

# Annex C: Calderdale Market Sustainability Plan March 2023

## Section 1: Assessment of the current sustainability of local care markets

### a) Revised assessment of current sustainability of the 65+ care home market

#### Background and demography

In Calderdale 65+ Care Homes are contracted via a Nursing and Residential Care Contract; this includes associated terms and conditions, and a quality framework that stipulates the service the Council expects and how care homes will be monitored. The contract has undergone a significant review, including engagement with the local market. Almost all 65+ care homes are signed up to the Overarching Contract, and all placements are made on an individual basis.

The Calderdale population size has increased by 1.4%, from around 203,800 in 2011 to 206,600 in 2021. This is lower than the overall increase for England (6.6%), where the population grew by nearly 3.5 million to 56,489,800.

However, there has been an increase of 21.0% in people aged 65 years and over, a decrease of 3.1% in people aged 15 to 64 years, and a decrease of 0.1% in children aged under 15 years.

ONS data estimates that in the 10-year period 2018-2028

- The number of people aged 75 - 84 is expected to increase by 41% by 2028.
- The number of people aged 85 and over is expected to increase by 17%

The census data and ONS projections suggest that the number of older people in Calderdale will continue to increase, making up a larger proportion of the overall population and that the demand for care and support will continue to grow for the near future.

#### Occupancy

There are 27 Older People's Residential and Nursing care Homes in Calderdale

As of 1<sup>st</sup> March 2023, occupancy was **935**, with a total bed capacity of 1180. Across the sector there were 245 vacancies, although the NHS Capacity Tracker shows only **126** of these were classed as admittable beds by providers. This is because a small number of homes have empty wings or units with staged plans to fill vacancies.

#### Funding

The Calderdale Market is evenly split between self-funders and LA funded residents according to the FCoC returns for care homes.

Submissions to the FCoC exercise are detailed in the table below. The sample contains an over representation of specialist provision and returns from national providers. Despite substantial market engagement and the offer of support to providers to complete the FCoC, it was not possible to get a full cross section of care home providers to complete the exercise.

<b>Funding split (%):</b>	<b>%</b>
<b>LA funded</b>	31.89
<b>Self-Funded</b>	49.94
<b>Joint Funded</b>	8.53
<b>CHC / Health</b>	9.65

### **LA base Fee levels 22/23**

<b>Type of Care</b>	<b>Fee Rate per week</b>
Nursing	£657.72 plus FNC £209.19
Nursing Dementia	£685.73 plus FNC £209.19
Residential	£573.69
Residential Dementia	£658.83

Care Homes will receive a 10% inflationary uplift on base fee levels in April 2023.

These fee levels do not show the accurate picture of actual payments for care home placements. Almost all homes in Calderdale request top up/ additional payments and the amounts requested continue to increase. These are often funded by the LA and vary across the market. Some care home sectors in Calderdale are so small that the base fee rate bears no relation to the cost of care- this is particularly the case with Nursing EMI. There are only 3 care Homes providing Nursing EMI care and all charge individual fee rates relating to the resident's needs, they are significantly higher than the standard fee rate.

### **Actual average fee rates paid in 22/23**

<b>22/23</b>	<b>Weekly average</b>	<b>Average total residential / Nursing</b>
Residential	£676.23	£704.96
Residential Dementia	£766.06	
Nursing	£742.48	£934.87
Nursing De- mentia	£1,683.07	

### **Cost of Care Fee Indicative Rates**

<b>Type of Care</b>	<b>Fee Rate per week</b>
Nursing	£1377.11
Nursing Dementia	£1481.42
Residential	£839.21
Residential Dementia	£824.06

## Quality Ratings

### October 2022 CQC Ratings and Quality overview of Care Homes

Outstanding	1
Good	18
Requires Improvement	7
Inadequate	1
<b>Total</b>	<b>27</b>

Calderdale has a Multi-Disciplinary Support Team supporting Care Homes to improve their quality ratings and standards of care, with a focus on homes that present the highest risk in terms of their quality rating and local intelligence. This is in addition to our Quality team who oversee and support all adult social care providers.

