

Newham Adult Social Care Market Position Statement

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Introduction

Welcome to our first Market Position Statement for adult social care in Newham. This document is intended to give social care providers information in order to plan the development of services for the future.

Newham Council is committed to supporting residents to develop personal, economic and community resilience, and social care services need to also support people to become resilient and less reliant on services.

The social care landscape is changing dramatically, giving more choice and control to customers with personal budgets, while at the same time there are significant budget pressures on local authorities. Providers need to ensure that they are offering good quality, affordable services that customers want to buy and that enable people to remain independent for as long as possible in the community.

This Market Position Statement gives you information about current supply and demand for social care services, but also projections for the future. It details some of the existing gaps in the market and opportunities for providers. We hope that this information will help you to plan how your services will develop over the coming years to ensure you continue to meet the needs of the social care population in Newham.

We are keen to work with providers and encourage you to talk to commissioners about plans and developments for services.

1. What is a Market Position Statement?

This Market Position Statement (MPS) is the start of a dialogue between Newham Council adult social care commissioners and providers of social care services. This document is intended to give providers information about where we are currently and what we would like to see develop in the future to meet the needs of people who have adult social care support needs. This MPS covers people from all groups within adult social care including:

- People with learning disabilities
- People with physical/sensory impairments
- Older people
- People living with dementia
- People with mental health issues

Newham's adult social care overall aim and vision include:

- Increased choice and control for individuals
- Individuals have increased independence
- People are included and connected in the community
- Services offer quality and value for money
- Services meet the needs of individuals they are supporting
- People with social care needs are safe

In putting together this MPS we have identified gaps in information and knowledge within the local authority and are working to find ways to capture this information in the future so that we are able to share relevant information with providers. We intend to update this MPS on a regular basis so that it forms a continuous dialogue with providers in order to shape and support the development of the social care market in Newham. We are aware that there are gaps in the market currently and areas of unmet need where individuals are not able to buy the services that they want or need within the borough, or that services are not affordable for personal budget holders or self funders.

Newham Council no longer provides separate teams or services for individual client groups (apart from mental health and substance misuse) as we believe that while some may require very specialist support and interventions depending on the nature of their condition, many people with similar support needs but from different client groups may be supported with a similar approach or use universal services.

This MPS is also not client group specific in most parts, for the reasons listed above. We have recently supported the development of services (for example Extra Care housing) where people with learning disabilities, physical/sensory impairments, older people and people living with dementia are supported together with person centred support for each individual. We have included client group specific information where necessary, for example learning disability and people living with dementia where there are specific gaps in the market relating to these.

2. Key messages

Demand for support from social care is rising, while the funding available is being reduced. Newham Council currently provides services to people meeting the critical or substantial criteria of Fair Access to Care Services (FACS). In addition, the council has recently introduced a charging policy for social care services, meaning that customers have to contribute towards the cost of their social care services. Newham Council is committed to the resilience agenda for all residents, including those with social care support needs to support people to become more resilient and less reliant on services.

The role of commissioning has shifted significantly with the implementation of the personalisation agenda and micro commissioning is now increasingly taking place as individuals have their own personal budget and commission their own services. In Newham approximately 82 per cent of social care customers receive self directed support, of these just over 21 per cent receive their personal budget as a direct payment, while the remainder opt for third party managed or services directly commissioned by the brokerage team in adult social care.¹

In the future there will be few commissioned contracts for adult social care services in Newham. We will commission services where we have a statutory obligation, for example Independent Mental Capacity Advocacy (IMCA) and Independent Complaints Advocacy Services (ICAS), and a small number of preventative or treatment services, but a large and growing number of services will be spot purchased or commissioned by customers with a personal budget or self funders.

The role of commissioners will be more focused on supporting and developing the market to respond to personal budget holders and ensure that providers respond to the gaps and unmet needs identified in this MPS. It is important that providers plan their services in line with the messages in this MPS and talk to commissioners about any plans for new developments so that we can work with you to ensure a sustainable market for social care in Newham.

We wish to see a varied, flexible and sustainable social care market develop in Newham over the coming years. However, providers must be able to demonstrate that they offer quality services and value for money to customers. Newham Council will seek to monitor the quality of provision of services available in the market and is clear that providers must meet standards outlined in the Newham Quality Outcomes Framework. This includes registration with the Care Quality Commission (CQC) as necessary, conforming to the council's safeguarding policy and procedure and ensuring co-production processes are embedded in services.

Newham Council expects all adults of working age to explore education and employment opportunities before other options are considered in order to ensure people are working towards personal and economic resilience wherever possible.

The council is keen to support micro providers offering social care services as these can often provide person centred, flexible solutions for people at a competitive price. Micro providers or potential micro providers can contact the Micro-enterprise project for support with establishing or developing an enterprise idea.

There may continue to be framework or outcome based purchasing arrangements in place for services that are directly commissioned by the local authority on behalf of individuals, for example

Independent Living Support Services (ILSS) or day services to ensure consistency of quality and price of services. Any arrangements that we have in place with framework or spot contracts will have outcome based specifications for providers to report against as part of performance monitoring.

Providers wishing to do business with Newham Council should register on the Newham Electronic Contract and Tendering Resource (NECTR), available via the council's website

http://nectr.newham.gov.uk/supplierselfservice/

We encourage providers to talk to commissioners in adult social care about innovation and development so that we can work with you to ensure that any new services meet the needs of customers. We have developed a number of provider forums to enable the sharing of information, opportunity and best practice between the council and providers.

Areas of concern

We are particularly concerned about the development of supported living services without discussion with commissioners due to the risk of people being placed in Newham from other areas. This has significant implications and cost pressure on the council to provide health care and benefits (e.g. Housing Benefit), and the risk of transfer under Ordinary Residence rules. Moving people from other areas into Newham can also have a significant impact on the individuals concerned if they are not making a proactive choice and they are moved away from family, friends and support networks into an unfamiliar community.

