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Kent County Council

From Capacity to Resilience

Evidence-led analysis of the adult social care provider market,
commissioning priorities and strategic direction.

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Independent Adult Social Care Market Intelligence
& Provider Development Research

ABOUT THIS PUBLICATION

This publication forms part of the Odelia Local Authority Intelligence Series.

The series provides evidence-led analysis of adult social care provider markets across England, translating publicly available information into practical intelligence for providers, commissioners, housing organisations, NHS partners and sector leaders.

Each publication draws upon publicly available sources, including Market Position Statements, adult social care strategies, commissioning plans, procurement information, CQC assessments and other relevant publications.

The purpose of the series is to improve understanding of local provider markets and support informed discussion across the sector.

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Independent Adult Social Care Market Intelligence & Provider Development Research

Independent research and market intelligence into Adult Social Care commissioning and provider markets

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THE SERIES

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PURPOSE

This note reflects publicly available information from Kent County Council’s CQC Local Authority Assessment, Commissioning Intentions, Prevention Framework, accommodation strategy and All Age Homecare commissioning papers. Its purpose is to explain what Kent’s changing commissioning direction may mean for provider readiness and future market development.

AT A GLANCE

Primary market theme	From Capacity to Resilience
Key commissioning priorities	All Age Homecare; Workforce resilience; Home First and hospital discharge; Locality-specific capacity; Prevention and early intervention; Supported living and accommodation; Complex and specialist care; Market sustainability; Direct Payments; Preparing for Adulthood.
Best read for	Homecare Providers; Supported Living Providers; Complex Care Providers; Reablement and Discharge Providers; Children’s Community-Support Providers; Preventative and Community Organisations; Commissioners; Market Development Leads.

WHAT THE EVIDENCE TELLS US

Kent's Adult Social Care service was rated Requires Improvement by CQC, with an overall score of 56%. CQC recognised committed leadership, partnership activity, prevention and integrated working, but found significant variation in people's experiences across the county. Concerns included waiting lists, delayed care starts, inconsistent communication, workforce pressures, safeguarding delays and gaps in specialist provision.

Kent's provider market operates at significant scale. The council purchases more than 55,000 adult homecare hours each week for over 4,500 adults, alongside more than 2,000 hours for over 200 children. The planned combined homecare spend for 2025/26 was £87 million.

Kent has approved a new Open Framework All Age Homecare Service covering adult homecare, care and support in prisons, and community support for disabled children. The model is intended to improve quality, affordability, provider sustainability and consistency across Kent.

The council has also adopted a Prevention Framework for 2025–2035, aiming to place wellbeing, independence and early intervention at the centre of adult social care.

WHAT THIS MEANS FOR PROVIDERS

Kent's market does not simply need more providers.

It needs providers that can demonstrate:

credible locality coverage; workforce resilience; reliable mobilisation; continuity; Home First and discharge capability; complex and specialist competence	all-age safeguarding where relevant; prevention and independence outcomes; financial sustainability; accurate capacity information; strong partnership working; effective quality and outcome reporting
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A provider saying that it "covers Kent" is unlikely to be enough. Commissioners need to understand where staff are based, which localities can be served reliably and whether capacity can be sustained.

WHAT THE CQC ASSESSMENT MEANS FOR PROVIDERS

Kent's CQC assessment has direct implications for the provider market.

Where residents experience delays, inconsistent communication and difficulty accessing suitable specialist support, providers need to demonstrate how they can contribute to improvement.

This includes:

accurate referral responses; realistic package-start dates; clear safeguarding escalation; continuity of staffing; specialist evidence; reliable communication with brokerage and families; outcome reporting; learning and improvement.

Providers that can make this evidence visible before a placement or procurement decision are likely to be better positioned than organisations relying on general capacity statements.