### Registration details of care Homes-( NB several homes provide more than 1 category of care).

Category of Care	Residential Care	Residential EMI Care	Nursing Care	Nursing EMI Care
<b>Number of Homes</b>	23	9	7	3

### Market Analysis

- The Calderdale market for nursing and residential care has reduced over the last 5 years, this includes the recent closure of 3 residential/ residential with dementia care homes. Vacancy rates in care homes have reduced over the last 12 months and there has been a significant increase in demand for discharge to assess placements to support hospital discharges. Some homes have reopened capacity in the last 3 months as recruitment pressures in the care home sector have shown slow signs of easing.
- Calderdale has taken the decision to use 90% occupancy rates as a baseline for occupancy levels and has adjusted the figures in the Fair Cost of Care analysis to reflect a 90% occupancy across all 4 care home sectors. We believe this to be an accurate reflection due to several recent and planned changes. Since the period in which the FCoC exercise was completed there has been the closure of 3 residential care homes. These closures have reduced overall capacity in the market and contributed to a reduction in vacancies. Commissioners are also discussing vacant provision with care homes where vacancies are at a high level. At least 2 homes have begun to take admissions in 2023 to sections of homes that were previously held vacant. This is because they have either recruited enough staff to be able to take admissions to a block of beds or plan to use a section of the home to develop a specialism required by the market. These changes have begun to support the demand for specialist provision and contribute to a reduction in vacant beds.
- The market in Calderdale contains a mix of providers including national, regional, and local provision. There are vulnerabilities particularly amongst local family-owned businesses. These homes are often based in old Victorian buildings that struggle to meet the needs of people with more complex care needs and mobility related issues. Homes in this category tend to be smaller and do not have the advantages of running services on a larger scale in modern buildings.

- The Care Home sector within Calderdale remains crucial to the local market and because of recent closures there is limited scope for the market to shrink further without having a detrimental impact on the choice and availability of provision. Although demand for residential provision has reduced over the last 5 years due to a home first model being promoted and people choosing to stay within their own homes for as long as possible, the current levels of bed capacity will be required to ensure that there is an adequate residential and nursing provision as the population of older people continues to grow.
- Care homes in Calderdale have been increasingly supporting with transitional arrangements because of the pandemic and hospital pressures, i.e., short term support between hospital and home. This creates increased pressure and workload for homes. The dependence on transitional beds has been partly driven by a lack of available homecare to support hospital discharges. We hope to address this by developing a sustainable homecare market and reducing the reliance upon transition beds in care homes.

### **Support to the market**

Greater support has also been given to prevent market failure and improve the quality of homes. For example:

- Business Relationship Managers offer more support to homes that struggle to meet CQC quality targets.
- Better quality monitoring of homes.
- We have given more support to homes and enhanced training.
- and initiatives to improve the quality of local provision, this includes the introduction of a multi-disciplinary support team in 2022 to support homes where there are significant quality concerns. The team contains health and social care staff and provides support and expertise to providers who are struggling to maintain the quality of provision
- Workforce recruitment and retention continues to be a major issue for the sector. There is an increasing reliance upon agency staffing impacting upon costs and consistency. The LA has supported the sector with recruitment and retention- by implementing an early fee uplift in 21/22, with targeted funding to providers and through the development of a targeted social care recruitment campaign for the sector.
- Inflationary pressures have had a significant impact upon the care home sector in 2022/23. Pressures have included food price increase, fuel costs, agency fees, insurance costs and rising staff wages. The LA has supported the market financially through reviewing individual fees where there is evidence of increased care needs. The LA has also supported care homes with additional payments towards the cost of utility bills and with recruitment and retention funding to offer enhanced benefits to care staff. The April 2023 inflationary uplift of 10% to care home base fees has been based upon the increase in the National Minimum Wage alongside other inflationary pressures outlined above.
- Delays in charging reform may impact provider sustainability as self-funders are more reluctant to pay a sustainable cost of care with no imminent statutory financial support. The LA will continue to work with the sector on sustainability and Calderdale is transitioning from net to gross billing for care home provision in 2023 to reduce the administrative burden on providers.

## **b) Assessment of current sustainability of the 18+ domiciliary care market**

### **Background**

There has been a substantial growth in the demand for home care across all age ranges. This is most evident for those aged 75 and over. This growth has put a great deal of pressure on the local market. As a result of this we put new arrangements in place in 2020 with 5 main providers, one in each of the Calderdale localities, in addition to establishing an Approved Provider List (APL).