Providers are advised not to bring people into supported living services in Newham from out of the area, and not to assume that the council will fund the placement in the long term. We expect providers to talk to us about any proposals for developing supported living services to ensure they are in line with need and demand to avoid people being transported into Newham unnecessarily. We will be less likely to support and do business with providers who develop services without talking to us or against our advice.



3. Current and future need and demand information for Newham

Newham is a very deprived borough while also being extremely diverse. Newham has a younger than average population compared to other parts of the country so it is essential that we get services right for our young people coming into adult social care while also ensuring that we have good services in place for our older people and those living with dementia.

We know that the older generation in Newham is less ethnically diverse than the rest of the population and is predominantly white British. We also know that we have a higher than average prevalence of learning disability in Newham and need to ensure that we have a range of services in the market to meet their varying needs. This includes people who may challenge services and people who need step down support after a period of time in a secure or assessment and treatment unit (ATU).

Population

Headlines:

- Newham's population was 308,000 in 2011 according to the 2011 Census and is projected to rise to 328,500 by 2013 and 401,600 by 2025. Table 1 shows the projected increases in population by age.
- We know that Newham has a high level of population churn, with many people staying in the borough for short periods only.

Table 1 - Population in Newham by age

Year	Age bands			
	0-19	20 to 64	65 to 79	80 +
2013	89,800	217,000	15,000	5,400
2025	106,100	265,800	16,300	7,200
% change	18.5%	22.5%	8.6%	33.3%

Source: GLA Strategic Housing Land Availability Assessment Projection 2012

 Newham has an unusually young population, with the highest number of people aged 25-29 and people over 65 making up a small proportion of the total population. See Figure 1 below.

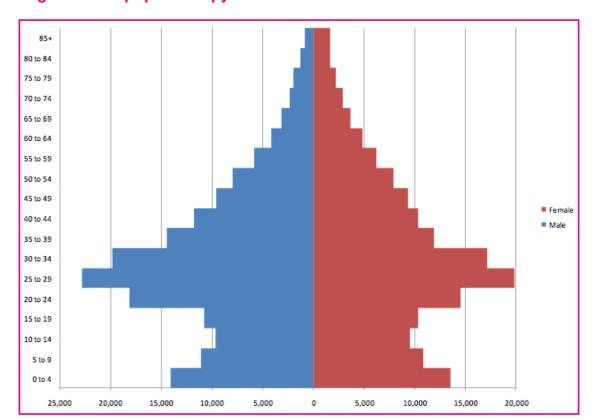


Figure 1 - Age and sex population pyramid for Newham 2013

Source: GLA Strategic Housing Land Availability Assessment Projection 2012 for 2013

- The older people's population will grow most rapidly over the next 12 years and will become more ethnically diverse. A variety of services will be required to meet the needs of this group of people.
- Newham has the most ethnically diverse community in England and Wales (72 per cent of the population are from black, Asian and minority ethnic groups)² with more than 100 languages spoken in the borough.

Adult social care customers

Within this population there are currently 4,412³ people known to adult social care in residential and community based support. This excludes people using housing related support services or mental health and substance misuse community treatment services. Table 2 shows this broken down into the following needs groups with predictions for how these areas are expected to grow over future years. This information is based on those people who received a care package during 2012-13.

²ONS Census return and GLA SHLAA Round Population Projections, 2012 ³Referrals, Assessments and Packages of Care (RAP), March 2013

Table 2 – Adult social care customers, March 2013

	Client group	March 2013		
Community based	Physical disability, frailty/temporary illness	2,367		
	Hearing impairment	20		
	Visual impairment	66		
	Dual sensory loss	13		
	Mental health	529 (including 170 clients with dementia)		
	Learning disability	514		
	Substance misuse	62		
	Other vulnerable people	10		
Total community based		3,581		
Residential/nursing	Physical disability, frailty/temporary illness	363		
	Hearing impairment	5		
	Visual impairment	5		
	Dual sensory loss	2		
	Mental health	297 (including 136 clients with dementia)		
	Learning disability	155		
	Substance misuse	3		
	Other vulnerable people	1		
Total residential / nursing		831		

Source: Referrals, Assessments and Packages of Care (RAP), March 2013

Figure 2 below shows the density of social care customers throughout the borough and identifies the wards where there are the highest numbers of people receiving social care support.

Figure 2 - Social care users

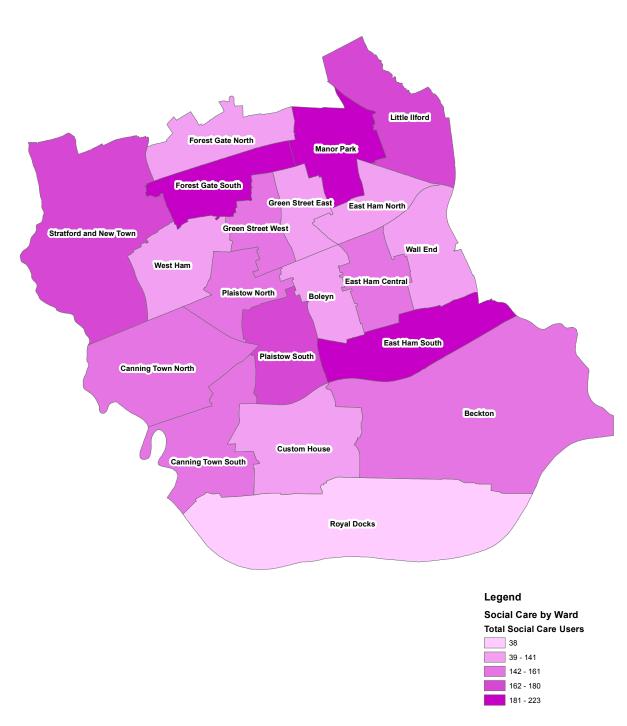


Table 3 below shows the population prediction for each of the social care client groups based on the primary need. In each category only a small proportion of the predicted population will be eligible for social care services as many will not meet FACS criteria, but this helps give an indication of the growing need and demand. Unless otherwise stated, this information has been taken from PANSI (Projecting Adult Needs and Service Information³).

