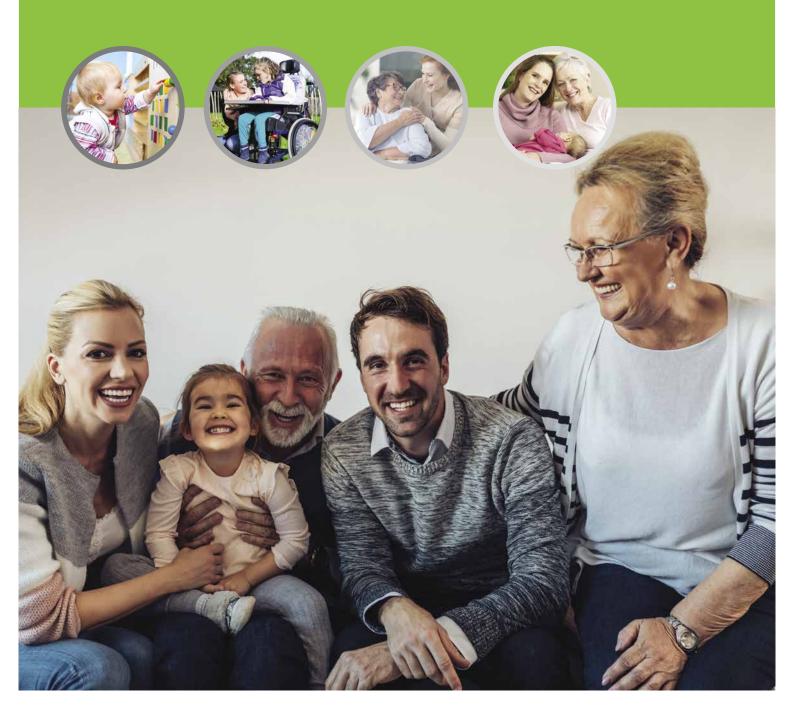


Market Position Statement 2019/2021

Adult & Children's Social Care & Health Services



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Market Position Statement 2019/2021

Adult & Children's Social Care & Health Services

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Welcome to Durham County Council's Market Position Statement

Hello and welcome to Durham County Council's third Market Position Statement (MPS). This document has been produced with input from a number of internal and external stakeholders including service providers and sets out the direction of travel for Children's and Adult Social Care, Public Health and Housing during 2019/2021.

What is the Market Position Statement for?

The aim of the MPS is to bring together information and analysis about the local market so that current and prospective providers understand the local context, what is likely to change and where opportunities might arise in the future.

The MPS is for both existing and potential providers with the purpose of helping them to shape their business plans to support the council's vision for the future of local public health, social care and housing markets. It will help providers to:

- Identify opportunities that they may tender for
- Develop their services to meet local need and demand

This MPS is designed as an interim document, to be used until the development of an Integrated Health and Social Care Market Position Statement for County Durham is finalised (see Section 7 – Messages for providers of Care and Support to adults – for more information).

Key messages for providers

Services in County Durham in the future should:

- Be preventative so that people can regain independence and move away from support or on to less intensive support.
- Be delivered in a more integrated way, with priorities aligned to improved service delivery and outcomes across the health and social care system.
- Encourage personal and community resilience.
- Offer short term interventions where appropriate.
- Be flexible and person centred and developed with input from service users and carers.
- Be designed and implemented around individuals and their communities.
- Identify and achieve outcomes for service users and carers.
- Be developed in partnership with the council and other commissioners and providers of service; for example health and the voluntary community sector.



I hope that you find this document accessible and useful. We plan to refresh the 'Planned procurements' section on page 26 on a quarterly basis to ensure that providers are as up to date as they can be about future developments.

Denise ElliottInterim Head of Commissioning

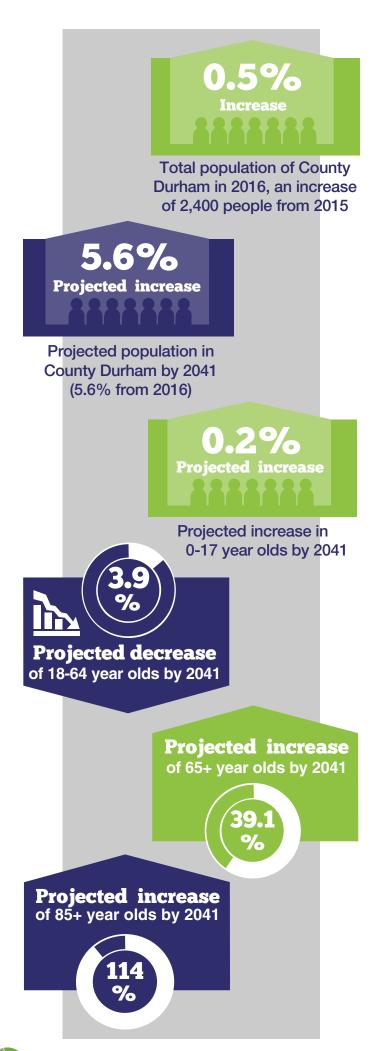
2. Introduction

About County Durham

County Durham is a socially, economically and physically diverse area, home to over 0.5m people in 12 main towns with over 300 smaller settlements, many of which are former colliery villages. The county plays an important role in the economic success and stability of the North East, with key transport links (A1M) and the East Coast main line railway running through it, providing infrastructure vital to local employment and the regional economy. Around 90% of the population lives in the east of the county, predominately the former Durham coalfield. The more sparsely populated western dales form part of the North Pennines Area of Outstanding Natural Beauty.

Our population is changing, meaning that County Durham will see significant demographic changes in the future. By 2030, the number of children and young people aged 0-17 is projected to increase by 0.7% (from 2016), reversing some of the declining trends seen prior to 2011. The number of people aged over 65 is projected to increase from almost one in five people in 2016 (20.2%) to over one in four people (27.0%) by 2030.

Predictions are for a fairly stable population trend for people with learning disabilities with a level of need requiring statutory social care interventions. Whereas the number of people with a physical disability aged between 18-64 years is expected to increase overall by approximately 500 people by 2020. The number of people with a mental health need is not expected to change significantly.



