

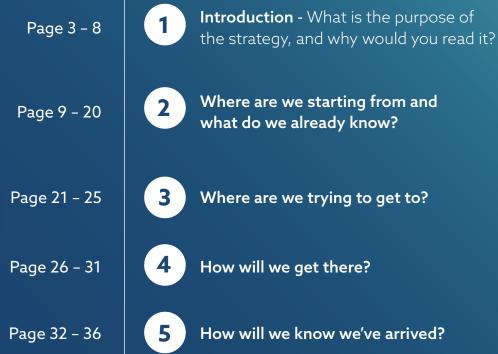
## Suffolk Care Market Strategy

2025-2030





## Contents





## Introduction



#### Foreword



**Cllr Beccy Hopfensperger** Cabinet Member for Adult Care

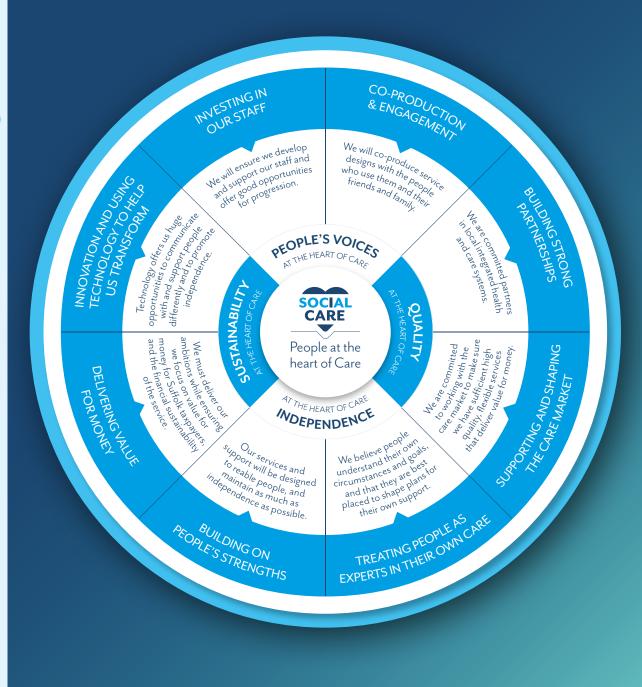
I am excited to be introducing our new five-year Care Market Strategy for Suffolk. This strategy outlines how Adult Social Care intend to work with the care market to deliver our strategic ambition to put People at the heart of Care, supporting people to live full and independent lives in Suffolk. We know that there are some substantial challenges to address. The population of Suffolk is expected to grow with a significant increase in the older population, and a corresponding increase in those requiring care and support. Where care and support are required, we will continue to see more people with higher additional needs. We know providers of care and support have concerns around the sustainability of their workforce, both now, and to meet future demands. All are seeking to provide high quality care and support, within an increasingly challenging financial environment.

However, the opportunities to work with people to ensure they receive more personalised care and support, have never been greater. This includes people having more choice and flexibility around how and when their needs are met, through the increased use of Individual Budgets. There is greater potential to diversify the care market, including the use of micro-enterprises. Technology is providing new and innovative ways to support people and work more creatively and smartly. Finally, Adult Social Care is increasingly working to commission care and support to meet the outcomes that really matter to Suffolk residents.

I am truly grateful to all those who have been involved in the production of the strategy – those who are currently receiving care and support, our partners and our care providers – all of whose views are reflected in the strategy. Thank you also in anticipation of your help in delivering this exciting and valuable work.

## Purpose of the Care Market Strategy (CMS)

- To set out the ambitions of Adult Social Care (ASC), including our approach to market shaping, and how ASC will work with and support the care market to meet the needs of Suffolk residents
- This is a five-year strategy running from 2025-2030
- The CMS will support the Council's wider ambitions for Suffolk including:
  - Looking after our health and wellbeing
  - Protecting and enhancing our environment
  - Providing value for money for our residents
  - Strengthening our local economy
- The CMS will support the delivery of our ASC <u>"People at the heart of Care"</u> strategic ambition, which sets out how we will support people to live fulfilling and independent lives in Suffolk. This will be delivered through the four strategic outcomes and eight key transformation principles shown on the Care and Support compass opposite.



