

Royal Borough of Greenwich

Market Sustainability and Fair Cost of Care Fund 2022-23

Annex B: Cost of Care Report

Part 1: Care homes

Part 2: Domiciliary Care

Part 2: Domiciliary care 18+

1. Introduction

The Royal borough of Greenwich established an Adult Social Care Reforms Programme Board to lead on implementing and embedding the Adult Social Care Reform changes for Health and Adult Services.

The Programme board identified Governance arrangements and initiated key workstreams to deliver on the different elements of the reforms. One workstream led the Market Sustainability and Fair cost of care fund requirements. The reforms structure enabled workstream leads to engage with all key stakeholders and ensure all communication and wider reforms were aligned to the Health and Adult Services (HAS) vision.

The Greenwich Integrated Commissioning Unit have strong relationships with the adult social care provider market which were further strengthened throughout the Covid-19 pandemic. Commissioners worked closely with providers through the pandemic providing and co-ordinating a range of support. Due to the established relationships and trust it was agreed the approach to market engagement would be more effective at generating engagement using our own workforce from the Integrated commissioning unit with support from partners such as the Care Provider Alliance.

2. Market Sustainability and Fair Cost of Care approach.

The Royal Borough of Greenwich initially identified seventy-two providers registered in the Borough to provide personal care to adults over the age of 18 years. Twenty-five of these were determined to be out of scope of the fair cost of care exercise because:

- They were a supported living or extra care services
- They were a staff recruitment agency
- They were not providing any care to people and therefore unable to submit costs

Those agencies not providing any care but registered with Care Quality Commission (CQC) were identified in partnership with CQC as having newly registered in the last 12 months.

<u>Registered with CQC as Domiciliary care</u>	<u>Homecare</u>	<u>Homecare</u>	<u>Homecare</u>	<u>Homecare</u>	<u>Supported living or Extra care</u>	<u>Employment agency</u>	<u>Other</u>	<u>Of total number classed as dormant by CQC</u>	<u>Total</u>
		Of the 51: 5 service users	Of the 51: zero service users	Of the 51: registered within the last 12 months					
Number of agencies	51	8	6	16	12	7	6	24	76
Percentage	69.90%	15.69%	11.76%	31.37%	16.40%	9.60%	8.20%	31.58%	
		NB percentages relate to the 51 providers							

3. Engagement

Learning from engagement throughout the pandemic demonstrated that there were high levels of provider attendance and engagement using the new virtual technology such as MS teams and Zoom. Virtual technology enabled more people from each organisation to attend meetings locally.

It was this learning that informed the initial provider engagement for the Market Sustainability and Fair Cost of Care exercise to be delivered using MS Teams.

The provider engagement consisted of the following main areas:

- introduction to the exercise, background, wider reforms and capturing feedback from providers on their preferred approach and market sustainability planning
- undertaking the fair cost of care exercise
- training on using the data collection tools
- one to one support for providers to increase response rates
- feedback meetings to review any queries with submissions.

The first session with providers was led by our Director of Integrated Commissioning. The session launched the exercise with providing links to wider Reforms guidance. The objectives of the initial sessions were to:

- share how the exercise fits with wider Adult Social Care reforms and guidance
- share requirements of the Fund and why it is important
- seek feedback from providers on who in their organisation needs to be included
- seek feedback on the process, data collection tools and planned timelines
- the support available and how to access it
- seek feedback on future Market Sustainability planning
- the providers were asked to contribute what support they might need to participate, any challenges or constraints.

Further sessions were held virtually with designated leads to discuss the process, data collections tools, key dates, key people involved from both Royal Greenwich and the providers.

Following sessions set out more detailed advice and support on how to submit costings using the data collection tools identified.

In line with national and regional authorities, the Council adopted the use of the Local Government Association (LGA) pricing tool for homecare. The LGA pricing tool and the parameters were consistent with national and regional local authorities.

The council did not ask providers for further information outside of this LGA data collection tool or use any other data collection template.

General awareness of the guidance and fund was delivered through market engagement events held virtually, with key contacts across local care home providers and head office. Communication during the early stages was targeted at providers to ensure it reached the right people in the organisation and identify key leads who would be leading on the data input. The Care Provider Alliance supported the Council in delivering various market engagement sessions with providers across care homes and homecare to promote the importance of the exercise.

