Adult Social Care Commissioning Delivery Plan

Areas for investment and development – a plan for Adult Social Care commissioning activity

May 2025



1 Introduction

- 1.1 Oldham's adult social care service is experiencing significant increased demand along with increasing levels of acuity, a growing level of high-cost placements and set of financial constraints faced by Oldham Council. Although challenging issues, this situation also presents considerable opportunities for adult social care as many individuals are placed out of area to have their assessed needs met as a result of us not having services within Oldham to meet people's needs, and intermediate care facilities need development in the borough.
- 1.2 This Delivery Plan is broken into two sections:
 - i. Where we are now presenting details on current commissioned capacity and demand and describes ongoing challenges when considering Oldham's demographic projections should commissioning activity not be addressed effectively and timely.
 - ii. **Plan to resolve** presenting proposals for development, investment and outlines existing and ongoing commissioning activity.
- 1.3 This Delivery Plan should be considered alongside the following: the Market Position Statement, Commissioning Strategies and Adult Social Care Transformation programmes.
- 1.4 Where investment and developments are proposed to be required, business cases will be provided.

2 Oldham's Adult Social Care

2.1 Commissioned services and operating environment overview

- 2.1.1 Oldham's Capacity and Demand Summary be viewed can https://www.oldham.gov.uk/mps-capacity-and-demand-summary, the analysis presented in this report is based on recent data and information which speaks directly to the Market Position Statement and other associated documents such as the Commissioning Position Statements for specific care provision (https://www.oldham.gov.uk/mps-cps)
- 2.1.2 On average, around 3,355 residents in Oldham have identified care and support needs in accordance with the Care Act 2014 and are in receipt of statutory services. The image below presents an overview of the commissioned services in place for adults with an adult social care assessed need (please note, some individuals are in receipt of one or more services).



- 2.1.3 In accordance with national drivers, the need for adult social care (ASC) continues to increase, however, supply has not always kept pace, meaning more people are not getting the support they need at the time they need it. The market position in Oldham mirrors both the regional and national picture. Oldham experiences key challenges of increased demand for both short and long-term care and support which includes:
 - a) In-borough market challenges, resulting in an increase in high-cost, out of area placements.
 - b) High-cost transitions of young people from Children's Social Care (CSC) into ASC.
 - c) Lower than pre-pandemic hospital discharge acuity thresholds resulting in residents being unable to return home and not meeting the criteria for intermediate care services. Consequently, ASC is experiencing an overused of short-term placements to ensure safe, timely and effective discharges, often resulting in residents becoming institutionalised quickly and ultimately requiring long-term 24-hour care on a permanent basis.
 - d) The Reablement model in Oldham is limited and has been identified for an independent review.
- 2.1.3 The vision for Adult Social Care (ASC) focuses on supporting residents to live independent, healthy, safe and well in the community with minimal support required from statutory services. The focus is prevention and early intervention, whilst reducing the over-reliance on social and health care services and addressing health inequalities.

Adult social care's operating model is displayed in the image below.



2.2 Workforce

- 2.2.1 It is widely reported that the care sector is facing unprecedented challenges in relation to recruitment and retention, locally, regionally and nationally. Workforce challenges continue to be at the top of the agenda for the Greater Manchester Integrated Care Partnership and ADASS, with regular assessments of workforce risk being undertaken across the North West region.
- 2.2.2 In 2023/24 the ASC sector in England had an estimated 18,500 organisations with 40,000 care-providing locations and a workforce of around 1.7m filled posts. In the same period, locally, the total number of filled posts in Oldham was around 8,400 with 500 vacancies. Skills for Care estimates that the staff turnover rate in Oldham is 22.5%, which is lower than the regional average of 25.4%, both higher than England average rate of 13%. The estimated vacancy rate across ASC in Oldham is 4.8%, which was lower than the regional average of 7.5% with the national rate sitting at 7.2%. However, it is recognised that care providers (residential and non-residential) operating in Oldham

