

# Public Document Pack



**TRAFFORD  
COUNCIL**

## **AGENDA PAPERS MARKED 'TO FOLLOW' FOR EXECUTIVE**

**Date: Monday, 18 March 2024**

**Time: 6.30 pm**

**Place: Committee Rooms 2 and 3, Trafford Town Hall, Talbot Road, Stretford  
M32 0TH**

<b>A G E N D A</b>	<b>PART I</b>	<b>Pages</b>
11.	<b>TRAFFORD ASSIST (LOCAL WELFARE ASSISTANCE SCHEME)</b>	1 - 8
	To consider a report from the Executive Member for Finance, Change and Governance and the Director of Finance and Systems.	
12.	<b>FAIR PRICE FOR CARE</b>	9 - 26
	For the Executive to receive a report on Fair Price for Care.	

**SARA TODD**  
Chief Executive

**COUNCILLOR ANDREW WESTERN**  
Leader of the Council

### Membership of the Committee

Councillors T. Ross (Chair), C. Hynes (Deputy Leader), S. Adshead, K.G. Carter, J. Harding, E. Patel, J. Slater, R. Thompson, A.J. Williams and J.A. Wright.

### Further Information

For help, advice and information about this meeting please contact:

Paul Rogers, Governance Officer  
Email: [paul.rogers@trafford.gov.uk](mailto:paul.rogers@trafford.gov.uk)

## Executive - Monday, 18 March 2024

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This agenda was issued on **8 March 2024** by the Legal and Democratic Services Section, Trafford Council, Trafford Town Hall; Talbot Road, Stretford, Manchester, M32 0TH

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## TRAFFORD COUNCIL

**Report to:** Executive  
**Date:** 18 March 2024  
**Report for:** Decision  
**Report of:** Executive Member for Finance, Change and Governance and the Director of Finance and Systems

### Report Title

**Trafford Assist Scheme – Proposal on a Redistribution of the Funding to the Trafford Community Hubs**

### Summary

Trafford Council has had a Local Welfare Assistance policy (Trafford Assist Scheme) in place since April 2013 to help residents in short-term acute financial difficulties.

The scheme has evolved over the years in its operational delivery and now is a cash first scheme.

The pandemic, followed by the cost of living crisis, has meant that the demand for the scheme has reached very high levels and the costs have significantly exceeded the Trafford Assist budget. The additional costs have been met through extra government funding in previous years; the current scheme being the Household Support Fund, but that is due to end 30 September 2024.

The ending of the annual funding means that the Council must review the purpose of the Trafford Assist scheme to contain costs within the annual budget of £218k. Priority being to return it to its pre-pandemic and original scope of being an emergency short term needs scheme mainly for food and fuel.

A public consultation has taken place and comments have been considered. It is recommended that the Trafford Assist budget of £218k plus an additional amount to cover administrative costs be re-distributed to the Trafford Community Hubs who are best placed to make decisions on the most effective way to spend resources in their communities.

Decisions on the allocation of the funds from the 6-month extension to the Household Support Fund will be taken separately, but most of the funding is expected to cover the cost of continuing the school holidays support.

## **Recommendation(s)**

That the Executive approves the proposal to replace the Trafford Assist scheme with a re-distribution of the funding to the Trafford Community Hubs from 1 April 2024.

### Contact person for access to background papers and further information:

Name: Louise Shaw

Contact Number: 07815 699615

Background Papers: [Trafford Assist Policy](#), [Household Support Fund Trafford](#)

Relationship to Policy Framework/Corporate Priorities	The Council's Trafford Assist scheme and the Trafford Community Hubs promote the Council's corporate priority of supporting people out of poverty, ensuring that vulnerable households on a low income requiring emergency assistance are supported
Relationship to GM Policy or Strategy Framework	The Council's schemes are aligned to meet the Council's corporate priorities, which in turn are aligned to GM Policy and Strategy Framework where required.
Financial	The Trafford Assist Scheme core budget for awards is already funded by the Council at £218k in 2023/24.
Legal Implications:	There is no legal requirement for the Council to have a local welfare assistance scheme
Equality/Diversity Implications	An Equalities Impact Assessment (EIA) has been carried out alongside the public consultation and there are no groups adversely
Sustainability Implications	If the level of need continues to increase, the Council will need to review if the best outcomes are being met with the budget available
Resource Implications e.g. Staffing / ICT / Assets	A redistribution of the funding to the Community Hubs will include an amount to support administration costs
Carbon Reduction	None
Risk Management Implications	None
Health & Wellbeing Implications	The Council could have decided to stop providing this discretionary scheme with the financial constraints it faces, but it understands the impact that would have on the health and well-being of its residents
Health and Safety Implications	None

**1.0 Background**

1.1 Trafford Council has had a Local Welfare Assistance policy (Trafford Assist (TA)) in place since the function moved from the Department for Work and Pensions (DWP) in April 2013. In the first two years, ring-fenced funding was provided but that ceased. Since then the core budget for awards has always been in line with the original ring-fenced funding.

1.2 The priority of the TA policy has always been to help residents in short-term acute financial difficulties and the award depends on the applicant's individual circumstances (but is linked to means tested benefits). The scheme has been designed to help Trafford residents:

- Meet immediate short-term needs in an emergency or because of a disaster.
- Return to or remain in the community and help them to live independently in their own home.
- Meet essential travelling expenses (e.g. to attend a funeral of a close relative).

1.3 In recent years and supplementing the TA budget of £218k, the Council has operated a Household Support Fund (HSF) with funding from the Department for Work and Pensions to support the most vulnerable households in need with food, energy and utility bills as well as

with wider costs. The current scheme was expected to end on 31 March 2024; the Government clearly stating in the Autumn Statement that there would be no further funding and therefore the main reason the Council has had to consult on a revised TA scheme.

- 1.4 The Council was pleased to hear the announcement in the Spring budget on 6 March 2024 that there would be an extension to the HSF, after months of campaigning, but disappointed it is only for 6 months. It is expected that most of the HSF funding in 2024/25 will need to be allocated to the continuation of the School Holiday Support (Free School Meal/Low Income Families £15 per child per week) during the 6-month extension. It is therefore necessary for the Council to proceed with a proposal around a 1 April 2024 and beyond TA scheme that can be operated within the available budget.