3. National developments and local context

For national developments and local context see the links below:

National developments

Care Act 2014

Children and Families Act 2014

Prevention concordat for better mental health - GOV.UK

NHS five year forward view

NHS 10 Year Plan (awaiting publication)

Local Context

County Durham Joint Strategic Needs Assessment - Durham County Council

Integrated Needs Assessment consultation - Durham County Council

County Durham Joint Health and Wellbeing Strategy - Durham County Council

Sustainable Community Strategy - Durham County Council

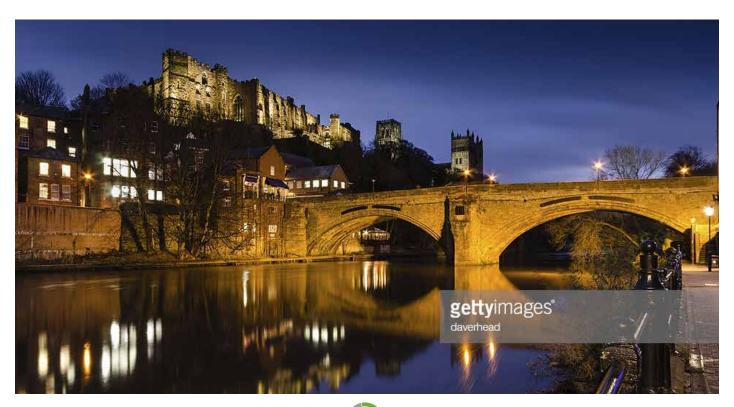
Joint Strategic Needs Assessment (JSNA)

The JSNA helps the council and the CCGs inform the planning and improvement of local services and guides us to make the best use of the funding in the commissioning of services in County Durham.

County Durham's JSNA is not just about health and social care, but reflects the many factors that can influence people's health and wellbeing. Locally it has provided the evidence base for the Joint Health and Wellbeing Strategy (JHWS) and has informed the development of the key strategies and plans, including the Sustainable Community Strategy and the Children, Young People and Families Plan.

Durham Insight

Durham insight is a shared intelligence, research and knowledge base for County Durham, informing strategic planning across Durham County Council and its partners. The aim is to provide users with an easy way to access and share information, intelligence, research and knowledge for deeper insights about their local area or communities. This resource will be developed further over the coming months. www.durhaminsight.info



Key Messages from the JSNA

- People in County Durham are living longer; life expectancy for both men (78.0 years) and women (81.4 years) has been improving over time, but the rate of this increase has slowed and there is still a significant gap between the life expectancy (LE) in County Durham and the England average.
- There is also a social gradient to LE within County Durham, where men and women in the most deprived areas have a LE of between 7 and 8 years shorter than the least deprived areas.
- It is also important to determine whether additional years of life are being spent in good health or prolonged poor health and dependency. Healthy life expectancy (HLE) adds a quality of life dimension to life expectancy. Similar to LE there is inequality in healthy life expectancy between County Durham and England, and within County Durham. Male and female HLE in County Durham is statistically significantly lower than England but has increased slowly over time.
- There is also a social gradient to HLE within County Durham, where men and women in the most deprived areas have a life expectancy of between 13.8 and 14.5 years shorter than the least deprived areas.

	Men	Women
Life expectancy (2014-16)	78.1	81.4
Healthy life expectancy (2014-16)	59.1	56.7
Years in poor health	19.0	24.7

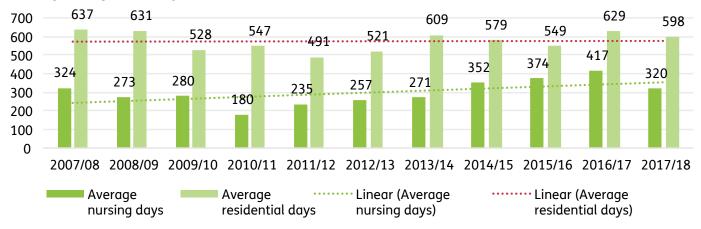
- In addition to this, locally HLE is consistently below retirement age, indicating levels of ill health among the working-age population and suggesting many residents are not able to enjoy their retirement in good health. If someone is diagnosed today with a long term health condition at the age of 51 years there is still on average 16 years of working life before state pension eligibility. The key point is that, compared to England, not only do people in County Durham live shorter lives, but also spend a smaller proportion of their life in good health and without disability.
- 14.5% of County Durham school children have Special Educational Needs and Disabilities (SEND). That's around 10,400 young people in County Durham. This is similar to England but statistically significantly lower than the North East.
- Just over one fifth of the County's population is made up of people aged 65 and over.
- Prevalence of long term conditions (such as diabetes, coronary heart disease and stroke) is significantly higher than the England average.
- Estimates suggest that nearly 7,000 people in County Durham aged 65+ have dementia. Projections suggest that this number will rise to nearly 12,000 by 2035. As this population will experience increasing levels of morbidity this will present a significant challenge to health and social care services.
- Estimates suggest there are around 10,000 children with a diagnosable mental health condition in County Durham, that's one in ten people.



- Estimates suggest that 1 in 4 adults will experience mental health problems at any one time (25%). For County Durham, this represents over 100,000 people aged 18+.
- Durham has a higher rate of older people admitted to permanent residential/nursing care (762.7per 100,000 population) than England (610.7 per 100,000 population).
- Evidence suggests that people are being admitted to permanent residential care later in life (average age 87 in 2017/18). Length of stay seems to be decreasing (598 days in 2017/18 compared to 637 days in 2007/8).



Average Length of Stay



- In County Durham there were over 2,330 emergency admissions for falls for those aged over 65 in 2016/17. This is statistically significantly higher than England. Falls are the largest cause of emergency hospital admissions for older people, and have a significant impact on long term outcomes e.g. being a major factor of people moving from their own home to long-term nursing or residential care.
- Estimates suggest that 20% of the older population are mildly lonely and a further 11% are intensely lonely. For County Durham this would mean around 19,000 people aged 65+ are lonely and over 10,000 experiencing intense loneliness.
- There are approximately 59,000 adult carers in County Durham. The number of carers aged 65+ providing unpaid care is set to increase by 27.9% by 2030.



4. Messages to the Whole Market

Finance and funding

In 2017/18 the council spent over £145 million on adult social care and over £11.5 million on children's social care in both the independent sector and voluntary and community sector. This figure excludes direct payments, where the expenditure in this area for 2017/18 was over £11 million for adults and over £350,000 for children. Over £28m has been spent on Public Health and £15 million on housing related services in 2017/18.

The council's Commissioning Service continue to achieve significant savings through service remodelling; negotiation with existing providers; and some decommissioning and, where appropriate, reinvestment in more efficient services to better fit future needs.

The latest Medium Term Financial Plan (MTFP) information shows that Durham County Council will have made £224m savings to 31 March 2019, with a further c£35m of savings between 2019/20 and 2022/23.

