Nottinghamshire County Council

Report for Cabinet

6 November 2025

Agenda Item: 8

REPORT OF THE CABINET MEMBER, ADULT SOCIAL CARE

RETENDER OF CARE PROVISION FOR EXTRA CARE SCHEMES IN NOTTINGHAMSHIRE

Purpose of the Report

1. The report seeks approval for the establishment of a Framework of providers for the care provision at the current Extra Care schemes across Nottinghamshire and any future Extra Care developments.

2. Approval is also sought to tender for the care provision for Extra Care services in Rushcliffe to replace the current short term interim arrangement and align with timescales for the development of a new Extra Care Framework.

3. This is a Key Decision because it will result in expenditure of £1 million or over and it will have significant effects on two or more electoral divisions.

Information

Background

4. The Council has a duty under the Care Act 2014 to promote wellbeing, with the concept of 'independent living' a core part of the wellbeing principle. The Care Act places a duty on local authorities to co-operate with partners to ensure that care and support is delivered in an integrated way and recognises that housing is a health and social care related service as it plays a vital role in supporting people to maintain good health, independence and improve quality of life.

5. Wherever possible, the Council aims for people to be supported to live independently in their own homes and avoid the need for any unnecessary moves.

6. For anyone with long-term social care needs which cannot be met in their current home, and who are eligible for social care support, the Council can commission 'Extra Care' to avoid the need for people to move unnecessarily into residential care. 'Extra Care' schemes offer older people the privacy of their own self-contained home and security of tenancy or ownership rights, within a community setting which provides readily accessible personal care support.

7. The Council's Extra Care service provides people with both planned and responsive 24/7 care and support. This is funded by the Council which purchases the care and support services from independent sector providers who are registered with the Care Quality Commission (CQC). Each scheme currently has one specific homecare provider and staff team assigned to it.

8. The current Extra Care service is commissioned as a call-off contract under the Home-Based Care contract. It is delivered by the lead Home-Based Care provider in each area on a block contract model with hours calculated based on number of people supported in any given Extra Care scheme. The exception to this is the scheme in Rushcliffe as there is no lead provider in the area.

9. The cost of the block contract is divided equally between the number of Council nominations for people receiving an Extra Care service. The cost is apportioned equally regardless of the level of support an individual may need. The average cost of care per person per week in an Extra Care scheme is approximately £533. Residents pay housing costs in addition to an assessed contribution to the cost of care.

10. The model was predicated on Extra Care being an alternative to or for the avoidance of the need for more costly residential care.

11. The total annual cost of Extra Care provision is £5,522,949, supporting 199 people.

12. As well as improving outcomes for people by supporting the maintenance of independence, living in their own homes and community connections Extra Care also reduces the financial cost to the Council.

Care Home Banding	**Band 2**	**Band 3**	**Band 4**	**Band 5**
Care Home Weekly Fee 2025/26	£749.52	£795.96	£814.32	£838.02
Care Home Weekly Fee 2025/26 including Dementia Quality Mark Payment	£827.28	£869.40	£886.680	£912.60
Care Home Fee Nursing Care 2025/26	£839.16	£883.44	£902.88	£929.88
Care Home Fee Nursing Care including Dementia Quality Mark Payment 2025/26	£905.04	£952.56	£970.92	£992.52

13. As seen in the table above an annual placement in a Band 4 care home would cost £42,344 whereas Extra Care would be an average of £27,715, a saving per person of £14,629 per year.

14. Extra Care can also offer a saving against homecare where a person is receiving four calls from a provider per day at an average cost of £25.67 per hour (an annual cost of £37,478). Extra Care provision in this instance would save the Council £9,763 per person, per year.

15. There are increasing complexities in people's care needs, due partly to deterioration in people's health as they age and also in the people who are being referred for Extra Care so not just presenting with age-related frailties but may have mental health challenges and/or a background of substance misuse which lead to a need for support in an Extra Care setting. It is important that Extra Care continues to adapt with these changing needs.

A new Framework for Extra Care

16. The current Extra Care contract is part of the Home-Based Care contract and is due to end on 30 June 2028. The specification and key performance indicators (KPIs) are shared with the Home-Based Care contract rather than being specific to Extra Care. Separating the Extra Care contract would allow specific KPIs and outcomes to be set and maximise the potential of Extra Care to support enablement, reablement and community integration.

17. It is proposed that a multi-provider Framework be established with a clear specification that can be utilised across all existing Extra Care schemes and for any future developments. It is proposed that the initial Framework be established for 5 years with the option to extend for 3 years in 1-year increments. Contracts awarded under the Framework would be constructed to include provision that recognises potential future changes within Local Government Reorganisation.

18. A Framework of providers for Extra Care services would offer greater choice as well as contingencies if a provider was no longer able to deliver the Extra Care service. Each call-off under the Framework would be tailored to the requirements of the scheme and the people living there.

19. Models of Extra Care delivery in other local authorities have been explored including Nottingham City, Leicestershire, Lincolnshire and North Yorkshire. Most deliver a model of low-level background support paid for by all residents and any additional planned care commissioned for each individual. This allows flexibility within the contract and the potential for cost savings.

20. This model would work well for Nottinghamshire as it would enable commissioning of support that is needs-led rather than commissioning a block of hours per person regardless of care needs. The Council would only commission care that is required rather than staffing a scheme with care that may not be needed. The background support hours would be drawn on for unplanned care needs or urgent care as well as for community engagement and activities.

21. The current schemes are each different with activities and the environment having evolved to suit the people living in a scheme. Partnering of schemes such as Poppy Fields or Gladstone House (where people may have a higher level of care needs) with Town View or Vale View (where the cohort of people may have lower level care needs and are more active) would allow for a more flexible and tailored model of support, with the option of additional support from the partner scheme if needed, to meet unplanned needs.

