

## **Health and Social Care Partnership Moray**

### **Care Home Sustainability**

#### **Q1 What impact does the recent announcement of the closer of 12 residential care homes have on your area?**

Bield has no care home provision in Moray. We do not anticipate any direct impact in Moray.

#### **Q2 Are there concerns regarding the sustainability of residential service provision (in your area)? and if so, how could they be addressed?**

Scotland Excel is carrying out work on the sustainability of the care home market in Scotland. They have the overall picture across Scotland on sustainability, cost and quality. Health and Social Care Moray are part of the User Intelligence Group for this work.

In Moray we currently have 14 care home services for older people. 2 provide residential care only. One of the residential care homes is run by a voluntary organisation.

Most of our providers are local businesses that cannot get the economies of scale large care home providers can and this impacts on the financial viability of their business model.

Similar to all providers within the care sector, recruitment and retention of suitably trained/qualified staff continues to be significantly challenging within Care Homes, particularly in the rural localities like Moray. The national workforce plan will hopefully address the issues around recruitment and retention of qualified staff.

We are actively working on keeping people at home for as long as possible and have developed a number of new services in Moray to allow this to happen. However the care at home market is also challenged by recruitment and retention issues.

The development of the NCHC has been of particular benefit to smaller, rural authorities like Moray. We benefit from standardised rates, quality standards, workforce matters and quality improvements. We also like that local variations can be made to the NCHC to meet our particular commissioning needs.

A key element within the reform of the NCHC is the development and agreement of a robust "Cost of Care" Calculator which is endorsed by all stakeholders. We are keen to see the end result of this work.

We strongly endorse the need to maintain a national contract and rates, whilst recognising there is a need for the flexibility of local variation. If we moved away from a nationally agreed rate individual negotiations with providers would be required, this would be a costly undertaking. These negotiations would also be difficult for the providers to ensure they secured an appropriate rate tailored to their individual requirements. However there needs to be clarity regarding fees, related to dependency and outcomes, to ensure there is no misunderstanding between nursing, residential and enhanced care fees.