

**WARWICKSHIRE
COUNTY COUNCIL**

Market Position Statement for Domiciliary Care

FEBRUARY 2024



**Warwickshire
County Council**

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Foreword



As the Portfolio Holder for Adult Social Care and Health, it gives me great pleasure to extend a warm welcome to you as we present our updated Market Position Statement for Domiciliary Care in Warwickshire.

It presents our commissioning intentions and emphasises the importance of collaboration with partners, including the Coventry and Warwickshire Integrated Commissioning Board (ICB) and public, private and voluntary sector providers in developing services that prioritise choice and independence for our citizens.

The Market Position Statement serves as a valuable resource, providing information and identifying opportunities for the market to evolve in a suitable manner while ensuring its diversity and sustainability. The Council plans to work closely with providers to explore service delivery options that meet the challenges of delivering agreed and appropriate outcomes for customers during these challenging times, marked by limited resources, complex needs, increasing demands, and shifting expectations. I hope you will find it both useful and informative.

Cllr Margaret Bell
Portfolio Holder for Adult Social Care & Health



Purpose of this Market Position Statement (MPS)

This document contains information and analysis that is of benefit to both current and prospective providers of Domiciliary Care within Warwickshire. It summarises supply and demand in the local authority area or sub-region, and signals business opportunities within the care market in that area. It also signals the strategic direction and our future commissioning intentions.

This MPS outlines how the Domiciliary Care market may need to develop and adapt to meet future anticipated need/demand. It also sets out the key areas for market development by identifying where there are current or anticipated service gaps.

The test of a MPS is how well it is used by the provider market. Our aspiration for the future includes an interactive web-based version of the MPS, which will enable regular updates to be made and provide the market with up-to-date information that will assist providers when shaping their business decisions.

Our Commitment

We have established a set of commitments that guide our approach to commissioning services at the same time as ensuring positive outcomes for the people of Warwickshire. These commitments reflect the council's dedication to creating a thriving community.

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We will only commission services that contribute to positive outcomes for Warwickshire people.

We will commission services that support a restorative and strength-based approach.

We will work within budget to commission safe and sustainable services that meet people's needs.

We will actively consider how we meet the needs of people with protected characteristics within our commissioning activity.

We will work with providers to baseline the carbon impact of commissioned services and develop plans to reduce carbon emissions from our health and social care contracts.

Our commissioned services will be developed using a robust evidence base, including our place based Joint Strategic Needs Assessments.

We will focus on developing and strengthening relationships with internal and external partners, service providers and people that use our services.

We will utilise their extensive knowledge to co-produce solutions and to plan, commission, and review.

We will support development of the Coventry and Warwickshire Integrated Care System; taking action to maintain, progress and further develop integrated and place-based commissioning arrangements where they secure the best outcomes for our population and reduce health inequalities.

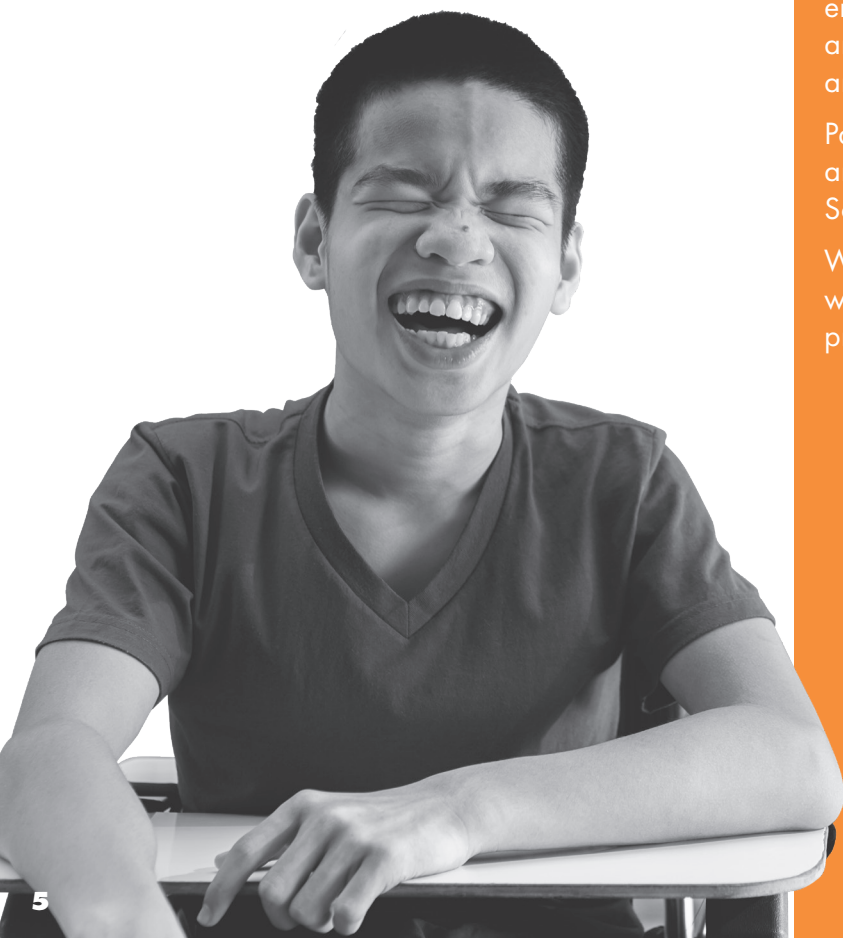
We will evaluate and review the impact of our commissioning activity on the Warwickshire population, ensuring flexibility and continuous improvement.



