



St. Helens
Council

St. Helens Market Position Statement

October 2015 - October 2016



1) Introduction

This is the first update of our Market Position Statement (MPS) for Adult Social Care in St.Helens. The MPS is developed for existing and potential providers of Adult Social Care services and provides information that will assist providers in making business and investment decisions. The October 2015 - October 2016 refreshed Market Position Statement updates the previous document and also includes the changes that the Government has made that may affect the ways Councils deliver Adult Social Care.

The Local Authority works closely with other partner agencies such as the National Health Service (NHS) who are also important commissioners of care. In October 2013 the Local Authority and the Clinical Commissioning Group (CCG) established an Integrated Commissioning Team to work with existing and prospective providers of Health and Social Care.

This version of the Market Position Statement has been drafted at a time of continued uncertainty around future funding of Health and Social Care. Recent events have seen the delay in implementation of Phase 2 of the Care Act to 2020 and the introduction of the national living wage from April 2016. The impact of these and the National spending review planned for the final quarter of 2015 have yet to be fully understood.

It should therefore be noted that the details set out may need to change in light of funding pressures and anticipated budget reductions and therefore you are strongly encouraged to make contact to verify the position should you be interested in pursuing any of the business opportunities.

We welcome your comments about this Market Position Statement and in particular its value to you as a provider. We are interested in obtaining your views about how we continue to provide high quality services that deliver the best outcomes for individuals in a difficult financial climate.

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2) The Council's Priorities for Adult Social Care in 2015/16

The Council's priorities for Adult Social Care need to be seen in the context of significant legislative change, namely Part 1 of the Care Act 2014, other government initiatives such as the Better Care Fund and a very challenging financial climate.

The Council's key strategic priorities for Adult Social Care are taken from the Health and Wellbeing Strategy 2013-16 and include:

- Promoting mental health and wellbeing.
- Early detection and effective management of long term conditions.
- Reducing unnecessary hospital admission and readmissions.
- Supporting people with dementia.

The Council will also:

- Endeavour to provide services that meet eligible needs of individuals and carers that are joined up and easy for people to access and understand.
- Ensure services are integrated whenever possible to ensure care is delivered in a coordinated and cost effective way.
- Learn from findings of national case reviews, complaints and performance information to improve and deliver good quality services that are safe, caring and promote dignity for all recipients of those services.
- Implement changes resulting from legislation and national guidance in a way that is fair, equitable and understandable.
- Maximise value for money, managing limited available resources effectively.

Whether services are provided by the Council or commissioned, we use the acronym SOPHIAA to ensure that all services are:

Safe - promote safety and wellbeing at all times

Outcomes focused - make a positive difference to the lives of individuals

Personalised - are individually designed

Healthy - promote positive health outcomes and wellbeing

Inclusive - include everyone

Accessible - services are easily accessible to all groups in the population

Affordable - that services offer value for money and are sustainable

The MPS has been developed alongside other key strategic documents such as the Joint Strategic Needs Assessment (JSNA 2015) and the Health and Wellbeing Strategy 2013-16. To successfully deliver our services the Council works with many different agencies and partners. This includes statutory health organisations such as St.Helens Clinical Commissioning Group (St.Helens CCG), St.Helens and Knowsley NHS Trust, (St.Helens and Whiston Hospitals), Bridgewater Community Healthcare NHS Foundation Trust and 5 Boroughs Partnership NHS Foundation Trust as well as others such as the Police, Housing, the Voluntary Sector and a range of independent providers of care and support.

3) Developments and Changes in 2015

The Care Act (Part 1) 2014

The Care Act is the biggest legal change for Adult Social Care in the last 60 years. Previous legislation was complex and put in place through various Acts and Amendments since 1948. The Care Act 2014 replaces the component parts into a comprehensive legislative framework. The most significant changes are:

- A national eligibility framework
- Identifying the individual's wellbeing as important in the assessment process for service users and carers
- Rights for carers
- Consolidating the statutory status of Adult Safeguarding

Part two of the Care Act focusing on paying for care has been postponed by the Government until 2020.

The Better Care Fund

The Better Care Fund (BCF) is a government directive to help promote greater integration between Health and Adult Social Care. The St.Helens plans were approved by NHS England in December 2014. The Adult Social Care and Health Portfolio and St.Helens Clinical Commissioning Group (CCG) are working closely in partnership to ensure that all elements of the BCF Plan are embedded with a focus on ensuring the following national conditions are met:

- Protection of social care services
- Closer integration between Health and Social Care
- A commitment to 7 day working
- Better sharing of information
- A reduction in total non-elective hospital admissions

Integrated Commissioning Team

The Council integrated its commissioning team with St.Helens CCG in October 2013. The team is working to provide improved integrated Social Care and Health outcomes for people in St.Helens and works in line with a jointly developed 5 year commissioning plan.