- are facing ongoing workforce challenges, which are financially related to recruitment, retaining, and rising costs of regulation fees and utilities and we have seen the impact of this in the last 36 months with an increasing amount of provider failures.
- 2.2.3 Oldham's Adult Social Care directorate launched its Workforce Strategy in 2025, and this covers the various professional disciplines both within the local authority and our wider provider market recognising that Oldham's Adult Social Care is not able to meet its statutory functions without the independent and commissioned sector. The strategy has an annual delivery plan which presents the activity to address the ambitions in the Workforce Strategy.
- 2.2.3 The Workforce Strategy is underpinned by the Vision of ASC of *supporting residents to be independent, healthy, safe and well*. The focus of the ASC Vision and the strategy to realise this Vision is to enable residents to live as independently as possible, with minimal reliance on the council, through early-intervention, preventative services, and strengths-based ways of working. In doing this, the service is reversing its approach to assessment and intervention by working with residents to focus on what they can do, rather than the previous prescriptive model which focused on what the person needed help with. To do this we need to have a workforce at full capacity, who feel valued, who are well trained, and who want to remain working in Oldham. To do this, we have prioritised **Recruitment, Support, Training** and **Being Valued** as key components.

3 SECTION 1: Current Pressures and Forecasts

3.1 Adult Social Care activity

3.1.1 On average, at any one time, there are around 3,355 residents in Oldham have identified care and support needs in accordance with the Care Act 2014 and are in receipt of statutory services.

Residential and Nursing Care

- 3.1.2 Oldham currently has 32 residential care homes, seven are dual registered (nursing and residential) and one is nursing only. The borough's current provision is 1,600 beds operating on average 72 beds being vacant.
- 3.1.3 Based on current occupancy and population projections the Oldham care home population is predicted to increase from 1,708 beds in 2023 to 2,404 beds by 2040, at an average growth of 40 beds per year. Based on the number of Oldham Council funded beds compared to the wider market results, indications suggest there is a need for an additional 20 council funded beds per year. There is currently insufficient capacity in the market to support this level of growth. ONS data estimates 24.6% of care home beds in Oldham are self-funders.
- 3.1.4 Residential and nursing benchmarking data below illustrates a cost per week of £951,103 for 999 Oldham residents in 24-hour care. The 2024/25-month 7 forecast position for all residential, nursing, respite, rehabilitation, and short stay beds is £52.405m. However, based on the current short stay activity this is likely to increase further as the average short stay 4 weekly payment is £0.300m per payment higher than 2023/24 values.

- 3.1.5 Based on the current pricing structure with no allowance being made for fee uplifts, the impact of the foundation living wage or transitions cases, the increase of 20 beds per year would show the following prediction for required growth in the market. (MQIS data forecasting forward based on trends over the last 2 years).
- 3.1.6 The number of care home beds in Oldham has reduced by over 200 beds since 2021. This has had a particular impact upon nursing provision with two large dual registered nursing homes closing in the last two years alone. At the same time, we are seeing increased acuity of needs for people requiring permanent nursing and residential care. This is due to a combination of factors, which are likely to see this remaining the case:
 - i. The council's adult social care target operating model, which promotes keeping people in their own home for as long as possible
 - ii. Increased acuity of people at the point of discharge from hospital and increasingly complex needs as people live for longer with more co-morbidities.
 - iii. Increasing rates of dementia
 - iv. Top up fees in care homes acting as a barrier to a placement.
- 3.1.7 Oldham has experienced an increase in residential and nursing homes introducing charged third party top up fees which are over and above the local authority set rates. Currently, around 60% of the residential market now apply these additional costs. It should be noted that this limits the availability and choice for Oldham residents.
- 3.1.8 Analysis is ongoing on reasons for out of area placements being made, with early indications for the main reasons being one or more of the following:
 - i. We have a limited nursing supply, which has further decreased in recent years.
 - ii. We need more specialist nursing provision, such as dementia nursing and bariatric provision.
 - iii. We need more specialist residential provision, such as complex dementia and bariatric provision.
 - iv. We also currently have no male only units for either nursing or residential care.

In addition to the above reasons, it is recognised that there are instances where it is individual or family choice to have someone in residential care outside of Oldham.

Residential and Nursing Out of Borough Position

3.1.9 At the time of compiling this report and analysis the data there were 167 Oldham residents placed out of borough (OOB) in residential and nursing placements, at a cost of £14.265m on an annual basis, with care delivered by 107 providers. The average cost of an OOB residential or nursing placement is £1,800 per week. The most expensive placement cost £13,562 per week and the lowest placement cost is £457 per week.

