

Market Position

Statement

January 2014



1. Strategic direction

Bolton Council wishes to stimulate a diverse market which offers good quality care as standard and a real choice for the customer.

To achieve this:

- We will focus on commissioning quality services which deliver value for money
- We want a balanced care market that offers the customer choice in how, where and from whom they receive their care and support
- We want to enable independence so that people avoid expensive specialist, residential care and health services for as long as possible
- We will only work with providers who can clearly demonstrate a commitment to delivering good quality care and who place dignity, compassion and respect at the heart of their service
- We will aim to work with the market to develop prevention and demand management to reduce harm and avoid hospital admissions

The Health and Social Care integration agenda is in its early stages but will gather pace during 2014/15 and we will need to ensure that the market is kept informed and aligned to any intentions to make strategic changes.

2. About the statement

A market position statement sets out to identify what the care and support market looks like. It provides a starting point for discussions between Bolton Council, local providers and other commissioning organisations.

It contains information about:

- What Bolton looks like in terms of current and future demography and service provision
- The Council's commissioning intentions
- The Council's vision for how services might respond to the changing needs for care and support in the future

This is Bolton's first Market Position Statement. We know there are areas which will need further work to improve the information we hold. It is our intention to continue to work with providers and commissioning organisations to improve our intelligence and data so we can help you with your business planning in future years. In these cases we have outlined what work we are currently undertaking to improve our knowledge of the local market.

3. Key messages in the statement

Strategic direction

About the statement

Key messages

Quality and performance

Growing needs

Demand

Supply

Specific Commissioning intentions

Learning disabilities

Mental health

Providers who we want to work with

Care for the future

Bolton Council expects to see an increase in the number of:

- Older people with multiple care and support needs
- People with mental health problems including a large increase in those with dementia
- Older people living alone
- People with caring responsibilities
- People who are funding their own care; and
- People who receive direct payments in order to arrange their own care

We also expect a small increase in the number of people with a learning disability.

Bolton Council currently commissions or provides care for approximately 6,000 people each year. A further 4,000 people receive a one-off intervention such as equipment or a period of short term support such as Home Support Reablement each year.

With an ageing population we expect demand for social care services to rise year on year. In particular we expect there to be an increased demand for:

- Services which enable someone to remain independent for longer such as reablement, equipment or telecare
- Community based services such as Home Care
- Residential care services for older people particularly for people with dementia and enduring mental illness
- Direct payments
- Day activities for vulnerable people
- Services for carers such as respite

Generally the supply of care and support services in Bolton is a mix of local authority, voluntary sector and independent sector. The mix varies depending on the service.

- There is currently an adequate supply of residential care beds and there are developments in progress which, if completed, will increase the overall supply
- There is currently a minor gap in residential care home beds for people with dementia
- There is currently an adequate supply of 24 hour supported living tenancies for people with learning disabilities and mental health
- There is limited choice for people who require day time activities

Our commissioning activity reflects our strategic direction and responds to our changing picture of demand.

- We will work collaboratively with the Clinical Commissioning Group to deliver effective integrated health and social care services
- We have a strong ambition to work closely with providers and ensure there is a level playing field regardless of the size or type of organisation
- We will encourage providers to design services which provide the specialist support required for people with dementia
- Our aim is to stimulate and assist providers in developing new models of care and support which deliver improved outcomes, quality and value for money
- We want to encourage providers who can demonstrate a person centred focus and can evidence their achievements on outcomes, reablement and enhancing independence
- We will work with providers to ensure that service users can access better quality information particularly those providers that provide services for self-funders and those with Direct Payments

Quality and performance

Bolton Council is committed to commissioning quality services which are safe and deliver good outcomes for services users. To support this commitment, a new Quality Assurance and Improvement Team has been established to put in place a consistent framework to help monitor provider performance, identify where providers are performing well and where improvements need to be made. We want to work with providers, services users and carers in developing our framework so that it is meaningful to all and adds value to the Care Quality Commission's standards of care.