Continued support for a wide range of preventative services and a transformation approach in front line children's services and adult care are helping to ensure that the Council's higher cost social care resources are targeted at those most in need.

This approach will continue with the council seeking further opportunities to commission services more efficiently whilst improving quality standards and an increased front line focus on the development of local community resources, alternatives to traditional resources and supporting the growth of the current reablement, rehabilitation and recovery approach.

The council is committed to stimulating a diverse market, where innovation and more efficient and effective ways of working are encouraged and inadequate practice is addressed. We will therefore continue to involve and engage existing and potential providers and stakeholders to ensure we look for different approaches to meet diverse and developing needs.

Integration

Social care and health organisations across Durham have agreed to an ambitious plan to further integrate services in the future. Revised management structures are being established and a dedicated Provider Alliance group will ensure that provider issues and market factors are considered throughout the social care and health system.

Providers should be aware that partner organisations will continue to seek opportunities to jointly commission services in the future, reducing duplication of work and allowing providers more opportunity to deliver services across the whole market. Service users should not experience different approaches to services because they are being commissioned by different organisations and this integrated approach will ensure that resources in Durham are delivered in the most efficient, cost effective way.

Please see Section 7 – Messages for Providers of Care and Support to Adults – for more information.

Supporting the provider market

Durham County Council intends to deliver a programme of work in the coming years to enhance, maintain and support workforce training, recruitment, retention and development in a number of adult service sectors across provider markets, such as domiciliary/community-based care, residential /nursing care, day services and the voluntary sector.

This work will be funded through the Improved Better Care Fund (IBCF) and providers and their priorities will be a key consideration in planning the programme. This supporting the provider market initiative is designed to be transformative, with an emphasis on new ways of working; including utilisation of new technology to support improvement.

Early examples of interventions linked to this work, such as falls training/increased emphasis on falls response; brokerage; and additional reablement resources, are already benefitting service users, providers and health and social care systems across Durham.

5. Market Opportunities

The following suggestions are ways providers can improve the quality of the services they deliver:

Working with stakeholders - Involve relevant council staff, service users and their carers/ family in the design and development of any services, their feedback is key to improving the quality of services. Providers need to consider how feedback can be applied practically to develop new or improve existing services.

Monitor and review performance -

Tracking performance and auditing of key areas of service delivery ensures areas for improvement can be identified. This helps to improve quality, identifying best practice and benchmarking with others ensures learning can be applied, leading to service improvement. Clear standards, consistency and compliance to service delivery expectations ensures quality assurance. A cycle of plan-do-check-act ensures improvement is monitored and can be demonstrated.

Review marketing tools used – providers can promote their service in the most effective places (e.g. Locate which is County Durham's 'emarket place' www.durhamlocate.org.uk). Consider whether information provided to people regarding services is accessible and easy to understand.

Improving outcomes for people - as part of the increased focus on quality for service users, there is a new emphasis by commissioners in ensuring good quality outcomes for people. We are looking for providers who can deliver innovative, flexible person centred services and, from a broader point of view, we will expect good providers to recognise that the people using their services and their carers are experts in their own lives and are therefore essential partners in the design and development of services.

As an example of this new approach, the council recently assessed a service user with a learning disability who was clear that he didn't want to access a day service. We

arranged a Virtual Budget for the individual, which he then used to attend bespoke music sessions where he was taught how to create and record his own music. This tied in with his interests and achieved his identified care plan outcomes of increasing self-confidence and skills for future employment/volunteering.

Focus on workforce development -

Appropriately trained, qualified and competent staff who are well supervised and managed improves the quality of service delivered. We have offered Falls Training to 44 care homes during September – November 2018, based on those with the highest incidence of emergency call-outs (falls being the major contributor to these). A pilot on Sepsis Training is also being undertaken with 36 staff working in Extra Care, domiciliary care and Reablement during October 2018 and if successful, will be rolled out to the wider provider market in early 2019.

Durham Dales Easington and Sedgefield Clinical Commissiong Group are also implementing infection control training with domiciliary care providers. An update has been delivered at the Domiciliary Care Forum and arrangements are being made for further sessions in the County, with key provider staff being trained so that they can cascade learning to their individual organisations.



Quality Assurance – The Safeguarding Practice Development Team, commissioners, Infection Prevention and Control (IPC) nurses and Care Quality Commission (CQC) work closely together and with providers, having regular information sharing meetings to discuss the quality of locally registered services, agree ways to improve this where required and plan how to respond to developing problems.

The council's Commissioning Service will continue to monitor contracted providers to assess the quality of service provision using relevant evidence-based measures and to ensure contractual compliance. We will continue to further develop effective processes for ensuring the quality of services, whether or not they are registered with CQC. We will ensure that Locate continues to indicate where a service is CQC registered or accredited with the council to help service users make informed choices when they are choosing a care home or other service, funding their own care or in receipt of Direct Payments.



Service user contributions to costs of services

All Councils who have decided to charge for services must follow regulations issued by the government. Within County Durham, those people who are assessed as being eligible for social care services may be expected to make a financial contribution towards the cost of those services depending on their financial circumstances. Please refer to the council website for further information Paying for your care and support - Durham County Council

Not all services are currently chargeable, for example intermediate care, advocacy services and some carer support services. Charging implications for services will be communicated to the people who will access them and the providers that will deliver them.

Person centred approach

We want all our services to treat each person according to their individual care and support needs and preferences. It is important that providers adapt their service to deliver flexible options and tailored support, particularly as more and more people will be making their own choices in purchasing care utilising their Personal Budgets and Direct Payments, or as self-funders.

A person centred approach to care and support, will support people to:

- live independent lives in the way they have chosen, based on information about the options available, and as much involvement as they want in decisions about what care and support they need and how it should be delivered.
- maintain relationships with family and friends and provide opportunities to take part in community life, including engaging in activities which match their interests, skills and abilities.
- live without fear of harm or abuse and support them to manage any risks which might arise and to avoid unnecessary risks.
- experience the provision of care positively, through relationships based on mutual respect and consideration, and where care - designed around their needs - is both consistently delivered and well coordinated with other agencies.

There is no reason in principle why these elements cannot apply to all groups of people needing care and support regardless of the setting in which they live, be it a care home, sheltered housing or their own home. Indeed it is important that such elements are present for all people in all circumstances. That is the essence of personalisation - tailoring care and support to what individuals choose as a means of helping them to live their normal life. People don't want to be defined by their condition – they are not suffering from dementia or autistic or subject to multiple co-morbidities. They are, first and foremost, individuals with very personal hopes, fears, aspirations and relationships.

