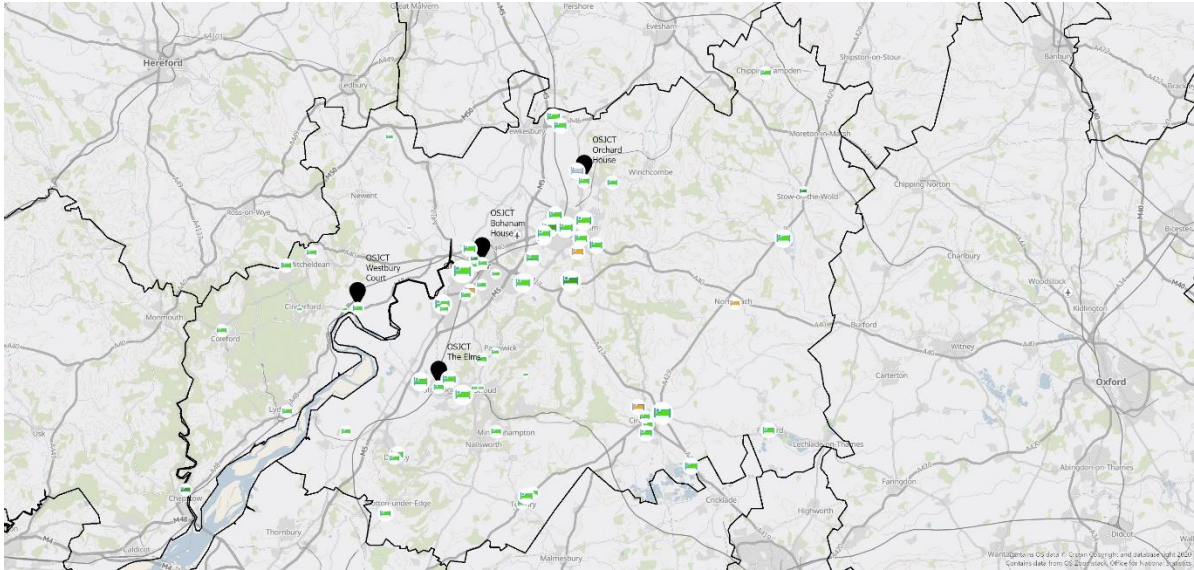
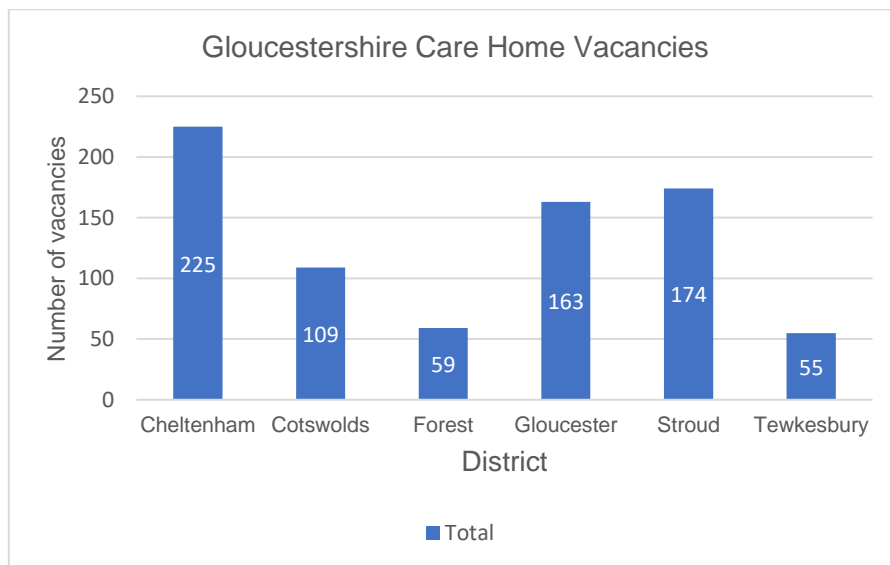