## **2.0 Introduction**

- 2.1 There have been several changes to the way in which the TA scheme operates over the past decade, for example, originally food parcels were provided at library collection points with second-hand furniture being provided by a local social enterprise. This moved to a supermarket voucher and newly purchased furniture via a procured contract. Since 2021, following an Executive decision, it has operated largely as a cash-first scheme using an automatic online form (which checks eligibility to a DWP means tested benefit and/or Housing Benefit and/or Council Tax Support), except for the furniture which has remained as newly purchased via a contracted provider.
- 2.2 The number of applicants applying, and being awarded, has significantly increased since the pandemic but this has been financially supported by several government grants, the latest being the Household Support Fund (HSF). The table at Appendix A shows how the TA scheme has evolved. Based on current demand levels this will mean that the available TA funding of £218k will fall significantly short in being able to cover the cost of the current scheme if this were to operate in 2024/25.
- 2.3 The current projected overspend on the TA budget in 2023/24 is c£800k and is being financed, in part, by utilising available HSF grant. With the current position being that HSF will only be extended for a further 6 months, a decision needs to be made as to what, if any, TA scheme will be delivered in 2024-25.

## **3.0 Proposed TA 2024-25 Scheme – Public Consultation**

- 3.1 The Council will be unable to replicate the current scheme due to the financial restraints already detailed above.
- 3.2 Understanding how best to distribute the core budget is a difficult task. Based on the current volume of applications (see Appendix A) an equal division of the funding would equate to a c£20-£40 award once a year, including furniture awards. The administration costs would significantly exceed the actual award costs and therefore does not seem to be the best use of the limited resources available.
- 3.3 None of the decisions are easy to make and the Council are continuing to raise their concerns about the significant impact the unfair funding for Trafford residents has on the most vulnerable members of the community at a time when cost of living is at crisis level. But on weighing up the difficult options, it is recommended that the option of redistributing the funding to the Trafford Community Hubs, who also provide a broader range of services,

including welfare rights advice and support with debt advice, would make the best use of the limited resources available.

- 3.4 A public consultation has taken place between 19 February and 7 March 2024 proposing the removal of the TA Policy and redistributing the budget to the Trafford Community Hubs which are already established and operating successfully across the borough. The public consultation also asked for suggestions of if there are other ways in which the budget could be used to maximise impact and outcomes.
- 3.6 There were 61 responses to the public consultation. In the main, although there are of course concerns around the lack of sufficient funding, the proposal to redistribute the Trafford Assist awards budget to the Hubs received overall a majority of support as the best way to utilise the available financial resources.
- 3.7 However, what was consistently highlighted as a concern was any proposal to remove the emergency furniture offer. Whilst it was accepted that there are alternatives available it was made clear that for emergency furniture for households in emergency situations such as fleeing domestic violence, there was very limited alternatives available that are free.
- 3.8 In direct response to that feedback, it is proposed the Hubs are not restricted to purchasing food and fuel only but allow an agreed split of the funding to be able to provide furniture in emergency situations.
- 3.9 It is also proposed to provide additional funding of £10k to HOST to provide emergency food vouchers and furniture in direct response to feedback received from representatives from HOST around the impact fully removing a furniture offer would have on the residents they support. This demand will be closely monitored during the year.
- 3.10 Further feedback received raised concerns as to the accessibility of the Hubs for those unable to attend in person. The Hubs already offer services within their communities and the Council will work closely with the Hubs to ensure that there is a consistent offer across the borough.
- 3.11 The operational aspects of the Hubs was also raised, both in relation to the allocation of funding, consistency of a 'Trafford' offer – 'not a postcode lottery' and how to ensure that professional services working with residents have a clear referral route in to the Hubs. The Council will ensure there is a smooth transition and will continue to work closely with the Hubs to constantly review the services being provided with the funding allocation. The Hubs are already subject to stringent and detailed data and financial returns requirements on a quarterly basis and therefore the Council will be able to identify and raise any concerns at the earliest opportunity.
- 3.11 Based on the above, it is recommended therefore that the Executive approve the proposals to replace the Trafford Assist scheme with a re-distribution of the funding to the Trafford Community Hubs from 1 April 2024 for food, fuel and wider essentials including furniture, with the additional of a budget to HOST for statutory emergency re-housing furniture applications.

#### **4.0 Other Options**

4.1 The Council could have considered keeping the existing TA scheme in place albeit with a much reduced fund, but believe having a scheme that is administered within community settings will allow financial support to be allocated in a more targeted way. The Council could have also considered no longer funding a local welfare assistance scheme as it is a discretionary scheme, but that would not support the Council's corporate policy of supporting people out of poverty.

**5.0 Reasons for Recommendations**

5.1 The Executive is asked to approve the proposals to replace the Trafford Assist scheme with a re-distribution of the funding to the Trafford Community Hubs and HOST - as detailed in this report - in order to deliver the most cost-effective scheme within the budget available.

**Key Decision:** Yes

**If Key Decision, has 28-day notice been given?** Yes

**Finance Officer Clearance** GB

**Legal Officer Clearance** EM

**DIRECTOR'S SIGNATURE**



(*electronic*)..... ..

To confirm that the Financial and Legal Implications have been considered and the Executive Member has cleared the report.