Adult Social Care Strategy

Our duties and responsibilities are determined by national legislation and the four important pieces of legislation which guide our work are the Care Act 2014, the Mental Capacity Act 2005, Health and Social Care Act, and the Mental Health Act 1983. Additionally, the Government has set out its plans and wide-ranging reforms for health and social care, through 'Build Back Better', 'People at the Heart of Care' and more recently 'Next steps to put People at the Heart of Care'.

We are currently in the process of writing our Adult Social Care Strategy. This document will both articulate what we are currently doing to deliver our Adult Social Care responsibilities, and areas which we need to strengthen to keep our population safe, well and independent for as long as possible. This section of our MPS will be updated Autumn 2024 once we have finalised this document by engaging with social care staff, providers and customers. Our draft document outlines our strengths and conversely where we should like to strengthen our offer..



Current Strengths

Strength-based practice has been identified as being particularly good in Warwickshire and was highlighted in our recent Peer review. This way of working builds on the established assets in people's lives, families and communities to deliver the best outcomes for our customers.

The WCC Learning and Development (L and D) team will continue to work closely with providers to support the training and development of the provider workforce. They offer training assessments to identify training needs amongst staff and work with providers to access the identified and required training. They both commission and deliver training for providers and utilise a web-based Learning and Development platform (Scils). This supports transferability of training, reduces re-training and concentrates on personal development needs.

We will continue to work with partners and providers to consider how assistive technology and digital solutions can support the efficiency of adult social care delivery. Our Domiciliary Care providers have made great advances in the use of technology to support customers maintain their independence and we want to learn from and share this across our market.

A centralised referral team has been developed to ensure we are able to work with providers in a consistent and professional way, ensuring customer outcomes and market sustainability are the focus of our activity.

Partnership working both with other statutory bodies and within WCC between Adult Social Care and Social Care and Health Commissioning is strong.

We have an integrated Adult Mental Health service with the NHS that results in a joined-up service provision to our customers with Mental Health Needs.

Areas for Development

We have started work on improving our information offer and digital interface and we will be looking regionally and nationally at authorities who do this well. If potential customers, friends and relatives can access the information they need easily and can also self-serve to understand what is available to meet their needs, then they might access non statutory community resources to help themselves. This will help people stay well and independent for longer.

We will continue to explore the role technology can play in supporting customers to remain independent or obtain independence and take advantage of opportunities arising from the rapid advancements in technology.

During Covid and since its decline we have seen an increase in sustained care post hospital discharge, as such we are developing short term recovery and reablement support, both bedded and within the community, to help people to reduce their long-term needs for care and support.

We will continue to work closely with Housing Authorities in the county to progress the development of Housing with Care schemes to create good quality, affordable housing options as alternatives to residential care for those with some care needs.

We will seek to encourage the development of a diverse market and promote opportunities for providers in the third sector, particularly social and micro-enterprises that can develop and offer alternatives to traditional support services. We will also look at ways of maximising community-based services and the voluntary sector to deliver services that support, and compliment commissioned services.

In line with Warwickshire's Health and Wellbeing Strategy, we will take a Health in All Policies approach to make health everyone's business, in particular helping people to improve their mental health and wellbeing and reducing inequalities in health outcomes and the wider determinants of health. It is recognised that all staff and services have a role to play in supporting good health and wellbeing. A Making Every Contact Count (MECC) approach is being rolled out across the Council and commissioned partners to deliver key messages and signposting to health and wellbeing support.

A Healthy Ageing Joint Strategic Needs Analysis (JSNA) has now been published which will outline the priorities for preventing ill health in later life.



Domiciliary Care in Warwickshire

Domiciliary care, commonly known as home care, holds a pivotal role in enabling individuals to maintain their independence within the familiar surroundings of their home. In Warwickshire, the provision of domiciliary care is strong with a buoyant market and experienced providers. However, it is not without its set of challenges. These challenges encompass the timely and consistent delivery of care services, the necessity to tailor care to individual needs, the recruitment and retention of a qualified workforce, and the constraints posed by financial resources.

Ensuring the affordability of care whilst upholding high quality is a cornerstone of Warwickshire's commitment to fulfilling its Care Act responsibilities. Affordable care not only upholds the quality of services but also alleviates financial burdens on individuals and the local council. Moreover, affordable care promotes inclusivity and equal access, benefiting diverse backgrounds by providing sustainable, diverse, and inclusive services that meet the needs of its residents.

Alongside the council's commitment to quality, our Commissioning and Quality Assurance teams continue to collaborate closely with Domiciliary Care providers through ongoing communication, visits and access to training to support providers to improve quality of their services.

We will continue to work closely with commissioned providers to drive quality improvement through our 'See, Hear and Act' approach through which we gather and triangulate intelligence from multiple sources to identify any quality themes or concerns. Where concerns are identified we undertake quality assurance activity to understand these in more detail and where necessary support improvements through Service Improvement Plans (SIP).

Significant concerns are escalated to Service Escalation Panel (SEP) where remedial actions are discussed, agreed and monitored. Remedial actions could include restrictions on admissions to the service until sufficient improvements have been evidenced and sustained.