Placements spend profile	Weekly cost
Most expensive	£13,562
Average cost	£1,800
Lowest cost	£457
Median cost	£947
Top 20 average cost	£5,185

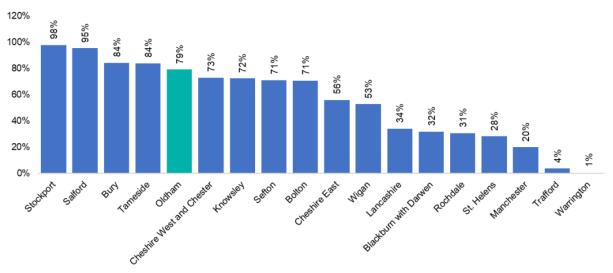
3.1.10 Since the pandemic the number of OOB placements has risen by 51% and the annual cost of the out of area placements has risen by 53%.

Year	No of placements	Cost per week £	Annual Cost	%increase in placements	%increase in cost
2022-23	112	117	£9,230		
2023-24	128	205	£10,690	16%	16%
2024-25	169	271	£14,110	32%	32%

3.1.11 The OOB provision by need is presented in the table below:

Need profile	Annual Cost	No of placements	Average Cost
Nursing Permanent	£4,558	54	£1,712
Residential Permanent	£7,345	92	£1,738
Nursing Temporary	£2,930	3	£1,872
Residential Temporary	£2,069	18	£1,892

- 3.1.12 The need of OOB provision indicates the highest demand is for permanent residential placements with an average cost of £1,738. The average cost of a permanent nursing placement is £1,712, this does not correlate with the in-borough position where at the time (2024/25 in-borough ASC rates) residential bed costs £697 per week and a nursing bed costs £740 per week. In addition, the average cost of a Section 117 placement is 87% higher than a standard bed at £2,300 and there are 46 residents with this identified need. Although these residents have their placement 50:50 funded between the local authority and integrated care board (ICB), a saving in the cost of these placements would benefit the wider Oldham health and social care economy.
- 3.1.13 The current in-borough residential and nursing provision is 1,600 beds with 72 vacant at the time of report writing and analysing the data. To note, throughout 2024/25 and into 2025/26 the market operates on an average of a 5% vacancy rate, resulting in residential and nursing beds a premium commodity. The split between residential and nursing beds is not available to be reported due to the dual registered homes often flexing between residential and nursing dependent on the needs of their residents.
- 3.1.14 Analysis undertaken across the North West region presents the relative difference in spend between OOA placements and the commissioning authority, regardless of the amount of spend in each local authority; this is presented in the graph below. For Oldham, the difference in spend between the two is 31%, which is the fifth highest in the region.
- 3.1.15 Oldham's reliance, in comparison to other North West authorities are presented in the graph below. In this the percentage difference in weekly average spend (£) per person between out of area and within the borough, showing that Oldham's out of area placements are 79% more expensive than in borough. Further work is taking place to analyse this data. For example, it is often reported that the level of complexity of people requiring care and support is high, which indicates that we have not got both the capacity and the capability of providers to manage within borough. This data could also point to a lack of suitable accommodation to accommodate and support people as per their identified and assessed Care Act eligible needs. Commissioners can also assume that there is work to do with Oldham's local authority rates in order to establish complex rates for more specialist services to be provided in borough.



Extra Care Housing

- 3.1.16 Extra Care Housing is considered as a step before residential care, with MioCare being the borough's sole care provider across six schemes offering 255 units. Extra Care Housing is a type of 'housing with care' which means that residents are able to live independently while being assisted with tasks such as washing, dressing, going to the toilet or taking medication.
- 3.1.17 Often operating at minimal voids, a challenge ASC face is of the six Extra Care Housing sites, only one of them was purpose built, with the remaining five being converted from previous Sheltered Housing stock. The challenges faced with the old stock is that the sites do not lend itself to providing support to people with additional needs. This is having an impact on more placements than necessary in residential settings. Oldham is committed to growing this model, and with the increasing demand on residential services it is recognised that Extra Care Housing has a role to play in enabling people's independence and providing support to people ahead of them requiring 24:7 support in residential or nursing provision.
- 3.1.18 Through recent Local Housing Needs analysis and data review, it is considered Oldham residents would benefit from an additional Extra Care Housing site in the borough, to accommodate between 40-60 people and scoping work is taking place with housing and partners. A business case is required in order for the authority to consider options for the authority to address this area of care, support and accommodation going forward.