## Appendix A – Trafford Assist (TA) Demand Pre and Post Pandemic

Financial Year	Number of Awards (Food and Fuel)	Comments
2019-20	2,764	Pre-Covid
2020-21	6,178	Food Banks Closed in Trafford – TA take-up campaigns began  DEFRA Funding
2021-22	9,300 (Increase to 3 awards)	Cash-First Scheme introduced with automated online application process  Increase from 2 to 3 awards, funded by HSF  Free School Meal eligible families invited to claim Fuel support
2022-23	14,932 (Increase to 4 awards)	Continuation of the above plus increase from 3 to 4 awards, funded by HSF
2023-24 (up to 30 November)	8,216 (Forecast at c10,000 by 31 March 2024)	Reduced back to 2 awards  Increased awards to £100 due to the reduction in overall awards plus to align to the HSF direct awards  Estimated year end cost c£1m which is c£800k over budget

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## TRAFFORD COUNCIL

Report to: Executive  
Date: 18 March 2024  
Report for: Decision  
Report of: The Executive Member for Health and Care

### Report Title

**Fair Price for Care**

### Summary

Every year the Council sets a Fair Price for Care which determines the bed rate for residential and nursing care and the hourly rate for home care for the following financial year. The Council has consulted with these providers, together with the providers of supported living, day care and residential care for people with learning disabilities, autism and/or mental health needs on the uplift for 2024/5.

This report summarises the consultation responses, recommends inflationary uplifts for 2024/5 and details the rationale for making these recommendations.

### Recommendation(s)

It is recommended that the Executive:

- (1) Considers the responses to, and outcome of, the consultation.
- (2) Approves the trialling of a three-month period for the submission of inflationary uplifts outside of the normal uplift process.
- (3) Approves implementation of the following fee rates from 1 April 2024:
  - (a) Home care: 7.47% increase  
£19.66 to £21.13 per hour
  - (b) Residential and Nursing Care (including Learning Disability and Mental Health provision): 4.92% increase
    - Residential – £657.90 to £690.27 per week
    - Nursing – £735.43 to £771.61 per week
- (4) Supported Living Rate: 7.47% increase  
There is no standard rate for Supported Living so rates will vary.
- (5) Day Services: 5.81% increase  
There is no standard rate for Day Services so rates will vary.

**(6) Confirm that in approving the above, it has taken into consideration the Council's Public Sector Equality duty.**

Contact person for access to background papers and further information:

Name: Karen Ahmed  
Extension: 1890

Background Papers: None

Implications:

<p>Relationship to Policy Framework/Corporate Priorities</p>	<p>One of the Council's corporate priorities is supporting people out of poverty. The Council is committed to paying the Real Living Wage (RLW) through all its commissioned services. The financial position following the Provisional Local Government Financial settlement from the 18 December 2023 means that this may need to be reviewed for the financial year 2024/5.</p> <p>The Council is accredited to the Living Wage Foundation and Council staff are all paid at least the Real Living Wage. It is important to note that this policy impacts on the independent sector only as it relates to the level of fee uplifts awarded in 2024/5 and not Council staff salaries.</p>
<p>Financial implications</p>	<p>The revenue budget agreed by Council on the 21 February 2024 included budgetary provision for provider uplifts based on the following methodology.</p> <p>The estimated cost of the proposed uplifts in fee rates for 2024/25 were calculated by reviewing the cost base of providers then applying appropriate inflationary factors to the different components of that cost base. The forecast average Consumer Price Index (CPI) of 3.1% was applied to non-staffing related costs. In respect of pay costs the Real Living Wage (RLW) increase was used for some providers (10.1% for 2024/25), including home care. For other providers an uplift was used (equivalent to 7.4%) which would allow at least National Living Wage (NLW) levels to be maintained.</p> <p>This calculation was the basis for the latest consultation with providers and provided for the following average uplifts: -</p> <ul style="list-style-type: none"> <li>Day Care – 5.81%</li> <li>Home care - 7.47%</li> <li>Residential &amp; Nursing Beds - 4.92%</li> <li>Supported Living – 5.81%</li> </ul> <p>The estimated cost of the uplifts was £5.45m in 2024/25.</p> <p>Following the outcome of consultation, it is proposed to amend the increase to be provided to Supported Living providers to include an increase on the pay component of their costs equivalent to the increase in the RLW. This will mean overall rates are increased by 7.47%.</p> <p>The additional cost of this is estimated to be £336k. This creates a recurrent budget pressure from 2024/25 for which additional transformational savings will need to be found from within the Adult Social Care budget. It is imperative that robust savings are identified to avoid any further call on Council reserves in 2024/25 and an</p>

	increase to the budget gap in 2025/26 which already stands at £15.4m. The development and delivery of these new savings will be monitored through the Finance and Change Board and reported to the Executive as part of the budget monitoring process.
Legal Implications	The legal framework and considerations are detailed within the body of this report, and legal advice has been provided throughout the process.
Equality/Diversity Implications	Decision-makers are under a legal duty to have due regard to the need to eliminate discrimination against people in recipient of care and support (as well as providers/staff), promote equality of opportunity between such persons and others and foster good relations between such persons and others. Therefore, it is important to take care that all the new rates are adequate to promote a diverse and high-quality care market.
Sustainability Implications	Not applicable.
Resource Implications e.g. Staffing / ICT / Assets	Not applicable.
Risk Management Implications	The key risks for Trafford are around maintaining a sustainable care market within a nationally very fragile social care market. The proposals within the report will contribute towards the management of risks caused by an unstable market, in particular risks related to recruitment and retention.  The Council will implement a review process to enable any unforeseen financial risks to be managed.
Health & Wellbeing Implications	The inflationary uplift will have a positive impact on the staff, residents and tenants of our commissioned providers as they will be in a better financial position.
Health and Safety Implications	Not applicable.

## 1.0 Background

- 1.1 Every year the Council undertakes an exercise called the Fair Price for Care, which essentially informs the Council's pricing approach for the forthcoming financial year. The Council is required by law to consult with providers on this process.
- 1.2 The Council's focus over the last two years has been on maintaining progress towards the Real Living Wage and it is extremely positive that the majority of providers already pay their staff the Real Living Wage. It was the intention of the Council to continue to support this position for the financial year 2024/5 in line with its accreditation with the Living Wage Foundation to pay the Real Living Wage by 2025 and the Council's commitment to the Ethical Care Charter. The Council initially went out to consult on a proposal based upon this intention.
- 1.3 The Provisional Local Government Financial Settlement (LGFS) was published on the 18 December 2023, and the Final LGFS was announced on the 5 February 2024, with the Government also announcing additional measures for local authorities on 24 January 2024. The level of funding was lower than anticipated by the Council, requiring the original consultation proposals to be reviewed.