WHAT COMMISSIONERS MAY BE THINKING

Kent appears to be asking:

- Where is capacity genuinely available?
- Can it be sustained?
- Does the provider have enough staff in that locality?
- Can it mobilise safely and quickly?
- Can it support complex or specialist needs?
- Can it contribute to Home First?
- Does it understand all-age and transition requirements?
- Can it demonstrate quality and outcomes?
- Is the delivery model financially viable?
- Will it remain reliable after the package begins?

This signals a shift from counting providers towards understanding deployable provider capability.

REFLECTION

Kent highlights an important lesson for providers.

Scale can conceal fragility.

A county may have hundreds of providers but still face significant local gaps where workforce, geography, complexity and mobilisation make services difficult to source.

Provider readiness therefore means more than being registered and willing to accept referrals. It means demonstrating where capability exists, how it will be deployed and why it can be trusted.

EMERGING MARKET THEME

Across Kent's CQC assessment, commissioning intentions and All Age Homecare programme, a recurring theme is the growing importance of provider resilience rather than simply provider capacity. As demand rises across a large and varied county, commissioners increasingly need providers that can demonstrate workforce stability, locality-specific coverage, operational flexibility and consistent outcomes.

KEY MARKET INSIGHT

Kent's challenge is not simply increasing provider numbers. It is building a resilient provider market that can deliver consistently, at scale and with confidence.

COMMISSIONER'S LENS

Kent's challenge is not simply securing enough providers. It is building a resilient market that can respond consistently across urban, coastal and rural communities while supporting independence, hospital discharge, complex needs and all-age pathways. Providers that can evidence locality coverage, workforce stability, mobilisation, specialist capability and measurable outcomes are likely to align most closely with these priorities.

PROVIDER ACTION GUIDE

All Age Homecare

COUNCIL CHALLENGES

- Recommissioning a major county-wide service.
- Maintaining sustainable homecare capacity.
- Supporting adults, children and prison-related services.
- Improving consistency and quality.
- Achieving transparent and sustainable pricing.

PROVIDERS SHOULD CONSIDER

- Mapping workforce and capacity by postcode.
- Demonstrating adult and children's safeguarding where applicable.
- Evidencing continuity and missed-visit performance.
- Preparing clear mobilisation and contingency plans.
- Showing how delivery supports independence and value.

Home First and Hospital Discharge

COUNCIL CHALLENGES

- Maintaining hospital flow.
- Mobilising support quickly.
- Reducing avoidable long-term care.
- Improving pathway consistency.
- Coordinating across health and social care.

PROVIDERS SHOULD CONSIDER

- Evidencing discharge and reablement experience.
- Recording referral response and start times.
- Demonstrating weekend or urgent-start capability where available.
- Measuring independence after short-term support.
- Showing multidisciplinary and escalation arrangements.

PROVIDER ACTION GUIDE

Supported Living and Accommodation

COUNCIL CHALLENGES

- Specialist accommodation gaps.
- Supporting people locally.
- Acquired brain injury provision.
- Mental-health step-down.
- Transitions into adulthood.
- Community integration.

PROVIDERS SHOULD CONSIDER

- Demonstrating a clear geographic and service gap.
- Building credible housing partnerships.
- Evidencing tenancy sustainment and move-on.
- Showing specialist workforce competence.
- Measuring independence and community participation.

Complex and Specialist Care

COUNCIL CHALLENGES

- Rising acuity.
- Dementia, mental health, ABI and complex needs.
- Limited specialist capacity in some areas.
- Safe management of health-related tasks.
- Reducing inappropriate high-cost placements.

PROVIDERS SHOULD CONSIDER

- Producing anonymised specialist case studies.
- Evidencing clinical or behavioural governance.
- Demonstrating Positive Behaviour Support where relevant.
- Showing multidisciplinary working.
- Recording stability, safety and quality-of-life outcomes.

PROVIDER ACTION GUIDE

Workforce and Geographic Resilience

COUNCIL CHALLENGES

- Recruitment and retention.
- Rural and coastal travel.
- Continuity.
- Specialist competency.
- Sustainable local staffing.