Specialist Accommodation for working aged adults

3.1.19 Supported Living refers to schemes that provide personal care to people as part of the support that they need to live in their own homes. The personal care is provided under a separate contractual arrangement to those for the person's housing. The accommodation is often shared, usually as a small group, but can also be a single household. Supported living provides people with individual tenancies, meaning people have their own home and benefit from a greater level of autonomy as far as the environment is concerned. Personalised care and support are designed and provided according to the needs of the individual, with a focus on maintaining, or if appropriate, increasing independence.

- 3.1.20 Oldham has a framework of care providers commissioned to deliver supported living services. MioCare also provides Supported Living services across the borough. There is a mix of apartment style living and shared house provision across Oldham with individuals receiving bespoke levels of support, and access to 24-hour wrap around (or background support). The availability of apartment style living is limited in Oldham, and with many younger people coming through from children's services, it is identified as an area to develop, and, in addition, to the needs identified where people are unable to be accommodated with others points to additional, single occupancy accommodation being required.
- 3.1.21 Current in-borough commissioned capacity is not enough to meet the demand for services. ASC has seen an increase in the demand for supported living services in Oldham since the pandemic. The supported living model enables people with a learning Disability and or a serious mental illness (SMI) to live in their own tenancies with 24-hour support. The current supported living demand is shown in the table below.

Supported living	No of placements
In Borough Provision excl Miocare	96
Miocare	87
No of vacancies	10
Occupied in borough placements	173
Out of borough placements	37
Total Occupied Number of placements	210

Whilst we are displaying vacancies, this is quite fluid, and often, long-term vacancies are as a result of the new people requiring supported living not being able to be accommodated with other people, and have their needs met as per their assessment.

3.1.22 In 2024/25 £25.56m was spent on supported living provision for Oldham residents, both in and out of borough, with 23% being spent on out of area supported living for 48 people. The current average cost for in borough and out of area supported living provision is presented in the table below:

Placements spend profile	Weekly cost
In borough average cost (Framework)	£1,580
In borough average cost (all providers)	£2,110
Miocare average cost	£1,800
OOB average cost	£2,330

- 3.1.23 There are currently 48 Oldham residents on a waiting list for supported accommodation services. The following types of support has been identified.
 - i. Requires single occupancy (assessed need): 10
 - ii. Shared Lives: 1
 - iii. Own flat with support: 7
 - iv. Flat/apartment style living with support: 18
 - v. Shared house: 14
 - vi. Single occupancy (preference): 15
- 3.1.24 It is recognised that demand for supported accommodation does outweigh current commissioned framework capacity, coupled with care provider experience and capability of delivering specialist services. As a result of us not having the accommodation availability and providers able to meet people's needs, an in-borough solution is required. The Supported Living framework is in the process of being recommissioned which will address our requirement for specialist care providers, and alongside this suitable accommodation needs to be identified, some of which, it is

acknowledged will need either development, acquisition and new properties in Oldham's supported living portfolio and have registered (housing) providers in place as the landlords.

Reablement

- 3.1.25 Oldham's reablement approach broadly aligns with the adult social care operating model, with the aim of ensuring that anyone identified as requiring ASC intervention goes through reablement first and a 'home first' pathway. The reablement pathway is viewed as successful with an average of 70% of residents returning to their baseline. However, the number of residents who receive a reablement offer is limited, with 630 'starts' recorded in 2024/25 in community reablement we also have a 40% decline rate from the total number of referrals received into the service. The top three rejection reasons were: 'not meeting criteria, resident declined, and internal service capacity. When benchmarking across other reablement services, Oldham has been assessed as having the second lowest of number of starts.
- 3.1.26 Whilst ASC reablement services are non-chargeable for up to 6 weeks, it is a key component of prevention, aiming to promote wellbeing, helping to reduce unnecessary hospital admissions, re-admissions and delayed discharges from hospital. Notably, a Return-on-Investment study commissioned by Public Health England (January 2020¹) has estimated the societal return on investment for reablement services is for every £1 invested with achieve £4.71 (with £1.15 solely from an NHS and social care perspective).
- 3.1.27 Oldham commissions MioCare to provides both bed-based (Medlock) and community-based (in people's own homes) reablement services across the borough. In 2023/24 a total of £1,679m was spent on reablement in the community in the borough (an average of 90 people supported per month, at an average cost of £1,555). In 2023/24 a total of £1,913m was spent on residential reablement (an average of 30 people supported per month, at an average cost of £5,300).
- 3.1.28 The objective for reablement services in Oldham are for the number of starts to increase, and for referrals to be picked up from both hospital and community and in doing this we will be ensuring reablement is considered first and offered to more people. To do this, we will work with key stakeholders to ensure the reablement criteria is up to date (especially with our statistical neighbours and in line with best practice) and consider the options for service delivery. It is also acknowledged that care technology will play a key role in this area, providing further support and assurance to people through their reablement journey.