## **2.0 Legislative Provisions**

- 2.1 Section 5(1) of the Care Act 2014 places a duty on the Council to promote a diverse and high quality market of care and support services (including prevention services) for people in its local area. In particular, the Council must act with a view to ensuring that there is a sufficient overall pool of efficient providers and a range of different services and providers to ensure that people are able to choose between a range of providers when care is required in a residential setting.
- 2.2 Section 5(2) lists certain factors that the Council must consider when exercising its duty. These include: the importance of ensuring the sustainability of the market and supporting continuous improvement in the quality of services; making available information about the services available to people in its area; the current and future demand for services in its area, and how this demand can be met by providers; the importance of carers and service users being able to undertake work, education and training; and the importance of fostering a suitable workforce.
- 2.3 Section 5(3) requires the Council, when considering current and future local demand and how this might be met by providers, to consider the need for there to be sufficient services to meet the needs of people in their area. Local authorities should understand the business environment of the providers offering services in their area and seek to work with providers facing challenges and understand their risks.
- 2.4 Section 5(4) requires the Council to consider, when making decisions about commissioning services, the importance of promoting the well-being of people with care and support needs and carers. Section 5(5) requires the Council to have regard to the duty when either providing or arranging services to meet the care and support needs of adults with care needs and carers.
- 2.5 The Care Act accompanying guidance obliges the Council to have evidence that the fee levels it pays for care and support services enable the delivery of agreed care packages and support a sustainable market. When commissioning services, the Council should assure itself and have evidence that contract terms, conditions and fee levels for care and support services are appropriate to provide the delivery of the agreed care packages with agreed quality of care. This should support and promote the wellbeing of people who receive care and support and allow for the service provider's ability to meet statutory obligations to pay at least the national minimum wage and provide effective training and development of staff. It should also allow retention of staff commensurate with delivering services to the agreed quality and encourage innovation and improvement.
- 2.6 The Council continues to work with its colleagues and providers to understand the local adult social care market and the key challenges it faces, which informs and develops ways in which the Council supports its providers.

## **3. Public Sector Equality Duty and Equality Impact Assessment**

- 3.1 The Equality Act 2010 requires public authorities to have regard to the Public Sector Equality Duty in making any decision. The Public Sector Equality Duty requires the Council to consciously consider how its policies and decisions affect people who share the protected characteristics set out in the legislation. The Council must have

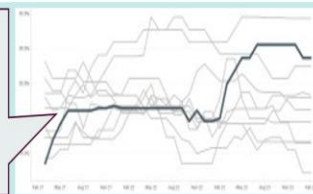
due regard to the need to eliminate unlawful discrimination, advance equality of opportunity between people who share protected characteristics and those who don't and foster or encourage good relations between people who share protected characteristics and those who do not.

- 3.2 In consideration of the Public Sector Equality Duty the Council has completed Equality Impact Assessments, which identify a combination of positive, potential negative and neutral impacts. The positive impacts relate to the proposals maintaining the rebased bed and home care hourly rates, enabling those providers to maintain the RLW and therefore being able to retain a more stable workforce. This will be of benefit to residents, and staff who are able to command a higher salary. In addition, a more stable market benefits both staff and residents as the risk of service failure from financial causes is mitigated.
- 3.3 The potential negative impact identified is the possibility of providers not being able to maintain the RLW, which may impact on staff recruitment and retention and overall service stability. This would disproportionately impact on women as they are the major providers, and recipients, of care. The Council will mitigate this risk by continuing to monitor the market based on identified risk factors to enable a targeted risk management approach.
- 3.4 Women would be one of the key beneficiaries of the identified positive impacts as they make up the majority of the workforce and the majority of recipients of care overall.
- 3.5 Another key beneficiary will be disabled people and those with age-related frailty. The combination of uplifts and the monitoring of the market will stabilise those services most at risk, ensuring that our service users benefit from consistency of provider and staff and enable the early mitigation of any risks.
- 4.0 **Trafford's Adult Social Care Market and Market Position Statements**
- 4.1 The Council has a duty to promote the efficient and effective operation of the market in ensuring that there are services to meet care and support needs and ensure that there are a variety of high-quality services to choose from. Trafford Council can demonstrate that this is the case through the outcome of CQC inspections and the quality ratings of our local providers:



## CARE HOME QUALITY IN TRAFFORD

TRAFFORD quality trajectory 2021 - 2023 (compared to GM)



All Home Care CQC Ratings	TRAFFORD Oct-20	TRAFFORD Oct-23	Trajectory	Northwest Average Oct-23	National Average Oct-23
Outstanding	1 (2.4%)	5 (9.3%)	↑	4.7%	4.4%
Good	31 (73.8%)	44 (81.5%)	↑	85.8%	80.9%
Requires Improvement	10 (23.8%)	5 (9.3%)	↓	8.8%	13.9%
Inadequate	0	0	↓	0.6%	0.7%
Total	42	54			

### Exceptions

- Number of provider organisations increased by 23% (12)
- The number of 'good' and 'outstanding' rated providers have increased by 13 and four, respectively. The number of 'requires improvement' providers has halved
- There have been consistently no 'inadequate' providers working in Trafford