Some awareness and training sessions were delivered jointly in partnership with neighbour local authorities, enabling the sharing of best practice and promoting wider discussion and questions.

Further communication was delivered via email, letters, and at all meetings held with Commissioners and contract managers.

Members of the Commissioning Team in the council signed up to the Care Provider Alliance (CPA) provider communication cascade to ensure messages were consistent and timely.

Providers were encouraged to participate using the iESE data collection tool for care homes. Providers were able to attend local Royal Greenwich specific training sessions delivered by Commissioners and the Care Provider Alliance. These training sessions ensured a focus on how to engage and completion of the data collection tools. In addition to this a range of support and information was shared, including online demonstration videos, step by step guides, frequently asked questions and online community support.

Throughout the summer the Integrated Commissioning team were able to monitor submissions from providers and ensure targeted support to individual providers. To maximise response rates Commissioners held one to one meetings with providers to discuss any concerns or queries with the data. The Care Provider Alliance attended one to one meetings with any providers where it was felt confidence in participating was lower.

Upon completion of the data, provider responses were reviewed and advice received from CPA on common clarification queries to ensure consistency of the advice and approach. All providers were able to have one to one meetings with Commissioners to discuss any queries with their submissions and identify areas for verification or amendments.

Engagement from the local market was good with all providers attending virtual sessions and expressing a willingness to work with the Local Authority. The overall response rate for older people was 90.90%. This includes responses from a range of providers including Private Finance Initiatives (PFI) and charities.

Engagement from the local market was good with a large number of providers attending the various sessions. The overall response rate for domiciliary care from the in scope providers was 33%.

Local market

Whilst the local authority is committed to supporting homecare providers within the Borough, the current contractual arrangements for homecare services delivered to 18+ are predominantly commissioned to providers located outside of Royal Greenwich. These providers (located in neighbouring authorities) account for approximately 76% of Royal Greenwich's homecare

commissioning activity with the remaining 24% commissioned to 'spot' providers. All of the spot providers utilised who are within the local authority boundaries, and account for 19% of commissioned activity, took part in the fair cost of care exercise.

During 2021-22 the Council has undertaken a new procurement for the provision of homecare in the borough, as part of this, agencies will open CQC registered offices in Royal Greenwich within the next 12 months. This will enable the Council to shape the market with providers and develop it further as part of a wider neighbourhood model of care and support. Any future repeat of this exercise will enable the Council to accurately report on their financial pressures and outcomes whilst applying variables applicable to the borough.

The Council has not included the fair cost of care submissions from contracted providers situated outside of the Borough; which account for 75% of commissioned care, as inclusion of these figures would distort the output from the exercise. These three providers will have made returns based on the cost of providing homecare within their registered geographical authority, all of whom have variable attributes which will not align to Royal Greenwich; such as travel and contractual requirements on care workers pay.

As the local authority moves to new homecare contracts (with all providers being located within the borough boundaries) we will utilise information garnered from this exercise to inform uplift decisions based on median rates and median Return on Operations (ROO) (Table B). Any future uplift approaches will also take in to account the affordability of such approaches for the local authority and will be informed by any funding received from Government after the outcome of the FCC process is known. Any future approach will also align to the fact that this set of measures in the Reforms is intended to move towards a fair cost of care over time.

Over the coming months the local authority will undertake further engagement sessions with the care market to update on current and future risks to sustainability.

SEL sub-regional boroughs worked collaboratively on the fair cost of care (FCoC) exercise; there have been regular information sharing meetings to understand the risk/issues on the market sustainability across the sub-region and share learning and best practice on methodologies used in completing this task, including some cross borough FCoC market engagement activities to support providers with the exercise. The FCoC analytical work and the Market Position Statement (MPS) were developed locally to suit local needs of each borough; there is now a sub-regional agreement to build on the wider understanding developed via the FCoC work in the future to support the care market as a sub region

4. Data Responses

During the data collection period, training sessions were provided using Microsoft teams with support from the Care Provider Alliance. This included detail explanations about what each of the data fields represented and guidance on how to populate the data.

Collaboration was a consistent theme running through all sessions and during one to one sessions so providers had the opportunity to ask questions and seek advice.

Some smaller providers did find it more challenging to breakdown their costs in the template required so tailored support was given both one to one and at group sessions, to facilitate best practice sharing.

