

Care provision, integration and continuity

Indicative score:

3 - Evidence shows a good standard

What people expect:

"I have care and support that is co-ordinated, and everyone works well together and with me."

The local authority commitment:

We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.

Key findings for this quality statement

Staff locality teams worked across 3 areas of the county that were aligned to the previous clinical commissioning group areas. Improvements had been made in sourcing care for people across areas by using a brokerage team. This team had worked successfully in reducing homecare waiting lists for teams and in supporting people coming out of hospital. This was in part due to the use of a care 'bridging service' for people to then transfer to a permanent care provider when one was available. Senior staff told us waiting lists had been very large following the COVID-19 pandemic but were now reduced and they were proud of this achievement. People who funded their own care were also supported with advice and information by the brokerage team to enable them to access the full range of options available.

To offer people more personalised care, there was an aspiration to increase the use of direct payments from 14% currently to 70%. Direct payments allow people to receive money instead of care services, which can give them more flexibility and control over the care support they use. A direct payment project team had been formed to lead this work and staff explained they had met with some other local authorities who did this well, to learn more from them. Increasing the confidence of staff in relation to direct payments was one area identified as being needed. Linked to this, a 'Community Catalysts' project worked with the local authority to try to increase the local care options for people and increase the opportunities for those who might take up a direct payment.

Staff wanted to get the best opportunities for the care providers they worked with and for people using services. There was a planned approach to develop relationships with care providers and help develop services. For example, in September work was planned with providers focusing on how individual budgets might work best for people.

Ratings of care services in Suffolk were higher than the national average, particularly for services rated as outstanding. The number of services rated as good was similar to the national average and services rated as requires improvement was lower. Local authority staff told us they worked closely with care providers in relation to quality assurance, but felt engagement with them could still be further improved.

Recruitment and retention of care staff remained an issue for both the local authority and care providers. Staff told us about innovative approaches to attract care staff, including a £750 payment made by the local authority for new carers after being in post for 12 weeks. To date, 246 people had received this and there was a 90% retention rate for staff remaining in post after 3 months. Support for care staff with the use of e-bikes and driving lessons had also been used to enable staff to provide care in the community, as transport links in rural areas were particularly challenging.

Gaps were identified in relation to several areas of care provision by staff and partners. Nursing care could be difficult to find, particularly in the Waveney area, and homecare was difficult in some rural areas. A learning disability needs assessment completed in 2022 identified a lack of good quality care providers for this type of complex need. There were gaps in services for younger people with dementia and neurological conditions. A lack of care provision could result in people being placed out of the county, making it more difficult for family and friends to visit. In May 2023, 298 people were placed out of county in residential or nursing care. The local authority told us it felt it had a good understanding around the availability of services and gaps, in part due to some work that had been co-produced with some local voluntary partners.

The 2023 Healthwatch report of people's experience of dementia in Suffolk contained themes such as a lack of continuity of care and people feeling like they needed someone to explain the options to them more clearly. The local authority was using this research to develop its dementia strategy alongside Healthwatch. Healthwatch is the consumer champion for health and care and exists to ensure the voices of people who use services are listened and responded to, leading to improvements in service provision and commissioning.

A redesign of supported housing was planned as this was found to be less suitable for people with a learning disability and autistic people, as they grew older. The majority of this was multi-person housing supporting 3 or 4 people, which did not always meet people's needs currently. There was also an increasing number of young people with complex needs moving across into adult's services. The local authority was gathering feedback to help design these plans and further work was being carried out with the district and borough councils to look at the links between housing and social care needs. Challenges included the need for 1,000 extra care housing units as well as smaller accommodation units for people. Senior staff told us these challenges could mean having difficult conversations in the future.

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