Care Homes in Trafford	2020				2021				2022				2023			
	Outstanding	Good	Requires improvement	Inadequate	Outstanding	Good	Requires improvement	Inadequate	Outstanding	Good	Requires improvement	Inadequate	Outstanding	Good	Requires improvement	Inadequate
All Care Homes	1	31	10	0	2	38	7	0	3	39	8	0	5	44	5	0
	2.40%	73.80%	23.80%	0%	4.30%	80.90%	14.90%	0%	6%	78%	16%	0%	9.30%	81.50%	9.30%	0%
General Residential	1	23	3	0	2	24	3	0	2	25	4	0	4	26	5	0
General Residential % of Yearly Total	3.7%	85.2%	11.1%	0%	6.9%	82.8%	10.3%	0%	6.5%	80.6%	12.9%	0%	11.4%	74.3%	14.3%	0%
Dementia Specialist	1	8	7	0	2	14	5	0	2	16	5	0	4	19	1	0
Dementia % of Yearly Total	6.3%	50.0%	43.8%	0%	9.5%	66.7%	23.8%	0%	8.7%	69.6%	21.7%	0%	16.7%	79.2%	4.2%	0%
Learning Disability Specialist	0	11	1	0	0	11	1	0	1	11	1	0	1	15	1	0
Learning Disability % of Yearly Total	0.0%	91.7%	8.3%	0%	0.0%	91.7%	8.3%	0%	7.7%	84.6%	7.7%	0%	5.9%	88.2%	5.9%	0%
Mental Health Specialist	0	6	4	0	0	9	1	0	0	9	2	0	0	10	2	0
Mental Health % of Yearly Total	0.0%	60.0%	40.0%	0%	0.0%	90.0%	10.0%	0%	0.0%	81.8%	18.2%	0%	0.0%	83.3%	16.7%	0%

## THE TRAFFORD CARE HOME QUALITY POSITION & FUTURE AMBITION



### As of October 2023,

- Trafford hosts six 'outstanding' rated care home providers
- 44 (81.5%) of Trafford's provider locations have a 'good' rating. Just under half of these are general residential providers, with dementia support, learning disabilities and mental health all represented as specialisms
- Five (9.3%) of Trafford based providers have a 'requires improvement' rating. These are all general residential settings with some specialisms
- Trafford has not had a care home provider location with an 'inadequate' rating in the last four years
- Trafford is fortunate to be in a position where no care home provider locations is without a CQC rating or CQC have 'insufficient evidence' to rate

### Summary:

- Trafford care home quality is remarkable in that growth of the market has been tied to consistent quality improvement. The number of 'good' and 'outstanding' providers operating in Trafford have increased and out-perform national and regional averages. There have been consistently no inadequate providers
- All Trafford providers with a 'requires improvement' rating performed poorly on the 'well-led' measure

### Ambitions for 2024 (to be agreed)

- Trafford already surpasses the GM quality ambition
- Focus attention on residential care home providers currently rated as 'requires improvement'
- Ensure that any continued market growth/expansion is aligned to Trafford's and GM's quality standards and CQC assessment framework

## HOME CARE AND SUPPORTED LIVING QUALITY IN TRAFFORD

**TRAFFORD quality trajectory 2021-2023**  
(compared to GM)



All Home CARE CQC Ratings	TRAFFORD Oct-20	TRAFFORD Oct-23	Trajectory	Northwest Average Oct-23	National Average Oct-23	Exceptions
Outstanding	2 (7.7%)	2 (5.4%)	↔	1.4%	4.3%	<ul style="list-style-type: none"> <li>Number of provider locations increased by 30% (11) between October 2020 and October 2024</li> <li>The number of 'good providers' increased by 10. The number of 'requires improvement' rated providers increased by just one</li> </ul>
Good	21 (80.8%)	31 (83.8%)	↗	77.2%	77.4%	
Requires Improvement	3 (11.5%)	4 (10.8%)	↔	18.4%	17.2%	
Inadequate	0	0	↔	1.4%	1.1%	
<b>Total</b>	<b>26</b>	<b>37</b>				

Home Care and Supported Living in Trafford	2020				2021				2022				2023			
	Outstanding	Good	Requires improvement	Inadequate	Outstanding	Good	Requires improvement	Inadequate	Outstanding	Good	Requires improvement	Inadequate	Outstanding	Good	Requires improvement	Inadequate
Home Care	2	21	3	0	2	21	3	1	2	22	5	0	2	31	4	0
Home Care % of Yearly Total	7.7%	80.8%	11.5%	0.0%	7.4%	77.8%	11.1%	3.7%	6.9%	75.9%	17.2%	0.0%	5.4%	83.8%	10.8%	0.0%
Supported Living	0	7	0	0	0	7	0	0	0	7	0	0	0	7	1	0
Supported Living % of Yearly Total	0.0%	100.0%	0.0%	0.0%	0.0%	100.0%	0.0%	0.0%	0.0%	100.0%	0.0%	0.0%	0.0%	87.5%	12.5%	0.0%

## THE TRAFFORD HOME CARE & SUPPORTED LIVING QUALITY POSITION & FUTURE AMBITION



As of **October 2023**,

- There are two home care provider with an 'outstanding' rating and one supported living provider
- 31 (83.8%) of Trafford-based home care providers have a 'good' rating. Seven of these have a supported living offer
- Four (10.8%) of home care providers located in Trafford have a 'requires improvement' rating and one supported living provider
- Growth in terms of the number of home care providers registered in Trafford largely mirrors the increase in the number of 'good' providers

### Summary:

- Trafford outperforms national and regional averages for 'outstanding', 'good' and 'requires improvement' home care providers

### Ambitions for 2024 (to be agreed)

- Focus attention on four 'requires improvement' home care providers. By supporting just one provider to move from 'requires improvement' to 'good' or 'outstanding' the GM quality ambition can be realised in Trafford
- Identify opportunities to elevate any of the 31 'good' providers to achieve an 'outstanding' rating
- Ensure that any continued market growth/expansion is aligned to Trafford's and GM's quality standards and CQC assessment framework

These results reflect the hard work that Trafford Council and our providers have undertaken in creating a local adult social care market that we are truly proud of.

- 4.2 Trafford Council have recently engaged the services of an independent consultant to develop our market position statements with our providers. Providers were offered the opportunity to co-produce those documents, but instead chose to form an editorial group, The market position statements were consulted on widely and are due to be published shortly.
- 4.3 The market position statement for older people recognises that Trafford has a very successful Home First strategy which is supported by our home care provision,

which offers both reablement and long-term support. It also recognises the valuable work that our care home providers do in supporting some of most complex residents as well as providing D2A (discharge to assess) provision. Trafford care homes command the highest prices in Greater Manchester as confirmed by the Fair Cost of Care exercise carried out in 2022, and funding from central Government continues to pose challenges in this regard.