Recent initiatives include:

- Improvements in the co-ordination of Health and Social Care provision in the community and at Accident and Emergency.
- Integrated Access St.Helens (IASH).
- Strong transitional placements, to enable the timely discharge from hospital for people following an in-patient stay.

Continuing Health Care

An Integrated Continuing Health Care (CHC) Team has been established by the Council and St.Helens CCG with a pooled budget for the provision of CHC, Funded Nursing Care and Joint Funded packages of care in July 2014.

4) The Adult Social Care Market in St.Helens

The Adult Social Care market in St.Helens is relatively stable, with a variety of different providers and different types of services to ensure that service users have genuine choice.

St.Helens Council commissions the full spectrum of Adult Social Care and support services, from preventative and community support aimed at those with emerging social care needs through to highly specialist care. Residents also purchase care and support directly as a 'self funder'. We have categorised the market into the following 3 areas:

Information, Advice and Preventative Services

Some people, regardless of whether they are eligible for state funded support, may wish to access low level preventative services.

Community Based Services

A range of community based support helps vulnerable adults to be independent and remain living within their community. This includes domiciliary care, day care, extra care housing, supported living schemes, short-term breaks and intermediate care.

Accommodation Based Services

Including residential and nursing care homes that provide care and support 24 hours a day, 7 days a week in a residential setting, which may be permanent or provide respite care.

In addition to care commissioned directly by St.Helens Council, care can also be accessed by the following:

Self Directed Support

The Council is committed to promoting the use of Self Directed Support for people as a means of meeting eligible social care needs wherever this is appropriate. Some people may ask the Council to commission a service on their behalf. Others may choose to manage their care through a direct payment. This is explained below.

Direct Payments

Direct payments are monetary payments made to individuals who request them to meet some or all of their eligible care and support needs. They provide independence and choice by enabling people to commission their own care and support in order to meet their eligible needs as set out in their support plan.

St.Helens Council currently provides direct payments to 635 adults who choose to arrange their own care either by employing a personal assistant or through a care agency provider.

The Integrated Continuing Health Care Team is able to offer Personal Health Budgets to people in receipt of Continuing Health Care funding and these payments will be made via a direct payment.

To support people to manage a direct payment Direct Payments Advisors will assist with recruitment and employer advice and we offer a free payroll support service.

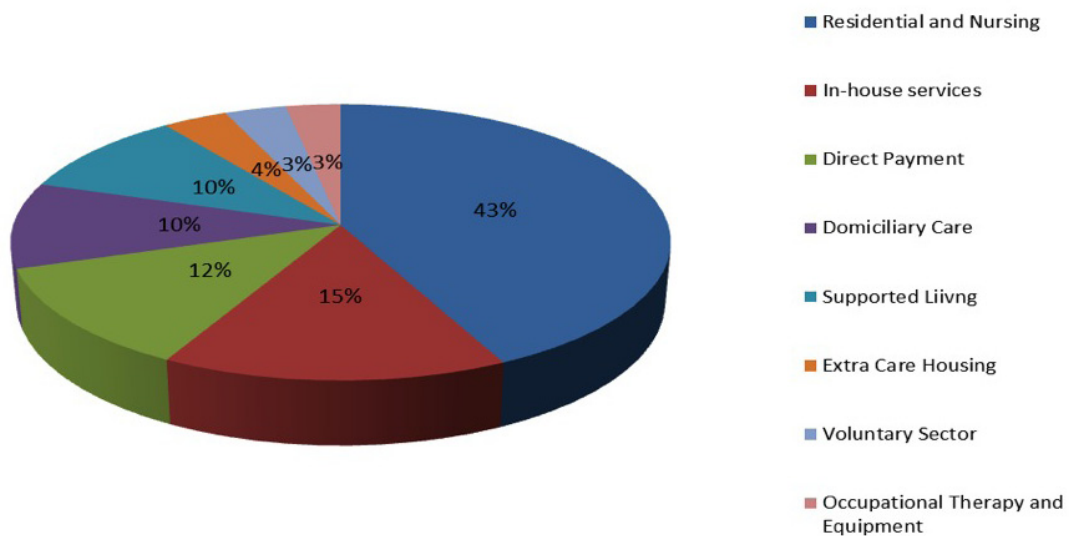
5) Funding 2015/16

The tables and graphs below show how much the department plans to spend during the period 2015/16 by client group and service area.