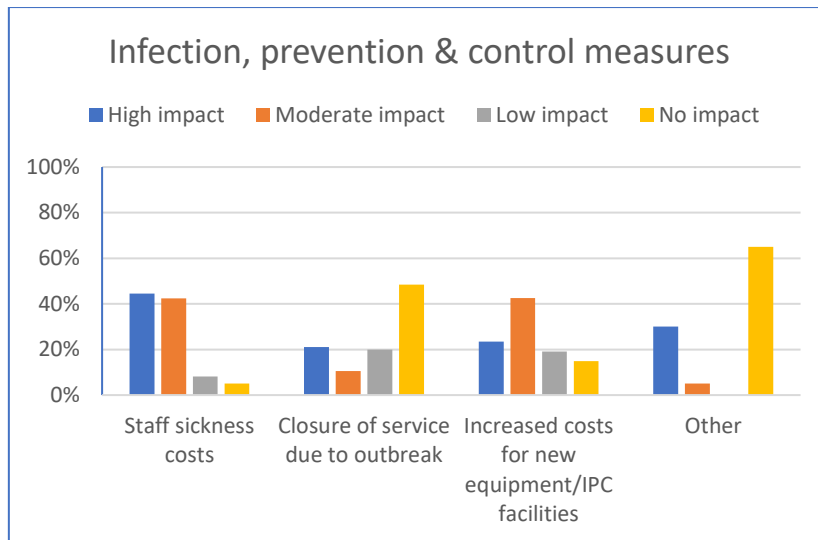
Figure 3 Care Homes in Gloucestershire with Vacancies (see full sized map Appendix 3)

Market engagement has shown that there are still many vacancies in care homes in Gloucestershire which has been the picture for some time. Providers told us that both public funded placements, and private have significantly reduced overtime.

The support required to assist hospital flow during the pandemic, and due to the lack of necessary domiciliary care provision, several of the beds that have been occupied in care homes are not by individuals who have residential or nursing needs and were placed to keep them safe.



The introduction of increased Infection, prevention, and control measures, in addition to the implementation of regular covid testing for staff and residents has presented further pressure on care homes.

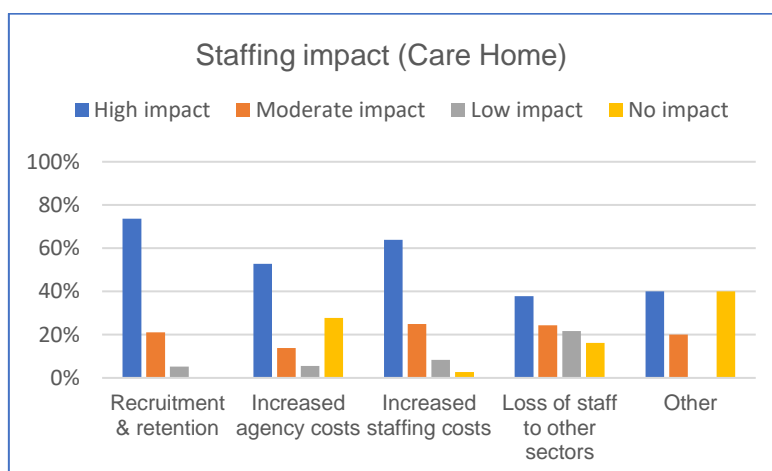


The management of covid-19 outbreaks and the difficult issues that outbreaks have presented have greatly impacted providers. The closure of services due to outbreak has impacted negatively in numerous areas, which the biggest impact including loss of income from new residents

The introduction of regular testing particularly for residents has also impacted, providers told us that the intrusive nature of the tests, make it uncomfortable for residents and the extra staff resource required to undertake the resident testing and take the time to support the residents and console them at a difficult time when staffing was already at a minimum.

Visiting in care homes has also been affected, and providers told us similarly to above that they are requiring additional resources to manage and encourage safe visiting, with the introduction of the covid passport, evidence, or support to under a negative LFT test, booking and cleaning regime of visiting room.

The introduction of mandatory vaccinations for care staff has also had considerable impact on an already unstable and diminished workforce. Providers told us that staff were already leaving the care sector for reasons stated above, and the mandating of vaccinations has unfortunately seen a further loss of staff who wished to not be vaccinated.