### Where does the Care Market Strategy sit within Adult Social Care?

- The CMS is heavily informed by other co-produced strategies within ASC including:
  - Suffolk Dementia Strategy & action plan 2024-29
  - Suffolk All-Age Autism Strategy & action plan
  - Suffolk All Age Carers Strategy & action plan 2022-27
  - Joint Learning Disability Strategy Refresh 2021
  - Mental Health and Emotional Wellbeing Strategies:
    - <u>East and West Suffolk Mental Health and Emotional</u> <u>Wellbeing 10 Year Strategy 2019-29</u>
    - Norfolk and Waveney Adult Mental Health Strategy
  - Accommodation Strategy due to be published later in 2025



#### Who are the care market?

- For the purposes of this document, the care market includes all providers of care and support to the residents of Suffolk, including the Voluntary, Community, Faith and Social Enterprise (VCFSE) sector, and micro-enterprises
- This includes those providers who are not required to be registered with the Care Quality Commission (CQC), in addition to providers and organisations who are not currently commissioned by Suffolk County Council (SCC)

#### Why do ASC engage with the care market?

- Because we value the care market, the role it has in the health and care sector, and recognise the opportunities for economic growth and development
- To meet our statutory responsibilities under the Care Act (2014), to ensure people can access the care and support they need, and to cultivate a market with a variety of high-quality services for **all** residents (including people who pay for their own care and support, sometimes known as "self-funders")
- Our Service Development and Contracts (SD&C) teams within ASC, have responsibilities for oversight of the care market, market shaping, and contract management, including quality assurance

## Who has informed this strategy?

Much of the content of this strategy has been informed by learning from the co-production of the aligned strategies previously referenced, and through engagement with:

- People including those receiving care and support and their carers, recognising the value of their lived experience
- Providers in addition to the relational approach ASC takes to contract management, we have reflected the concerns, hopes and ambitions we have heard from providers at dedicated countywide events.
- Other relevant organisations, such as the Suffolk Care Association, Care Development East and Healthwatch Suffolk
- The Voluntary, Community, Faith and Social Enterprise (VCFSE) sector
- Integrated Care System partners including Integrated Care Boards (ICBs), Alliances, the Great Yarmouth and Waveney Community Collaborative and district and borough councils
- Adult Social Care Service Development and Contracts teams, practitioners and management teams





## Where are we starting from?



#### The current position

ASC is responsible for delivery of care and support to those most vulnerable, and often with the least financial resources. ASC plan to spend **£387.3m** alone in 2024/25 on long-term support. However, we know that the care market extends much wider than Social Care spend. On average ASC has approximately **10,550** people receiving a service. **1,137** will manage their own care by way of a direct payment, giving them more choice and control over how care is delivered.

ASC purchase care and support from over **550** providers in Suffolk, who deliver a diverse range of services such as Care Homes, Extra Care Housing, Community Services, Home Care and Supported Housing. ASC currently has **2,438** people in nursing home and residential care home placements with an annual spend of **£118m.** This represents **35%** of the market share of **6,887** beds within care homes for older people in Suffolk. Our allocated contract managers within ASC work directly with providers to monitor, develop and shape support based on what people receiving care and support say.

As of the beginning of March 2025, Suffolk had **416** Care Quality Commission (CQC) registered locations (**193** residential care services and **223** community-based services), and **154** non-regulated services contracted by ASC. Of the services in Suffolk who are CQC regulated, **70.5%** are rated outstanding or good, against a national average of **65.5%** and eastern region average of **61.5%** 

The care market is the third largest public service (behind NHS and Education). In addition to providers delivering care and support, it includes housing associations, private businesses and the VCFSE sector.