Self-funders

The council expects the number of self-funders seeking care to increase in the future and has planned for more individuals seeking our advice as a result of the Care Act 2014, which outlines updated responsibilities for such individuals. The council has a duty to support those people who choose to fund some or all of their care and support and who need non-residential services. In limited circumstances, the council may also choose to exercise its discretion under the Care Act to arrange care for self-funders who need residential or nursing care.

We will continue to develop information and improve support and advice on the options available to self-funders, including potential brokerage services. The council also continues to improve and extend its online Locate adult care information service, which is an important tool for self-funders looking for guidance on care services in the County.



Voluntary and Community Sector Enterprise (VCSE)

The council will continue to signpost a number of people to services in the community and an assessment will be made about the scope and ability of small and medium VCSE providers to meet this requirement. The role of the VCSE in combating social inclusion is increasingly important and VCSE providers across the county will be encouraged to work responsively in their local communities.

VCSE organisations play a key role in the delivery of services, particularly at a time of major change for the public sector and are well placed to take advantage of opportunities and identify new ways of working. The sector can become a delivery agent that will ensure the sustainability of vital services across the county by taking a proactive approach. The council will seek to evolve and strengthen our ethos of partnership working with VSCE providers.

Our VCSE Strategy identifies that knowledge has improved, understanding increased and productive working relationships have developed. All partners recognise that a strong, active and flourishing VCSE is a vital component in building resilient communities and enabling individuals to reach their potential.

6. Working with Durham County Council

Corporate procurement

As a contracting authority the council must adhere to procurement legislation in the form of the Public Contracts Regulations 2015. Within this legislation, and relevant to social care and health services, are rules that allow flexibility in procurement for certain service contracts in social care, health and education - they allow a Light Touch Regime (LTR) to be applied to the procurement process. This allows us to tailor the procurement to take into account additional criteria such as the market and its development, specific needs of the client group, and the involvement and empowerment of service users.

Further information on how to do business with the council is available:

Support in using the NEPO ProContract portal and more information on public procurement legislation (Public Contract Regulations 2015) is available from corporate.procurement@durham.gov.uk

Information on the procurement process and tips for completing a bid, as well as details of supplier engagement events for large procurements, see www.nepo.org



Social value

The council are fully committed to wider social benefits and the environmental wellbeing of County Durham and fully embrace the duties set out in the Public Services (Social Value) Act 2012.

In 2013 Durham was the first local authority in the North East to establish its Social Value Task Force. In 2016 the council was a winner of the Social Value Leadership Award, and we continue to be a committed member of the National Social Value Task Force.

We have applied our social value duties in a wider context than the Act requires, by contributing to the work of the Local Government Association (LGA), and as a contributor to the Social Value Portal in developing a national model for implementation of social value through procurement. This national model considers opportunities for social value in the design of the procurement process, the specification, specific clauses, or by the way the evaluation criteria is applied. An example of this is the most recent domiciliary care procurement which appointed the majority of providers from Durham/North East region. This promoted local economy, business sector employment through Careers in Care. The project manager for Supporting the Provider Market will work with providers to enhance recruitment/retention and skills in the coming years.

The council will continue to promote and embrace the requirements of the Public Services (Social Value) Act 2012 by pursuing improvements to Durham's economic, social and environmental wellbeing, which are recognised as the three pillars of sustainable procurement.

7. Messages for providers of care and support to adults

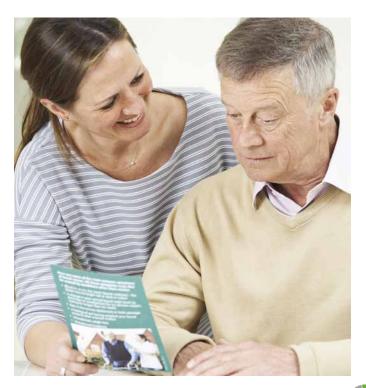
The work of DCC Commissioning in relation to adult care and support services will focus on a number of key areas:

Integration of health and social Care

Integration has been a key policy driver for many years within health and social care. Most recently the Five-Year Forward View and the Care Act 2014 outlined the need to design and implement services around individuals and their communities, to further enhance pathways and joint service provision across health and social care.

The NHS locally have already began to integrate their commissioning and delivery functions, for example the five Clinical Commissioning Groups across Durham, Darlington and Teesside have a unique partnership with Tees Esk and Wear Valley NHS Trust called the Accountable Care Partnership, which focuses on integrated NHS commissioning in relation to learning disabilities and mental health.

This way of NHS integrated working makes best use of resources, of the skills and expertise of staff and allows any savings made to be reinvested into front line patient care.



Teams Around Patients (TAPs)

This model acknowledges that more care should be delivered in community settings and at home, through better integration of provision by a range of staff delivering care which supports those patients who are most vulnerable and are at risk of deterioration of their health and wellbeing. The TAPs model has an increased focus on prevention and promoting independence by coordinating care across the whole range of a person's health and care needs.

TAPs are operational across County Durham, principal outcomes include reducing avoidable hospital admissions, improved out of hospital services, less presentation at Accident and Emergency departments, improving rehabilitation and Reablement services, reducing the need for permanent residential or nursing care home placements and connecting and supporting people better in their own communities.

Joint Strategic Commissioning Function

An agreement has been reached in principle that exploring a Joint Strategic Commissioning Function would benefit County Durham. This could potentially include the commissioning of community based services for children and adults across the County. Acute (hospital based) and other health care commissioning is expected to be delivered outside of this model and would be addressed by CCGs at a regional/sub-regional level.

An Integrated Care Board (ICB) will be responsible for driving service development with partners to ensure that system integration happens effectively. The ICB will be a key decision making authority for the new strategic model of care. Membership will include leaders from all organisations in the local health and social care system and the ICB will act as a forum where whole-system challenges can be addressed and solutions identified and initiated. The board will play a crucial role in the success of new, integrated

models of care, enabling swift and decisive leadership across multiple organisations, including both providers and commissioners.

Prevention

We will continue the work with stakeholders on reviewing preventative services to reduce or delay the need for statutory care and support in order to make social and health care services more sustainable in the future. This aligns with the feedback that we have received from individuals about wanting to remain in their own homes for longer.