All providers were sent details including virtual sessions, online videos and help guides to assist.

As part of the support to verify and lock responses, providers had opportunities to attend virtual drop-in sessions, one to one meetings and phone calls with the Royal Borough of Greenwich (RBG) Commissioning team and the Care Provider Alliance.

Each of the provider submissions were reviewed with any data verification queries sent back to providers to clarify or explain.

Each provider submissions was reviewed with data verification queries sent back to providers to clarify or explain. Common outliers or clarification queries were discussed with the Care Provider Alliance and providers directly. In some cases, providers chose not to accept advice and continued to submit their data as is. This creates a fundamental cause for concern when calculating the median costs.

The Council has used best judgment to ensure cost lines are not inflated or deflated and reflect provider actual costs. Where there are outliers, these were discussed with providers and moderation has only been applied where outliers cannot be explained, this is described below.

5. Challenges with the data

This exercise presented significant and fundamental constraints, including issues with data quality, lack of clarity in the structure and guidance for the exercise and unreliable results being produced by the mathematical median calculation method. These challenges are detailed further below. These limitations are such that the results produced by this exercise cannot be treated as wholly reliable or accurate. The Royal Borough of Greenwich intends to work with providers from 2022/23 to agree local fee rates that are sustainable for Royal Greenwich's market.

The quality of the information produced by this exercise is limited by several key issues including:

5.1 The median rate reflects the middle of a range of responses received and does not guarantee that it will relate to an accurate market rate. The median calculation is more suitable to larger data sets, whereas for small sample sizes the addition removal of a single value can significantly impact the median. The method does not give weighting to relevant factors such as the number of clients supported by a provider.

5.2 The ability of providers to separate one of grant funding income and expenditure.

In Royal Greenwich, round two of the Workforce Recruitment and Retention Fund (WRRF) enabled providers to offer staff additional payments either to their hourly rates, bonus, working over the festive season and other non-financial benefits. This grant funding was applied in the financial year 2021-22 and therefore expenditure is reflected in costs despite using one off grant funding. Homecare providers were able to bring forward the London Living Wage to 1st January 2022 instead of waiting until April using the WRRF fund.

5.3 Approximately 75% of the Council commissioned homecare hours are delivered using providers located outside the borough boundaries.

5.4 31% of homecare agencies registered in Royal Greenwich are classed as dormant and not providing care.

5.5 There are other factors which will impact the cost of providing care. Since the submission deadline there are additional developments which will impact provider costs such as energy costs, inflation and increase to London Living Wage. It is necessary to have a dynamic approach to understand local costs.

5.6 Feedback from providers during the engagement sessions was that the exercise does not address how to support the workforce challenges in the market and how to move staff rates of pay to be more competitive with other sectors, such as retail.

6. Data tables

Table A demonstrates the lower quartile/median/upper quartile of number of appointments per week by visit length from submitted returns by homecare providers. Further explanation can be found on the GOV.UK website: <https://www.gov.uk/government/publications/market-sustainability-and-fair-cost-of-care-fund-2022-to-2023-guidance/annex-b-cost-of-care-reports-contents>

Table A

call duration										Median Values	Average Values	Lower Quartile	Higher Quartile
15	0	0	0		0	0	0	0	0	0	0	0	0
30	0	2225	468	763	0	1262	128	84	760	468.3461538	632.2607	84	2225
45	28	1467	164	196	540	440	56	252	345	252	387.5043	163.5385	1467
60	1179	1147	182	196	0	294	7	0	262	196	362.9722	7	1179
90	22	0	75		0	14	0	0	12	6	15.34375	0	74.75
120	46	0	0		0	0	3	0	21	0	8.75	0	46

The local authority has taken the median rate from all submitted providers for the reported return on operations, this equates to 4.77% which the local authority agreed to increase to 5%; as this is the figure, we historically utilised when working with providers to support local tendering activity.

Table B illustrates the median, upper and lower rates for the Return on Operations (ROO) returns at a currency level and percentage rate. The Royal Borough of Greenwich have submitted the median hourly rate from all received returns to support the calculation for homecare and consistently apply 5% for ROO. This will allow investment in the local market, growth of homecare providers and support 'levelling up' and aligning rates paid by the local authority and private use individuals. Once providers submitted their returns, partners from the commissioning team verified the information before passing the returns to Care England, with providers permission, for verification. In a number of instances Care England gave advice on ROO, advising providers to increase. Following the recommendations 6 out of 9 providers took Care England's suggestion and increased their ROO.