Table 3 – Social care customer projected growth 2012-2020

Client group	2012	2014	2016	2018	2020
Learning disability	5,310	5,437	5,545	5,630	5,697
Physical impairment (severe + moderate)	17,046	17,601	18,166	18,611	19,028
Visual impairment	139	143	146	148	150
Older people	21,000	21,300	22,100	23,000	23,900
Mental health – severe disorders e.g. psychosis Mental health – common	843	864	882	895	906
disorders e.g. anxiety and depression	33,975	34,839	35,553	36,081	36,544
Dementia	1,460 ⁴	Local analysis predicts an increase of 48% by 2031			
Substance misuse – opiate and crack users	2,465 ⁵	Predictions are based on 2001 Census so we expect to see a significant increase in the future.			
Substance misuse – higher risk drinking	8,623 ⁶				16.

⁴Based on Census 2011 data

 $^{^{5}\}mbox{Glasgow}$ estimate for Newham 2010/11 based on Census 2001

⁶Local Alcohol profile for England 2012/13

*Mental health figures are a total of the following disorders: common mental disorder, borderline personality disorder, antisocial personality disorder, and psychotic disorder, two or more psychiatric disorders.

4. Service demand

Key headlines

- In 2012-13 approximately 716 people were using day services, the highest number of these being older people and people with a physical or sensory impairment, but also people with learning disabilities (LD) and dementia
- In 2012-13, 2,179 people received home care services
- Over 1,800 people are currently connected to telecare services, with a further 1,700 accessing telecare through housing related support services
- We expect 90 young people to transition to adult social care from children's services over the next three years (2012-15), most of whom will have complex disabilities or long term health conditions
- 51 per cent of people with LD known to adult social care are from black and minority ethnic (BME) communities
- 59 per cent of people with LD are men, and 41 per cent are women
- A disproportionate number of people with learning disabilities are in placements outside of Newham as their needs could not be met in borough at the time of placement
- Approximately 20 per cent of people with LD known to adult social care live with a family carer
- According to the Census 2011, there were 24,604 carers providing unpaid support to family members in Newham
- Approximately 1,600 people are supported under the Care Programme Approach (CPA) in community mental health teams, and the same number supported in outpatient services
- Around 4,000 people with common mental disorders will be seen at the primary care psychological therapies services
- Based on national predicted figures we estimate that in the region of 176 people may self fund residential care, and 289 may self fund community based services. We expect this market to grow considerably over the coming years
- There are high levels of income deprivation of pensioners in the borough with nearly half of people receiving a state pension also receiving pension credit in Newham, compared with 27 per cent across London in 2011⁷
- Inpatient detoxification admissions are approximately 40 admissions per year with around a 50:50 split between drugs and alcohol as the primary substance. Almost all those who access inpatient detoxification follow this with entry to residential treatment

- In 2010 there were 712 deaths from end of life conditions in Newham, as opposed to 358 sudden deaths. Cancer accounted for 26 per cent of all deaths
- The main four non-cancer causes of death in 2010/11 were diseases of the circulatory, respiratory and nervous systems and mental and behavioural disorders
- A high representation of young people in Newham (18-64 years) is projected to develop dementia in the future
- People with learning disabilities have an increased risk of developing dementia as they age and
 generally develop dementia at a younger age. This is particularly the case for people with Down's
 syndrome one in three of whom develop dementia in their 50s. As people with learning disabilities
 are now generally living longer, we need to consider how best to support people as they also
 develop dementia
- There are estimated to be 32,000 people with a physical or sensory impairment in Newham, of whom approximately 6 per cent will receive a social care service

In 10 years time (2023), it is anticipated that Newham will...

- Have a population of approximately 395,000, an increase of about 20 per cent
- See an increase in population in all age groups, although this is less significant for those aged 15 to 24
- Have a white population of 24 per cent (39.3 per cent in 2001 Census) while the BAME population will represent 76 per cent of Newham population (SHLAA)
- Have more people in employment significant regeneration work in Stratford, Canning Town and the Royal Docks within the business and commercial sectors is likely to mean an additional 24,000 local jobs (GLA 2009 Economics Employment Projections for Newham for 2007-2031)
- Have less 'population churn' due to people moving to Newham to stay for employment
- Be home to a thriving business and commercial sector as part of major regeneration work. This is likely to also mean more micro and social enterprises

5. Current and future levels of resourcing

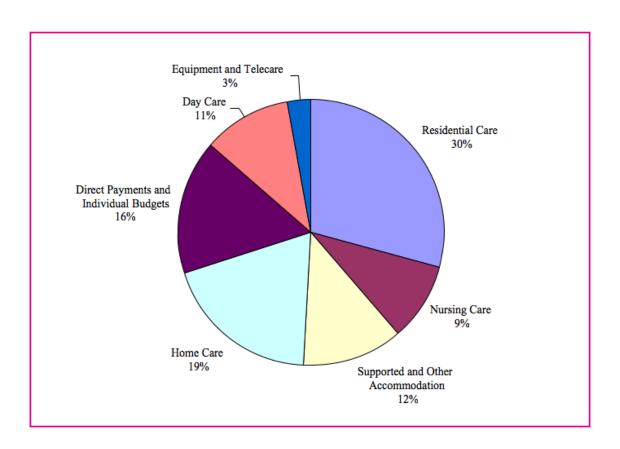
In 2012/13 adult social care expenditure in Newham (excluding supporting people and equipment and adaptations) accounted for over £80 million. Table 4 below shows how this money is shared between people with different needs.

Table 4: Expenditure against needs

Client group	2009/10	2010/11	2011/12	2012/13
Mental health	£11,010	£9,607	£9,487	£9,291
Older people	£39,137	£37,714	£36,777	£34,733
Physical impairment	£9,119	£9,592	£9,445	£9,692
Learning disability	£22,552	£22,730	£25,674	£26,087
Other adults	£1,595	£1,314	£1,128	£536
Total	£83,413	£80,957	£82,511	£80,339

Of the money we spend on adult social care, around two thirds is spent directly on placements with providers or direct payments. The amount we spend on placements has stayed above £64 million between 2009/10 and 2011/12. Figure 3 below shows the types of care we were buying in 2012/13.