Learning Disability Services

In 2018/19 the council is developing a Joint Commissioning Strategy for adults and young people (14-25) with learning disabilities, in collaboration with health colleagues. This will outline our commitment to supporting people with learning disabilities and helping them maximise their independence, choice and control. It will be underpinned by a strategic action plan, which will guide commissioning, planning and decision making processes. Partners will work with local stakeholders to agree a shared vision and commissioning priorities for the future.

Joint commissioning between the CCGs and the council will be strengthened through the best use of resources; more integrated commissioning, contracting, monitoring and reviewing arrangements; and working together better with service users, carers and providers to develop and manage the market.

The commissioning strategy will need to take into account wider work that is being undertaken regionally with other local authorities, CCGs and NHS England as well as local partnerships between health, social care, education, employers, housing, the Voluntary and Community sector, police and the Criminal Justice System.

The following key principles have been developed for strategy implementation:

Co-production - through appropriate service user, carer and provider representatives/mechanisms

- Taking a whole-life approach including young people in transition
- A focus on early help, timely intervention and prevention
- Promoting personalisation and progression
- Improving outcomes such as increased independence and employment
- Improving outcomes such as increased wellbeing, choice and control with shared responsibilities and community resilience
- Delivering a coordinated approach to supporting individuals to achieve their goals
- Promoting and developing provider resilience and responsiveness to local needs
- Increasing efficiency, cost-effectiveness and value for money
- Ensuring services are safe and of high quality



Autism

An autism action plan is under development in 2018/19 to support the implementation of the national Think Autism Strategy in County Durham. A multi-agency Autism Strategy Implementation group led by the council is overseeing the action plan with involvement from key stakeholder representatives. Areas that will be covered include preventative support, diagnosis and care pathways, employment and housing; as well as support for young people in transitions, those with complex needs or whose behaviour may challenge and people with autism in the criminal justice system. The strategic action plan will help to identify commissioning intentions. Current priorities are meeting the Transforming Care agenda and developing respite options.

Mental health

A mental health strategic plan is being developed by Public Health on behalf of the Mental Health Strategic Partnership Board, a multi-agency/stakeholder group, which reports to the County Durham Health and Wellbeing Board. The five priority areas of the strategic plan are Children and Young People's Mental Health and Wellbeing, Adults Mental Health and Wellbeing, Suicide Prevention, Crisis Care Concordat and Dementia. Commissioning plans for mental health will be developed as part of the different workstreams. This will include the council and partners continuing work on the implementation of the mental health promotion, prevention and wellbeing model, which will involve re-modelling and recommissioning current provision.



In-house services

The council has recently reviewed and realigned our in-house, County Durham Care & Support (CDCS) services. Supported Housing and Reablement services previously provided by CDCS will be delivered by the independent sector in the future.

The council continues to provide Extra Care services through CDCS at a range of locations across Durham. Pathways Day Services are strategically positioned to provide for more complex, specialist service user groups with those who require less intensive services being placed in the independent sector via the Day Services Panel.

The Hawthorn House respite service is in the process of being reviewed and is likely to also accommodate more complex service user groups in the future.

The council is also seeking to expand its Shared Lives offer, in recognition of the strong track record of these services in relation to improving service user outcomes. The Mental Health Support & Recovery service is also being retained in house, with consideration of the future direction of this service being taken forward as part of the wider mental health review work, as outlined above.

Carer Support

The introduction of the Care Act 2014 has seen an increase in the number of carers asking for support as carers now have a right to an assessment in their own right even if the person they care for does not have eligible needs. The council will continue to offer support to adult carers, including through its contracts with carer organisations.

Similarly the Children and Families Act 2014 has clarified the law relating to young carers ensuring the right to an assessment of needs for support is extended to all young carers under the age of 18 regardless of who they care for, what type of care they provide and how often they provide it.

Residential and nursing care

The council continues to work with a range of residential and nursing providers to deliver both long and short-term support in care

home settings. This includes the Intermediate Care beds model in Durham, where the council commissions both 'step up' and 'step down' beds for reablement and rehabilitation purposes for a maximum period of 6 weeks.

We will continue to engage with the care home market to address issues such as the optimum model for nursing services, given the national pressures on the supply of nurses and the potential outcomes from future changes in government policy.

The council will also work on improving analytical data in relation to the provision of residential and nursing care, in recognition of the challenges faced by both Local Authorities and providers in terms of predicting future need and where and how resources should be directed.

Domiciliary care

A review of domiciliary care services will report in late 2018 and will be followed by a procurement process to re-commission domiciliary care services from 1st April 2019. The review will consider if any strategic changes are required to the current domiciliary care framework and/or spot commissioning arrangements.

The council recognises the key role which domiciliary care plays in supporting people to remain in their own home and assist hospital discharge alongside wider health services. The review will consider the optimum ways of ensuring that domiciliary services are robust in terms of their ability to deliver high quality interventions in the future.

Reablement services

Reablement is a key community service which plays a critical role in helping individuals to recover and regain independence following, for example, a stay in hospital.

The council has a dedicated, countywide, Reablement service in place and as well as seeking to increase the usage of this service, will also explore the potential of using reablement principles in the delivery of other provisions, either existing or new. As well as benefiting individuals in terms of their own wellbeing, Reablement also generates

efficiencies which can then support the wider commissioning activity of social care and health services.

Information from the recent Adult Social Care Survey 2017-18 highlighted that the majority of service users (88.2%) said the service made them feel more confident. Most service users (85.4%) said they were able to do more things for themselves after their service ended. The majority of service users (88.7%) said the service helped them to have a better quality of life. Of the service users that have used the Reablement Service before 89.7% of them required no ongoing care or had a reduced care package going forward.

Comments such as "The service was a real bonus for me to be able to remain in my own home", indicate that the service is working well.

Day care services

A provider panel for day care will be commissioned on a yearly basis to allow new providers to come onto the day care approved framework. The Council intends to work with day services providers to increase innovation in these services, including identifying service users with aspirations to move into volunteering or paid work in the future, in line with transforming care principles.



8. Messages to providers for children's services

We want County Durham to be a great place for children and young people to grow up in and for Durham to be a place where all children are healthy, happy, and achieving their potential.

Our key aims are to ensure:

- Children and young people have a safe childhood
- Children and young people enjoy the best start in life, good health and emotional wellbeing
- Children and young people can access good quality education, training and local employment



 And achieve the best possible outcomes for children and young people with special educational needs and disabilities (SEND)

Commissioned providers play a key role in helping us deliver these outcomes for individual children and young people.

Durham County Council remain committed to securing the participation of children and their families to enable them to influence decisions about their lives and the design and delivery of services that leads to change.