3.2 Demographics and Population Projections

3.2.1 Oldham's population of 242,089 (2021 Census data) is projected to increase by 10% by 2040. The over 65 population is projected to increase from 16.58% in 2023 to 19.58 in 2040, this is growth of over 10,000 people. The Oldham population of over 85 is projected to increase from 2.06% in 2023 to 3.00% by 2040. Projections also show a significant increase in people over 65 with dementia by 2040, with the increase predicted to risk more sharply from 2025 onwards. The number of people with early onset dementia are also forecast to increase by 2040, with a gender split of prevalence towards men. Adult Social Care can therefore expect a continued rising demand on the need for social care support and commissioned services.

¹ The older adults' NHS and social care return on investment tool - Final report (publishing.service.gov.uk)

- 3.2.2 Oldham has a higher proportion (31.9%) of non-white residents than Greater Manchester (GM) (23.6%) or England (19%) and required services suitable to meet the diverse needs of the community. The Black and Minority Ethnic (BAME) population has been increasing gradually and is expected to continue to increase. This is particularly anticipated around the Bangladeshi and Pakistani communities. From an access of service perspective, we know people identifying as BAME are less likely to access support and when they do the support required is within the family home. We are seeing an increase to families reaching a crisis point, whereby emergency placements are required. It's therefore essential that we engage with the communities and do this collaboratively with other services being provided and the community leaders.
- 3.2.3 The number of people with statutory care and support needs living with a parent is also predicted to increase by 2040. Of particular significance is the proportions of residents living with parents who are 55-64m in these cases parents will be elderly, which presents a high likelihood of a breakdown in care arrangements.
- 3.2.4 In order to meet the needs of Oldham's projected population the right commissioning strategies and services are to be in place. Through the commissioning pipeline activity work will continue to take place to ensure that Oldham's commissioned provision is able to meet the needs of its population. This will include extensive coproduction activity, as part of each framework's commissioning cycle, and ensuring communities, individuals and organisations are engaged with taking a co-produced approach. Appendix 1 provides an overview of the commissioned service areas the plan to address and indicative timeframes.

3.3 Financial landscape

National Insurance employer increases 2025-26

3.3.1 The 1.2% increase in employer contributions to national insurance announced in the Chancellor's Autumn (2024) budget has been estimated to cost the adult social care sector an additional £940m in 2025-26 (Nuffield Trust analysis). This outweighs the £600m extra funding due to be allocated to adult and child social care in the budget via the local government settlement. Further, the majority of adult social care providers are small to medium size both for and non-profit organisations in the independent sector, therefore they will not qualify for the financial support put aside to cover employer national insurance contributions in the public sector. For Oldham in 2025-26, it is estimated to cost in the region of £2.6m for our commissioned ASC care providers. From a commissioning perspective, there is a Care Act duty for localities to have stable and sustainable markets that are diverse to meet the needs of its residents. It is therefore essential that the impact of NICs is considered as part of fee setting processes. As part of the ASC rates for 2025/26 the council agreed additional funding to go some way in meeting the assessed funding gap as a result of the national insurance contribution employer responsibilities.

Foundation Living Wage

3.3.2 Oldham Council is a Living Wage organisation, meaning that all employees both directly and indirectly via its suppliers receive the living wage rate. For 20250-26 this is £12.60 per hour. Oldham's social care commissioned providers are required to pay their staff at least the living wage rate, which is verified through a contract and quality monitoring approach. We are proud that care workers across Oldham are paid the living wage, but this does come at a cost to the council when, on an annual basis the rates for adult social care are reviewed and set.