Growing needs

It is expected that the demand for services will be largely driven by changes in the local demographic profile and the health and care needs this leads to.

The increase in the older people's population is expected to continue, with a 17% increase in the number of people aged 70+yrs and a 33% increase in people aged 85+yrs over the next 10 years.

The wards that contain the highest concentration of people aged over 65 are Bradshaw, Heaton & Lostock, Horwich North East, Bromley Cross, Hulton and Little Lever and Darcey Lever.

Current and predicted population of Bolton aged 65 and over	2013	2023
People aged 65-69	14,770	13,490
People aged 70-74	11,000	12,800
People aged 75-79	8,300	12,150
People aged 80-84	5,800	7,530
People aged 85+	5,390	7,140
Total population 65 and over	45,260	53,110

The latest census data identifies an increase in the proportion of people living in Bolton from an ethnic minority background from 11% in 2001 to 18% in 2011.

An index of potential care need was developed for Bolton in 2011/12 combining a wide variety of local data sources to identify geographical areas where there is a higher concentration of vulnerable older people. This identified just over 5,000 older people in the highest needs category meaning they are vulnerable to needing some form of care and support.

We know that at the end of March 2013, there were approximately 6,600 people receiving on-going care services funded by the local authority. Based on population growth we can expect this to increase by around 22% over the next 10 years.

The 2011 Census shows that 7.6% of Bolton's population aged 16 to 64 years (13,414 people) has a long term health problem or disability that limits their day to day activities a lot. The proportion of the population with a disability increases with age, rising to 56% of those aged 85+.

There is considerable variation across the borough in the proportion of people aged under 65 years with a long term health problem or disability that limits their day to day activities; ranging from 4% in Heaton & Lostock and Bromley Cross to 11% in Farnworth and Halliwell.

In 2013, approximately 4,300 adults (4% of the adult population) have a sensory impairment that limits their day to day activities. The incidence of hearing and visual impairments increases with age rising sharply after 75. For those people aged over 75 with a visual impairment, half of them are serious enough to be registered as blind or partially sighted.

The number of adults with a learning disability known to the council is approximately 650 people at present. The expected increase of people with learning disabilities is 4% in the next 10 years.

Changing needs for learning disabilities mostly relates to young people with learning disability, autism and complex needs making the transition into adult services. This will impact across a range of services. In addition we will need to commission community based services to replace those currently funded out of area by the CCG. This is a national issue in response to findings of the Winterborne View Serious Case Review.

Demand

Community based services

Bolton's strategy is to keep people independent for as long as possible. Each year we support over 5,000 people in community based services such as home care and day services.

Recent years have seen a general decline in the number of people receiving community based services funded and organised by the council - a result of people taking direct payments and the impact of signposting people to universal and prevention services. We anticipate this trend to flatten although take up of Direct Payments will continue to increase and have an impact.

- In 2012/13 Bolton Council funded 361,791 hours of home care for 2,285 people

- We are projecting the number of home care hours delivered in 13/14 to surpass that of 12/13 and, because of increasingly complex needs, we expect an increase of 9% in the next 5 years and 20% in the next 10 years
- In 2012/13 Bolton Council placed 164 older people into local day services and we expect the demand for day support/activities will rise in future years
- In 2012/13, there were 320 Extra Care tenancies; 220 people were receiving care. The greatest demand coming from people over the age of 75

Our survey of social care customers revealed that those receiving home care most valued continuity of staff, good timekeeping and consistency of care. Our survey found that home care service users are more likely to report a poor quality of life.

¹Adult Social Care User Experience Survey 2013

Number of people in services funded by the council

(does not include those paying for services with a Direct Payment)

Adults in community based services	2008/09	2009/10	2010/11	2011/12	2012/13
Home Support	3515	3395	2860	2770	2285
Equipment	4394	3705	3851	3305	3156
Community Meals	672	612	668	595	482
Day Care (Older People)	622	485	515	516	465
Day Care (Learning Disabilities)	177	193	167	180	181
Day Care (Mental Health)	67	113	88	97	86
Adult Placement	201	184	182	180	175
Supported Living	491	460	244	179	223
Extra Care	Included in supported living	Included in supported living	202	236	203

Accommodation based services

Demand for accommodation based services is increasing year on year for over 65s and we expect this trend to continue.