We believe that children and young people that are looked after and/or children and young people who have special educational needs and disabilities have the right to the same outcomes as every child in County Durham to ensure that Durham is a place where all children are healthy, happy, and achieving their potential.

There are different degrees of participation but where possible Durham County Council and partners will strive to co-produce services with children, young people and their families.

Co-production is a way of working that ensures people who use services are involved in an equal partnership. Co-production places an emphasis on engaging groups of people at the earliest stages of service design, development and evaluation. Co-production acknowledges that people with lived experience of a particular condition are often best placed to advise on what support and services will make a positive difference to their lives. Done well, co-production helps to ground discussions in reality and to maintain a person-centered perspective.

For co-production to become part of the way we work, we will create a culture where the following values and behaviours are the norm:

Ownership, understanding and support of co-production by all

A culture of openness and honesty

A commitment to sharing power and decisions with citizens

Clear communication in plain English A culture in which people are valued and respected

Children and young people have a safe childhood

The council works collaboratively with families and partners to offer family support and enable children and young people to be cared for within their own families wherever possible. We offer a range of Early Help Services to support children and their families, and prevent entry into care.

When it is not possible for a child or young person to remain with their family, we will seek to provide high quality care which meets their individual needs, as near as possible to the child or young person's home to maintain links with birth parents, relatives and their communities (where appropriate).

Independent fostering

Alongside our own fostering and residential arrangements we make placements with independent fostering agencies (IFA's) and independent children's residential homes where this may be necessary to meet the child's needs. Durham plays an active role in the current North East 7 IFA Consortia Framework, which enables independent foster placements to be purchased from providers. This is an established framework in its second phase which has received positive feedback in national reports.

The current framework is due to end in March 2019. A new commissioning solution is being developed involving 12 regional Local Authorities. It is anticipated that this regional approach will result in greater understanding and input into the recruitment strategies of IFAs and a consistent approach to the commissioning of IFA placements across the region. The new solution will also offer a greater level of flexibility, enabling new IFAs to join (following relevant checks) throughout the term of the contract.



Children's residential services

Durham's agreed route to seek external residential provision for children is through the new regional flexible solution called the North East 12 Consortia Framework which commenced on the 1st February 2018. This enables the council to purchase children's residential home placements and for children and young people from independent providers.

An analysis of need highlights that there remains insufficient residential provision to meet the current and future needs of our looked after children and young people. Particularly in relation to children with complex needs and behaviour that challenges who require solo provision to support discharge arrangements and bail conditions. There remains a pressing need to develop provision that has the capacity to provide a broader and more flexible and accessible range of quality residential solutions which ensures that the needs of our most challenging and complex children/young people are met.

Care leavers

As Corporate Parents we want to give care leavers every opportunity to be happy, healthy and safe and to achieve their full potential. It is important that their transition into adulthood is positive and that all young people have the necessary life-skills, confidence and experience to enable them to thrive. Young people leaving care need somewhere safe and suitable to live to help them make a positive transition into adulthood. Good housing underpins success in other areas of life.

The council has historically worked with the provider market to develop a menu of options to meet the accommodation needs of care leavers which are accessed on a spot purchase basis. The introduction of new legislation in April 2018 that requires Local Authorities to secure support and accommodation for care leavers up to the age of 25 will result in an increase in the need for accommodation and support options for the 21-25 age group. An analysis of need further highlights that there is a growth in demand for supported living

more generally (16-25 years), with a need to consider support and accommodation options for young people released from custodial settings. In response, there will be a need to increase the number of accommodation and support options for Care Leavers across the county.

Children and young people enjoy the best start in life, good health and emotional wellbeing

We want every child to have the best start in life and ensure that this continues throughout their childhood through the promotion of good health and emotional wellbeing. Healthy and resilient children are ready to learn, ready for school and have good life chances.

County Durham's Healthy Child Programme

This initiative is a commissioned public health programme for children, young people and families which focuses on early intervention and prevention. The service works in community settings to deliver universal and targeted interventions designed to meet public health outcomes to secure the emotional and physical health and wellbeing of babies, children, young people and families across County Durham. The service is delivered in partnership with a range of health, social and education organisations.

The 0-5 service

Offers a programme of screening tests, immunisations, developmental reviews, information and guidance to support parenting and healthy lifestyle choices. All families



with a child under five in County Durham have access to the community-based service which consists of Health Visitors, Early Years and Assistant Practitioners and infant feeding specialists. They provide expert health assessments, advice, support and interventions for babies, children and families and encourages and supports parents and carers to develop life-long skills to enable them to make informed choices that affect their family's future health and wellbeing.

The 5-19 service

Provides a service to all children and young people of school age, and their families, whether or not they are attending school. The service offers advice and information, and assesses the health needs on children entering school and on transfer to secondary schools. The service is the first point of contact for schools when there are concerns about a child's health and wellbeing.

These services are scheduled to be recommissioned in early 2020. Going forward it is anticipated that there will be further emphasis placed on the integration of health, education and care services across communities to secure the best start in life, good health and emotional wellbeing for children, young people and their families.

Children's mental health services

Mental health problems in children and young people are common and account for a significant proportion of the burden of ill-health in this age range, with estimates suggesting that mental health problems affect approximately one in ten. Durham County Council and partners continue to consider ways to make it easier for children and young people, their parents and carers to access help and support when needed.

The council and the CCGs jointly commission a suite of preventative mental health services including:

- Children and Young People's Bereavement Support Service which provides easily accessible and culturally appropriate post intervention and bereavement counselling and support for the children and young people in County Durham.
- Suicide Prevention Helpline which provides confidential practical advice and support to children and young people who are experiencing suicidal thoughts and finding life difficult; and also offers advice to those who may be concerned about a young person who they feel may be having thoughts of suicide.
- Parental Peer Support Service which provides parent support groups in County Durham, one in the South and one in

the North for parents with experience of supporting a child with emotional and mental health problems.

Existing contracts are due to expire in January 2019 therefore, we are currently working to review a wide range of preventative Mental Health services with procurement scheduled to commence November 2018 with new services in place from February 2019. In addition, we are currently engaging with Children and Young People with a view to developing a "Digital Offer" aimed at early intervention of Mental Health issues via online support and self-help tools.

Domestic abuse services

Tackling domestic abuse continues to be a key priority for the Council and the broader Safe Durham Partnership. Domestic abuse can seriously harm children and young people whether they are abused directly by the perpetrators and by hearing, witnessing or intervening in incidents. Witnessing domestic abuse is child abuse, and teenagers can suffer domestic abuse in their relationships.