Challenges in the public sector

- 3.3.3 The financial challenges facing councils have never been greater. The Local Government Association (LGA) stated in 2024 that the 'divergence between councils' income and spending requirements can no longer be ignored', and that the system has been creaking at the seems for decades, but the pressure exerted on it in recent years means it is now comprehensively failing to provide councils with the security of funding they need to reliably and effectively deliver for all of their communities. The result is weakened public services, hampered growth, and poorer outcomes for many, in particular the most vulnerable.'
- 3.2.4 The government ran a consultation on how local authorities are funded through the local government finance settlement between 18 December 2024 and 12 February 2025. The consultation sought views on the approach to determining new funding allocations for local authorities and fire and rescue authorities. It also covered ways the government can reduce demands on local government and increase local flexibility, for example through changes to the sales, fees and charges landscape and funding consolidation. We await the outcome and decision following this consultation.

4 SECTION 2: Development Opportunities

4.1 Areas for further investment and development

- 4.1.1 Through the capacity and demand analysis undertaken in the market position statement, considered alongside the out of borough activity, it is clear Oldham has an over reliance on high-cost and out of area provision. This is something which needs to be address particularly when the analysis is considered alongside the population projections via the Office of National statistics. However, more 'need' does not always equate to an equal amount of more provision (for example, nursing, residential services); it also signals the needs for alternative ways of working.
- 4.1.2 Oldham's Adult Social Care service has been making strides in working in a strengths-based way over the last couple of years, culminating in its Target Operating Model and the Launch of the Adult Social Care strategy in 2023. This way of working is about ensuring that our workforce is able to support people to consider and identify people's strengths. We as an organisation need to make sure that our frontline workforce has the tools they need to continue to support Oldham's residents in this way enabling people to live independent, healthy, safe and well in their own homes for as long as possible.
- 4.1.3 Adult Social Care has a number of transformation programmes underway in Oldham's adult social care that are supporting alternative ways of providing support, including:
 - i. <u>Assistive/Care Technology:</u> this programme is focused on ensuring that when someone meets the adult social care threshold, care technology is considered at the first and foremost. Care Technology is widely considered to enable people to live independently for as long as possible in their own homes, whilst being less intrusive than the more traditional 'hands' on care package provided by a career. We are working to embed this in social work practice as well as considering additional and new Care TEC to meet the needs of Oldham's residents.
 - Proposed action 1: continue with the transformation programme, which includes input from across the council (including procurement,

finance, IT and transformation) with an investment case due to be considered at the Capital Investment Programme Board in January 2025 for 2025/26 budget setting.

- ii. Reablement: this programme is focused on increasing starts and ensuring referrals from both community to prevent further deterioration, hospital admission and/or high levels of dependency on health and social care services. It is not currently considered that additional resources are required, in the first instance, test for change projects will take place providing opportunities for us to consider alternative practices that are within the current financial resources. Care Technology, working closely with Occupational Therapists as well as ensuring a strengths-based approach is embedded is key to realise the outcomes for Oldham residents.
 - **Proposed action 2:** agree test for change priorities, establish project governance and mobilise.
 - Proposed action 3: complete a review of the resources within the existing commissioned service and include considering whether it would be possible for the service could flex the types of roles and delivery focus.
- 4.1.4 Increasing the use of Care Technology in support packages for Oldham residents and remodelling the Reablement services are part of Adult Social Care's transformation programmes, and they will continue to compliment commissioning and development activity to ensure that Oldham has the services its residents require from Adult Social Care. All commissioning activity will have a 'forward view' on ensuring its service specification, contracts and overarching commissioning intentions will consider the areas of demographic changes, as referred to throughout this document.

Residential and Nursing developments

- 4.1.5 Oldham Council purchased Chadderton Total Care in 2023 (now known as Oldham Total Care, or 'OTC'), this presents a number of opportunities for the council to own and operate a care home as a Local Authority Trading Company (LATCo). A major opportunity for the locality to consider is the potential to have a Discharge to Assess (D2A) pathway in one facility. Whilst this will improve process from an administration perspective, the locality will also see benefits in adult social care working closely with the ICB's Continuing Healthcare Team and the hospital discharge team to improve outcomes for Oldham residents.
 - Proposed action 4: a review of D2A processes and current pathways to consider options for this area, and approach to the market or progress the route via a LATCo.
- 4.1.6 Given the reduction in residential and nursing beds in borough over recent years and our subsequent over-reliance on high-cost and out of area provision it is evident that there needs to be a focus on increasing specialist care home provision in borough.
 - Proposed action 5: through the residential and nursing commissioning framework in place, carry out market engagement presenting the gaps we're experiencing in Oldham, and opportunities for working differently with commissioners.
- 4.1.7 On an annual basis the local authority reviews its fees for social care provision.
 - iii. <u>2025/26 fee modelling:</u> It is proposed that modelling for 25/26 rates considers further enhancements for providers willing to meet the gaps that have been identified in the market. Alongside this reference guidance and briefings to the

adult social care workforce to ensure in borough provision is considered first and foremost, with