- The number of adults in state funded residential and nursing care has remained fairly consistent for the last 5 years at an average of around 1,200 a year
- In 2012/13, Bolton Council placed 373 adults into permanent residential and nursing care which is a 15% increase on five years ago. The increase has come in the over 65 population
- The vast majority of admissions in 2012/13 to permanent residential and nursing care were for physical and sensory disability/frailty (73%); 23% were for mental health; and, 2% for learning disability

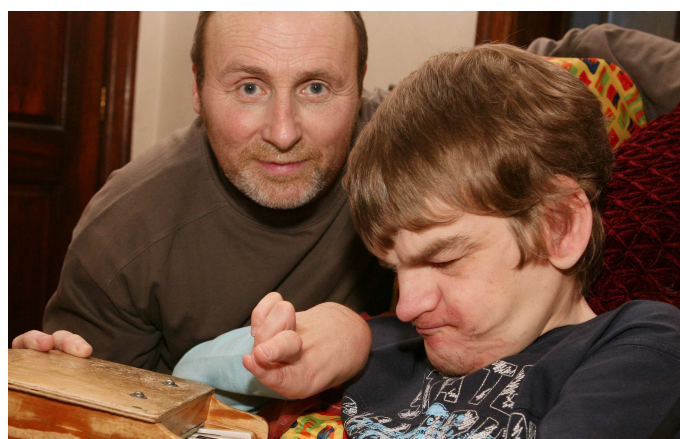
- The average length of stay in residential and nursing care for state funded customers in Bolton is currently just over two years but has reduced year on year
- We expect that demand for residential and nursing care for older people will increase by approximately 2.5% per annum but remain relatively static for 18-64 year olds
- In 2012/13, Bolton Council placed 942 people in respite or short-term residential/nursing care

Our annual survey of families/carers of people living in residential care in Bolton has shown high levels of overall satisfaction with particularly good feedback for safety and security, staff and the quality of care.

According to our survey the most important factors considered when choosing a care home are: friendly and approachable staff; cleanliness; whether the home is responsive to individual needs and choices; and a relaxed homely atmosphere.

Number of adults admitted to state funded permanent residential or nursing care

	2008/09	2009/10	2010/11	2011/12	2012/13
Total number of adults admitted to permanent residential and nursing care (LA-funded)	325	345	360	365	373
Number of adults aged 18 to 64 admitted to permanent residential and nursing care	20	30	20	20	21
Number of adults aged 65 and over admitted to permanent residential and nursing care	305	315	340	345	352



Mental health

At the end of 2012/13 there were just over 1400 people (younger and older adults) receiving local authority social care services with a primary support reason of mental health.

- It is expected that the prevalence of severe mental health disorders in Bolton will increase by 5% in the next 10 years and 12% in the next 20 years. A faster rate of growth than the North West average of 4% and 8%
- Common Mental Disorder (CMD) is predicted to increase by 4% in the next 10 years and 9% in the next 20 years
- In 2012/13 Bolton Council placed 86 younger and older adults with a mental health condition in permanent residential or nursing care
- In 2012/13, 2,255 hours of home care were delivered to people with mental health conditions