### Adult Social Care spend

- The Council continues to face a significant budget challenge, as do many other local authorities
- It is assumed that ASC will have to meet an increasing demand for care and support, both in terms of numbers and level of need, whilst managing a reduction in funding
- This can only be achieved by ASC working differently with the care market to support with implementing significant changes. This includes reducing the prevalence of traditionally commissioned services, promoting a more personalised offer through the introduction of outcome-based commissioning, and giving people more choice and control through an increased use of Individual Budgets
- ASC wants to ensure services are sustainable and offer improved value for money by supporting care providers to embrace innovation such as a greater use of digital technology both within their organisations, and in the delivery of care and support services
- A shift in priorities will lead to a shift in spend



#### Adult Social Care spend: Shifting our priorities (2024/25 spend)



## The county of Suffolk – demography and inequalities

- Suffolk has a population of 776,442 residents
   Office for National Statistics (ONS) mid-year 2023
- It has a mix of urban and rural areas, with some significant towns including the county town of Ipswich, in addition to Bury St. Edmunds, Lowestoft and Newmarket
- However, only 55% of the population of Suffolk live in the largest 10 towns
- Although the high rural population of Suffolk can bring physical and mental health benefits for many, it also presents challenges. For example, those who live in small villages, may find accessing services more complicated than those living in large towns where transport is more available. They may also experience more isolation and loneliness
- The rurality of the county can also make it more difficult to recruit to the care market workforce

 In terms of ethnicity, 93.1% of the population broadly identify as white (compared to 86.5% regionally and 81% nationally)

lpswich

**Bury St Edmunds** 

Lowestoft

- Suffolk has a smaller population of people living in greatest deprivation compared to the English average, (it is the 53<sup>rd</sup> least deprived of the 151 upper tier authorities in England). However, 10.5% of Suffolk residents still live in deprivation in our county
- *Healthy* life expectancy is lower for those who are born in areas that are more deprived. Although our situation in Suffolk is better compared to the national average, there is some evidence that this is declining
- An increasingly ageing population may also increase the risk of more health inequalities to Suffolk residents – and leads to more pressure on services

### Known current and future demand challenges (as of 2024/25)

#### The population of Suffolk is growing and ageing

- Suffolk's total population is projected to increase by nearly 8% over the next 20 years - but the number of older people is expected to increase by 38% (Suffolk in 20 years 2025)
- According to Office of National Statistics (ONS) data from 2020, East Suffolk has the oldest age profile of all the Suffolk districts with 27.7% of the population estimated to be over 65

#### This gives rise to more people with care and support needs, including a significant increase of those with higher additional needs

- By 2043, 1 in 3 residents will be over 65 years old, and 1 in 5 over 75 years old, many of whom will have multiple conditions. We know multi-morbidity is a key driver of cost.
- In 2020 around 13,000 people living with dementia, by 2040 this is estimated to be 21,000

- As the population increases, so the number of people with mental health conditions is likely to increase proportionately, and the prevalence of these conditions may also increase. In ASC we have seen an increase of 60% in the numbers of customers with mental health conditions since April 2022, with 1,956 people identified in September 2024
- The institute of Public Care estimated that in 2020 there were **14,212** people in Suffolk with Learning Disabilities (LD) aged 18 and over. The number of people known to ASC was much lower with **2,640** people aged 18 having an LD as a primary need in 2020-21.

(Learning-disability-needs-assessment-2021-summary.pdf)

#### There will also be a corresponding increase of unpaid carers, potentially with their own support needs

- The 2021 Census identified 65,103 unpaid carers in Suffolk of all ages. The number of unpaid carers is expected to increase by 3.4% between 2020-2040, particularly impacted by the significant increase in the numbers of people aged 75 and over
- Projections suggest that the number of people aged 65 and over who provide unpaid care in Suffolk will increase between 2019 and 2035, from 25,300 to 33,700 (an increase of 33%)



## Workforce and Market sustainability challenges



- 1 in every 17 of the jobs in Suffolk is in care
- 84% of the care workforce in Suffolk is female, with an average age of 44 years
- For 2023/2024 there were approximately **26,000** posts available in the Suffolk care market, broken down as follows:
  - 24,000 filled posts a 2% increase from 2022/2023
  - **1,800** vacancies a **18%** reduction from 2022/2023
- It is estimated that between 192,000 242,000 more posts will be required in the Eastern region between 2022/23 - 2035 if the workforce grows proportionally to the projected number of people aged 65 and over. For Suffolk, this would equate to an extra 6,700 jobs