The council commission a countywide Domestic Abuse Service. The service delivery model places a significant emphasis upon integration with social care teams and seeks to provide:

- Individual practical and emotional support to victims of domestic abuse aged 16 years and over in a variety of formats to meet the needs of the victim including face to face 1:1 sessions or over the telephone;
- Individual support to children and young people aged up to 17 years who witness domestic abuse in a range of settings including group work and 1:1, meeting the needs of the individual.

These services are scheduled to be recommissioned in autumn 2018. Going forward it is anticipated that there will be further emphasis placed on the integration of domestic abuse services to improve the health, wellbeing and safety of victims who have experienced domestic abuse and the safety of children who have witnessed domestic abuse; whilst challenging and

changing attitudes of individuals who have perpetrated domestic abuse.

Children and young people can access good quality education, training and local employment

All pupils should be helped and encouraged to achieve or exceed the standards of a good education. To support learners who, because of exclusion, illness or other reasons, would not otherwise receive suitable education, schools have the power to secure alternative education that is tailored to the young person's needs.

Education placements

Alternative education placements can vary from academic placements with colleges to vocational placements encouraging a more 'hands on approach' or therapeutic placements like counselling or developing confidence and social skills.

We have high expectations for all young people who live in County Durham. We want to ensure that they have access to appropriate education, in a safe learning environment and are given the opportunity to gain and develop skills to help them progress, learn and develop. To support the development of high quality alternative education the Council manages a directory of alternative education providers for schools to access when considering placing a pupil on an alternative provision. This directory provides schools with information on those providers who have been quality checked and monitored to make sure they meet minimum standards.

Businesses or organisations that become providers of alternative education and offer placements will receive funding from schools for each student placed. If you want to make a difference and become a recommended provider of alternative education in County Durham you will need to register your interest. Completion of the Alternative Education Directory application form and Provider self-assessment form available at www.durham. gov.uk/alternativeeducation.

We have a commitment to supporting providers and will provide training opportunities which can be accessed by

alternative providers to support workforce and organisational awareness and development.

Achieve the best possible outcomes for children and young people with special educational needs and disabilities (SEND).

In County Durham, we want all children and young people (0-25 years) with special educational needs and/ or disabilities (SEND) to be given every opportunity to take control of their lives, be as independent as possible and achieve their full potential in life.

SEND services

We will focus attention on services which prevent, delay or reduce needs from escalating, working alongside our families to focus on maximising inclusion, confidence and independence. This will require a co-ordinated, personalised, creative and flexible approach to providing services.

Going forward the council and the CCGs will be seeking to build upon the recent reviews of:

- Paediatric Therapy Services
- Autism (including Social Communication Assessments)
- High Needs Educational Provision

To inform the recommissioning of services education, health and care services.



Children's domiciliary care services

Enable children and young people to live within their own home and community while preserving maximum independence and quality of life. The Council is committed to the delivery of high quality Domiciliary Care Services and wishes to work in partnership with providers, who can demonstrate and deliver services which achieve and maintain

value for money' and positive outcomes for children and young people enabling them to live independent, safe and active lives.

These services are scheduled to be recommissioned in autumn 2018.

Providers providing personal care at any time must be registered with the Care Quality Commission (CQC) for the provision of Domiciliary Care Services. Services will be available twenty four hours per day, seven days per week, and three hundred and sixty five days per year, flexible, timely and speedily accessed. They may be required in an emergency situation with 24 hours' notice or for a brief period of time; in addition to requirements for long-term care to service users within their own homes to prevent unnecessary admission to hospital or children's residential care facilities.

For further information contact:

Strategic leads for commissioning within Adult and Health Services and Children and Young People's Services are shown below:

- Neil Jarvis Interim Strategic
 Commissioning Manager Older People /
 Physical Disability and Sensory Impairment
 Services
- Tricia Reed Interim Strategic
 Commissioning Manager Learning Disability
 and Mental Health Services
- Mark Smith Strategic Commissioning Manager Children and Young People's Services and Public Health



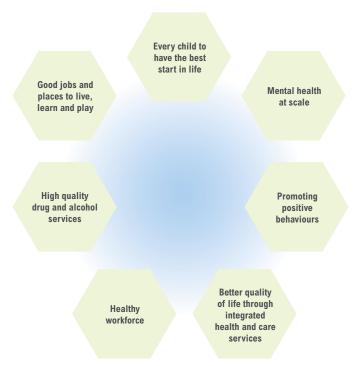
9. Key Messages from Public Health

Durham County Council aims to improve and protect the health of local people and reduce the unacceptable differences in health inequalities that continue to exist.

Combining the needs identified in the Joint Strategic Needs Assessment; the requirements of the mandated services for local government; the data provided via the local Health Profiles; as well as local knowledge about services and assets in our communities; means that in order to achieve the Public Health Vision, we need to focus on the following key areas:

Good jobs and places to live, learn and play

- Develop opportunities for good employment
- Reduce poverty
- Encourage inclusive growth, employment, education and skills
- Ensure good homes for everyone
- Develop a community led approach and help to build connected and resilient communities.



Every child to have the best start in life

Give our children the best start in life by commissioning high quality 0-5 health visiting services, reducing smoking in pregnancy and childhood obesity, and by improving breastfeeding and emotional health & wellbeing.

Excellent drug and alcohol provision

Reduce the harm from alcohol.

Mental health at scale

- Support the County Durham Partnership Prevention at scale – mental health.
- Improve mental wellbeing for all ages including suicide prevention and reducing loneliness.

Our healthy workforce

 Develop the wider public health workforce via Making Every Contact Count (MECC).

Better quality of life through integrated health and care services

 Reduce the morbidity and improve quality of life for those with long term conditions including cancer, CardioVascular Disease (CVD) and respiratory conditions.

Positive behaviour change – smoking, activity and food

- Work towards a smoke free future for our children and families.
- Carry out dedicated interventions with targeted populations including Gypsy Roma Travellers (GRT), those most at risk of domestic abuse, drug & alcohol misuse and sexual health.
- Tackling obesity (sedentary behaviour and poor food consumption).

10. Housing Services

Housing Strategy

The overall Housing Strategy for County Durham is currently being refreshed. The overall structure of the strategy has been agreed and the action plan and delivery partnerships are being reviewed. The strategy will be delivered in partnership and the aims and objectives are:

Aims:

- More and better homes.
- Better housing support for County Durham residents.