When compared to other London boroughs, Newham Council spends less on residential and nursing care, and day services for people with mental health and physical impairments than the London average, but more on day services for people with learning disabilities and older people. Newham's average weekly cost of direct payments is above the London average and eighth highest in London.⁸

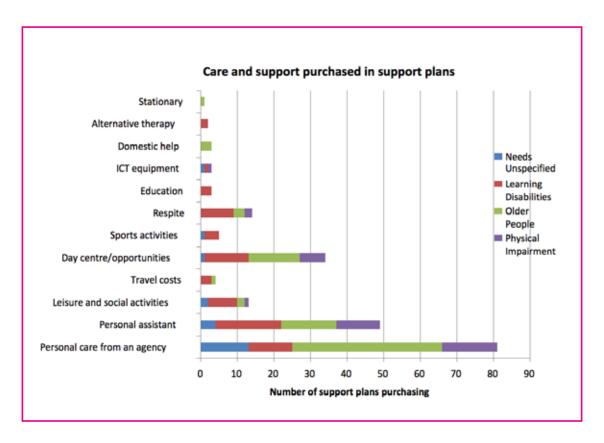
The council no longer directly provides residential care, does not intend to be a provider organisation in the future, and is now looking at options to outsource or spin out current services to become social enterprises or businesses independent of the council.

What do people in Newham spend their personal budgets on?

All new requests for funding include the completion of the 'Ready Reckoner', a tool for determining the resource allocation for an individual based on their assessed needs. This allocation gives the customer a sum of money with which to plan their support.

We have recently carried out a support plan audit of people who have a personal budget. This was a sample of plans including people with learning disabilities, older people and people with physical/sensory impairments. Of these, Figure 4 shows what people spend their personal budget on:

Figure 4



The majority of support plans included personal care from an agency, and just under a third included a personal assistant.

73 per cent of support plans audited had an unmet need. These included:

- Support to get out and about for example to access church/local community/social networks/for a
 daily walk
- Help with budgeting and finances
- Help to be physically active
- Lack of culturally specific services in Newham so services were purchased in neighbouring boroughs.

The data we have suggests that people using individual budgets use a much more personalised service, with around 50 to 70 per cent employing staff directly and also including peer support or informal caring in their support. Other activities include music lessons, art classes, physical activity, employment support services and respite care.

What will spending on adult social care look like in the future?

By the end of 2012/13 we planned to have made savings of £14.9 million in adult social care since the comprehensive spending review in 2010. We have made these savings across a range of activities, for instance by introducing charging, redesigning our council provided services, making changes to housing related support and improving the efficiency of our high cost placements.

We plan to make further savings of at least £2.4 million from the social care placement budget between now and 2014/15, meaning our spend on adult social care is around £80 million. The financial position after the next comprehensive spending review is uncertain, we are likely to continue to need to make savings.

Funding that will be available for investment in development will be money from health intended to meet both health and social care outcomes. This money will be used to fund integrated care services and support.

6. Current state of supply

Housing and support

There are a large number of providers in Newham who provide a range of housing and support services. These include residential and nursing care, supported living, extra care and shared lives. There are currently a number of vacancies across all of these services.

Day support

There are a range of services offering day support to people with learning disabilities, older people, people with physical/sensory impairments and mental health. These are provided by a mixture of council services, private, community and third sector organisations.

There are also many universal services in Newham that older and disabled people can participate in, with support if needed. For example the Active and Connected programme currently being delivered by community groups and organisations in a consortia arrangement with East Thames and Age UK has an extensive programme of activities that people can be supported to access.

We have recently closed and redesigned some of our in-house day service provision to reflect changing demand. A large day centre (the Greenhill Centre) for disabled adults was closed in September 2011 and learning disability day services have been redesigned to reflect the personalisation and resilience agenda, offering less leisure-based services and more employment and enterprise-focused services.



Independent living support services (ILSS)

The council introduced a framework agreement in 2012 for ILSS that provide care and support in people's own homes. There are 16 providers currently on this list. The framework is used to purchase services for people who do not have a personal budget and whose services are commissioned directly by Newham Council. Customers with a personal budget are not restricted to this framework and so can purchase directly with any provider who offers a quality service that can meet their needs while offering value for money.

Community equipment, assistive technology solutions and adaptations

As part of our Transforming Community Equipment Service programme, we have a new retail model for low-cost items of equipment whereby, following assessment, prescriptions for equipment are issued to people and collected from local retailers (mostly pharmacies). Equipment continues to be delivered to people unable to arrange collection. The retail market will continue to be developed in 2013.

High-cost and complex equipment (e.g. mobile hoists, hospital beds) is provided by Newham's Integrated Community Equipment Service (ICES), which is funded by the council and the CCG. We work closely with ILSS providers to ensure high quality practice and correct use of equipment.

Our equipment offer also includes assistive technology (AT) such as telecare with remote monitoring to alert help when needed. Our AT services are focused around enablement and early intervention, supporting older and disabled adults to stay independent in their own homes and preventing the need for more intensive support. This includes facilitating safe discharge from hospital.

Along with equipment, home adaptations are an important approach to supporting people to remain living in the community. Major adaptations support family carers to continue in their caring role and can improve the health and wellbeing of older and disabled people.

Recommendations for major adaptations are made where the need cannot be met by equipment interventions, assistive technology or simpler minor adaptations or temporary solutions. This service is currently provided by adult social care.

People living with dementia

In Newham there are currently some good quality, well-integrated services for people living with dementia delivered by the voluntary sector, housing associations, the NHS and Newham Council.

In April 2013 we awarded a one-year contract (Social Care Support for Memory Services) for the facilitation of further dementia support though the provision of dementia cafes and an advisor resource. The service will be supported by volunteers, providing opportunities for the wider community to interact with local dementia care services. The NHS, Newham Council and voluntary sector partners will work closely to streamline the dementia care pathway and determine where value for money investment can help people in Newham live well with dementia.