- The current gap in workforce is being supported by a large influx of international staff (approximately
   600 – 700 in Suffolk). This is not a long-term solution and comes with many challenges
- Attracting people into the care sector is likely to be more difficult due to the falling number of working age people, together with perceptions and experiences of employment within the sector

#### People's voices – What are people telling us?

Source: Healthwatch Suffolk My Care at Home survey 2023/24

It is important to people that they are kept updated with any changes to their care and support It is important for people to feel listened to and heard, and be communicated with in a way they understand

Regularity and consistency of care/ carers is important

Some of the terminology used by social care is confusing, for example people not understanding what is meant by a "care plan?"

**75%** of people felt overall that the allocated time for their care visits was appropriate, but **60%** said that they did not routinely receive the full duration of care People rightly expect that (paid) carers will be trained and confident at managing their needs. For home care, training on communication, hearing aids, surgical stockings, food safety and stairlifts were specifically identified as being important

People appreciate, and should expect to be treated with kindness, dignity and respect

> People value carers having time to talk with them and not feeling rushed/pressured by short visits

### People's voices -What are people telling us?

e.g. through co-production of strategies

Unpaid carers feel they are not always recognised or heard, and have to keep telling their story

(Suffolk All Age Carers strategy)

"It always feels like health blame social care, social care wants health to take it up and there's no accountability"

(Unpaid carer, Healthwatch Suffolk report "A roundabout without signposts" May 2023)

#### Care and support work well when they are tailored to individual needs

People value flexibility and choice in their care and support

(Feedback from an unpaid carer Individual Service Fund (ISF) Pilot

workshop September 2023)

<u>(Healthwatch Suffolk report</u> <u>"A roundabout without signposts" May 2023)</u>

People are often unsure and confused about where to go for help and support

<u>(Healthwatch Suffolk report</u> <u>"A roundabout without signposts"</u> <u>May 2023)</u>

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Housing should be major activity

(Suffolk Joint Learning Disability Strategy) "We are not a crisis intervention team, we are a care home. We need the right levels of training and support from other professionals when people are in distress"

<u>(Care home manager</u> Suffolk Dementia Strategy)

" I don't care whose role it is - I just need help"

(Unpaid carer, <u>Suffolk Dementia Strategy</u>)

### Providers' voices – What are providers telling us?

Source: Adult Social Care Workforce Development workshop - October 2023

Concerns about the quality of applicants for social care posts

Providers are worried that they are experiencing longer

hours, more complex

care and greater

medical needs

Providers are concerned about staff mental health and wellbeing

Providers value having clear career pathways and opportunities to progress A dedicated, sustained and properly resourced campaign is needed, to promote care as a worthy career choice

The potential impact of

International Recruitment is a key concern

A review is needed of how to break down the obstacles between health and social care e.g. how to support people with diabetes More guidance and direction are needed on the level of training considered to be mandatory training, to avoid wasting staff time

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Being able to attract (and retain) good quality staff by offering a real living wage is important – more money needs to come into the sector to deliver this

#### Providers' voices – What are providers telling us? Other sources...

Home carers like being able to help others and make a positive difference

(Healthwatch Suffolk "My Care at Home" Homecare workforce survey 2024)

Providers are excited about the opportunities of outcome-based care, however, feel that further thought is needed on how to offer the flexibilities required by this

> (Homecare Provider workshop Waveney November 2024)

Home carers are concerned that commissioned care is not always assessed correctly to allow enough time to provide personalised care

<u>(Healthwatch Suffolk "My Care</u> <u>at Home" Homecare</u> workforce survey 2024) Home carers feel that their wellbeing would be improved by regular check-in's with their employer

(Healthwatch Suffolk "My Care at Home" Homecare workforce survey 2024) Providers feel that people may be concerned to take on the additional responsibilities of managing an Individual Budget and will need support with this

(Homecare Provider workshop Waveney November 2024)

"A lot of (home) carers feel overworked and underpaid. The pressure from calls and texts every single day about working more is relentless"

(Healthwatch Suffolk "My Care at Home" Homecare workforce survey 2024)

Providers are interested in exploring and co-producing ways to give people more choice and control

> (Individual Service Fund (ISF) Pilot workshops)

Providers often experience delays in seeking decisions around increases or decreases to care, creating further issues with capacity

(Provider workshop Ipswich and East November 2024)

#### Adult Social Care - What are our worries?

We know that even with what we are currently spending and doing, we still have some significant challenges, and these will only increase due to our known future demography, including an increasingly older population, and higher levels of need overall.