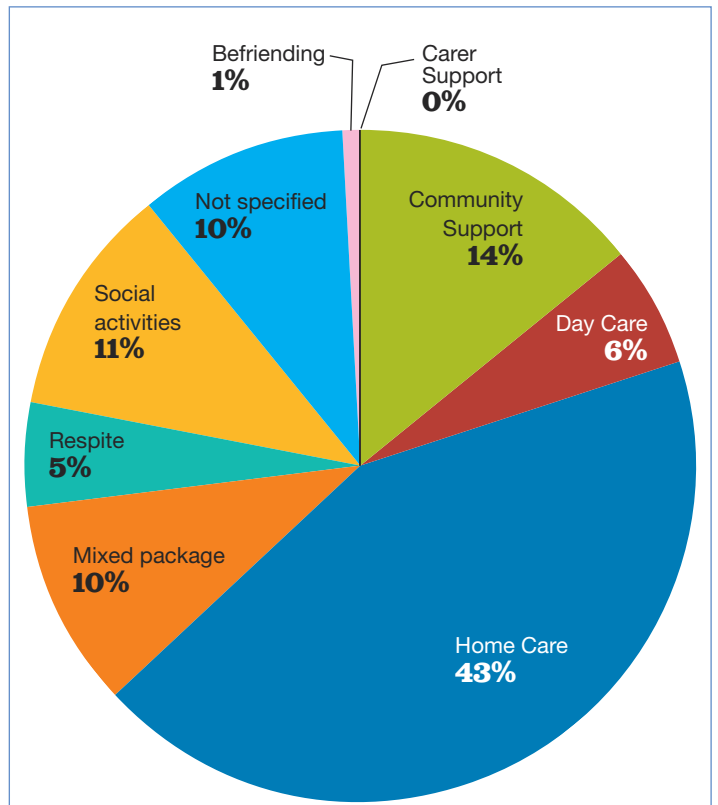
Direct payments

People assessed by the Local Authority as being eligible for Social Care can decide to receive a Direct Payment to allow them to organise their own care.

- Overall, there has been a 77% rise in the number of people taking a Direct Payment in the last four years
- In Bolton, there were 755 direct payment recipients over the age of 65 at the end of March 2013, a 53% rise since April 2010
- The majority of direct payments are spent on care agencies to provide home care

Number of service users and carers using direct payments

2009/10	2010/11	2011/12	2012/13
985	1,075	1,470	1,743



The Adult Social Care Survey 2012-13 showed that those receiving a Direct Payment were more likely to say that services help them with a wider range of quality of life outcomes than those receiving other social care services and that they were able to find the right kind of care. There was also an increase in overall satisfaction with care and support among those using Direct Payments from 2011-12 to 2012-13.

- Increasingly adults with learning disabilities are choosing to take a direct payment and arrange their own care. At the end of March 2013 there were 219 people with Learning Disabilities receiving weekly direct payments including 14 people who used the budget to commission their own supported housing provision
- Out of all learning disabled direct payment recipients living in Bolton the largest proportion of direct payment spend is on home care services, with community support, and social activities all receiving significant proportions of local direct payment spend

People who fund their own care

Our knowledge of those who fund their own care is limited but studies by the Association of Directors of Adult Social Services and the Local Government Association, indicate the proportion of the total social care market that is self-funded is growing².

We are currently engaged in a survey of care providers, focusing initially on residential care in Bolton, in order to gather more reliable data on the services used by self-funders. So far, this research has found that about half of residential care is funded by the Council and about a quarter self-funded. The remainder is funded by the NHS with a small amount funded by other local authorities.

Research³ carried out in 2007 estimated that nationally there were around 750,000 over 65s in receipt of some form of community based service and that 40% were self-funding all or part of that care.

The parliamentary act on the future of sustainable funding system for long term adult social care is due in 2014 and this will place new responsibilities on the council by 2016 to support and assess self-funders to receive care or be placed into care homes. This will also provide opportunities for the council to obtain more intelligence on the needs of self-funders.

Carers

The 2011 census identified just over **30,000** people in Bolton with caring responsibilities, an increase of 2,000 since 2001.

We know there are many more informal carers out there who do not see themselves as 'carers' but simply **sons, daughters, husbands, wives, friends** etc.

Bolton Council funds a number of voluntary sector organisations who deliver services to approximately **4,000** carers in Bolton.

Much more information about **Bolton Carers** is available in our **Carers' Strategy**.

The 2012/13 Carers Survey shows that over half of the respondents (**53.4%**) indicated they were caring for someone who had a disability or long term illness

28.1% of carers in 2012/13 reported that they are able to spend time doing the things that they like and enjoy which is up from **26.3%** in 2009/10.