22. A more flexible Extra Care service could also deliver the support that people say is important for them. To understand what matters to people living and working at an Extra Care scheme, commissioners and providers came together with people living and working at the Extra Care schemes in Rushcliffe. The Social Care Futures ‘Working together for Change’ model was applied to learn and formulate plans to improve the Extra Care offer in Rushcliffe.

23. Social inclusion and engagement with the wider community were identified as important for people. By offering services which can be accessed by the wider community and which enable greater integration into the local community, such as a café within the scheme,

shared coffee morning/movie night or hiring of communal spaces when not in use by residents for meals etc, there is a more cost-effective use of communal spaces.

24. Further coproduction activity is planned as part of the development of a new Framework.

25. An initial Equality Impact Assessment has been completed and will be reviewed as the specification is developed in coproduction with staff teams and people. Subsequently it will be reviewed at least annually or as new call-offs are made under the Framework to ensure that equality requirements are being met.

Rushcliffe Extra Care

26. The tender for care provision at the Rushcliffe Extra Care schemes (Cricketers Court and Hilton Grange) is a priority as the current contract is due to expire in July 2026 with no option of an extension. There is therefore a potential gap in provision between the end of this contract and the establishment of a new county-wide Extra Care Framework from 2028.

27. The Rushcliffe schemes are currently supporting 19 people at a cost of £509,326 for 2025/26.

28. The Council had previously commissioned both housing and support for the schemes from Metropolitan Thames Valley Housing (MTVH) who gave notice on the scheme with them withdrawing from support delivery in May 2024.

29. Whilst MTVH is maintaining any existing tenancy agreements to ensure continuity of tenure for those residents already residing within the settings, no new nominations are available within the schemes.

30. Temporary arrangements were commissioned to ensure that people continued to receive support in the scheme. The current interim contract is due to end on 17 July 2026 with no option for extension.

31. The current contract has a sliding scale of support hours which reduces as the number of nominations decreases.

32. It is proposed that an interim contract be put in place for the Rushcliffe Extra Care schemes to cover the period from the end of the current contract in July 2026 until the end of the current Extra Care call-off which forms part of the Home-Based Care contract and which is due to end in June 2028. This would also enable time for the new Extra Care Framework to be established.

Other Options Considered

33. Continue with the current block contract model for Extra Care, via the Home-Based Care contract which has limited flexibility: the cost of this option would be higher than the proposed model, with staff provision based on cover rather than planned needs.

34. End the Extra Care service in Rushcliffe when the current interim contract ends: this is not a viable option as Extra Care supports people to remain in communities and maintain

independence as much as possible, avoiding and delaying the need for residential care. Removal of the Extra Care service would mean that the people within the service would have to have their needs met through residential or other inappropriate care services such as standard home-based care.

35. Support Rushcliffe residents to move to other Extra Care schemes in the County or into other settings: the remaining schemes would not have capacity to support such a move and it would also not be in the best interests of the person to move them far from their families and communities.

Reason/s for Recommendation/s

36. The model of Extra Care proposed evaluates well in other parts of the country where the majority of the nominations available are utilised and the support is seen as a housing choice rather than a care option.

37. Not having this provision is likely to lead to a deterioration in health and social care needs of individuals and may lead to individuals being forced into costly long-term care options such as a residential home that would also lead to a loss of skills and independence.

38. An interim contract is required in Rushcliffe to ensure continuity of support for the people living in the two existing Extra Care schemes in the area.

Statutory and Policy Implications

39. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

40. The current cost of care for Extra Care services is £5,522,949 per annum. Whilst spend is likely to increase in the longer term due to increased demand this will be offset by the cost avoidance against a residential placement or high-cost homecare package.

Implications for Residents

41. Residents are able to continue living in communities they are already part of, living independently in their own homes in settings suited to their care and support needs.

42. Residents currently residing within the Rushcliffe Extra Care schemes require ongoing care provision to meet their support needs. The interim contract is due to end in July 2026 with no contract extension available.

RECOMMENDATION/S

That Cabinet approves:

1) the procurement and subsequent award of a multi-provider Extra Care Framework on the terms and for the period set out in this report.

2) the decision to tender for the care provision for Extra Care services in Rushcliffe from July 2026 to June 2028, to replace the current short term interim arrangement and align with timescales for the new Extra Care Framework as set out in the report.

Councillor Barry Answer
Cabinet Member for Adult Social Care

For any enquiries about this report please contact:

Helen Neville
Commissioning Manager, Ageing Well
T: 0115 977 3044
E: helen.neville@nottscc.gov.uk

Constitutional Comments (GMG 01/10/25)

43. There are no direct legal implications arising from this report. This matter falls with the remit of the Cabinet to determine under Section 5, Part 2, CA.2 on p.72 of the Council's Constitution.

Financial Comments (PD 08/10/25)

44. The total 2025/26 budget for Extra Care is £5.45m, including £0.55m for the Rushcliffe schemes. The cost of retendering the Extra Care contract should be contained within the existing budget and considered in the context of ongoing financial pressures on the overall Adult Social Care and Health budget.

45. Use of Extra Care does afford opportunities to support some people at a lower cost compared to alternatives such as residential care and home care. The service should consider how these potential cost benefits are determined by the level of needs of individuals.

46. It will be necessary for the service to monitor uptake of the service to ensure that usage of capacity is maximised and best use of funding is ensured.

47. There are differences between districts for example in terms of demographics, relative level of needs, capacity of residential provision which could mean that Extra Care provision to individual districts is affected to differing degrees in the future. The service should monitor uptake, need and capacity at district level to facilitate future decision-making in relation to implementation of Local Government Reform.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Equality Impact Assessment

Electoral Division(s) and Member(s) Affected

All.

A0147