#### We are specifically worried about a lack of:

- Suitable accommodation and support for people with higher additional needs, with a focus on promoting independence
- Specialist and nursing provision for people with dementia
- Support for higher additional needs including young onset dementia, people affected by neurological illness, and autism
- A range of replacement care (respite) options for unpaid carers, including carers breaks
- Flexible and urgent support
- Alternative community-based solutions that are local to people, and offer value for money

#### In addition, we need to consider how we best:

- Work with others, including the Voluntary, Community, Faith and Social Enterprise (VCFSE) sector to help people live well for longer, and prevent the need for more intensive support
- Ensure support is more integrated and co-ordinated
- Work with, and shape, the care market to ensure it understands the personalisation agenda, and has the infrastructure and flexibility in place to deliver on this
- Encourage a strengths-based approach
- Improve an understanding of the potential of technology, including digital care
- Encourage and support new and innovative approaches

We know that we will need to work closely and more smartly with our care market to address these gaps and challenges, and to ensure we are best placed to meet the needs of Suffolk residents, now and in the future.





# Where are we trying to get to?



## Adult Social Care – Our vision for the Suffolk care market



We need significant change for the care market to align with the principles of our People at the heart of Care strategic ambitions;

- An outcomes-focused approach to commissioning care and support at a strategic and individual level
- Reducing the amount of care ASC commissions on behalf of people, by supporting personalisation with an increased use of Individual Budgets, including direct payments and Individual Service Funds (ISFs), giving people more choice and control in how their care and support needs are met
- Expanding the range and diversity of care and support available, including increasing the number of microenterprises
- Empowering people to act as consumers in choosing their own care and support to meet their needs and outcomes, assisted by the availability of wider choice and good information
- Working to ensure appropriate support for people with higher additional needs – across all service areas and locations

- Acting quickly and more flexibly to prevent people going into hospital unnecessarily
- Ensuring that there is sufficient capacity and provision to enable people to leave hospital when they are medically fit including giving people sufficient time and opportunity to achieve and / or regain their full potential by taking reabling approaches
- Supporting unpaid carers, including increased availability of carers breaks of varying types and duration
- Exploring, embrace and embed innovative practice, including the use of technology
- Having a workforce which is skilled, equipped, and confident, to meet the differentiated needs of Suffolk residents
- Ensuring sustainability, including looking for creative and innovative ways to respond to new and increased demand, and opportunities for providers to develop their businesses (including those offered by self-funders)

### What needs to change?



#### **Current state**

#### Commissioning activity defined by metrics

People reaching crisis, necessitating more urgent and costly support, which is not always available or suitable to meet needs. This can often lead to the breakdown of unpaid care, and an increase in costs

Predominance of commissioned care and support, based heavily on time and task, and with little flexibility to meet individual needs

A lack of diversity and flexibility in care and support options

A lack of provision for those with higher additional needs across all settings, necessitating expensive individual care and support packages to meet needs



#### **Our ambitions**

Outcome-focused commissioning directly aligned to the ASC strategic outcomes of People at the heart of Care

More preventative support to avoid crises where possible. However, where urgent support is required, this should be more flexible and responsive (and include support for unpaid carers)

More personalised offers, where people have more choice and control over their care and support, including the use of Individual Budget options, such as direct payments or Individual Service Funds (ISFs)

Diverse and flexible services including an increased number of micro-enterprises

More universal services for people with higher additional needs across all service areas and locations

#### What needs to change? (continued)



#### **Current state**

"Doing to / for" approaches to care and support, and a lack of opportunity to reach / achieve their full potential

A lack of diverse accommodation options in varying locations, to enable people to live with appropriate and proportionate support