### **Care homes further support:**

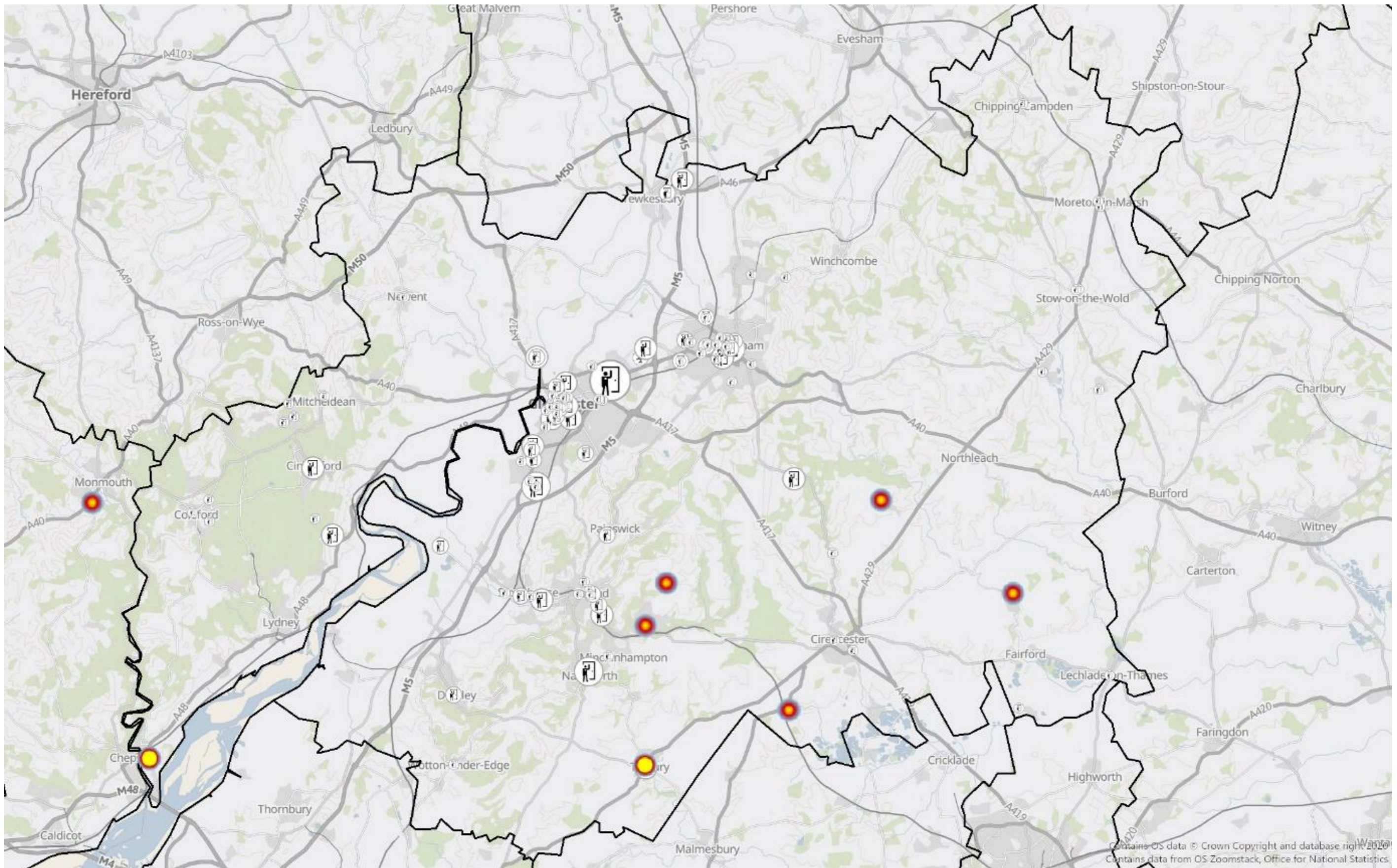
As a result of the engagement survey and focus groups, providers expressed significant concerns about the interface between their business and provision of services and commissioning decisions made at a strategic level across Gloucestershire. In essence providers were keen to explore a future state with the County Council that focused in on a placed based agenda, rather than the historic block contracting arrangements designed and implemented in a different era from a provider, commissioning and service user perspective. An example of this was the decision to purchase the Pathway 2 beds from our block provider which disadvantaged the independent care sector market in Gloucestershire. There was considerable unease that this decision was taken against the backdrop of a global pandemic that by its very nature reduced an income source (self-funders) that providers had relied on as part of their business planning and sustainability.