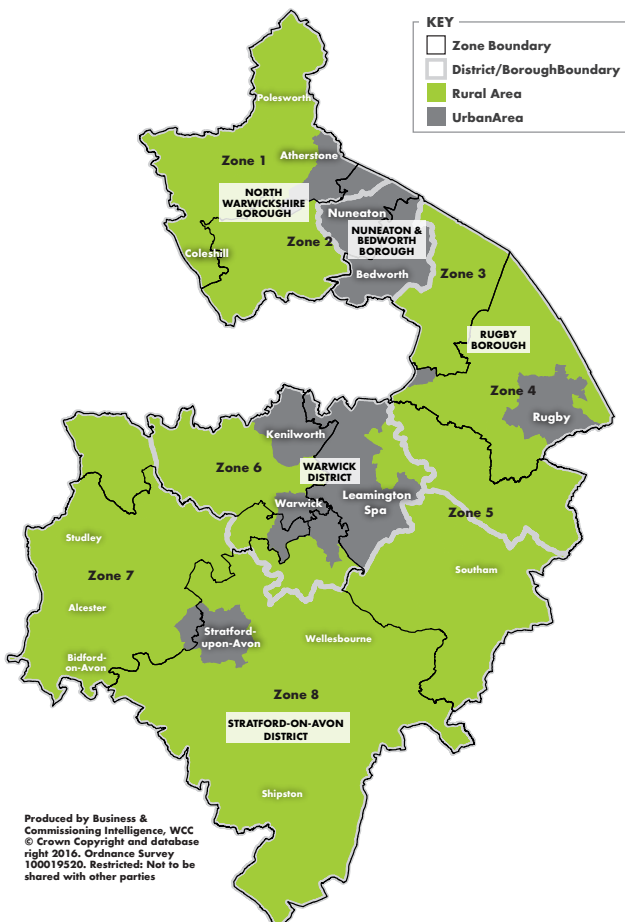
The council believes that ongoing collaboration with providers is indispensable. Such partnerships facilitate the formulation of strategies that enhance affordability, address the increasing demand for care, and align with the finite resources available for adult social care within the council's purview. This collaborative approach not only benefits the service delivery but also fosters a strong, sustainable partnership between the council and the market.

The core for success lies in a robust Domiciliary Care market that excels in delivering services with three primary goals: providing coordinated support to address diverse customer needs, facilitating quicker hospital discharges, and empowering customers to maintain their independence in their own homes.

Commissioning Intentions

The Warwickshire adult social care market faces considerable challenges, but commissioners remain committed to working with providers to ensure quality of care and sustainable services for the long-term. The commissioning intentions below outline the key activities being undertaken.

1. The current Care at Home contract has been in place since August 2016, will end in July 2024 and the service will be out to tender in early 2024. The current contract operates on a geographical zonal basis, with fixed pricing arrangements which were calculated according to whether the area is urban or rural; volumes of customers within the zone; travel requirements. Providers who applied to join the contract were invited to bid for specific amounts of business in particular geographical zones with volumes of business guaranteed. There are eight zones across the county, outlined in the graphic below, each with a proportion of urban and rural coverage. This model endeavours to maximise the time that carers spend with customers, as they will only travel within one zone thus contributing to more targeted and effective sourcing of care.



Work is currently underway to review the current service to inform the next contract model and specification. The tender is due to be published in April 2024, with the new contract due to commence in August 2024.

Micro-commissioning opportunities such as pilot schemes, smaller business opportunities, along with the retender of the main domiciliary contract will be advertised on our electronic tendering system, [CSW JETS](#) and we encourage local providers to register on the portal to ensure they are notified of these tendering opportunities.

2. In addition to the Care at Home contract, Warwickshire is one of six national pilot sites for NHS England's national Front Runner Programme, to test out models of intermediate care. As part of this programme the council, working in collaboration with health partners, have developed the Community Recovery Service (CRS) that went live at the end of April 2023.

CRS provides short-term care (up to six weeks) to a patient who requires care in their own home and also provides them with access to therapy. The service aims to:

- Ensure that care commences for more patients being discharged from hospital within 24 hours of a referral to domiciliary care.
- Support more people home from hospital with a rehabilitation and/or recovery services to increase their functional outcomes so they can remain independent for longer.

The service consolidates several previous hospital discharge pathways operating in Warwickshire including Stroke, and Home-based Therapy.

CRS is currently running as a 12-month pilot until April 2024 with a small number of providers. Prior to April the service will be reviewed and evaluated to understand the longer-term service requirement for people coming home from hospital with short term care and rehabilitation needs.

There will be decisions made about the long term model of CRS as part of the wider care at home domiciliary care offer once the pilot service has been evaluated. Therefore, there may be an opportunity for providers to tender for this service during 2024.