PROVIDERS SHOULD CONSIDER

- Reporting vacancy and turnover data.
- Mapping where staff are based.
- Demonstrating sustainable travel and rota arrangements.
- Evidencing recruitment and retention plans.
- Showing how quality will be maintained during growth.

Prevention and Community Support

COUNCIL CHALLENGES

- Shifting investment towards prevention.
- Supporting people earlier.
- Reducing escalation.
- Strengthening community assets.
- Supporting carers.

PROVIDERS SHOULD CONSIDER

- Demonstrating preventative outcomes.
- Building links with local community organisations.
- Evidencing safe escalation into statutory care.
- Measuring wellbeing and social inclusion.
- Explaining how services delay or reduce formal care.

PROVIDER ACTION GUIDE

Direct Payments and Personalisation

COUNCIL CHALLENGES

- Supporting individual choice.
- Ensuring suitable services are visible.
- Clear pricing and service information.
- Flexible personalised support.
- Quality and safeguarding outside council-managed packages.

PROVIDERS SHOULD CONSIDER

- Developing Direct Payment-friendly offers.
- Explaining prices and outcomes clearly.
- Making information accessible to families.
- Evidencing personalised support planning.
- Maintaining clear quality and safeguarding arrangements.

Preparing for Adulthood

COUNCIL CHALLENGES

- All-age service continuity.
- Supporting disabled children moving into adult services.
- Housing and community support.
- Avoiding crisis at transition.
- Coordinating families, health, education and social care.

PROVIDERS SHOULD CONSIDER

- Engaging early in transition planning.
- Demonstrating SEND, autism and complex-needs expertise.
- Evidencing life-skills and independence outcomes.
- Working closely with families and professionals.
- Showing continuity across age thresholds.

PROVIDER READINESS SCORECARD

How prepared is your organisation for Kent's future commissioning priorities?

Question	Yes	No
Can we identify the Kent localities we can serve reliably today?	☐	☐
Is our reported capacity supported by an available local workforce?	☐	☐
Can we evidence referral response and mobilisation times?	☐	☐
Can we demonstrate workforce stability and continuity?	☐	☐
Do we have Home First, discharge or reablement experience?	☐	☐
Can we evidence specialist or complex-care capability?	☐	☐
Are our safeguarding arrangements suitable for every service group we support?	☐	☐
Can we demonstrate prevention and independence outcomes?	☐	☐
Are our pricing and operating model sustainable across our stated coverage area?	☐	☐
Can we support Direct Payment users where relevant?	☐	☐
Can we support transitions into adulthood where relevant?	☐	☐
Could a commissioner quickly understand where, how and why we are ready to deliver?	☐	☐

READINESS REFLECTION

Kent's commissioning direction suggests that providers will increasingly need to demonstrate resilience at scale, not simply registration or general availability.

The strongest providers will be those that can provide credible evidence of locality-specific workforce, sustainable mobilisation, specialist competence, safeguarding assurance and measurable outcomes.

QUESTIONS WORTH EXPLORING

- How should providers evidence genuine locality coverage?
- What information does brokerage need before contacting providers?
- How can Kent distinguish reported capacity from deployable capacity?
- What specialist services are most needed in each locality?
- How should all-age readiness be assessed under the new homecare model?
- What role can preventative and community providers play in reducing statutory demand?

SOURCES

- CQC Local Authority Assessment: Kent County Council
- Kent Adult Social Care Commissioning Intentions 2025–2027
- Kent Adult Social Care Prevention Framework 2025–2035
- Kent Adult Social Care Accommodation Market Position Statement
- Kent All Age Homecare commissioning papers
- Kent Direct Payments information
- Kent Adult Social Care and Public Health Cabinet Committee decisions

DISCLAIMER

This insight note is based on publicly available information and reflects the author's interpretation of published evidence. It is intended to support discussion and should not be regarded as representing the views of Kent County Council, CQC or any other organisation.

ABOUT THIS SERIES

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