4.4 Within this context, the market position statement identifies the following risks for older peoples' provision:

- A small number of home care providers have exited from the home care market because of a combination of pricing for service provision, underlying liquidity, staffing recruitment and retention and quality expectations.
- The Council's care home fee structure may not provide adequate income to cover costs and to maintain standards of care.
- The Council acknowledges that there are other pressures on providers in the markets covered by this position statement. These pressures include:
  - a. Increases in the National and Real Living Wage over time
  - b. Recruitment and retention challenges for workforce
  - c. Access to capital
  - d. Ability to obtain planning permission for modifications to buildings and for new build
  - e. Costs arising from competition in public sector procurements

The market position statement also notes mitigations to these issues:

The home care market is resilient and there is a wide choice of provision. The Council has taken steps to improve resilience, e.g., by enabling providers who initiate the 'stabilise and make safe' service to continue to provide care where this is assessed as required after the initial service has run its course of 21 days. The Council will continue to work with providers in this, and all other segments of the market, to explore ways of increasing resilience without losing the benefits of a dynamic and flexible market place.

The Council is committed, through this market position statement, of 'squaring the circle' between the relatively high costs the Council is paying for care homes and the need for the market to remain resilient and dynamic.

4.5 The market position statement for learning disability, autism and mental health services describes a more complex landscape. Whilst mental health services are stable, there is room for improvement, services for people with a learning disability and/or autism have proved more volatile with some providers making business decisions resulting in one service closure and four changes of provider during 2023/2024 due to provider withdrawal. Despite having a range of long-standing providers, the learning disability market is the most fragile element of the adult social care market in Trafford. Commissioners are working closely with providers to maintain sufficiency and stability.

4.6 The market position statement identified the following risks mental health and learning disability providers:

- Increases in the national and real living wage over time

- Recruitment and retention challenges for workforce
- Access to capital
- Ability to obtain planning permission for modifications to buildings and for new build
- Costs arising from competition in public sector procurements

These factors, together with more specific local or organisational factors, can have an impact on providers' willingness and ability to maintain service levels and indeed, to stay in the social care market altogether. In light of this and the number of market exits the Council will remain vigilant about the risk of market exit or market failure, and will regularly seek intelligence from providers about changes to the risk profile.

## **5.0 Consultation**

5.1 The Council undertook a two-stage consultation process on fees due to factors arising from the Local Government Financial Settlement and the impact of this on the Council's financial position for 2024/25.

5.2 The first consultation process took place from the 22 November 2023 to the 22 December 2023. The Council has a well-established e-mail address lists that is frequently updated and verified which is used to send out all mailing including consultation letters. In the case of providers, particularly learning disability providers, who have not been consulted before, an additional note was added to ensure that the recipient passes them onto the correct person in the organisation. These letters asked for views from homecare, residential, supported living and day care providers on the following proposals which considered two components of the cost – the non-pay component (the CPI) and the pay component (the RLW/NLW component):

“An inflationary uplift for 2024/25 based on the following elements:

- The average forecasted CPI rate for 2024/25
- The national living wage (NLW) increase for supported living providers not currently paying the Real Living Wage.
- The Real Living Wage (RLW) increase – this will be a proportionate increase to support our providers to maintain the payment of the RLW.”

The Council also requested views on the proposal to implement a new requirement for providers to request an uplift within a three-month period (April to June) in the following circumstances:

- Where they fall outside of the automatic increase process
- Where an uplift may have been missed, or
- Where the uplift may have been deemed to have been applied incorrectly

The intention is to avoid long retrospective uplifts being applied that put both the Council and provider at risk.

5.3 The announcement of the Final Local Government Financial Settlement on the 5 February 2024 required the Council to review the original consultation proposals and continue the consultation process based on updated proposals. This took place from the 7 February 2024 to the 6 March 2024 and utilised the established mailing lists. The same two components were consulted upon – the non-pay component (CPI) and the pay component (RLW/NLW). The updated proposals were as follows:

- The average forecasted CPI rate for 2024/25 for all providers
- The real living wage (RLW) increase for home care and
- To exceed the national living wage (NLW) for other providers. Maintaining the NLW would have required an increase of 4.95%, and the additional monies from the Govt announcement have enabled the Council to propose an increase of 7.4%

The letter explained that the Council had managed to maintain the original proposal of providing our home care staff with at least the Real Living Wage because “it is in home care where the earliest headway was been made on paying the Real Living Wage. The home care market is particularly volatile so this provision makes sense in recognising the current position and helping to maintain the market. Maintaining the home care market is also critical to support hospital discharge and achieving our Home First ambitions.” The volatility experienced in home care is more in terms of capacity due to recruitment and retention issues rather than in provider exit. Home care also supports older people, those with learning disabilities and/or autism, mental health needs and people with physical and/or sensory impairments. This service is the largest service area and supports over 2000 people at any one time.

The figures are summarised in the table below:

Category	23/24 rate £	Increase %	Increase £	24/25 rate £
Home care (Framework)	19.66	7.47	1.47	21.13
Home care (Non-Framework)	18.63	7.47	1.39	20.02
Older People Nursing Care Home	735.43	4.92	36.18	771.61
Older People Residential Care Home	657.90	4.92	32.37	690.27
Day care	variable	5.81	variable	variable
Learning Disability / Mental Health Residential	variable	4.92	variable	variable
Learning Disability / Mental Health Supported Living	variable	5.81	variable	variable

#### 5.4 Consultation Response

18 providers responded to the consultation. Some providers submitted more than one response and learning disability providers were the main group to respond. A small number of learning disability providers requested a meeting with the Council to better understand the proposed uplift and make their views known. Clarification and support was given to providers as and when requested throughout the process.

5.5 The breakdown of responses is as follows (please note that this will not add up to 18 as some providers work in more than one sector):

Care Sector	Number
-------------	--------

Residential Care sector (older people)	4
Home Care	2
Learning Disabilities	10
Mental Health	3
Day Care	2

5.6 The consultation responses will be summarised as follows:

1. The response to the proposal regarding submission of uplifts.
2. The response to the proposed inflationary uplifts. The responses to both consultations will be taken together along with correspondence received independently regarding requested increases for next year.