3. As the number of individuals living with dementia grows, there will be an escalating demand for comprehensive support services, including healthcare, social care, and community-based services. Moreover, we recognise the importance of public awareness and education about dementia, emphasising early diagnosis and intervention to reduce stigma, along with improving access to care and support for affected individuals and their families. Working together with colleagues in health WCC integrated Commissioners will be testing out a model of care to support people with delirium or cognitive impairment that require additional short-term support overnight. It is also essential that all care at home services can embed the key principles of the local dementia strategy within their service delivery including supporting people with dementia to live well at home and within their communities.
4. We are committed to supporting the care market in working more digitally and adopting technologies to improve the quality and safety of care. When supporting people or giving advice, we will ensure assistive technology is always considered, especially where it can improve hydration; reduce medication errors; reduce falls; support those with learning disabilities; support those with dementia; those with physical disabilities; those with mental health issues; and support carers. We will continue to support care providers to maximise their use of AT to ensure the quality of care and safety for customers.
5. We are committed to acting decisively to tackle climate change and the biodiversity crisis. Acting now, so that we are a county with a sustainable future, is one of the key strategic priorities in the Council Plan. We have already started work towards our goals of reducing carbon emissions to net zero across the Council by 2030 and to support us as a County to do the same by 2050 or earlier. We will be working with domiciliary care providers to assess and reduce the environmental impact of domiciliary care, with a view to agreeing a protocol/ambition which would then form part of our future contracts.
6. We will continue to work with providers to improve health and wellbeing and prevent ill health for older people, building on the recommendations in the Warwickshire Healthy Ageing JSNA. Conditions that most impact on health in later life for Warwickshire residents include cancer, Ischaemic heart disease and dementia; back pain, hearing loss, diabetes, falls and chronic obstructive pulmonary disease (COPD).
7. We will continue to work with the domiciliary care market to ensure that we are purchasing the right amount of business to meet the identified care demand. There is an ongoing commitment to get care of good quality targeted into the right geographical areas. This will continue to be achieved, through building strong business relationships with contracted providers and the wider market and ensure that there is ongoing dialogue to understand the ongoing needs of the market. This helps the council to make financial and business decisions to nurture a flexible, stable and evolving market that continues to meet the changing needs of the population.
8. We have launched several pilot schemes within the County (Restricted Mobility Pathway, Home Based Therapy Services, the Community Recovery Service etc) to trial new and innovative ways of meeting the requirements of communities, partners (e.g. Hospitals, Therapy Teams, Care Providers) and internal teams within the council. This is done in partnership with all stakeholders and Warwickshire will continue to push for evolving and improving services, that will improve the lives of its most vulnerable citizens.
9. We will move domiciliary care services to automated payment and call monitoring processes from 2024. This will allow for the removal of paper-based invoices for individual customers and enable queries to be alerted and responded to in a live system.

Resources

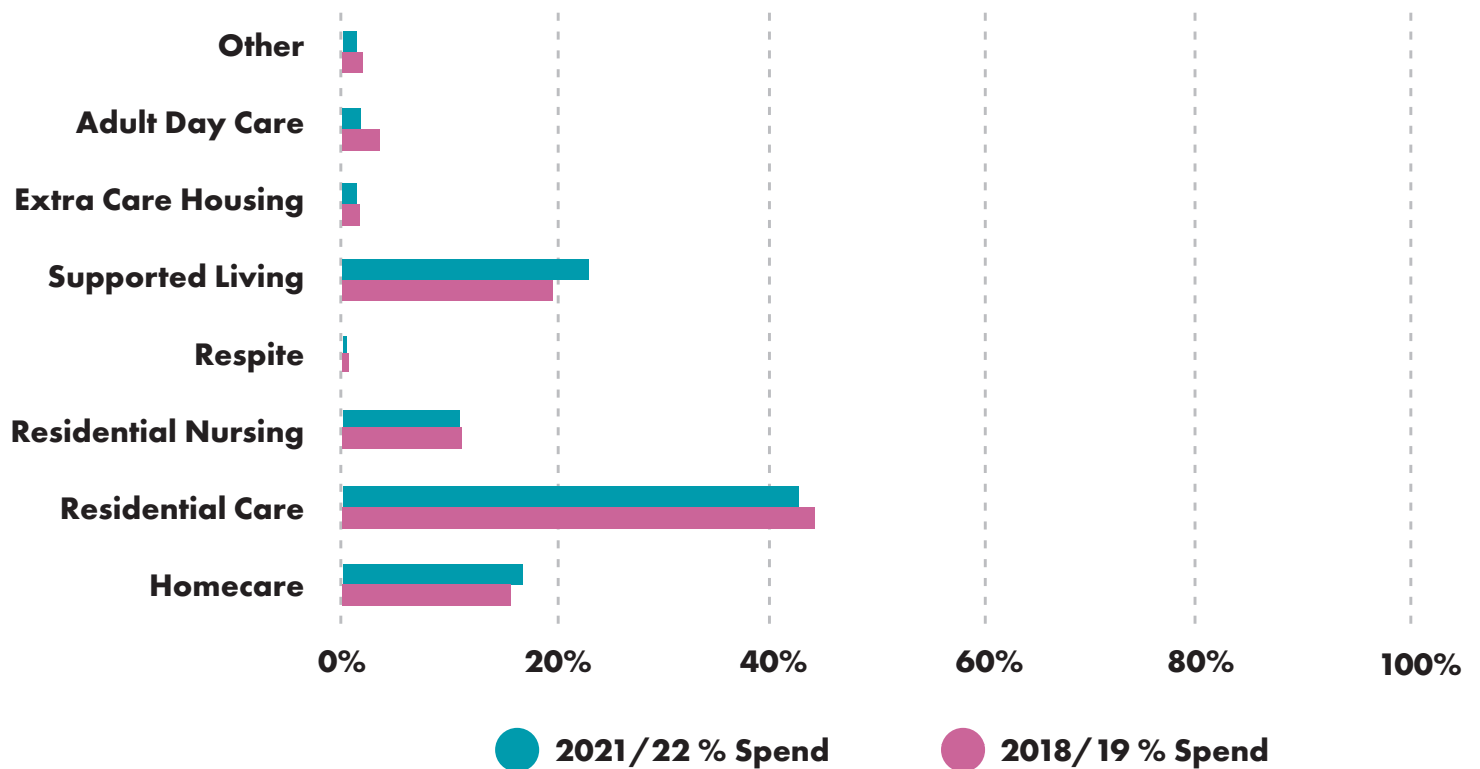
WCC Adult Social Care Spending on Direct Care

This section focuses on Adult Social Care expenditure on direct packages of care only. It does not include expenditure relating to staffing or any other area, further this excludes income. In particular, the income that eligible customers pay towards the cost of their care.