### **What we commission**

We have a diverse home care market with a range of providers. There are five main contracted providers and a substantial number that can take work through the Approved Provider List (APL). There are currently over 40 active providers on the APL. People can also access home care services through direct payments. Home Care supports all ages, including children and young people, and all client groups. There is an emphasis on the provision being flexible and enabling for people, whilst at the same time meeting personal outcomes. The contracts provide a set hourly rate for urban locations in Calderdale, with an enhanced hourly rate for support in more rural locations.

The Approved Provider List re-opens once a year if required, to allow for diversity and resilience in the home care market.

### **Current fee Rates 22/23 for homecare**

**Urban** £19.78 per hour

**Rural** £20.74 per hour

An uplift of 9.25% has been agreed from April 2023

### **Capacity and demand**

- Demand for homecare continues to grow as people wish to remain in their own homes for as long as possible. The provision of homecare is also essential to support hospital discharges. Currently over 11,000 hours of homecare are being delivered.
- Demand continues to outstrip supply and there are geographical areas of Calderdale where this is more significant. The Upper valley of Calderdale continues to be an area where there is not enough provision to meet demand. Efforts have been made to further incentivise provision in this locality and to grow the market of direct payment provision. Whilst direct payments offer flexibility, they are sometimes used due to lack of commissioned capacity.
- The covid pandemic impacted on the local market with carers exiting social care. Whilst the market is slowly recovering, challenges around recruitment and retention mean securing and maintaining suitable staff remains one of the key challenges. Developing Homecare provision continues to be a challenge in Calderdale, and this is key to delivering a home first model for people in the community and for those stepping down from hospital who require support. Over the last few months, the homecare market has steadily grown, and recruitment and retention has improved.

## Quality Ratings

### Current CQC Ratings for domiciliary care providers

Outstanding	1
Good	33
Requires Improvement	6
Inadequate	0
Not Yet Inspected	11
<b>Total</b>	<b>51</b>

### Market Pressures

- Providers have reported that capacity in the domiciliary care market has been severely impacted over the last 12 months primarily due to challenges in recruitment and retention. Finding and retaining staff is the primary risk to sustainability within the market. Pay rates (exacerbated by cost-of-living crisis), terms and conditions and 'burn out' being cited as compounding factors. This is showing slow signs of improvement.
- Calderdale Council is working towards the principles of the Ethical Care Charters which stipulate that staff must be paid at least the real living wage to try and alleviate pay rate issues for staff and improve retention in the sector. As outlined in relation to 65+ care homes, there is a robust workforce offer of support for providers in Calderdale.
- Inflationary pressures continue to impact homecare providers, steep increases in petrol prices have particularly affected homecare staff. Calderdale has given extra support to providers throughout 22/23 to support staff with the additional costs of petrol and diesel.
- The impact of the NLW has been considered when setting fee uplifts for April 2023 and our fee modelling indicates that the agreed 9.25% uplift is sufficient for providers to meet the National Living Wage rates of £10.90 per hour for direct care staff.
- Delays in charging reform will not have a significant impact on our ability to manage current market pressures and sustainability.

## Section 2: Assessment of the impact of future market changes between now and October 2025 for each of the service markets

### Impact of Market Changes between now and October 2025.

Self-funders continue to form a substantial proportion of the over 65 care market and whilst Care Reforms have been delayed the LA will continue to consider the self-funder market and its contribution to the wider care sector in Calderdale. Due to the considerable number of self-funders, there are risks for the LA as the financial assets decrease and providers approach the council to assess and fund care that is often at a higher private rate. This creates a strategic risk for this market and continued financial pressures for the LA. The LA continues to work with the market to ensure sufficient information is provided to self-funders when they access care and support and strongly encourages providers to advise the LA when people are reaching the lower capital threshold for care, so that appropriate planning can take place regarding ongoing care and support needs.

There is also a risk in terms of the pressure that inflationary costs including rising energy costs, food and insurance premiums are having on 65+ care homes, it is unclear on the sustainability of the market if the costs continue to rise and the affordability of providers to keep the services running. The LA is continuing to work with providers to understand the pressures they face and to offer support wherever possible. Projections show that inflationary pressures show signs of easing in the next financial year.

Similarly, within the domiciliary care market there will be a pressure around self-funders who reach the lower capital threshold and are receiving care from providers who charge a premium to self-funders. The LA works with providers to encourage them to give accurate advice to self-funders who access their care and to brief families on LA assessment requirements should the person require funding from the LA in future years.