²Local Government Association, ADASS, January 2011, People Who Pay For Care: A Quantitative Analysis of Self-Funders in the Social Care Market, Oxford Brookes University.

³Forder, J. 2007. Self-funded social care for older people: an analysis of eligibility, variations and future projections, PSSRU Discussion Paper 2505.



Supply

Residential and Nursing Care

There are currently 36 residential and nursing care homes in Bolton providing long term care, two of which are provided by the local authority and 34 of which are provided by the independent sector. In total there are 1,540 long term residential beds registered with CQC. The categories that these homes fall into are as follows:

- Residential only (18 homes: 515 beds)
- Residential with a specialist dementia unit (EMI) (7 homes: 298 beds)
- Residential and Nursing Care (5 homes: 177 beds)
- Residential and Nursing Care with a specialist dementia nursing unit (EMI) (4 homes: 332 beds)
- Residential and Nursing with additional specialist residential and nursing dementia units (EMI) (2 homes: 239 beds)
- Residential and Nursing Care learning disability (2 Homes; 8 beds)
- Residential and Nursing Care mental health (5 homes)

National providers of care homes account for 47% of the beds in Bolton across nine care homes. Local providers account for 49% of the beds across 25 homes and the local authority for the remaining 4% in two homes.

Number of people in state funded residential and nursing care as at March 2013

	2008/09	2009/10	2010/11	2011/12	2012/13
Total	1,280	1125	1,275	1,159	1,250
18-64 yr olds	145	75	145	90	100
65+ yr olds	1135	1050	1130	1150	1150
Learning Disability	75	26	75	30	40
Mental Health	300	374	320	360	350
Physical Disability/Frailty	885	747	865	835	845

Older people's residential care represents the largest proportion of the residential and nursing care market locally. While our analysis indicates that the main growth area is likely to be dementia services there are currently fewer care homes with this specialism.

Since 2011, Bolton Council have granted planning applications for 220 additional residential or nursing beds across Bolton. To date, just over a quarter of these are in the process of being developed.

Home care

Bolton Council commissions home care from 23 providers on a framework agreement. A framework agreement allows ordered home care to be delivered across 7 geographical 'zones' between those providers on the agreement. The allocation through zones is designed to minimise travelling time between customers and to maximise efficient use of resources.

There are a total of 33 home care providers registered with CQC to deliver care in Bolton. This number and mix of statutory, private and third sector organisations means that the local market is highly competitive. Local providers are typically small although some larger organisations also have a presence in Bolton.

Day care

There are five local authority provided older people's day centres across Bolton. Each provides a service exclusively for people aged over 65 years. Of the five available centres for older people only one specialises exclusively in dementia, the primary need met by this service is carer respite.

75% of the current older persons' day-centre capacity is for people with a physical disability or sensory impairment whereas 23% of the overall capacity is for people with a primary diagnosis of dementia or other mental health issues.

There are currently 8 disability day service locations across the borough catering for adults aged 18 to 65 with learning and physical disabilities. The council currently runs 6 of these services. In addition there is an externally commissioned service for people with learning disabilities and a specialist sensory centre run by the council.

Adult placement

The adult placement scheme operated by the Council provides long term, short term, sessional care, befriending to approximately 175 people. The long term service is predominantly provided to adults with a learning disability in family homes in Bolton.

Supported living

Bolton Council currently provides support to 79 people with learning disabilities and 28 people with a mental health condition across 26 properties. There is currently only one directly commissioned property specifically for people with physical disabilities or acquired brain injury; this property supports 6 tenancies.

There are 139 adults with learning disabilities living in 40 properties where care is provided by an independent sector provider and 4 people live in properties outside the borough.

There are 5 properties for 20 adults in supported housing where the care is commissioned via direct payments. This has developed incrementally in response to demand from individuals however it is anticipated that this will have modest growth in the future.