- Proposed action 6: fee modelling continues to take place alongside annual fee review activity for 2025/26.
- Proposed action 7: guidance and briefings for the workforce.
- 4.1.8 The following areas have been identified as development opportunities (accommodation based):
 - iv. Extra Care Housing: Oldham's Local Housing Needs Analysis (LHNA) is in the process of being finalised and soon to be published. Within the LHNA it sets out a gap between our current 255 ECH units and 842 being required, with the need increasing a further 364% (1,182) by 2041. Furthermore, a key conclusion in the LHNA is that there needs to be a broader housing offer for older people across the borough (making reference to sheltered housing, Extra Care Housing and specialist accommodation units that are dementia friendly), with the LHNA providing evidence of an additional 50 Extra Care Housing units per year up to 2041.
 - Proposed action 8: a business case to be progressed and options for accommodation developments to be appraised.
 - v. <u>Specialist accommodation for working age adults with complex needs:</u> to support with the capacity and demand constraints and reduce the need to support people out of area it has been assessed that additional specialist accommodation is required in Oldham. Also referenced in the LHNA, there is an under supply of specialist accommodation. Specialist Housing Provides have also advised they continue to face challenges finding suitable one-bedroomed accommodation for people with support needs.
 - Proposed action 9: business case to be progressed and options for accommodation developments to be appraised.
 - vi. <u>Shared Lives:</u> to provide alternative to 24:7 care packages, Shared Lives has been identified as an area for expansion in Oldham. The current scheme provides services to around 50 people predominantly with mild learning disabilities. It has been recognised that the service could be expanded into providing support to people with mental health, care leavers, and young adults transitioning between children's social care to adult services, as well as opportunities for support for people with dementia, and older people. Work is currently taking place on the return on investment to expand into different cohorts and specialisms.
 - Proposed action 10: business case to be progressed and options for expanding the service to be appraised.

5 Conclusions and next steps

- 5.1 Through the ongoing capacity and demand analysis, and the projected population increases it is essential for the commissioning frameworks to be as flexible and dynamic as is practicable, both meeting the council's constitutional requirements, as outlined in the Contract Procedure Rules, as well as duties presented in the Care Act and other relevant legislation such as the Mental Capacity Act and Mental Health Act.
- 5.2 The adult social care commissioning team has an agreed procurement pipeline in place, which will ensure that all core categories of care and support are refreshed, and this presented in Appendix 2. All commissioning work engages with the market as well as

- includes co-production with service users, families and potential service users, ensuring that we are commissioning service provision that is fit for the future.
- 5.3 All current and future commissioned frameworks ensures that there is the ability to work collaboratively with all stakeholders, which enables commissioners and providers to remain 'solutions-focused' and addressing and emerging pressures and challenges being experienced or forecast.
- 5.4 Whilst the commissioning pipeline is considered as 'Business as Usual' for the Adult Social Care commissioning service, there are additional areas identified and recommended in this Delivery Plan that are developments whether they are service reviews to transform services currently in situ, or to increase capacity and services provided in Oldham. These areas are being progressed and governed through the council's Transformation Change Pillars.

Appendix 1

Commissioned service areas and demographic projections

The below table provides a high-level summary of the commissioned services areas and potential impact against the projected population categories, presenting the plan to address and timeframe. These priority areas have been considered as part of the 'Development Opportunity' section which outlines investment and development proposals.