Table B

											Median ROO	Lower quartile	Upper Quartile
Total Return on Operations	£1.10	£1.63	£2.32	£0.89	£2.98	£1.12	£0.28	£1.17	£0.68		£1.12	£0.89	£2.98
TOTAL	£23.00	£28.74	£28.06	£23.19	£32.73	£23.59	£27.90	£24.53	£17.68		£24.53	£23.19	£32.73
Return on operations as a percentage	4.78%	5.67%	8.27%	3.84%	9.10%	4.75%	1.00%	4.77%	3.85%		4.77%	3.85%	9.10%

Table 3 indicates the count of observations (which remains consistent) lower quartile, median and upper quartile (where relevant) of all items reported in Annex A Section 3, align with the information presented in Table C.

Table C

Cost of care exercise results - all cells should be £ per contact hour, MEDIANS.										Median Values	Average Values	Lower Quartile	Higher Quartile	Count of observations	
Total Careworker Costs															
Direct care	£11.18	£12.07	£10.42	£11.45	£10.90	£11.23	£9.10	£9.61	£10.11	£10.90	£10.67	£10.11	£12.07	9	
Travel time	£1.79	£4.35	£0.59	£0.61	£2.42	£1.15	£1.54	£0.85	£0.00	£1.15	£1.48	£0.61	£4.35	9	
Mileage	£1.08	£0.54	£0.17	£0.48	£0.53	£0.65	£1.22	£0.36	£0.00	£0.53	£0.56	£0.36	£1.22	9	
PPE	£0.00	£0.00	£1.42	£0.51	£0.70	£0.69	£0.00	£0.64	£0.21	£0.51	£0.46	£0.00	£1.42	9	
Training (staff time)	£0.14	£0.56	£0.59	£0.39	£0.92	£0.67	£0.55	£0.07	£0.24	£0.55	£0.46	£0.24	£0.92	9	
Holiday	£1.52	£2.02	£1.44	£1.53	£1.83	£1.73	£1.39	£0.84	£1.32	£1.52	£1.51	£1.39	£2.02	9	
Additional noncontact pay costs	£0.00	£0.08	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.01	£0.00	£0.08	9	
Sickness/maternity and paternity pay	£0.24	£0.69	£0.55	£0.52	£0.93	£0.74	£0.32	£0.00	£0.60	£0.55	£0.51	£0.32	£0.93	9	
Notice/suspension pay	£0.00	£0.08	£0.05	£0.00	£0.00	£0.00	£0.00	£0.00	£0.10	£0.00	£0.03	£0.00	£0.10	9	
NI (direct care hours)	£1.76	£1.11	£0.53	£1.12	£1.37	£1.21	£0.44	£0.00	£0.67	£0.67	£0.80	£0.44	£1.76	9	
Pension (direct care hours)	£0.38	£0.51	£0.33	£0.43	£0.41	£0.47	£0.39	£0.00	£0.35	£0.39	£0.36	£0.35	£0.51	9	
Total Business Costs															
Back office staff	£2.17	£3.86	£4.54	£4.18	£6.38	£3.57	£8.22	£8.93	£1.86	£4.18	£4.86	£3.57	£8.93	9	
Travel costs (parking/vehicle lease et cetera)	£0.06	£0.04	£0.11	£0.00	£0.00	£0.15	£0.00	£0.00	£0.00	£0.00	£0.04	£0.00	£0.15	9	
Rent/rates/utilities	£0.25	£0.09	£0.20	£0.14	£1.42	£0.33	£0.73	£0.73	£0.51	£0.33	£0.49	£0.20	£1.42	9	
Recruitment/DBS	£0.10	£0.03	£0.37	£0.02	£0.17	£0.21	£0.10	£0.00	£0.17	£0.10	£0.13	£0.03	£0.37	9	
Training (third party)	£0.14	£0.09	£0.08	£0.10	£0.09	£0.14	£0.12	£0.00	£0.00	£0.09	£0.08	£0.08	£0.14	9	
IT (hardware, software CRM, ECM)	£0.09	£0.14	£0.28	£0.11	£0.94	£0.15	£0.87	£0.29	£0.13	£0.15	£0.33	£0.13	£0.94	9	
Telephony	£0.08	£0.10	£0.04	£0.05	£0.07	£0.03	£0.10	£0.03	£0.04	£0.05	£0.06	£0.04	£0.10	9	
Stationery/postage	£0.02	£0.01	£0.04	£0.10	£0.01	£0.04	£0.06	£0.08	£0.05	£0.04	£0.05	£0.02	£0.10	9	
Insurance	£0.18	£0.06	£0.12	£0.05	£0.01	£0.07	£0.18	£0.31	£0.05	£0.07	£0.11	£0.05	£0.31	9	
Legal/finance/professional fees	£0.22	£0.09	£0.22	£0.30	£0.20	£0.08	£0.29	£0.20	£0.08	£0.20	£0.19	£0.09	£0.30	9	
Marketing	£0.10	£0.03	£0.55	£0.00	£0.28	£0.01	£0.11	£0.06	£0.05	£0.06	£0.13	£0.03	£0.55	9	
Audit and compliance	£0.00	£0.04	£0.00	£0.00	£0.02	£0.05	£0.08	£0.18	£0.06	£0.04	£0.05	£0.00	£0.18	9	
Uniforms and other consumables	£0.38	£0.10	£0.03	£0.02	£0.02	£0.02	£0.09	£0.04	£0.13	£0.04	£0.09	£0.02	£0.38	9	
Assistive technology	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	9	
Central/head office recharges	£0.00	£0.04	£1.89	£0.00	£0.00	£0.00	£0.00	£0.05	£0.15	£0.00	£0.24	£0.00	£1.89	9	
Other overheads	£0.00	£0.28	£0.95	£0.13	£0.00	£0.00	£1.60	£0.00	£0.00	£0.00	£0.33	£0.00	£1.60	9	
CQC fees	£0.01	£0.10	£0.21	£0.08	£0.11	£0.07	£0.12	£0.09	£0.12	£0.10	£0.10	£0.08	£0.21	9	
Total Return on Operations	£1.10	£1.63	£2.32	£0.89	£2.98	£1.12	£0.28	£1.17	£0.68	£1.12	£1.35	£0.89	£2.98	9	
TOTAL	£23.00	£28.74	£28.06	£23.19	£32.73	£23.59	£27.90	£24.53	£17.68	£24.53	£25.49	£23.19	£32.73	9	
										£23.34					

