

**CASA;**

# Co-operating In Health & Social Care

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# CASA's Theory Of Change

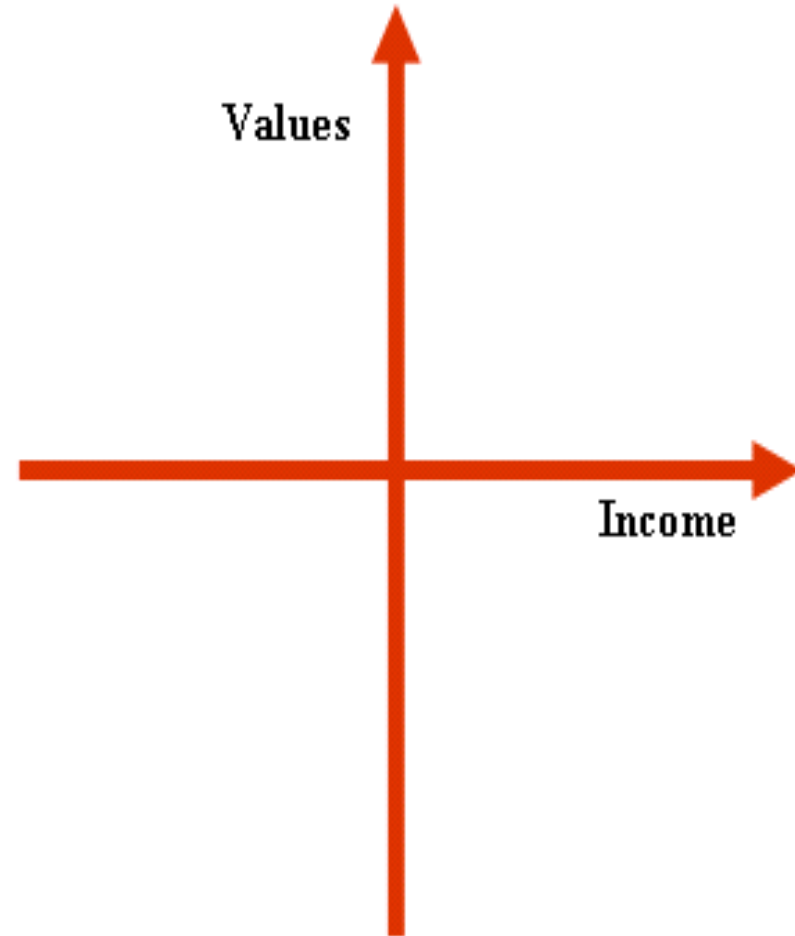
- Engaged Employees Deliver Higher Quality Care
- Financial Transparency To All Stake Holders
- Mutuality Is Key To Innovation



# Mind The Gap; Values become an integral part of the business proposition



- Big Issue
- Café Direct
- Shetland Soap Company
- Care & Share Associates





# CASA In Context; Key Performance Indicators

- A Leading UK Employee Owned Social Enterprise
- Delivery of 24,000 Hours Of Support Per Week
- Quality - CQC – Hold 4 ‘Goods’ & 2 Uninspected
- Operates Across 9