Learning disability

We are aware of over 50 providers in Newham who offer services to people with learning disabilities who meet FACS criteria, some in addition to other client groups. These are a mix of voluntary and community organisations, private providers and the local authority. Some providers are very small and local while others are regional or national organisations. Providers are located throughout the borough and in most cases offer services across the borough. In addition there are many organisations that offer universal services that people with learning disabilities are able to access either independently or with support (via a personal budget if they are FACS eligible).

For the people with learning disabilities known to adult social care who meet FACS eligibility criteria, we spend an average of £788 per week.

Carers

Newham currently provides and commissions a range of support to carers. This includes carers' assessments, a carers' grant scheme and carers' support service.

A review of carers' services is currently underway and a carers' strategy being developed.

Mental health

There are a number of providers of mental health services in Newham, the largest of which is East London NHS Foundation Trust (ELFT). The trust delivers a full range of primary, secondary and inpatient services for children and adults in the borough. Older people inpatient services are delivered from the Tower Hamlets site.

In addition to the statutory provider, there are smaller contracts with third sector providers who deliver community based services for adults and families.

Primary care mental health services are delivered by the trust in various settings across the borough including 32 GP surgeries and can be accessed by professionals or by self referral. 52 per cent of people who receive primary care services move to recovery services.

There are 66 inpatient beds for the adult population in Newham. This is likely to be supplemented by NHS developments over the next 18 months. The average length of stay in an inpatient bed is very low at about 22 days, when compared with London and the rest of England.

Substance misuse

Four organisations provide inpatient detoxification services and around 10 providers deliver residential or structured day programmes. Inpatient services nationally are funded from public health budgets while residential or structured day programmes are funded under community care arrangements. The inpatient and community care funded placements are delivered under spot purchasing arrangements.

7. Gaps in the market and market opportunites

Housing and support

As we aim to decrease referrals to registered care, providers will need to adapt and re-design their services to meet different needs to those they may have met in the past. For example, older people entering residential care may have higher needs and may be nearer the end of life as they have spent longer being supported in the community.

Some gaps and shortfalls in current service provision include some best practice systems and working practices that we would like to see improved. These include:

- Response to personalisation. Some work still needs to be done to ensure services
 are truly personalised and that people are empowered to make decisions about their care and
 support individually
- Recruitment and retention of a competent well trained workforce
- Appropriate and accessible buildings to meet the needs of residents/tenants (especially those living with dementia, cognitive and sensory impairments)
- Variety and choice around meals and activities for people using the service

Market opportunity

There are gaps in the market for housing and support in relation to very specialised services. For example housing and support for people with autism, profound and multiple learning disabilities (PMLD), and people with learning disabilities who have challenging behaviour, including step down accommodation for people who may have had a stay in an ATU.

Day support

We know from the redesign work of our in-house services that there are gaps in the market in this area. For example, when we closed the Greenhill Centre a number of disabled people used their personal budgets to attend a centre in Tower Hamlets because there was no service in Newham that they felt met their needs.

Equally, with the redesign of the LD services, we know that there is potential for providers to develop services for people with LD that will support them to achieve their personal outcomes, maintain friendships and relationships and to be a part of the local community including supporting people to pool their personal budgets. In addition, services that offer training opportunities and support to gain employment are needed.

Market opportunity

Fewer services offer support at the evening or weekend, which is often a key time when family carers need a break or when individuals want to access leisure facilities in the community with their friends but need support to do this. Providers may benefit from advertising their services with external support planning and brokerage agencies in order to increase referrals to the service.

Employment

There are gaps in the market in relation to supported employment, job coaching and specific support for people with disabilities to gain skills and confidence to move into paid employment or self employment opportunities.

Independent living support services

Independent living support services (ILSS) are needed by people with a range of differing support needs. The ILSS contract includes an enhanced service offering support to people with more complex needs.

Market opportunity

While there are lots of generic agencies in the market offering care and support, there are less providers of specialist support, for example home support for people with complex learning disabilities or dementia, and skilled community support that really connects people with their community. In addition to the framework we are keen to develop the market of homecare and support providers who are able to offer a service to personal budget holders, particularly those with specialist areas of expertise and experienced staff who are able to offer services to individuals with more complex needs.

ILSS and outreach services offering support to people of working age may also like to consider how the service could offer support around employment to individuals who may be considering employment options.

Assistive technology solutions

If applied in the right way, at the right time and with the right support, assistive technology (AT) and home adaptations have the potential to support needs and meet outcomes across a wide range of customer groups and postpone the need to increase support services. AT is, however, currently under utilised in some areas such as mental health, LD and transition.

As our current telecare delivery model is based on the model developed for the whole systems demonstrator pilot in 2009-11, most of our AT equipment has been sourced from a limited range. This does not enable choice and control for customers.

Market opportunity

Many providers do not currently offer AT within personalised support packages. AT has historically been included as an add-on to support and this does not demonstrate value for money. There is a need for the market, including supported living and other support providers, to offer a range of flexible and personalised solutions to service users and carers as part of their core offer. Customers will need support on all aspects of the service, from installation and response as well as maintenance of equipment.

In line with our resilience and personalisation agendas, people should be able to choose how their technology equipment is monitored and who responds if help is needed. This means taking up opportunities for friends, family and carers to assist with monitoring and response services via mobile phone.

End of life care (EoLC)

Newham's EoLC strategy states:

Our vision is to ensure that Newham residents receive good quality care at the right time and in the right place and ensures that everybody follows the local defined pathway. Services should be developed and tailored to meet individual needs, ensuring that carers' needs are also taken into consideration.

In Newham:

- There is still a significant gap between vision and reality, with an excessively high number of people dying in hospital, compared to national and London-wide averages
- The social care element of the EoLC pathway needs to be strengthened



Market opportunity

EoLC is a priority for both social care and the CCG to reduce hospital admissions. Providers have two-fold opportunities to develop services in consultation with adult social care and the CCG.