Table D identifies the cost per visit for all commissioned durations as reported by Homecare providers. The median rate of £23.34 has been utilised for this costing and the 5% ROO median applied in the far right column to signify ROO per total weekly reported call totals.

Table D

call duration										Cost per visit, applying median values for hourly rate.	Total cost for submitted period applying median rate	ROO for above applying Median rate (5%)
15	0	0	0	0	0	0	0	0	0	N/A		
30	0	2225	468	763	0	1262	128	84	760	£12.27	£69,792.10	£3,489.60
45	28	1467	164	196	540	440	56	252	345	£18.40	£64,161.99	£3,208.10
60	1179	1147	182	196	0	294	7	0	262	£24.53	£80,133.38	£4,006.67
90	22	0	75	0	0	14	0	0	12	£36.80	£4,516.59	£225.83
120	46	0	0	0	0	0	3	0	21	£49.06	£3,434.20	£171.71
										Total	£222,038.25	
										Total		£11,101.91

Results for the Homecare fair cost of care report were collected with providers taking information and figures for the base year 2020/21. Historically the Royal Borough of Greenwich has applied annual uplifts in-line with the London Living Wage increase with an additional 20% of the increase applied to cover oncosts as a result of wage increases. This is consistent with spot providers and those on framework contracts.

The Council utilised the LGA pricing tool, a copy of which can be found using the following link: [Homecare cost of care toolkit | Local Government Association](#)

This tool used for the Fair Cost of Care Exercise for Domiciliary care adopted the LGA template.

The council did not ask providers for further information outside of the Local Government Association (LGA) data collection tool or use any other data collection template.

7. Future fee setting

The local authority will imminently be entering into new homecare contracts which have been developed using the LGA cost of care tool. The median fair cost of care rates may align more closely with submitted, and accepted, hourly rates from providers once implemented.

The LGA tool is closely related to the Association of Directors of Adult Social Services (ADASS) pricing tool which was recently used to support the Council's procurement of a new homecare model and pricing submissions.