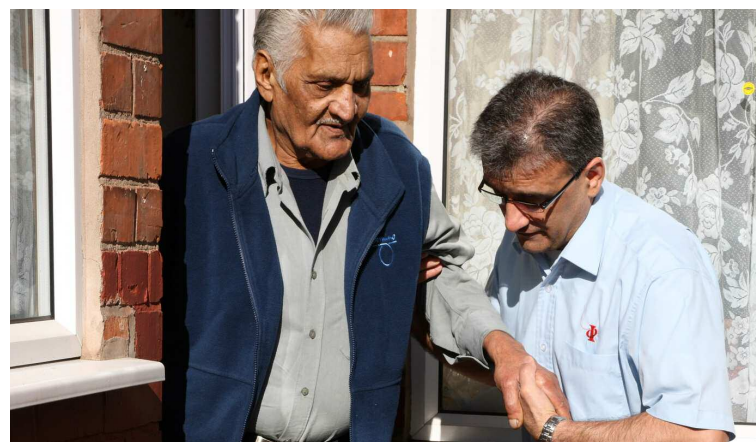
Extra care

Bolton has ten Extra Care housing schemes offering 320 individual properties. All of the properties are provided by registered housing providers. Bolton Council provides the care at four of the schemes with the remaining six provided by independent providers. Of the 320 properties available with on-site care, 298 are for social rent and 22 are shared equity properties.

Equipment

There is a wide variety of disability equipment retailers and suppliers across the borough providing the following equipment: mobility; toileting; bathing; kitchen; and equipment for general use around the home. These are mainly used by self funders but there is a council run equipment service that can help with advice and information on equipment and modifications in the home. The service undertakes a needs assessment to determine eligibility and requirements.

The Council funds a range of Telecare equipment for around 150 people at any one time. The service is Council run but equipment supplied by one national provider.



Sensory Impairment Support Services

There is a current in-house service which works to help and support people with a sensory impairment both vision or hearing loss. The aim is to ensure people lead a full and active life within their community and maintain independence at home. The service provides assessment, advice, training and equipment. The service is delivered through a drop-in and a separate one to one appointment system.



Community meals

There is a council run community meals service (including meals on wheels) which is available for people who are finding it difficult to cook for themselves. This service helps maintain a person's independence and also, where it is provided in luncheon clubs, gives the opportunity to reduce social isolation. Service users are required to pay for delivered meals.

A variety of nutritionally balanced meals are delivered including hot meals, frozen meals (delivered by a private company), meals for special dietary needs (diabetic, vegetarian, low salt, low fat and gluten free) and also those that meet cultural needs (Asian Vegetarian, Asian Halal, Kosher, Caribbean, West Indian, Middle and Far Eastern and African).



Carers' services

Bolton Council operates the Carers' Grant Scheme where local voluntary and community groups can apply for grants to deliver services/activities which help achieve outcomes for carers. Applications for the grants are currently invited on an annual basis.

Five voluntary sector providers are currently funded through the Carers Grant, and it is hoped that several more will be able to deliver targeted support to priority groups of carers through a second round of the Carers Grant Scheme, which is currently open for applications.

A range of services and activities are provided under the grant including carers' breaks, advice and information, health and wellbeing services, dementia specific services, self-help groups, a carers' helpline and culturally sensitive activities.

Prevention and early intervention

The council funds a wide variety of services which contribute to the prevention of people requiring long term social care and assists in their independence and improving their health and well-being. Examples of preventative and early intervention services commissioned include sheltered housing, community alarms, care and repair, drop-in centres, advocacy, befriending and other services that also reduce social isolation.

Bolton Council has grant agreements in place with a wide range of voluntary sector organisations that provide day-time activities for older people. It is unknown what day care services self-funders are accessing currently.

There are also other complementary preventative services funded by partner organisations such as mental health advice, Urban Care and Neighbourhood Centres (UCAN) and Staying Well.