5.7 **Proposal to submit inflationary uplifts within 3 months in certain circumstances.**

This proposal received mixed responses, some of which expressed dissatisfaction with the current process and suggested a number of improvements alongside this change.

5.8 The majority of respondents were supportive of the proposal, with one respondent highlighting that consideration should be given to relaxing this where services were at risk of closure. One provider also felt that the uplift could be announced earlier following confirmation of funding through the Autumn Budget Statement and as soon as the Council budget was set. This normally takes place in February, which would mean that the uplift would be announced in March.

5.9 Whilst some providers welcomed the proposal, others expressed concerns about the impact of such a proposal on the financial viability of the service e.g. due to the delayed or backdated inflationary uplifts which might undermine the financial stability of the organisation, the cumulative impact of delayed reviews or delayed/changes to care packages and finally the impact of changes to regulatory requirements mid-year.

5.10 The proposal to implement the three-month cut-off period is to enable providers to maintain financial stability by ensuring that where an uplift is agreed it is paid early in the financial year, thus avoiding delays and significant back-payments. It is not a delay in administering any uplift agreed through the normal process which will be automatically applied.

Care package changes will not be impacted by this process and those may be reviewed through the financial year.

It is unusual for regulatory changes which have significant financial consequences to be implemented mid-year. However, should this happen, the Council will work with those impacted to minimise any negative consequences. Where additional funding is received to support any changes, this will of course be distributed to the sector.

5.11 **Recommendation**

It is recommended that the Council trial this approach this year, with a review at 6 months – September 2024. In addition, the Council will commit to:

- (a) Writing to providers as soon as a decision has been made regarding an inflationary uplift, together with the implementation date;
- (b) Acknowledging requests within 7 working days; and
- (c) Responding to requests within 6 weeks.

## 5.12 Other options

### **Do nothing**

Late uplifts and adjustments can cause financial difficulties for providers. Bringing in this commitment to early resolution will enable robust financial planning and stability.

### **This option is not recommended**

### **Implement a one month uplift period**

This option would promote a faster resolution of issues but is too short as providers may take longer to identify any shortfalls. In addition, the Council may not be able to effectively manage a significant number of requests in a very short timescale. This approach is likely to cause frustration for everyone.

### **This option is not recommended**

## 5.13 Responses to the Proposed Fee Increases

The Council received a significant number of responses and is very appreciative of the time that providers have taken to consider the consultation proposals and provide their extremely detailed feedback. It is difficult to summarise the responses as providers have included different elements, different costings and different outcomes, reflecting the uniqueness of their provision. The Council has carefully considered all the responses and feedback given.

The most common elements that were raised were issues relating to the:

- Real Living Wage/ National Living Wage uplift
- Inflationary/overhead costs
- Pension costs

Other costs highlighted by learning disability providers included:

- Oliver McGowan training
- Infrastructure costs (digital care management systems etc)
- Recruitment and retention costs

One day care provider also specified onboarding costs which were 40% higher than retained staff, highlighting the challenge of recruitment and retention.

A number of providers raised the Fair Cost of Care exercise that the Council undertook as a part of a national mandatory exercise. Unfortunately, the Department of Health and Social Care (DHSC) have not yet confirmed how they will support the outcomes of that exercise.

5.14 The main concern raised by over half of the providers was that the Council's proposals fall short in some areas of fully meeting the increase of the Real Living Wage (RLW). The respondents recognised that the Council had financial constraints but disagreed with the proposals. The proposals particularly impacted on some learning disability providers as they had committed to offering the RLW to their staff.

5.15 This report explains that the decision to move away from offering the RLW uplift across the sector was determined by the challenging financial situation faced by the Council because of funding pressures and that the longer-term commitments to the RLW remain.

5.16 Residential and Nursing Care Home Sector (Older people)

Three responses were received from providers in this sector. One focused on the proposal to bring in a three-month time limit and highlighted some issues with this proposal which have been addressed. The second response focused on the inflationary uplift with reference to the NLW and a request of 12.3%. The third response raised several issues including reference to the historical freezing of Council tax for a period by the Council.

5.17 The same respondent was also of the opinion that the framework rates had not been agreed at any point with providers. However, the Council has consulted on those rates and the inflationary uplift on an annual basis. The Council acknowledges that there is sometimes a discrepancy between those rates and prices paid for some care home beds within Trafford. Another respondent also raised this point, feeling that the Council set bed rates were irrelevant to them.

5.18 Finally the respondent questioned the inflationary uplift figure of 4.92% and how it was arrived at. They pointed out that the overheads, especially utilities are still very high. Whilst no definitive inflationary uplift was requested, the respondent requested reconsideration of the proposed uplift.

5.19 Whilst the Council acknowledges the views and concerns that this respondent raises, the offer is the maximum available within the budgetary constraints that it faces. Should the Council receive additional funding for this purpose, then rates across the board will be reviewed.

5.20 Home care provision

The response from the home care sector was very small in comparison to the number of providers the Council commissions. One provider was committed to paying the RLW and requested a slightly higher inflationary uplift of 8.2% to do so and meet overhead costs.

5.21 The other provider commented that their care packages were becoming smaller resulting in disproportionate administrative costs and so required additional funds to meet that and other challenges. An additional uplift of 2.3% was requested.

5.22 In general, there were few comments regarding the higher uplift for home care in comparison to other providers, although two providers were concerned that this was disproportionate and that the Council placed more value on the home care sector than other sectors. This is not the case; the Council is in a very difficult financial position and is seeking to fulfil its statutory duty to maintain a care market which



meets peoples' needs and offers choice, with home care being the largest service offer to over 2000 residents.