People living with dementia

All providers should maximise recent technology to best effect for individuals living with dementia.

A dementia strategy is currently being developed and providers should refer to this for more detail once launched.

The following gaps have been identified in relation to people with dementia:

- Easy access to information, advice and support pre and post-diagnosis, including additional dementia care advisor resource and memory cafes
- Appropriate local services for people with alcohol-related dementia
- Post-diagnosis support for people with dementia and their families/carers
- Appropriate local services for people with LD and dementia
- Service outreach to people from under represented communities South Asian communities in particular
- Good end of life care for people with dementia
- Enhanced home support to defer the need for residential care
- Additional extra-care housing and housing related support

Market opportunity

We are keen to see providers offer a range of day support options for people living with dementia including supporting people to socialise with others and access the community.

Transition

There are a number of gaps in service provision for young people in transition. A large number of young people transitioning into adult social care have attended residential schools and colleges during childhood and need intensive support. Many young people have been unable to access further education opportunities without dedicated one-to-one support funded by their personal budget.

The transition team often struggles to find suitable, age appropriate placements for housing and support or support during the day. Young people entering transition now have expectations for their future that involve training, education and employment rather than traditional day services.

Market opportunity

Key areas where there are gaps in the market in relation to young people include:

- Education and employment opportunities for young people on leaving school. Current local provision is very limited or does not accommodate young people with complex or additional health needs
- Personal assistants for young people who can offer enabling support to young people to learn skills and become a part of their local community
- Respite opportunities. Young people often live with their families and so respite is crucial to give the carers a break. Young people need exciting and innovative respite opportunities that enable them to learn skills, make friends and develop independence so that when their family is no longer able to support them at home, they can move on confidently to the next stage of their life. For example, respite options could include opportunities to complete Duke of Edinburgh Awards or other vocational awards. Disabled young people want to have the same opportunities as their non disabled peers, meet their friends, go out to clubs, visit the cinema or have weekends away. Therefore respite options for young people in Newham need to reflect this
- A training flat for young people to use for short periods of time or respite while still living at home with family to prepare them for when they do make the move to live independently

Learning disability

Given the projected growth of the learning disability population in Newham over the next 10 years, we anticipate that there will be a need to develop new services to ensure capacity of support to individuals and to ensure that large segregated services are not recreated.

Market opportunity

In talking to organisations involved in support planning for people with LD and others working with people with LD, the following gaps and unmet needs were identified:

- A range of respite options for people with LD, including specifically people with autism, people who may challenge services and younger people living at home with family carers
- Sensory services for people with LD, particularly those with profound and multiple learning
 disabilities. The services that currently exist are aimed at children but can have significant benefit for
 adults and would be used by personal budget holders if available
- User led groups that are independent of adult social care that encourage people with learning disabilities to be less reliant on services, make links in the community, link with others with the same interest etc
- Hydrotherapy / accessible swimming opportunities

Move on from assessment and treatment units and secure accommodation

Individuals with a learning disability and associated challenging behaviour and mental health issues sometimes require additional support from a medium or low secure assessment and treatment unit (ATU). These hospital units will provide specialist health interventions based on a person centred approach within a multidisciplinary/agency framework under a treatment plan. Individuals within these units may be detained under the Mental Health Act or may be admitted as an informal patient. Newham currently has 10 residents with LD in ATUs. A large majority of these people also have autism.

Admissions into ATUs are approximately two per year, and have approximately two discharges per year. However, the learning disability health team have not placed anyone in an ATU for the past two years and we would strive to avoid admissions when at all possible by offering alternative, specialist support in the community.

Market opportunity

There are limited options in Newham for step down once people are ready to move on from ATUs and to meet the needs of people with very high levels of challenging needs. There is also limited provision in Newham to meet the needs of people who have behaviour that challenges and/or autism. This is a gap in the market that requires specialist, experienced providers with a track record of delivering this type of support.

People requiring this level of support are generally supported in high cost placements. Newham Council uses the Care Funding Calculator to ensure that costs are reflective of the support needs of the person and the service provided. We will require evidence of outcomes from providers supporting people with complex needs and welcome providers' innovation of different support models that can support people to achieve their outcomes and develop skills to move on in the future.

People with physical impairments

We know there are significant barriers that make it difficult for people with physical impairments to participate in their communities and in specific activities. Unfortunately, many of these barriers are outside the power of adult social care to change. The Greenhill Community Group, established following closure of the Greenhill Centre in 2011, monitors progress on the following key areas, identified through an informal audit of access issues in Newham:

- Buildings, leisure centres, local service centres, libraries, adult education, community buildings, dentists and some GP surgeries
- Roads / pavements
- Transport
- Summer events
- Information and communication
- Staff and public attitudes

Market opportunity

Friendship groups wishing to meet informally may require personal assistants (PA) / support workers to help with co-ordinating arrangements.

PAs/support workers who accompany people with communication needs (e.g. stroke survivors with aphasia) out into the community need to be especially proactive and prepared to challenge access barriers on their behalf.

PAs/support workers may need to provide support with accessing the Newham Mag and Information, Advice and Guidance (IAG) website to find out about activities or events of interest. This is particularly important for visually-impaired people.

Accessible housing is essential, including for those requiring temporary accommodation.

People with sensory impairments

Through the workshops that we ran with service users and carers, we were clearly told that there are not enough services in the borough that offer British Sign Language (BSL) interpreters. Solutions could include independent living support services that offer BSL trained staff to support people, or a range of other services that can support deaf and hearing impaired people by having BSL trained staff, rather than the person needing an interpreter with them all the time to sign for them, which is not cost effective or inclusive.