Adult Social Care and Health Portfolio 2015/16 Budget Service Area (Gross)

Service Area	£	Percentage
Commissioned Services		
Residential and Nursing	28,227,039	43%
Direct Payments	8,018,107	12%
Domiciliary Care	6,638,230	10%
Supported Living	6,562,917	10%
Extra Care Housing	2,386,750	4%
Voluntary Sector	2,243,494	3%
Sub-total Commissioned Services	54,076,537	82%
Occupational Therapy and Equipment	2,006,582	3%
In-house Services	9,967,172	15%
Grand Total	66,050,291	100%

Adult Social Care and Health Budget by Service 2015/16



Adult Social Care and Health is the largest Portfolio in the Council and the past four years has seen a reduction in the Portfolio budget of £20m in real terms. This has been found through reductions in staffing, including voluntary redundancies, tightly managing inflationary uplifts on provider fees, significant reductions in voluntary sector funding and managing demand.

For the period 2016 - 2018 there are expected to be further significant reductions in spending required arising from the reductions in central Government funding.

This continued uncertainty over funding, as well as the impact of the delay in the implementation of Part 2 of the Care Act, the introduction of the national living wage from April 2016 and the outcome of the National spending review, expected late 2015, will have a significant impact on how services are provided and eligible needs are met in the future.

6) Demographic Changes: Impact on Demand and Services

Key Messages for Adult Social Care in St.Helens

- As the number of older people increases, due to increased life expectancy, demand for Adult Social Care services for this service user group is likely to grow in the future.
- The number of older males is projected to increase most rapidly.
- The number of people with dementia is likely to increase.
- People with learning disabilities are living far longer which means there will be a growth in the number of people with a learning disability and other conditions related to older age such as dementia.
- Integration and partnership working between Social Care, Health and housing commissioners and providers will be strengthened.
- In order to manage demand universal and preventative services will have to play a greater role.

Population and Age Structure Summary

There are currently approximately 177, 200 residents in St.Helens (ONS 2014 Mid-Year Estimates). 49% of residents are male and 51% are female. There are an estimated 34,000 people aged 65 or over living in St.Helens (ONS 2014 Mid-Year Estimates). 55% of the older population are female and 45% are male.

Age Structure

The age structure of the St.Helens population has changed significantly over the past ten years. Since 2003 the number of people aged 65 and over has increased by 20% and population projections indicate that the ageing population is set to continue with the proportion of older people growing at a faster rate than the national average.

The older population in St.Helens are most likely to live in the West of the Borough in areas such as Billinge and Seneley Green, Eccleston, Rainford and Rainhill. In some communities people aged 65 and over make up 40% of the total population.

The very elderly population (people aged 85 and over) has grown over recent years. In some parts of the borough over 4% of the population are 85 and over, these areas include parts of Eccleston, Haydock, Rainford and Rainhill.

The growth in population will vary considerably by age group; between 2012 and 2025 the number of people aged 65 and over is projected to increase by more than 27% (to a total of 42,000 people). The number of older people aged 85 and over is predicted to rise by nearly 70% over the same period, increasing from 3,500 to 5,900.

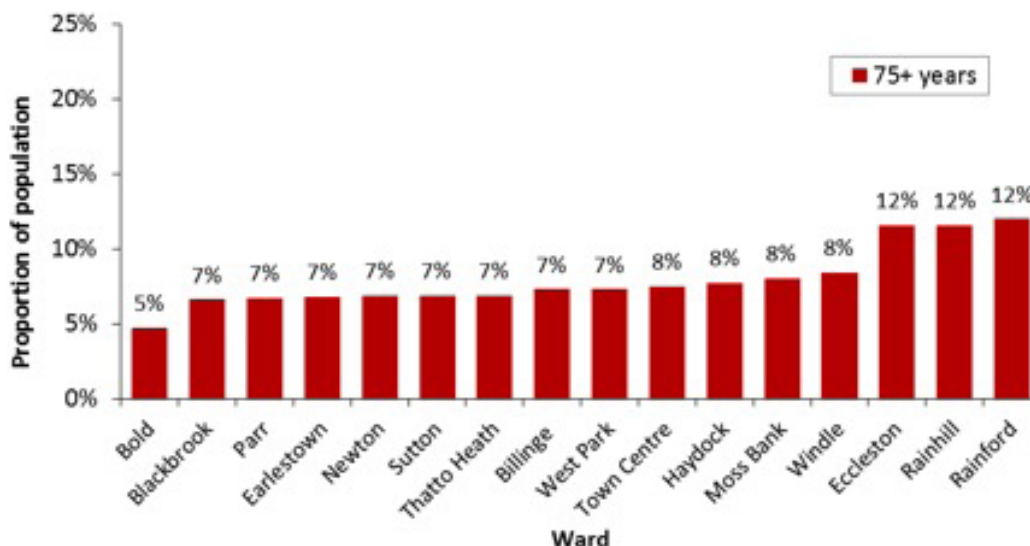
As people in the borough are living for longer many people are likely to have one or more long-term health conditions, and for a significant number of people older age brings increased frailty.