A fragile workforce with varying levels of skills and confidence, specifically around responding to those with higher additional needs

Limited use of technology (including digital care), to increase efficiency and support care

Increasing care costs that compares poorly with neighbouring local authorities



#### **Our ambitions**

More enabling approaches, with a focus on promoting and / or maintaining independence and wellbeing

Different models of accommodation with support "the right home for me" in the right locations to meet people's needs

A skilled and competent and sustainable workforce, which is equipped and confident to meet the differentiated needs of Suffolk residents

Technology fully utilised at every opportunity, including the use of digital care

Care purchasing spend will be in line with regional benchmarking

## Our plans will deliver...

Outcomefocused commissioning

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More services for people with higher additional needs

> Technology fully utilised at every opportunity

Increased use of Individual **Budget options** 

More preventative support

A focus on promoting and / or maintaining independence and wellbeing

Different models of support in the right

Better support for

unpaid carers

Diverse and high-quality services



ASC spend in line with benchmarking

accommodation with locations

A skilled workforce

Services which offer

value for money and are sustainable



## How will we get there?



## Shaping the care market to deliver change

There must be a fundamental shift in the way ASC work with and shape the care market in Suffolk, which will require energy and commitment over the next five years.

There are key enablers to help us move towards achieving our ambitions:

- Commissioning outcome-based services, both at a strategic level (to meet the outcomes of People at the heart of Care), and at an individual level (moving away from time and task)
- Continuing with the relational approach to contract management
- Applying the principles of co-production to all we do
- Encouraging innovation in the range of care and support available, and how it is delivered

The following four pages identify some of the ways ASC will support and shape the care market.



## People's voices at the heart of Care



Transformation principles	How will these be delivered?	Examples of activity
Co-production and engagement	<ul> <li>Using our co-production guidance to inform how we engage best with people with care and support needs, including unpaid carers</li> </ul>	<ul> <li>Promoting advocacy to ensure all voices are heard</li> <li>Accommodation and support - redesigning the offer</li> </ul>
Investing in our Service Development and Contracts staff	<ul> <li>Ensuring our staff are properly trained and have the required skills and knowledge to deliver a robust and risk-assessed approach to contract management, to ensure the delivery of safe and high- quality services</li> <li>When commissioning new services, our staff will have a good oversight of the care market, emerging trends, and innovative services, to bring new ideas into Suffolk based on what works</li> </ul>	<ul> <li>Skills matrix including progression planning</li> <li>Using data from our Business Intelligence dashboard</li> <li>Initial response to safeguarding enquiries (Provider concerns)</li> <li>Roll-out of our new contract management tool, Provider Assessment and Market Management Solution (PAMMS)</li> </ul>

## Independence at the heart of Care



Transformation principles	How will these be delivered?	Examples of activity
Building on people's strengths	<ul> <li>Ensuring a greater focus on what the person requires to maintain, or improve, independence</li> <li>Working to ensure sufficient capacity for people to move out of hospital in a timely manner, and be supported either at home or in a care home bed, to further assess their capabilities</li> <li>Supporting providers to identify opportunities to increase independence through the provision of equipment and / or digital care</li> </ul>	<ul> <li>Inclusion of a new lot for reablement in the Locality Home Care Framework</li> <li>Availability of Discharge to Assess (D2A) and temporary assessment beds</li> <li>A greater focus on enablement and progression for working age adults</li> </ul>
Treating people as experts in their own care	<ul> <li>People will be given opportunities to have more say in their own care</li> <li>Supporting people to make informed choices, through the provision of good quality information, advice and guidance</li> </ul>	<ul> <li>Give people different options for funding and arranging their own care and support e.g. Individual Service Funds (ISFs), micro- enterprises, Care Finder</li> <li>Expand the range of information available, including Suffolk Marketplace and Suffolk InfoLink, so people can make more informed choices</li> </ul>