The total expenditure for adult social care services below increased from £126m in 2018/19 to £155m in 2021/22, representing a £29m increase and a 23% growth in gross expenditure. Among the various types of care, Domiciliary Care accounted for 16% of this spend in 2018/19 and 17% of this spend in 2021/22.

We have several statutory responsibilities, including setting a balanced budget. We recognise the need to remain within budget, but also to help maintain the quality, sustainability, and accessibility of adult social care services in Warwickshire.

Adult Social Care Percentage Spend on Commissioned Services



Workforce

Recruitment remains a persistent challenge within the sector. The allure of higher-paying job vacancies in other sectors, makes it difficult to attract and retain skilled workers. To overcome this obstacle, it is important to focus on enhancing the offer for prospective care workers and the council would want to join with providers and the Coventry and Warwickshire ICB in system-wide initiatives that promote the rewards of working in the care industry, such as making a positive impact on people's lives.

During, and directly following, the Covid-19 pandemic, domiciliary care services across the country faced unprecedented pressures in meeting increasing demands for services. Due to risks of direct contact care delivery, workers left the sector, and there was an increasing anxiety in the remaining workforce due to risk of contracting Covid. This saw an overall reduction in available provision and presented a deficit between capacity and demand. Working closely with providers and health colleagues, we supported the introduction of PPE delivery, facilitated information distribution about the pandemic and worked with the wider market to source care creatively and safely. Introductions of "block purchased" rotas gave providers and their staff stability in employment and saw the unmet demand levels dramatically decrease. This responsive approach was only possible due to the effective working relationships that had been established over the period of the current contracts, and we would want to establish this similar close working with all providers it does business with, now and in the future. Providers responded well and used several creative solutions to increase their workforce. This was equally supported by our effective distribution of funding to cover increases in fuel costs and financial burdens put on the market by the pandemic.

Currently a number of providers have built a successful business on the basis of effectively utilising Home Office Sponsorship licences to give opportunities to overseas workers to deliver care in the Warwickshire area. However, this is not without risk and we are currently developing resources to aid the market to apply for licences and effectively manage those licences to reduce this identified risk.

We will continue to work closely with all partners to meet the challenges presented by the delivery of domiciliary care services and develop services that are fit to cope with future changing demands and pressures.



Warwickshire and its Population

The county of Warwickshire is located in the West Midlands region. According to mid-2021 population figures published by the ONS, the population of Warwickshire was 599,153. Based on recent growth rates, it is estimated that the current population in 2023 has risen to around 623,000.

Warwickshire is at the heart of Britain's transport network and several key strategic routes pass through the county. Warwickshire currently has a two-tier Local Authority system in place with an upper-tier County Council and five lower-tier district and borough councils as follows:

- North Warwickshire
- Nuneaton and Bedworth
- Rugby
- Warwick
- Stratford-on-Avon

The population of Warwickshire is diverse, with a mix of urban and rural areas. In terms of demographics, the largest age group is those aged 45-64, followed

by those aged 65 and over. There is a relatively low percentage of young people under the age of 16, which suggests that the population is ageing. The population is predominantly White British, with ethnic minorities making up a smaller proportion of the population.

It is estimated that the population in Warwickshire will continue to grow over the coming years. The current projected growth rate suggests that the population of Warwickshire will reach around 677,000 by 2041.

In 2016, we undertook a comprehensive re-tendering of the Care at Home contract. This involved a transformation of how we commissioned domiciliary care services. Collaborating closely with providers, we introduced a geographic zone model, segmenting the service provision into 8 distinct zones. Within these zones, multiple contracted providers were allocated a share of service packages. They now collaborate with the central brokerage function to effectively manage support demands. Notably, we acknowledged the variations between rural and urban areas, a factor that significantly influenced the planning of the zones and the associated hourly rates. This strategic approach has been pivotal in optimising our services.

Please find below a summary of the zones by location.

Zone	Locations
Zone 1	Polesworth, Atherstone, Hurley, Kingsbury, Water Orton, Coleshill.
Zone 2	Nuneaton, New Arley
Zone 3	Bedworth, Attleborough, Bulkington, Exhall
Zone 4	Rugby, Church Lawford, Wolston, Binley Woods
Zone 5	Leamington Spa (North-East) , Sydenham, Whitnash (East), Southam, Long Itchington, Harbury
Zone 6	Kenilworth, Warwick, Henley-in-Arden
Zone 7	Stratford-upon-Avon (West), Alcester, Bidford-on-Avon, Oversley Green, Studley
Zone 8	Stratford-upon-Avon (East), Leamington Spa (Southwest), Whitnash (West), Bishops Tachbrook, Wellesbourne, Ettington, Kineton, Shipston-on-Stour, Lower Quinton, Long Marston, Welford-on-Avon, Long Compton, Upper and Lower Tysoe, Bishops Itchington

Population aged 65 and over, projections to 2040, in Warwickshire.

According to the latest data, the population aged 65 and over in Warwickshire is estimated to be around 145,50 in 2030. In terms of future projections, it is expected that the population aged 65 and over in Warwickshire will continue to grow, with estimates suggesting that by 2035 it will reach approximately 157,600, an increase of over 29% from the 2020 figure.

The number of people living with dementia in Warwickshire is expected to increase in the coming years, due to a combination of factors such as an ageing population and increasing awareness and diagnosis of the disease. According to the Alzheimer’s Society, there were approximately 8,760 people living with dementia in Warwickshire in 2020. This number is expected to rise to around 11,227 by 2030, and to almost 13,721 by 2040, based on current trends.