### Care Homes

Analysis shows that Calderdale has a substantial number of self-funders in the care home market. Although estimates vary, responses from the FCoC exercise suggest up to 50% of the local market could be made up of self-funders. Given the results of the exercise in terms of the costs of delivering care it can be assumed that self-funder fees command a premium and cross subsidisation of LA fees is occurring. Care Homes are increasingly approaching the Local Authority requesting payments in addition to the base fee model.

The last year has seen an unprecedented number of care homes approach the local authority for in year increases and state that they are uplifting their basic fee levels. There are now only a small number of homes who work to the CMBC base fee model and due to demand Calderdale is paying additional costs for most new placements. In previous years, the selection of a home with additional costs was considered as a personal choice with the extra fees being paid by the resident or family, however this is no longer applicable. Few homes work within the basic fee models that there are often no available placements without significant additional costs.

Without sustainable funding to implement a revised fee model, there is a risk of further closures in the Calderdale Care Home Market and the under provision of care in some sectors or localities. **An incremental approach to increasing fee levels to maintain and support the Care Home market will be required over the next 2-3 years from 2023. This will be dependent upon the allocation of funding to Calderdale for 2023 onwards.**

Commissioners will also need to continue to work with providers to support the development of the market, ensuring vacant beds are brought back into the market and specialisms are developed according to demand. As there are only 6 care homes in Calderdale providing nursing care, this remains a vulnerable sector of the market. This is not only in terms of fee levels, but also the recruitment and retention of qualified staff and support to maintain good quality provision.

### Homecare

The ONS estimated self-funder figure of 36.1% for Calderdale would indicate that over a third of the homecare market is utilised by self-funders. Given the need to increase home care hours to support people to remain at home and to facilitate timely hospital discharges, **the lack of available home care provision continues to present a key strategic risk for Calderdale.** Whilst hours available have

increased in late 2022 and early 2023, demand for good quality home care will continue to grow as the Home First model is further developed and embedded in Calderdale.

When self-funders due to diminishing financial assets, look to the LA to arrange their care the differentials in care costs and premiums homecare providers currently charge will have a significant impact on market sustainability.

Sufficiency varies according to geographical area- as Calderdale is geographically dispersed with rural and urban communities, there are issues with provision in the more remote areas of Calderdale in particular the Upper Valley. Commissioners will continue to work with the market to offer support wherever possible and to encourage growth to support future demand.

**An incremental approach to increasing fee levels for the Home Care market will be required over the next 2-3 years from 2023. This will be dependent upon the allocation of funding to Calderdale for 2023 onwards.**

#### **Impacts on the wider market**

Whilst the MSP and FCoC seeks to address some of the sustainability and funding concerns for the 65+ Care Home market and all age domiciliary care market, it does not directly address issues across the wider social care market. Decisions around rates of pay and fee levels will have a knock-on effect to the funding and sustainability of other areas of the market. Whilst care home placements for younger adults are negotiated and agreed on an individual basis, resulting in fee levels that are higher than the over 65 care home market, other sectors supporting younger adults are based on set fee rates. Providers in this market are likely to question why their fee models have not been reviewed as part of this exercise.

The LA as a direct employer of care staff will also need to evaluate rates of pay to ensure they remain in line with the wider market.

Taking into consideration the wider market and the sector wide inflationary pressures Calderdale will provide fee uplifts at similar levels to those agreed for Care Homes and Home Care to most direct care providers in 2023.

### **Section 3: Plans for each market to address sustainability issues, including fee rates where identified**

#### **(a) 65+ care homes market**

**Year 1** we propose to undertake the following actions to support market sustainability:

**Cost Pressures:** Cost pressures this year have been significant for the 65+ care home sector with requirements to increase workforce pay, the legacy of the peak of the pandemic with reduced occupancy, and the huge increase in energy costs. The Council will continue to review cost pressures and the funding model for care homes.

Care homes can increase the basic fee levels by applying a top up or third-party contribution to their fee rates. This is now standard practice with very few placements agreed at the standard fee rates



outlined above. Third Party Contributions have increased significantly during the last financial year, and this is having a significant financial impact on Adult Social Care budgets. High levels of inflation and rising energy costs impacting provider financial viability are being considered in 22/23- and one-off payments to providers will be made to offer short term support.