Territories

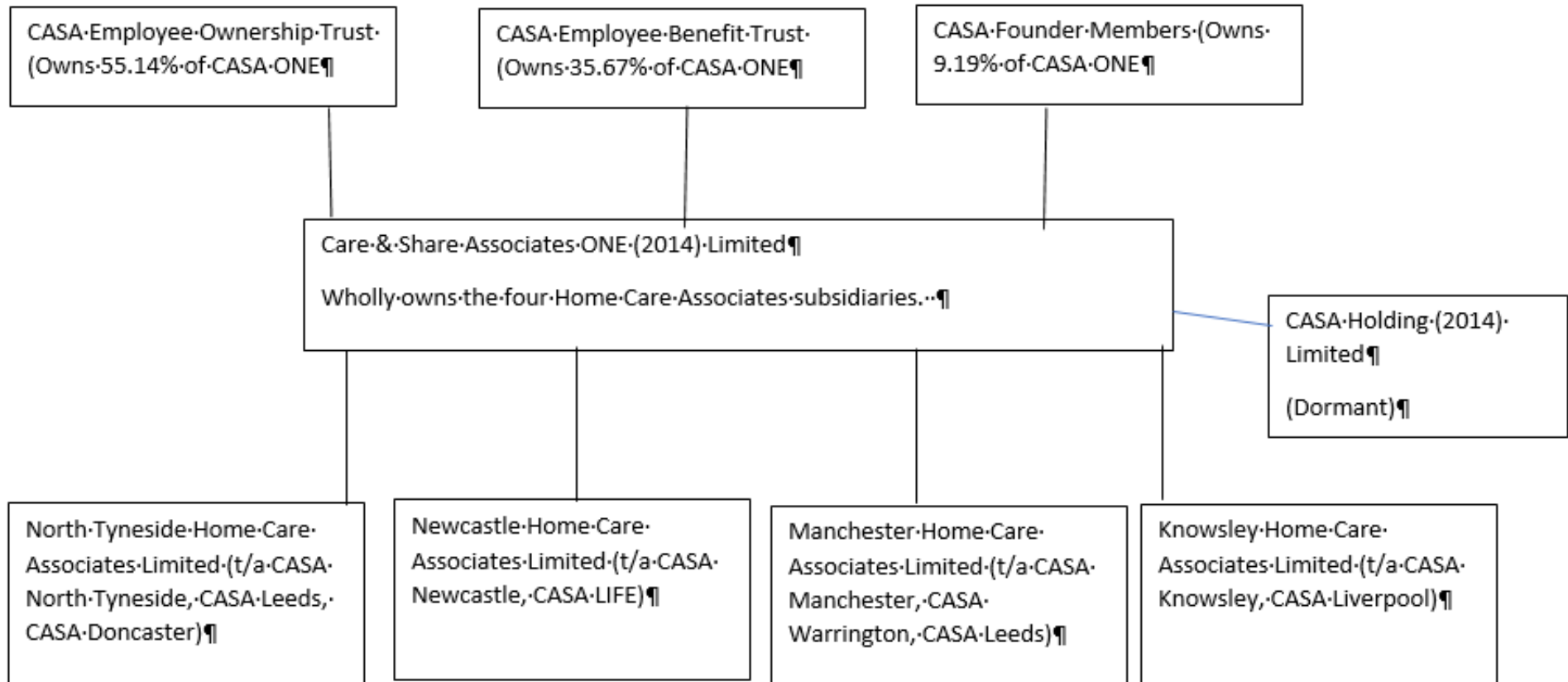
- Employ over 1,000 CASA

Owners

- Current run rate; £17m



# CASA Organisational Structure



# Vision & Ambition

- A Beacon Of Employee Ownership; A Game Changer In Health & Social Care

## 2015 Vision

- It is (was) CASA's ambition to grow from a £10.5m to a £25m turnover, employee owned business, generating in excess of £1.5m in profits per year in the next 5 years.

# Phases Of Development

- 1976 – Little Woman
  - Fun, Ideological, & Values Based
  - Small loan/Sweat Equity
- 1993 – Sunderland HCA
  - Fun, Ideological, & Values Based
  - Small grant/Sweat Equity
  - Contract – straight-forward/guaranteed
- 2004 – Care & Share Associates
  - Fun, Ideological, & Values Based
  - Sweat equity & Complex mix of grants and loans
  - Contracts – Complex procurement process
- 2010 – CASA One
  - Fun, Ideological, & Values Based meets quasi commercial investment