Other gaps include:

- Awareness-raising training for staff to be more aware when they are working with people who may have a sensory impairment
- Specialist training on software for people with a visual impairment, who currently have to travel to the Royal National Institute of Blind People (RNIB) at Kings Cross to access this support
- Mobility training by qualified rehabilitation workers. Visually-impaired people may have money in their personal budget to buy this training but are not able to spend it as there are no qualified workers in Newham
- Trained support workers who are trained in guiding and / or BSL who can work flexibly to meet the needs of individuals
- Braille tutoring
- BSL / lip-reading courses
- Housing environments that are suitable for people with sensory impairments, e.g. adequate lighting, suitable decoration / soft furnishings etc
- Safe transport options
- Specific sensory support for people who also have a learning disability, often the sensory impairment is overlooked and viewed as behaviour associated with the learning disability

Carers

The carers' support service market is in its infancy and there are opportunities for providers to develop in this area. Newham Council is moving to a more personalised model where carers will be given a personal budget which opens up opportunities for providers to develop creative and flexible services. This includes:

- Opportunity for providers to market their care and support services to carers who are not FACS
 eligible and to self funders to ensure that all carers have access to the same quality service and
 information
- Ensuring that carers services are included in the community hub model that the council is currently designing to bring services to the heart of the community closer to residents

Market opportunity

We will be going out to tender in autumn 2013 for a carers support service for adult and young carers. The tender will be advertised via the NECTR system.

Support planning and brokerage

Market opportunity

We are currently going through a procurement process for independent support planning and brokerage services for social care. Our vision is for people to have the option of high quality, person centred, and creative support planning and brokerage. Over time we want to expand the number of people accessing this service and give people the option of working with peer brokers which will involve developing capacity for disabled people to support each other through the support planning and brokerage process. This tender opportunity will be advertised on NECTR.

Mental health

The borough is well served in terms of primary, secondary and acute care provision. Inpatient provision will be further supplemented by the introduction of a triage ward in 2013 which will help to expedite hospital discharge and prevent admission where possible.

There is a need to review third sector provision to ensure that it is meeting an identified need and is able to support people in the community and in accommodation based settings.

Access to residential and supported living provision will be reviewed and the pathway of care will need to be more responsive to supporting people into independent living than it currently is. We will also focus on ensuring that there is a range of supportive provision, including tenancy sustainment and preventative floating support.

The biggest gap for people with mental health issues is access to employment opportunities, particularly for those who are supported in secondary care services. Access pathways to universal employment services will need to be established in order to maximise opportunities.

8. Commissioning intentions

Housing and support

Our commissioning intention is to support people to remain as independent for as long as possible and to reduce the use of residential and nursing care unless absolutely necessary. However, we would like to see more use of housing schemes and residential facilities as a community resource to avoid segregating people from the wider community.

We are committed to enabling people who wish to stay in Newham where possible and so providers may be able to fill some of the gaps in the future to support people to stay closer to home. Following on from this, we would encourage providers to ensure that whenever they are considering new developments, to talk to us about the design of new buildings, to ensure that they will be suitable for people as they get older and who may develop both physical and sensory impairments as they age. We recommend that providers follow best practice guidelines, for example NICE guidelines.

In the future we would like to see a range of housing options develop in the community, offering a range of choices to both people eligible for social care and self funders (who may choose to buy different types of services). In order to support people to remain independent for as long as possible we need skilled and experienced providers to offer solutions to people who may traditionally have been placed in residential care. We are keen to explore future options with providers, who may have creative and innovative ideas for development, including accommodation with adequate lighting and suitable decoration/soft furnishings etc for people with sensory impairments and appropriate design for people with dementia.

We will only support and work with providers who meet the Newham Quality Framework standards and comply with the outcomes defined in service specifications.

Day support

We are keen to see the ongoing development of local, community-based opportunities that promote inclusion for disabled and older people. Where the authority owns or invests in buildings in the community we want to ensure they maximise their potential as hubs for activity and attract diverse funding to ensure viability and value for money.

We would like to talk to providers about new and innovative ideas for supporting people to achieve personal outcomes, in line with personalisation, resilience agenda and the principles of 'Keys To Citizenship' (Simon Duffy, 2006).

There are many universal, community-based services and activities that people with social care needs can be supported to access and we would like to see more providers taking a lead on this in the future rather than creating segregated services for people with social care support needs who want to participate in bingo, yoga, pottery, book clubs etc.

Employment

Adult social care commissioning is currently reviewing the supported employment service for disabled people and intends to redesign this service working with Newham's Workplace service.

We would encourage the provider sector to be innovative and develop more models of employment related support which offer quality, choice and services at competitive prices as people begin to make new and creative choices to meet their employment needs and develop skills to enable them to access paid employment.

We would also like to encourage social care providers to consider their role as employers in the local area and to consider opportunities for employment, work experience and apprenticeships for disabled people. Social care providers need to lead by example and show other local employers what can be achieved by disabled people.

Independent living support services (ILSS)

The ILSS framework has been implemented in 2012 and is a three year contract with the option to extend for a further two years. There will be no further competitive tendering of ILSS services during this period, however we may work with providers to review the price of purchasing care.

There may be opportunities for services providing support to personal budget holders, particularly those with specialist areas of experience and expertise. There may also be opportunities for joint working with housing and support providers, for example to work jointly to provide services for people who have had a stay in an ATU and are now returning to live in the community.



Assistive technology

We are committed to prescribing the right range of equipment from a diverse, high quality market to meets identified needs. There are a number of new equipment items on the market and technology is changing all the time. Our commissioned services will need to offer a choice of flexible options that deliver value for money. We expect to see a range of providers utilising telecare as an integrated approach to service delivery.

We will develop the market for self purchase of equipment and provide information, advice and guidance to customers to facilitate informed choice when choosing equipment solutions for themselves.

We will also seek to enhance the use of assistive technology as a cost effective solution within personalised support planning. We will also work with sheltered and supported living providers to develop their AT offer.

End of life care (EoLC)

Newham Council aims to support at least 50 per cent of people receiving EoLC to die at home, if this is what they want.