Future homecare uplifts are contractually linked to the London Living Wage increase, whilst also taking in to account local authority budgetary constraints and provider inflationary pressures.

The outcome of the fair cost of care exercise is not intended to be a direct replacement for the fee setting element of the local authority commissioning process or individual contract negotiations.

It is expected that actual fee rates may differ based on sound judgement, evidence and local negotiation. The fair cost of care will be an element to inform future negotiations, taking into consideration other known market factors such as London Living Wage, demand, capacity, benchmarking and quality and importantly affordability for the local authority.

8. Commissioning Intentions

- The Government Market Sustainability and Fair Cost of Care fund is the first part of ongoing provider engagement and future market sustainability planning. Further engagement and events will be planned as we continue to learn from the outcomes of this exercise and set our future commissioning intentions
- we will be embarking on a series of market engagement events with providers to communicate our market position, outcome of the exercise, strategy and commissioning intentions; this work will be closely linked to the development of the PAMMS tool.
- the Council will be adopting a new Provider Market Management Solution (PAMMS) to better share information with providers about our demand, capacity and future growth
- the Fair Cost of Care exercise does not replace or remove the need for individual pricing negotiations to take place and will communicate this directly with providers at the future engagement events, in addition to outlining our strategy to align prices and fees within budgetary constraints
- the Fair Cost of Care exercise will be an element to inform future negotiations taking into consideration other known market factors such as inflation, demand, capacity, benchmarking, quality and importantly affordability for the local authority
- we have incorporated a 'progressive change' element within our new homecare model; this will focus on supporting providers to adapt and change the way they work, interact with the local authority and provide independence enhancing care and support to residents. Through progressive change we will work collaboratively with providers to adapt their care delivery in line with our 'thinking differently' initiative; focusing on strengths based assessment, care delivery and improved outcomes
- the new homecare model was tendered utilising the ADASS pricing model, this model is closely aligned to the LGA tool which we utilised for the fair cost of care exercise. The Royal Borough of Greenwich is focusing on our commitment to payment of the London Living Wage to homecare carers and the new homecare pricing ensures that those providers delivering homecare within the new contract are sustainable and have the necessary funding to invest in their workforce

- the Royal Borough of Greenwich is committed to growing the 'Home First' programme to support the safe discharge of residents in hospital back to their homes with appropriate support. This programme includes a 'Discharge to assess' service, temporary housing, Dementia support in the community and temporary community support. The Home First initiative is a three- year transformation programme across local systems that allows residents to receive the highest quality care in the most independent environment and wherever possible, this should be the person's home. Our vision is that our Home First services will enable system partners to provide flexible, holistic and rapid interventions which provide a real alternative to hospital care
- the Health and Adult Services (HAS) vision, focuses on supporting a strength based approach to care and support and delivering care; embedding changes withing all services delivered and offered by adult social care. Within these changes there is also a focus on the strengths of residents and staff, communities and diversity to enable residents to live a life they choose, supporting their independence and their networks to provide choice on how they wish for their needs to be met. This also includes ensuring the right information is available, at the right time and in the right accessible format to ensure residents are able to access the information they need
- the new reablement rotation supports the training of external homecare providers, within the new contract, to allow the Council to expand the use of independence enhancing and outcome focused care through continuous training and care worker development.
- The Councils reablement service has moved to be therapy led, focusing on supporting residents to regain independence within the home and delay care home placements and increased homecare use by supporting people post hospital discharge or acute needs change. This is linked closely with the reablement rotation and expand this ethos and skill set in the community
- the Council is working diligently on demand modelling and data analysis so that services and support can be adjusted to match need variation and market growth
- The Royal Borough of Greenwich has a Dementia strategy. This strategy incorporates developing the Dementia Inclusive Greenwich initiative so the borough remains a dementia inclusive place to live, work and visit
- the wider reforms work, provides a foundation for the Council to provide digital platforms, including the use of Assistive Technology Enabled Care to prevent, reduce and delay needs, as well as support residents' independence
- the Council will also focus on the increased use of self-directed support, to empower residents and carers to have increased choice in meeting their identified and eligible needs
- the reforms also promote and supports the Council to adopt a system wide approach to ensure the availability of resources such as accommodation to meet needs, such as supported living and shared lives.