## Quality at the heart of Care



Transformation principles	How will these be delivered?	Examples of activity
Building strong partnerships	<ul> <li>Valuing and working together with strategic partners, and recognising the role of the wider Voluntary, Community, Faith and Social Enterprise (VCFSE) sector</li> <li>Taking a place-based approach to care through greater involvement with Integrated Neighbourhood Teams (INTs)</li> </ul>	<ul> <li>Seeking to jointly commission residential and nursing bed placements with the Integrated Care Boards (ICBs)</li> <li>Increasing focus on working at a place-based level with care providers</li> </ul>
Supporting and shaping the care market	<ul> <li>Allocated contract managers adopting a relational and proportionate approach to contract management</li> <li>Using a sound evidence base to shape and support the workforce through recruitment, retention and training (e.g. the key themes and priorities of the <u>Skills for Care Workforce</u> <u>Strategy for Adult Social Care 2024-2039</u>, plus the <u>Norfolk and Suffolk Social Care and Health</u> <u>Sector Skills Plan 2024</u>)</li> </ul>	<ul> <li>Continue to promote the profile of our care market in Suffolk through the ASC "I Care" campaign</li> <li>Review the workforce development offer and expectations with the care market</li> <li>Continuing dialogues with providers at a local level, including exploring opportunities to diversify their business</li> </ul>

## Sustainability at the heart of Care



Transformation principles	How will these be delivered?	Examples of activity
Delivering value for money	<ul> <li>Establishing a commissioning and procurement board</li> <li>Ensuring contracts are "fit for the future" e.g. adopting outcomes-based commissioning</li> <li>Suffolk County Council (SCC) will be clarifying and tightening-up processes to ensure more robust financial management</li> </ul>	<ul> <li>Redesign of Mental Health services with a greater focus on progression</li> <li>Remodelling Extra Care</li> <li>Exploring the potential to expand Day Opportunities, with an increased focused on employment and transport</li> <li>Sharing PAMMS information with authorities across the Eastern Region</li> <li>Provider Finance Query policy, Funded Nursing Care (FNC) rates etc</li> </ul>
Innovation and using technology to help us transform	<ul> <li>Using digital care wherever possible to support independence and deliver value for money</li> <li>Supporting the development and use of technology by providers, including electronic case management systems</li> </ul>	<ul> <li>Increasing sharing of data to improve efficiency e.g. Electronic Care Monitoring (ECM)</li> <li>Continue to innovate and promote digital care offers e.g. Home First pilot</li> <li>Exploring the potential of Artificial Intelligence (AI)</li> </ul>

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## How will we know we've arrived?



## Outcomes for people needing care and support and their carers

#### For people needing care and support:

- I have care and support that is co-ordinated, and everyone works well together, and with me
- I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and goals
- I can get information and advice about my health, care and support and how I can be as well as possible – physically, mentally and emotionally
- I am supported to plan ahead for important changes in my life that I can anticipate

The above co-produced statements from <u>Making it Real</u>, align to the Care Act 2014, and are built into the CQC Single Assessment Framework.



#### And...

• As an unpaid carer, I feel recognised and valued, and am supported to maintain, and where possible, improve my own health and wellbeing

## Outcomes for the care market

#### For the care market:

- We are clear about what is expected of us and receive a fair price for the services we provide
- We feel valued and included in discussions at an individual and system-wide level, and our professional views are recognised
- We are supported to identify opportunities to improve and expand our business



#### Outcomes for Adult Social Care

#### For Adult Social Care:

- We will be receiving consistent good feedback from people who receive, and those who deliver, care and support services in Suffolk
- We are meeting our responsibilities under the Care Act 2014, in helping people access the care and support they need
- We are meeting our strategic ambitions to put People at the heart of Care, including supporting and shaping the care market to ensure we have sufficient, high quality, flexible, care services that deliver value for money for the residents of Suffolk

### Defining and measuring progress

- The progress of delivering the CMS will be defined and measured via a Market Position Statement (MPS), which will sit underneath the CMS and be reviewed annually.
- The MPS will:
  - Describe the current position of the care market
  - Identify where ASC wants to get to against key service areas
  - Help providers identify gaps and opportunities for their business
  - Enable ASC to track progress in shaping the market against identified metrics (aligned where appropriate to People at the heart of Care), for the five years of the CMS

The first MPS will be published for the year commencing 2025/26 and <u>can be located here.</u>



Thank you for reading