	2020	2025	2030	2035	2040
Population aged 65 and over, projected to 2040	122,000	131,900	145,500	157,600	165,500
People aged 65 and over predicted to have dementia by age and gender, projected to 2040, in Warwickshire	8,760	9,907	11,227	12,549	13,721

Warwickshire’s overall health outcomes are above the national average; however, these outcomes vary among its residents. In more deprived regions, individuals experience shorter lifespans and spend a substantial portion of their lives in poor health. Contrarily, in less deprived areas of the county, males anticipate living over nine years longer, while females expect to live five years longer than their counterparts in the more deprived regions.

Notably, people are facing an extended duration of poor health in their extended lives, with men enduring 17.6 years and women 19.3 years in suboptimal health. These discrepancies in health outcomes are avoidable and closely tied to living and work conditions, alongside lifestyle choices encompassing smoking, alcohol consumption, nutrition, and physical activity.

In the year 2021, the leading causes of death for individuals aged 65 and above in Warwickshire were cancer, followed by ischaemic heart disease among men, and dementia and Alzheimer’s disease among women. COVID-19 claimed the third position for both sexes. Importantly, many of these conditions offer opportunities for prevention and early intervention.

While numerous individuals continue to enjoy a healthy, active, and independent lifestyle in their later years, some face an escalating risk of frailty, long-term medical conditions, dementia, terminal illnesses, dependency, and disability, including falls, as they age. Furthermore, individuals from certain ethnic minority groups and lower socio-economic backgrounds are more likely to experience inequalities in aging well.

Diversity

Warwickshire is less diverse than the West Midlands region and England as a whole. The majority of the population in Warwickshire identifies as White, accounting for 89.1% of the population.

Our care records systems show that our older Domiciliary Care population appears to have a different ethnic composition compared with the wider UK population. However, the ethnicity of 10% of our

Domiciliary Care service users is undeclared. Because of this, work needs to be undertaken in this area to understand more accurately what the real diversity of care is in Warwickshire, and we will seek to work with providers to help ensure the care provided meets the specific needs of the wider community.

	WARWICKSHIRE	WEST MIDLANDS	ASC 2022/23 SERVICE USERS	ASC 2022/23 SERVICE USERS (REMOVING UNDECLARED)
Asian, Asian British or Asian Welsh (%)	6.3	13.3	3.0	3.3
Black, Black British, Black Welsh, Caribbean or African (%)	1.3	4.5	0.6	0.7
Mixed or Multiple ethnic groups (%)	2.3	3	0.5	0.5
White (%)	89.1	77	85.5	94.9
Other ethnic group (%) Undeclared (%)	1.0	2.1	0.5 9.9	0.5

For additional information please use the links provided. [Warwickshire Insights](#)

Projecting Older People Population Information System (POPPI), Oxford Brookes University Institute of Public Health (other data sources are available) [POPPI](#)



Current Capacity, and Forecasted Demand

Current Domiciliary Care provision

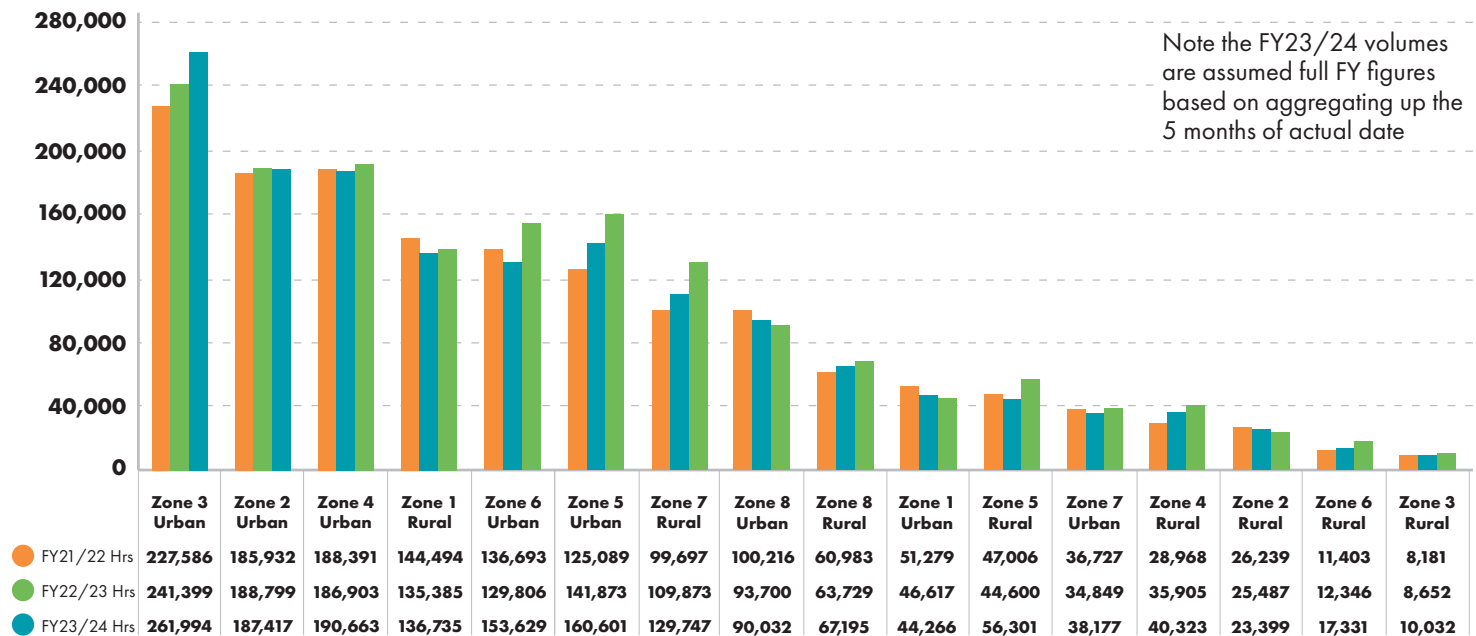
There are 21 providers on the zonal contract and 29 registered spot providers with the majority of these registered in Warwickshire and the remaining based in the wider Midlands including Coventry, Leicestershire and Solihull. Together they help to provide a total of 1.5m hours of care in 2022/23 which is expected to increase to approx. 1.6m hours in 2023/24.