Specific Commissioning Intentions

A “commissioning intention” is a brief statement that sets out the priorities of the commissioning authority in respect of services and market changes it wishes to deliver. The commissioning intentions below are an outline of the Council's priorities during 2014:

Older people

Home care

- To tender the Home Support Framework agreement by 2015 and build in stronger requirements around provider quality assurance and effective management of service
- Consider models of home care with Clinical Commissioning Group and examine piloting different forms of home care that will reduce hospital admissions and reduce the need for residential care

Residential care

- To reduce the frequency of registered care home placements
- To develop a quality framework within 2014/15 for all Care Homes across the Borough
- To look to stimulate the market to increase the supply of beds specifically for those with dementia and in particular work with the CCG to develop services for those with more challenging behaviour/complex needs
- We will work with care home providers to help them prepare for the future government changes to the system of long term care funding

Day support and activities

- To stimulate more community based and volunteer run models of service including exploring the possibility of piloting innovative day support and activities where people can be enabled to get employment, access leisure activities

Learning disabilities

Supported housing

- The current framework expires in March 2016 and work will commence later in 2014 to begin to identify future commissioning intentions
- Our specialist contract for people with autism and complex needs expires in March 2016 and we will examine future commissioning intentions by the beginning of March 2015
- In light of increasing demand for specialist 24 hour support and in response to Winterborne View, we are exploring the options of commissioning additional services in partnership with the CCG

Services for those in transition

- We will be working with partner organisations to plan commissioned services for children in transition to adult's services from an early stage. This will be to ensure the best continuity, quality and cost of care

Day support and activities

- To tender for a framework for Day Support providers to ensure there is service flexibility to cope with changes in need/demand
- To stimulate more community based and volunteer run models of service including exploring the possibility of piloting innovative day support and activities where people can be enabled to get employment, access leisure activities

Short term breaks and respite

- We are currently aware of some developments in planning but want to work in partnership with developers to ensure a small expansion of provision provides greater choice for service users and carers

Mental health

We will work with the Clinical Commissioning Group as the leads for mental health to deliver their commissioning intentions:

- To continue to review those service currently commissioned through the Bolton Clinical Commissioning Group including qualitative and quantitative measures to ensure delivery of key national and local targets and ensuring good outcomes for patients/service users and value for money
- Ensure on-going improvements in quality of care for people who experience mental health issues in order to secure good mental wellbeing outcomes for the population of Bolton
- Continue to work collaboratively with all partner agencies to deliver the Integrated Care Multi Disciplinary Team health and social care model

In terms of specific social care commissioning intentions ensure needs are met by services effectively and appropriately.

Supported housing

- The existing provision is adequate to meet current need and there are a number of non-commissioned developments which may extend choice for customers. We are however working with the CCG to monitor need and will commission supported housing if services are required to meet specialist need

Services for those in transition

- We will be working with partner organisations to plan commissioned services for children in transition to adult's services from an early stage. This will be to ensure the best continuity, quality and cost of care

Day support and activities

- To stimulate more community based and volunteer run/peer support models of service including exploring the possibility of piloting innovative day support and activities where people can be enabled to get employment, access leisure activities

Short term breaks and respite

- There are currently no plans to develop further respite provision

Sensory Impairment Support Services

- The existing provision is adequate to meet existing need and there are no plans to further develop or expand the provision

Carers support

- We are seeking an extension of services to support informal carers including models of volunteer run groups
- To complete a second round programme of carers grants focusing on specific groups
- We will monitor providers of grant funded support and expect a good level of delivery against the Carers Strategy outcomes

Prevention and early intervention

- We are seeking to refocus services on the reduction of harm and avoidance of hospital admissions
- Evaluate the impact of equipment including Telecare and Telehealth with a view to enabling more people to remain independent for longer



Providers who we want to work with

- Those that work proactively to quality assure their services and are able to evidence the positive outcomes for service users
- Those that want to work in partnership with all agencies across the borough to continuously improve service provision
- Those that are delivering improved value for money and added value whilst avoiding sacrificing quality standards
- Those that proactively listen to service users views when improving service delivery
- Those that work to develop and train their workforce to deliver the above
- Those that promote independence choice and control of service users
- Those embed a culture of dignity and respect into services

All the above expectations will be reflected in future service specifications.