# 2016: One Hell Of A Year

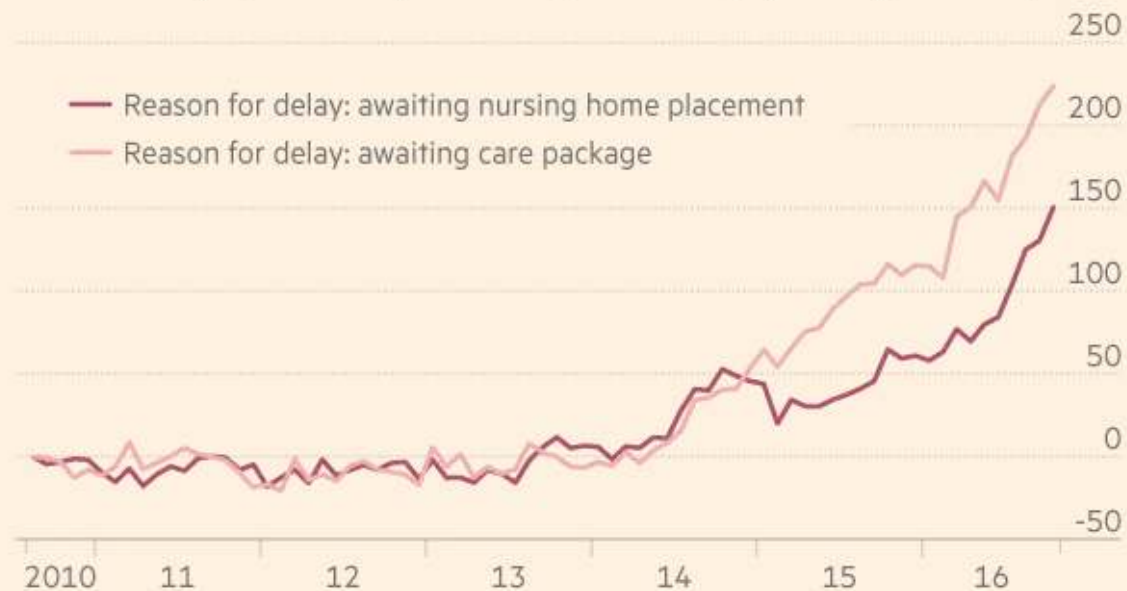


# #Socialcare Crisis

- 6 years of Local Authority Cuts
- £2.6Bn Funding Hole – Precept Can't Fix It
- Increased demand
- Increased cost pressures – NLW
- Health 'economy' broken – hospitals viable if full up/Bizarre GP incentives
- Cancer is Free/Dementia Will Cost You

## Lack of social care provision has led to large rise in delayed discharges from hospital

Number of days by which hospital discharges were delayed, % change since Aug 2010.



## Hospitals are increasingly struggling to meet waiting time targets

% of emergency admissions admitted, transferred, or discharged within 4 hours



# Language

- ‘Tipping Point’ - CQC
- Jeopardy - ADASS
- Crisis
- Unprecedented

# Keeping Our Shirt

- Significant growth in volume & turnover
- 17% increase in T/o
- But negligible profit
- 2016: A year of 4 quarters





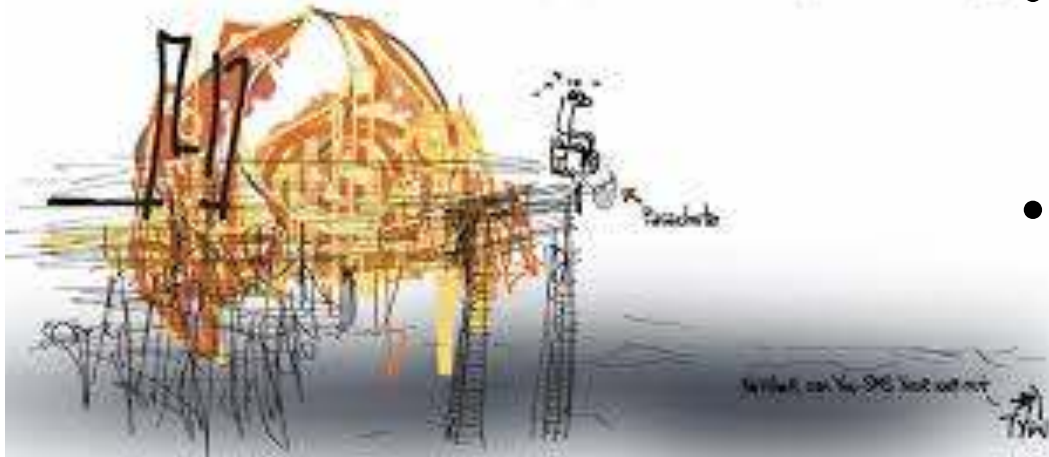
# The BIG CASA Game



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# Burning Platform vs Last One Standing

You Can't Iterate on a BURNING PLATFORM



- Innovation
- Easier To Implement Change
- But Challenging Environment

# CASA's Mutual Response

- Workforce & Enterprise Are Key – Create CASA Careers
- No Financial Leakage
- Profit motive & Incentivisation work
- Financial accounting is open and transparent to all – employees, service users, and commissioners all able to see where the money goes and why – Realistic Returns
- Efficient – A commercial and enterprising approach is the CASA default position..
- Co-production – we need to move away from the traditional commissioner provider split, to where all stakeholders get together to work out what's best.

# Is It Working?

- Backed By Big Issue Invest – Genuine shared journey
- Commissioners Open To A Conversation/Innovative products coming on stream
- Taking up the ‘Private Sector’ slack
- Better Results Achieved & Forecast

# CASA Future: Significant Opportunities Lie Ahead

- Demand will continue to increase
- Focus On Our Four ‘Clusters’
- Continue To Create CASA Care Careers Through The CASA Academy
- Occupy ‘more’ of the health & social care economy – ‘Vertical Integration’
- Develop A JV Asset Base
  - Co-produce property based care



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