### **Futher support**

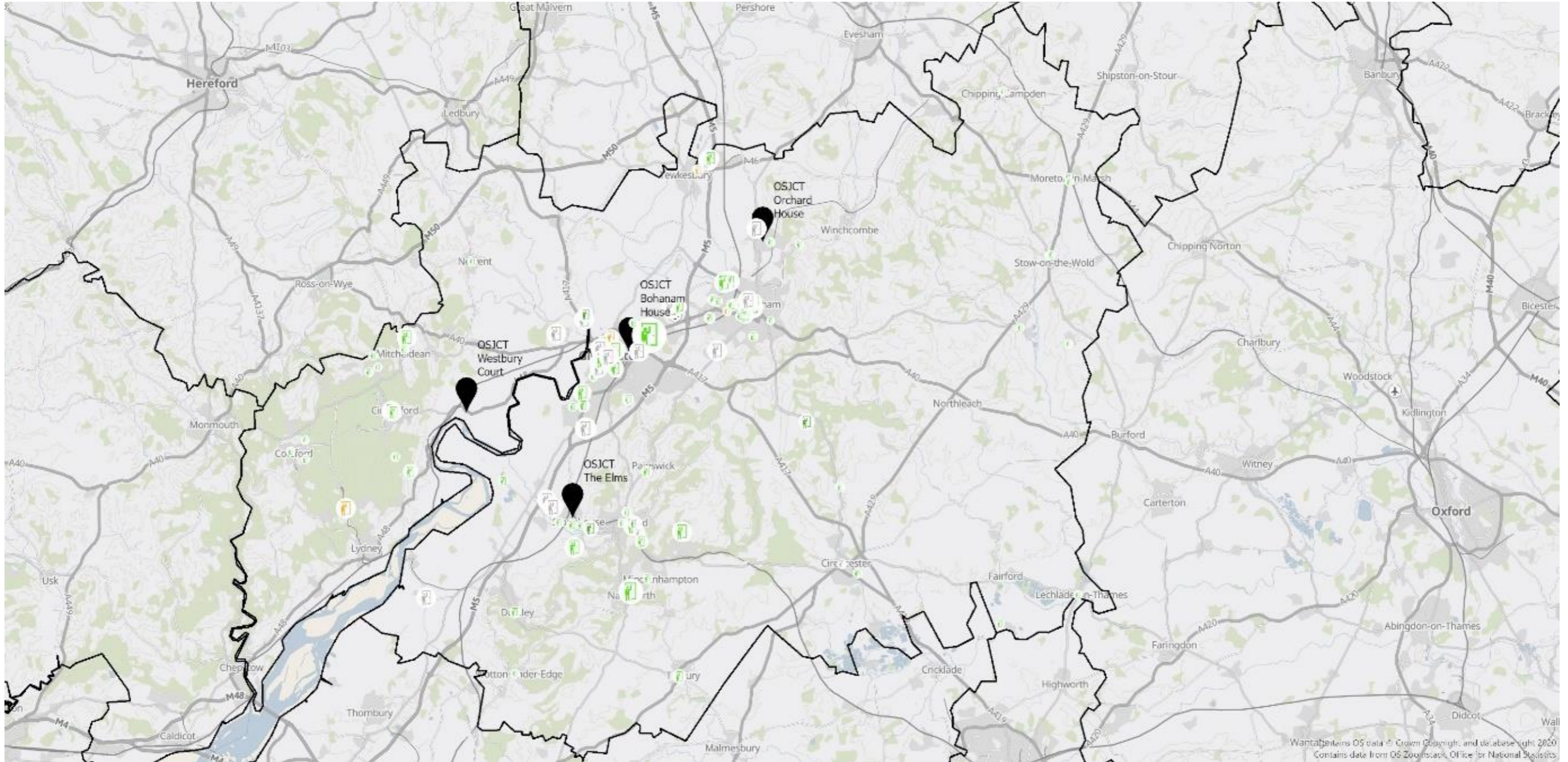
Providers told us that they felt they could be supported further in the following areas:

- Support with filling vacancies in care homes across Gloucestershire
- Further support for smaller independent providers
- Extra opportunities for outcome focused support for adults with disabilities
- Support to enable building transformations to provider better and more suitable care for individuals living with dementia
- Enable digital transformation to achieve efficiencies and higher quality care
- Re-design, and new specification for new services to support individuals
- Improved relationships and payment processes
- Review current rates so placement more closely reflect true cost of care
- Additional support and funding with recruitment and retention of staff
- Consider consolidating nursing services into fewer homes

Appendix 1: Domiciliary Care Provider Locations



Appendix 2: Domiciliary Care provider locations in Gloucestershire



Appendix 3: Care Homes in Gloucestershire with Vacancies