Number of hours delivered in each zone.

Of this, during Financial Year 22/23, Zone 3 Urban (Bedworth, Attleborough, Bulkington, Exhall), recorded the highest delivered hours with 241,399 hours, which is 21.8% higher than the next highest zone. Urban Zones accounted for the top 4 zones in terms of delivered hours, representing 50.5% of the total hours delivered. The bottom 7 Zones had fewer delivered hours overall than Zone 3 Urban Financial Year 22/23. We can also see that total hours delivered increased by 7.2% from Financial Year 22/23 to Financial Year 23/24 YTD which is an increase from the 1.4% increase from Financial Year 21/22 to FY22/23.

Please note the total number of hours does not include Community Recovery Service hours for Financial Year 2023/24.

Total hours delivered by Zone and FY - Excluding CRS



Future Demand

The graph below shows the total number of hours for our domiciliary care service users in Warwickshire between 2020 to 2023 and the projected growth thereafter to 2026. Over the years, there have been significant change in the total number of Domiciliary Care hours. In April 2020, there were 25,618 hours of care provided. By April 2023, this number increased by 17% to 28,849 hours, indicating a growing demand for in-home care services. It is projected that in April 2026, the total number of hours will rise further to 35,293, representing a 38% increase compared to April 2020

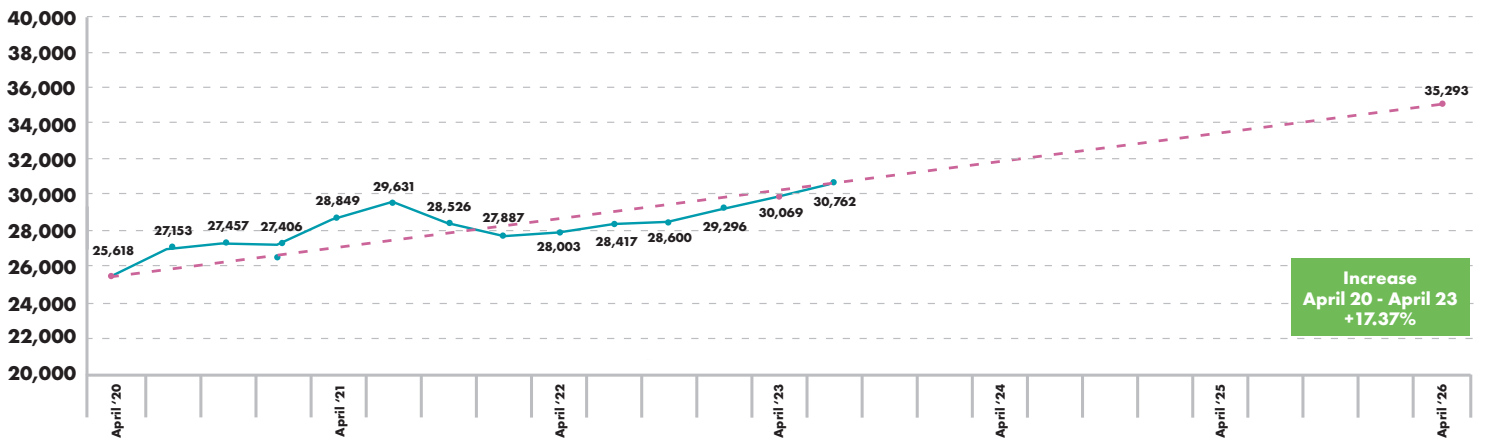
These percentage growth figures suggest a rising need for domiciliary care services in Warwickshire. Several

factors may contribute to this trend, including a growing aging population and evolving healthcare requirements.

COVID-19 has further complicated the forecasting of future trends. The pandemic caused significant disruptions in healthcare service delivery. The dynamic nature of the pandemic and its impact on healthcare needs has made it challenging to predict future trends accurately.

As a result, understanding and forecasting the future demand for domiciliary care in Warwickshire necessitates a comprehensive approach, considering both pre-pandemic and post-pandemic trends, and collaborating with healthcare providers and Domiciliary Care providers to gather valuable insights into these evolving demands.

Active weekly hours on snapshot dates



Time to source packages of care.

The graph below illustrates the average sourcing times by Financial Year for comparative analysis. It's important to recognise that the Zone with the longest average sourcing time may change between financial years. What is apparent is the substantial contrast in sourcing times between Urban and Rural zones, highlighting the challenges faced when sourcing care packages in rural areas.

It's encouraging to note that the gap between Urban and Rural sourcing times has notably

narrowed, however, we remain attentive to the potential issues providers encounter when sourcing packages in specific rural zones.

The data highlights a positive trajectory of decreasing average sourcing times across financial years, indicating enhanced efficiency in the sourcing process, along with the requirement to source CRS packages of care with 24 hours. While most zones have shown significant reductions in average sourcing times, Zone 6 Rural presents an opportunity for further enhancements to optimise sourcing efficiency in FY23/24.