Care for the future

The things we will be engaged in over the next two years based on what we know about supply and demand and the level of resources.

- A model of quality assurance for care services which informs service users and other citizens of the quality level of service
- Further develop prevention such as early intervention services to help reduce future demand
- Increased use of voluntary run services to complement existing statutory care
- Improve our intelligence on self-funders and direct payment recipients in order to stimulate specific service growth
- Working with housing providers to develop models of housing to allow older people to stay in their own homes for longer reduce the need for home adaptations and give greater choice to disabled people who cannot achieve independent living due to lack of suitable housing

How we use our resources

In Bolton £21m was spent on state funded residential care last year and £8m on home care out of a total adult care budget of £92m.

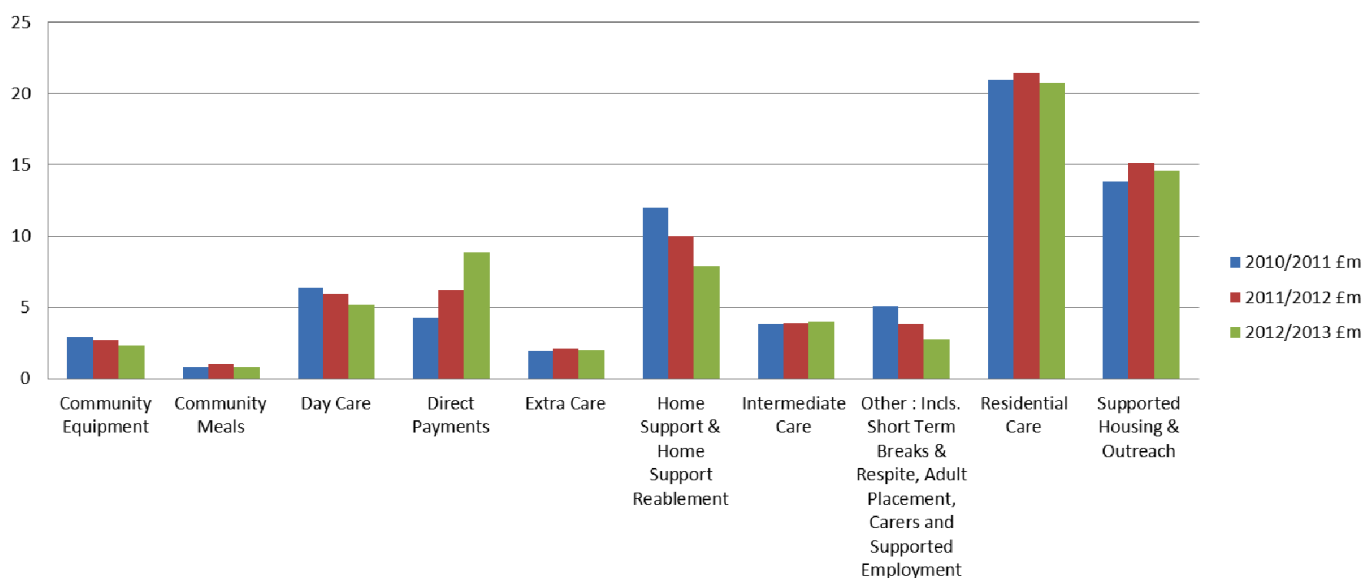
Nationally

In 2012, 83% of councils set their threshold for eligibility for state-funded care at "substantial"..... this is also true of Bolton.

The adults, health and well-being budget in 2012/13 was 6% less than the previous year; the budget available in 2013/14 is a further 4% less; and in 2014/15 will be a further 4% less.

Last year the Council spent £58m (net) with over 350 organisations on social care services in 2012/13 which constituted 72% of the total adult social care spend.

Distribution of total gross social care service expenditure



Fee levels residential care

Average weekly fee paid last year for residential care

Residential Care	£382
Residential Care with nursing	£491
Actual dementia premium	£43