Objectives:

- Delivery of more homes to meet housing need and demand.
- Maintain and improve housing standards across County Durham's stock and wider housing environment.
- To provide housing advice, assistance and support for older and vulnerable people.
- To improve access to housing.



Housing Market Position Statement

In support of the Housing Strategy a Housing Market Position Statement (HMPS) is being developed. This is designed to contain information and analysis of benefit to providers of older people's housing, supported housing and support services in the County. It is intended to help identify what the future demand for housing and support might look like and to act as a starting point for discussions between the local authority and those who provide services.

It will contain information concerning:

- What Durham County looks like in terms of current and future demography and service provision.
- The Council's intentions as a facilitator of care for older people and supported care provision.
- The Council's vision for how services might respond to the changing needs for housing and support in the future.

The Council wishes to stimulate a diverse market for care and support offering people a real choice of accommodation and care. To achieve this aim the Council recognises that it needs to know how best it can influence, help and support the local market for housing and care (and care related services such as community activities and advocacy, information and advice) to achieve better outcomes and value. We see our Housing Market Position Statement (HMPS) as an important part of that process, initiating a new dialogue with housing and care providers in our area, where:

- Market information can be pooled and shared.
- The Council is transparent about the way it intends to strategically commission and influence services in the future and how it wishes to extend choice to consumers of accommodation/housing and care.
- Services and workforce skills can be developed that older people need and want.

 Developing social capital and strengthening social connectivity for older people and supported care will become more significant in commissioning intentions.

Four key service user groups have been identified as part of this work, these being:

Older people

The aspirations of older people are changing. Many older people would prefer to stay living in their own home for as long as possible. There are, however, people who would like to move house and live in accommodation that is better located, more accessible and easier to maintain. One of the main issues has often been the lack of housing options for older people with sheltered housing or residential care often being the only choices available. The proportion of people needing care and support services rises with age and it is the older age groups in particular which are set to increase. Due to the demographics of County Durham, older people are a particular client group which have been highlighted in the Housing Strategy.



Single people with support needs

With one in ten people in England reporting that they have had personal experience of being homeless, many people will require support and help for homelessness at some point in their lives. While homelessness can happen to anyone at any time, the causes of homelessness and the subsequent support people need varies. The kind of assistance that people are eligible for will also depend on their circumstances and some people may find it difficult to access the help that they need. In particular, this applies to people who become single homeless - people without dependents who are, generally, unless they are found to be vulnerable, not eligible for the main duty of statutory support under homelessness legislation but there is a duty to provide advice and assistance. Many of these individuals rely on services in the homelessness sector to provide them with accommodation and support to help them address the issues that led to, or maintain, their homelessness.

People with mental health issues and people with learning disabilities

The council recognises the role played by good quality housing and support services in promoting independence and wellbeing. We as an authority are committed to improving access and availability of suitable accommodation and services to support recovery for people with a range of needs including learning disabilities, mental health problems and autism to enable them to live as independently as possible in the community. This client group is anticipated to see the largest increase in numbers coupled with the largest rise in funding requirements. Therefore from both a demand and need point of view we would expect that these groups would impact most significantly upon service provision and future requirements.



11. Planned procurements for 2019/20 and 2020/21

Although the following procurements were planned to start during 2019/20 and 2020/21, the council reserves the right not to tender for such services or change the tender start date if required. If you have any queries about these planned procurements please contact the Commissioning Service on ahs.commissioning@durham.gov.uk

Service	Anticipated	Anticipated
	procurement	contract start
Residential respite options	Autumn 2018	Early 2019
Non-accommodation Based Community Services		
(learning disability)	Autumn 2018	Early 2019
Handy Person Service	Autumn 2018	March 2019
Countywide Domestic Abuse Service	Autumn 2018	April 2019
Tier 4 In-patient Detoxification Residential Services	Autumn 2018	April 2019
Contract of Provision of Domiciliary Care	Autumn 2018	April 2019
Domiciliary Care (spot provision)	Autumn 2018	April 2019
Cleaning Provision in Extra Care	Autumn 2018	April 2019
Independent Mediation Service for Education, Health, Care Assessments and Reviews	Autumn 2018	April 2019
Crèche Services for One Point County Durham	Autumn 2018	April 2019
Framework for Independent NHS Complaints Advocacy Service	Autumn 2018	April 2019
Regional Independent Fostering Agency Services (led by Newcastle City Council)	Autumn 2018	April 2019
Healthwatch County Durham	Spring 2019	July 2019
Home from Hospital Service	Spring 2019	August 2019
Advocacy for Children	Summer 2019	October 2019
Appropriate Adult Services	Summer 2019	November 2019
Webster House – support services for domestic abuse refuge	Autumn 2019	April 2020
Stop Smoking Service for County Durham	Autumn 2019	April 2020
Independent Visitor Service	Autumn 2019	April 2020
Provider Panel for Day Services	Autumn 2019	April 2020
Post Adoption Support	Autumn 2019	April 2020
Wellbeing for Life Service.	Autumn 2019	April 2020
LGBT Health and Wellbeing Service	Autumn 2019	April 2020
Workplace Health Service	Autumn 2019	April 2020
Mobile Sexual Health Service	Autumn 2019	April 2020
Contract for Community Support Service for People who are Blind or Partially Sighted	Spring 2020	August 2020
Dementia Advisor Service	Autumn 2020	January 2021

12. Abbreviations

MPS	Market Position Statement
JSNA	Joint Strategic Needs Assessment
JHWS	Joint Health & Wellbeing Strategy
LE	Life Expectancy
HLE	Healthy Life Expectancy
MTFP	Medium Term Financial Plan
IPC	Infection Prevention Control
CQC	Clinical Commissioning Group
VCSE	Voluntary Community Sector Enterprise
IBCF	Integrated Better Care Fund
LTR	Light Touch Regime
NEPO	North East Procurement Organisation
LGA	Local Government Association
DCC	Durham County Council
NHS	National Health Service
TAP	Team Around Patient
DDES	Durham Dales, Easington, Sedgefield
CCG	Clinical Commissioning Group
ICB	Integrated Care Board
TEWV	Tees, Esk, Wear Valley
HMPS	Housing Market Position Statement
SEND	Special Educational Needs and Disabilities
IFAs	Independent Fostering Agencies
GRT	Gypsy Roma Traveller
MECC	Making Every Contact Count
CVD	Cardiovascular Disease
LGBT	Lesbian Gay Bisexual Transgender



For further information please contact:

Tel: 03000 266 837

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Please ask us if you would like this document summarised in another language or format.







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