**£85,410 of the 22/23 FCoC grant has been allocated to support the exceptional cost pressures within residential and nursing care. This allowed a one-off payment to support providers with exceptional inflationary costs during this financial year. The payment was based upon the size of the home.**

- **Market Engagement:** We will need to continue to work with the provider market to ensure there is sufficient provision to cope with particular types of demand, this is especially critical around care for people with Dementia. This engagement will be done via the Registered managers Network, Provider Forums, and engagement with individual homes.
- **Workforce:** We need to address the workforce issues to cope with an increasing demand for services, this will continue through engagement with the provider market and the continued work on our local recruitment and retention campaign

**Years 2 and 3** will be dependent upon the financial settlement from the Market Sustainability and Fair Cost of Care Fund; however, we have identified the following preliminary activities:

- **Cost Pressures:** The Council will utilise the additional government funding to continue to review care home fee rates and take into consideration inflationary pressures alongside the results of the FCoC exercise. However, work needs to continue to review current fee rates including top ups and to work with the market to agree realistic standard fee rates.
- **Dementia Provision:** work will continue to increase specialist dementia care provision within Calderdale, particular Nursing Care for people with Dementia.
- **Market sustainability:** work will continue with the market to ensure that providers are supported to reduce the number of vacant beds in Calderdale, in turn increasing their efficiency and profitability. Commissioners are working with the market to support providers to make the best use of available beds, including support for specialist provision where required (e.g., single sex accommodation).
- **Care Home Contract:** a new care home contract was rolled out from November 2022; the contract includes changes that will have financial benefits for providers. These include the opportunity to provide transitional beds at an enhanced rate and the removal of a lower weekly rate for shared rooms. The contract will also implement a return to gross billing as a standard practice reducing the administrative burden on care homes.
- **Recruitment and retention:** a recruitment and retention programme will benefit the whole of the care sector, and this has been developed in conjunction with providers- a shared website went live in Autumn 2022 and the LA has launched an introduction to care programme and support with the costs of training staff. Business Relationship Managers continue to support homes to address and manage any issues they have.

**An incremental approach to increasing fee levels for the Care Home market will be required over the next 3 years. This will be dependent upon the allocation of funding to Calderdale for 2023 onwards. This will allow further time to analyse the level of top up ups paid by the local authority and self-funder fee rates that act as a current subsidy to the basic fee levels.**

Fee setting for care homes will be included in the priorities for subsequent years funding (subject to confirmation of funding levels from April 2023). The LA is reviewing current fee levels and the actual amount paid to care homes for placements which in practice is significantly higher.

The fee rate has been agreed from April 2023 considering the funding available to the LA to support the FCoC and the LAs commitment to fees that facilitate the contracted care home providers to pay the Real Living Wage by the end of the financial year 23/24. Funding from the LAs medium-term financial plan will also be used to support this commitment of a 10% uplift to base fee levels.

#### **Extra Care housing to sustain the wider market**

**Year 1** we propose to undertake the following actions to support market sustainability:

- The development of Extra Care housing remains a priority for Calderdale, a new scheme opened in August 2022 with a focus on dementia and in development. This will mean that in the next 3-5 years there will a significant increase in Extra Care housing with a good geographical spread across Calderdale. The strategic aim is for housing with support to be widely available in Calderdale and offer a viable alternative to residential care. The new Extra Care Housing at Railway Bridge View creates a great opportunity for people to remain in their own homes even with a diagnosis of dementia. The environment has been designed to be dementia friendly and in turn create a living environment that can support people to remain as independent as possible for as long as possible. Referrals to the scheme are being encouraged from people with significant needs and several successful placements have been agreed as an alternative or step down from 24-hour care settings. Whilst this scheme has created a real alternative to residential care, to do this a dedicated and well-trained staff team need to be in place to ensure tenants receive the support they require to remain in their own apartment. Considering these support costs and the requirement to fund void costs whilst the scheme is established to fulfil its potential dedicated funding is required. **We have allocated £200,000 from the FCoC grant in 22/23 to establish specialist extra care to compliment the provision of residential and nursing care in Calderdale and provide a viable alternative to people with significant support needs.**

#### **Years 2 and 3**

- Funding allocations for 2023 onwards will also consider the growth in the provision of Extra Care housing in Calderdale and the funding required to support this growth. The allocation will be dependent upon the amount of grant allocated to Calderdale.