- 5.23 Trafford has a long history of facing challenges in providing home care resulting in long waiting lists for care. This included people who were living at home alone and people waiting for discharge from hospital. Due to the lack of care at home, the Council was only able to offer residential beds to those people to keep them safe until such time as any home care became available. Many of those people would have preferred to stay at home but this choice was not available.
- 5.24 The Council worked closely with providers to understand their costs and difficulties, and this led to a rebasing of the hourly rate in order to become attractive to workers from that sector. Staff in the home care sector are a valuable commodity as are all social care staff – however home care staff will often move from one provider to another where there is a higher salary on offer. This meant that Trafford's providers were recruiting staff at considerable expense, training those staff and then losing them to other providers who were offering a higher salary.

Since the rebasing of the hourly rate to the RLW, Trafford have had sufficient capacity in the market to meet the needs of our residents and we no longer have long waits for home care.

#### 5.25 Mental Health Providers

The response from mental health providers mainly focused on other areas of their business rather than specific fee uplifts. However, one provider indicated that they had undertaken an internal analysis and reached a conclusion that they required a 9.8% inflationary uplift. Other uplifts ranged up to provider uplift requests ranged to 12%.

#### 5.26 Learning Disability Providers

The Council received the largest response from learning disability providers with ten providers responding, some more than once. This figure represents more than half of the commissioned services for people with a Learning Disability the majority of which are Supported living. Several providers also requested a meeting with the Council to put their position forward.

- 5.27 The key issue raised by this group of providers was the centrality of the RLW to their recruitment and retention policies for supported living. The experience of recruitment in Trafford is difficult across all sectors, but the recruitment issues experienced by learning disability providers are particularly difficult. Where temporary staff were used, this impacted negatively on their financial position, service continuity, culture and quality. Many providers had only managed to achieve their aim of paying the RLW in Trafford last year because of a rebasing exercise and were able to demonstrate the impact of being able to offer the RLW on their staff retention with one organisation having a full staffing complement in Trafford for the first time.

- 5.28 The response from the Council's learning disability providers reflects the fragility of the learning disability market. Providers expressed their commitment to their service users and families but needed to emphasise that the offer from the original proposal was not financially viable for them as they would not be able to continue to recruit and retain staff unless they paid the RLW. Further, the providers indicated concern

that the proposals would not enable them to set a balanced budget. Inflationary uplifts between 9.8 and 20% were requested.

## 5.29 Day Care providers

One provider accepted the proposed uplift, the other provider requested an uplift of which reflected the 20% increases in costs which the service asserts they experienced in all aspects of recruitment, salaries, provision of uniforms, PPE, and travel. This increase is substantially higher than that incurred by other providers.

5.30 The Council recognises the challenges of the current economic circumstances that providers, and indeed the Council, are managing, along with a desire to maximise staff salaries and meet a commitment to the RLW.

## 6.0 Summary and Recommendations

6.1 The recommendation that the Council has considered considers the following rates:

- the RLW uplift of 10.1%
- the NLW uplift of 9.7%
- the forecast CPI average rate for 2024 and 2025

The final inflationary uplift figure recommended usually considers any salary increases and the predicted rate of inflation for the following financial year.

### 6.2 Recommended uplift for 24/25:

The Council has carefully considered all responses provided during the consultation exercise and refined its recommendations in light of those responses to reflect the representations and evidence put forward by the learning disability supported living providers. The recommended uplifts are set out in the following table:

Category	23/24 rate £	Increase %	Increase £	24/25 rate £
Home care (Framework)	19.66	7.47	1.47	21.13
Home care (Non-Framework)	18.63	7.47	1.39	20.02
Older People Nursing Care Homes	735.43	4.92	36.18	771.61
Older People Residential Care Homes	657.90	4.92	32.37	690.27
Day care	variable	5.81	variable	variable
Learning Disability / Mental Health Residential	variable	4.92	variable	variable
Learning Disability /Mental Health Supported Living	variable	7.47	variable	variable

The residential/nursing uplift will apply to all current rates including top up fees.

### **6.3 Other options**

There are two other options:

#### **Revert back to the original proposals in order to maintain the commitment to the Real Living Wage**

This is no longer a financially viable option for the Council.

**This option is not recommended**

#### **Offer an inflationary uplift based on the increase in the National Living Wage**

This option would enable providers to meet their legal requirements but would not be in keeping with the Council's commitment to the Real Living Wage and the Ethical Care Charter. There is a real risk that this would destabilise the market in at least one of the sectors, having a negative impact on both residents and provider staff.

**This option is not recommended.**

### **7.0 Reasons for Recommendations**

- 7.1 The recommendations will enable our home care providers to maintain their commitment to paying the RLW. This will be reinforced contractually by the Council through the tender process.
- 7.2 The recommendations will enable our learning disability providers to maintain their commitment to paying the RLW. The Council will work with those providers who are currently not paying the RLW to work towards this position. In addition, all new providers will be expected to pay the RLW and this will be enforced contractually by the Council.
- 7.3 The recommendations will enable the remainder of the social care market to continue paying in excess of excess of the National Living Wage, and in some cases maintain the Real Living Wage
- 7.4 The Council will develop a risk management approach to managing the market and in maintaining market sustainability.

### **Recommendations**

**That the Executive:-**

- (1) Considers the responses to, and outcome of, the consultation.**
- (2) Approves the trialling of a three-month period for the submission of inflationary uplifts outside of the normal uplift process.**
- (3) Approves implementation of the following fee rates from 1 April 2024:**
  - (a) Home care: 7.47% increase**

**£19.66 to £21.13 per hour**

**(b) Residential and Nursing Care (including Learning Disability and Mental Health provision): 4.92% increase**

- Residential – £657.90 to £690.27 per week
- Nursing – £735.43 to £771.61 per week

**(4) Supported Living Rate: 7.47% increase**

There is no standard rate for Supported Living so rates will vary.

**(5) Day Services: 5.81% increase**

There is no standard rate for Day Services so rates will vary.

**(6) Confirm that in approving the above, it has taken into consideration the Council's Public Sector Equality duty.**

Finance Officer Clearance *GB*

Legal Officer Clearance *EM*

**CORPORATE DIRECTOR'S SIGNATURE**