Service					(based	on the summ	nary abov	e what	Plan to address	Priority (doing now or	Timeframe
area	Service Age	Ethnicity	will be impa Physical Disability	acted) Dementia	Mental Health	Learning Disabilities	Autism	Transitions??		ongoing commissioning activity?)	
Care Home provision	Yes	Yes	Yes	Yes	Yes	Yes	Yes		OTC Engagement and commissioning strategy with the market to fill gaps. Consideration of fees	Priority Ongoing commissioning activity and strategy	2025/26 project
Carer Support		Yes		Yes		Yes			Information, advice and guidance ARCC Carers Strategy is due to be refreshed and published in 2025/26, and prior engagement with the public/stakeholders is required		Ongoing
Care Technology	Yes	Yes	Yes	Yes	Yes	Yes	Yes		Investment, transformation programme in place	Priority	2025/26 project



Day Services	Yes	Yes		Yes				Early intervention and prevention Respite and overall deflection from people entering long-term residential care	Day Service Framework in planning stages (project team in place including procurement, legal and finance)	2025/26 project
Extra Care Housing	Yes	Currently delivered by MioCare (traded arm) Ensure current contract and model works. Agree plans for additional development and options appraise accommodation model (PFI/partner/investment)	Priority Meeting taking place with housing colleagues. Care contract/s to be re-tendered 2026	2025/26 project						
Home Care	Yes	Yes	Yes	Yes				Ongoing commissioning activity. Current model works well, a need to reinforce not over prescribing provision and consider Care Technology to complement existing packages.	Ongoing. Commissioning plus Operational involvement Contracts to be re- tendered 2026	Ongoing
Reablement	Yes	Investment required to enhance and increase reablement capacity and ability to meet more people's needs. 'Reablement First model'.	Priority Investment case and options required	2025/26 project						
Shared Lives		Yes		Yes	Yes	Yes		MioCare provides. Consideration for upscaling the service to meet more people's needs	Ongoing work between commissioners and MioCare	Ongoing
Supported Living		Yes	Yes		Yes	Yes	Yes	Recommission existing framework ensuring the ability to add providers	Priority	2025/26 project

				and accommodation on as	
				and when required	

Appendix 2

Commissioning pipeline

The below table provides an overview of the commissioning pipeline up until 2026/27.

Project/ commissioned service area	Timescale	Procurement Route	Capacity and demand/projections rationale OR 'Commissioning Strategy'	Detail and next steps
Care Technology Enabled Care	commence	Open tender / National Framework	Ageing population projections, increasing home care packages and hours, a focus on strengths-based practice and enabling residents to live independently for as long as possible	A need to ensure that we remain on top of latest developments via the benefit of a strategic partner relationship. Competitive dialogue provides best route for this given the dynamic market and system developments.
Supported Living	commence		Capacity and demand – we do not have enough specialist accommodation and care services to provide support to people in the borough	GM Framework in place from April 2025, plan to commission services through this framework in the summer of 2025
Day Services	Procurement to commence during 2025-26		Oversight of the market ensuring equity of access is achieved, consistent contractual monitoring and management	Work is taking place to further understand the in-borough market and assessed need for services
Broker framework	Commissioning approach to be agreed in 2025/24		Oversight of the market ensuring equity of access is achieved, consistent contractual monitoring and management	Work to understand other locality models for third party brokers and options appraisal to take place for Oldham provision
Care at Home DPS <i>Mini competition</i>	Procurement to conclude 2024-25		Ageing population projections are likely to result in an increase of home care packages.	Mini competition to award preferred partner status to two providers within the Flexible Purchasing System for the remainder of the current contract.



CAH/Extra Care retender as contract ends March 2026	Procurement to commence summer 2025	New contract for services – details to be confirmed	Need to ensure commissioned provision is able to meet the needs of Oldham's demographics Ageing population projections are likely to result in an increase of home care packages. Need to ensure commissioned provision is able to meet the needs of Oldham's demographics, paying particular attention to ethnic and cultural needs	
Specialist Residential and Nursing Care Home provision	Ongoing	Engagement with existing market and new providers	A recent reduction in care home bds though the closure of homes in the last 24 months. Ageing population projections indicate the need for more care home provision. Consideration of an increase in care homes applying a top up fee to their provision and correlation of the increase in out of are residential provision, to consider the in-borough rates for specialist provision required to meet needs, paying particular attention to ethnic and cultural needs	We are keen to talk to providers who are interested in developing care homes in Oldham or remodelling their current provision to fill identified gaps in our current nursing and specialist residential provision. - Nursing - Dementia Nursing - Dementia Residential - Bariatric - Male only units