#### **(b) 18+ domiciliary care market**

The Council's strategic aim is to maintain people at home for as long as possible with a home first approach. To enable us to meet this aim we have engaged with local providers to identify and develop ways to address the market sustainability issues identified.

The stability of current provision and the growth of domiciliary care is essential in Calderdale. This is driven by the ageing population, commitment to support people at home for as long as possible and the continued demand for domiciliary care to support safe and timely hospital discharges. Demand

for packages of care often outstrips local supply and there is an increased seasonal impact of this over the winter months when demand grows.

Calderdale is still working to restore domiciliary care provision to pre covid levels. The lack of available care has led to an increase in residential care transitional beds and causes delays in discharging from community services such as re-ablement, urgent community response and intermediate care. To maximise people’s independence and make best use of the resources available in Calderdale, the growth and stability of home care provision is essential.

**Year 1** we propose to undertake the following actions to support market sustainability:

- **Cost Pressures:** Cost pressures this year have been significantly different to previous financial years due to legislative changes to workforce pay, competition for staff and unprecedented inflation of over 10%. In recognition of the strategic direction of travel, the Council utilised the additional funding from Government because of the Fair Cost of Care exercise to close the gap between current fee rates and the fair cost of care. In recognition of the current capacity issues, a one-off payment was made to providers to support direct care workers.
- Funding from the 2/23 FCoC grant was used to uplift homecare rates in year by an average of £1.78 per hour to support the market and with the specific intention that a significant proportion of the uplift is passed on to employees who are providing direct care. This was passed on as a single block payment. The Fair Cost of Care rate in Calderdale (based on the median of each line) is £22.04, a £1.78 / 8.09% increase on the current average fee rate of £20.26. This uplift was agreed from 1<sup>st</sup> January 2023 and communicated to the provider market to inform their ongoing recruitment and improve the retention of existing and future employees.
- The annual impact based on 10,700 hours of care delivery per week is in the table below. The current spend is based on an average rate of £20.26. The Impact of increasing homecare rates by 8.09% for 3 months from 1<sup>st</sup> January 2023 will cost **£248,000**. The continuation of this commitment in future financial years will be dependent upon the grant allocated to Calderdale to deliver the FCoC from April 2023 onwards.

Current spend	£11,272,664.00
FCoC cost	£12,264,519.79
<b>Annual impact of increase to FCoC</b>	<b>£991,855.79</b>

- From April 2023 a permanent uplift to previous home care rates of 9.25% will be awarded, extending the commitment made between January and April and making the early in year uplift permanent.
- **Recruitment and retention:** engagement with the market will continue to explore what action the system (providers and commissioners) can take to tackle current challenges; this may include work locally to generate training and development opportunities, raise the profile of social care as a profession and build links between prospective sources of recruitment, e.g., schools and colleges. The Quality Team have reviewed and developed the offer to the market and a range of new roles are in place including a Multi-disciplinary Support Team to support services where there are significant quality concerns as well as roles

to support targeted sector wide improvement. Dedicated Business Relationship Managers continue to support providers to address and manage any issues they have. A recruitment and retention programme will benefit the whole of the care sector, and this has been developed in conjunction with providers- a shared website will go live in October 2022 and the LA has launched an introduction to care programme and support with the costs of training staff.

- **Review of operational efficiencies:** further engagement with the market in relation to how operational processes can be streamlined to provide efficiency to the market – this has the potential to ensure care recipients are reviewed in a timely manner and care hours are better utilised to meet the demands of the market.

**Years 2 and 3** will be dependent upon the financial settlement from the government, we have identified the following activities:

- **Cost Pressures:** as year one, the Council will utilise the additional Government funding to support providers . Homecare will remain a key priority with the intention of building provision in all localities of Calderdale and improving sustainability.

#### **Market Position Statement**

Calderdale is currently refreshing its Market Position Statement and will publish the updated version in 2023 giving a clear indication to the market regarding our commissioning intentions, areas we wish to develop and areas where there is sufficient provision. This will complement our Commissioning and Quality Strategies, which outline our strategic commissioning approach and the support available to the local care market to sustain and improve the quality of provision.