Sourced package average waiting days by Zone & FY - Including CRS



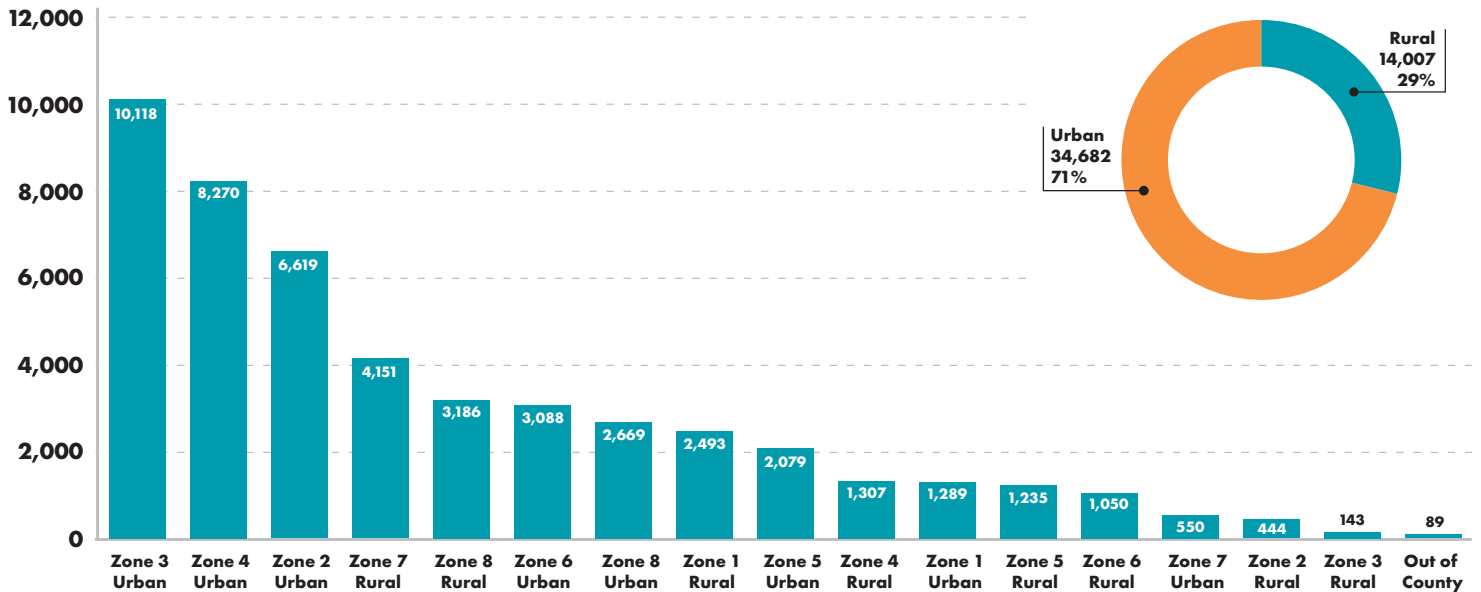
Community Recovery Service

The CRS Programme aims to provide Warwickshire residents with increased opportunities for 'homefirst' support after hospital discharge. It establishes a single access point for the service, facilitating quick discharge and home assessment for more individuals. Therapy is available during the assessment of their longer-long-term care needs, with an ambition of discharging more people within 24 hours of referral.

This will enable access to a mix of domiciliary care and therapy support at home, which is free for up to 6 weeks, to allow patients to regain and maintain their independence or to maximise recovery post hospital admission. The Council is commissioning domiciliary care in a different way, using pre-paid blocks of domiciliary care, to ensure flexibility and a reablement ethos for the individual at home, rather than in hospital.

The table below shows the number of hours delivered for CRS between April to August 2023. This shows that the most common zone for referrals is Zone 3 followed by Zone 4 and Zone 2 which matches that of the number of domiciliary care hours sourced to date.

Total CRS delivered hours by Zone FY23/24



Summary

The Market Position Statement provides an overview of Warwickshire County Council's approach to market development, its commitment to achieving positive outcomes, strategic intentions, and the financial context within which it operates. Collaboration, sustainability, and innovation are underscored as crucial elements in the provision of care services in Warwickshire.

Moving forward, the Council will continue working closely with its Health and Social Care partners to integrate services and ensure the delivery of high-quality care and support in the most suitable settings, with a focus on minimising hospital admissions. Technological advancements and innovation will be leveraged to transform commissioned services, enabling service users to receive personalised care. This involves ongoing development of digital platforms and the utilisation of Assistive Technology (AT) to promote independent living.

Furthermore, the Council recognises the importance of its voluntary and community sector partners in addressing social care challenges and meeting the diverse needs of communities. It will actively collaborate with these organisations, fostering innovation and seeking to strengthen partnerships to enhance the well-being of citizens in the years to come.

Useful Contact Details

If you would like to be alerted when tendering opportunities arise at Warwickshire County Council, we would encourage you to register your organisation with [CSW-JETS](#) which is the electronic procurement portal used by Warwickshire County Council and other local Councils to advertise tendering opportunities.

If you would like to enquire about opportunities to open or consider new services in Warwickshire, please email: marketmanagement@warwickshire.gov.uk

Warwickshire Climate Emergency Warwickshire Climate Emergency – [Warwickshire Climate Emergency](#)

Social Care Information and Learning Services is an online learning resource/community dedicated to the Health and Social Care Sector. [Social Care Information & Learning Services \(SCILS\)](#)