The following recommendations for commissioning social care will contribute to the development of local integrated care services:

 Work to speed up hospital discharge so that people do not die in hospital while waiting for equipment - ICES to respond to urgent requests that facilitate discharge home and ensure that syringe drivers are available



- Assess the 24-hour support available to people dying at home and their carers and take steps to address social care gaps in service provision
- Consider the provision of personal alarms and telecare for frail patients and carers
- Ensure there is a single point of contact for carers through which they can arrange a home-based assessment for home-based equipment by a qualified professional, such as an occupational therapist, and be trained to use it as necessary
- Ensure providers access accredited training courses for care home managers and domiciliary care staff, to establish a good grounding in the principles and practice of end of life care, including knowing when to seek expert advice and information
- With the CCG, explore the potential for involving social workers in EoLC planning at an early stage, including:
- attendance at monthly Gold Standard Framework meetings in general practices
- taking an active part in patient care where appropriate and with the consent of the individual and family
- involvement with hospital patients
- supporting patients to make advance care plans that relate to all their social and clinical needs
- recording of advance care plans (ACPs) on social care systems to ensure that, when an individual needs social care support and services, the information in the ACP can be used to respond promptly and appropriately. This will enable social workers to prioritise and fast track support to people at the end of life and ensure that people are given good, early advice and support to help them access financial, practical and other support.
- Ensure the development of information sharing pathways between health and social care to facilitate integrated care and a seamless service.

Transition

Young people have aspirations and expectations for their lives that we want to see supported and developed. Providers need to adapt services to move away from a traditional style of services as young people will not want to purchase these with their personal budgets. We are keen to see the market grow and develop in order to allow these young people to lead real lives and have the same opportunities as their non-disabled peers.

Dementia

The Prime Minister's challenge on dementia (March 2012), aims to achieve improvement in the quality of care and help to reduce future pressures on health and social care by focusing on three key areas:

- 1. Driving improvements in health and care, including care homes and domiciliary care and better information and support for carers
- 2. Creating dementia friendly communities that understand how to help
- 3. Better research

Newham's commissioning goal is for people with dementia and their families and carers to be supported to live well with dementia, no matter the stage of their illness or where they are in the health and social care system. This will be achieved by:

- Focusing on improving services for people with dementia, preventing unnecessary hospital admissions and facilitating early discharge from hospital through more appropriate community packages of care
- Purchasing both specialist and universal services and support to achieve the best possible outcomes for people with dementia, their families and carers. This is to ensure that people with dementia receive high-quality care and support in primary, community and secondary healthcare, social care and housing services
- Increased resourcing of pre and post diagnosis social care support for individuals and their families and carers
- Considering the needs of people in Newham living with dementia in future proposals for extra-care housing and housing-related support
- Ensuring that people living with dementia can equitably access personal budgets and enablement services
- Further developing joint NHS/local authority working arrangements and integrated care
- Increased choice of support services for people living with dementia

Learning disability

We would like to see a more diverse market develop for people with learning disabilities which offers flexible, person centred support for individuals while ensuring services offer quality and value for money. Services for people with learning disabilities should be outcome focused, supporting people to gain skills and achieve their goals. Employment should be a central focus for people with learning disabilities.

We wish to see people with learning disabilities supported to make much more use of universal services available locally, use of volunteers and individuals supported to pool their budgets to purchase support around shared interests.

All learning disability services must be able to evidence outcomes achieved by individuals as a result of the service's intervention and evidence of real co-production within the service.

We would like to see opportunities for people who may have stayed in an ATU or have specific behaviours to be supported effectively in order for them to learn and develop skills to live more independently in the community. This support requires specialist staff who are experienced and trained to provide support and interventions, and providers who have a good understanding of the issues and needs of people who require this intensive support. These services may often need to be bespoke for individuals or very small scale due to the complexity of needs and support requirements, e.g. specific sensory support to avoid sensory impairments being overlooked and viewed as behaviour associated with learning disabilities.

We are keen to discuss this further and in more detail with interested and experienced providers who feel they may be in a position to offer this service in the future.

Physical/sensory impairments

We would like to see PAs and support workers who are supporting people with physical and sensory impairments upskilled to be proactive and prepared to challenge access barriers when supporting people in the community.



Organisations need to support people who previously used services to pool budgets, maintain friendships and access the community as much as possible. This may include supporting people to access information (e.g. Newham Mag/internet), providing staff who are trained in guiding, BSL, rehabilitation etc to offer quality support to individuals.

We would like all services to have a good awareness of the barriers and issues that people with physical and sensory impairments face and to plan services with these in mind, as these issues are likely to affect all groups of people as they age.

Carers

A review of service provision and the effectiveness of carers' services is currently underway as part of the carers strategy. As a result the following actions are in place:

- The development of a carers' service provider market to support the implementation of self directed support for carers
- Encouraging carers to take up an individual budget
- Development of a specific client group support service, including services of carers of customers with dementia

A procurement process for a new carers' service is due to commence in autumn 2013 and the service will commence in 2014.



Mental health

In 2013/14 the provision of social care in mental health services will be remodelled to enable a greater focus on personalisation. The ready reckoner for mental health services will be introduced and social care delivery will be much more aligned to the priorities of adult social care generally.

There will be an in depth review of residential and supported living providers which will focus on enhancing quality of delivery as well as market management in terms of cost and quantity of units. There will also be a greater emphasis on ensuring that providers deliver integrated care that supports recovery and promotes independence.

Substance misuse

Our commissioning intention is to continue with spot purchasing arrangements which allow for differing needs and customer choice with regard to placements.

9. How to engage with Newham Council

We encourage providers to contact commissioners to discuss ideas and plans for development of services within Newham. Contact details are below.

We operate a number of provider forums in Newham including: Strategic Provider Forum and client group specific forums for LD and MH. For more details please contact us on the details below.

All tenders for contracts are advertised through NECTR and tenders are submitted electronically through this system. Once registered, providers will receive notifications of new tender opportunities with Newham Council.

10. Contact details

If you would like more information on any of the areas covered in this Market Position Statement please contact us on the details below and we will ensure that you are put in touch with the most appropriate person to discuss your query.

Email: Commissioning.Assistant@newham.gov.uk

Call: **020 8430 2000**