Gender Structure

The older male population is projected to increase at a faster rate than the female population.

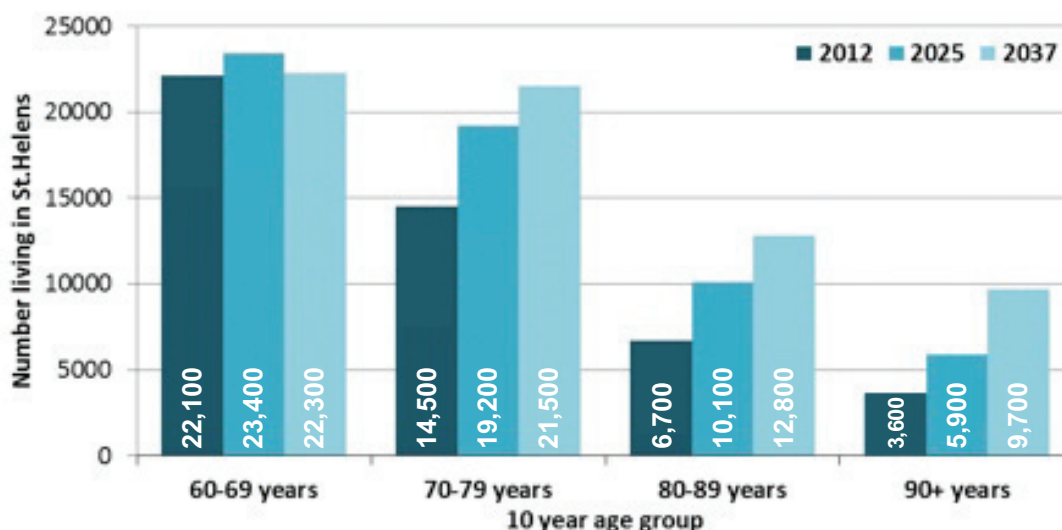
The number of males aged 85 and over is projected to increase by 109% by 2025. This compares with an increase of 50% in the number of women aged 85 years and over in the same period. This may have a significant impact on the profile of social care service users and may have future workforce planning implications. To ensure person centred care delivery, providers may want to consider the gender ratio of the workforce in their future workforce planning decisions.

Population structure by age by ward: 75+ years



Source: Census 2011, NOMIS

Predicted St.Helens resident population aged 60+ years by 10 year age band, in 2012, 2025 and 2037



Source: ONS (2015)

Living Arrangements

In total there are 75,736 households in St.Helens. Over the last decade an increasing number of individuals live alone. Information from the 2011 Census tells us that 22,700 people in the borough live in single person households, accounting for 30% of all households.

There are 16,700 all pensioner households in the borough; this includes almost 10,000 households consisting of an older person living alone. This means that 13% of all households in St.Helens consist of one person aged 65 and over living alone.

The number of households is forecast to increase by around 5% over the next decade, which is faster than population growth. The change in household composition is important as it implies that a greater number of people will be living alone.

According to the 2011 Census there were 968 people resident in a St.Helens care home. This includes people from out of the area, self-funders and those whose care is Health funded. The current position is referenced on Page 20.

Direction and possible business opportunities

The Council values the work that the voluntary, charity and faith sectors already achieve in our communities to support people to reduce issues such as social isolation and loneliness by providing support and friendship. We would encourage further development in this area and would like the sector to make use of the skills and time that the more able older population can become involved in.

The Council encourages the third sector to work in collaboration to deliver this in a planned and structured manner.

Diversity

Although predominantly white British, since the 2001 census there is estimated to be a growth in the number of people from black and ethnic minority groups in the borough.

According to the 2011 Census, 98.5% of households in the borough have English as a main language. Non-white ethnic groups are currently estimated to make up around 1.5% of the total resident population (2011 Census). This has increased from 1.2% in 2001 but remains significantly lower than the North West and England average. Although the ethnic minority population remains small, this provides a challenge to ensure that the health and care needs of these small communities and individuals are appropriately met.

Within the 65 and over age group there is little ethnic diversity. At mid-year 2009 it was estimated that over 99% of people within this age group were from white ethnic groups, this includes British, Irish and other white groups. There is evidence that older people from ethnic minority groups may be at greater risk of social isolation as they age because they are more likely to live alone and have less contact with family.

Dementia

Dementia is most common in older people, affecting 5% of people aged over 65 and 20% of people aged over 80. Dementia is likely to be a significant ongoing health and social concern with a potential impact on providers. Projections from the JSNA indicate that the number of people with dementia will continue to rise. The early diagnosis of dementia can improve outcomes and work is ongoing to improve awareness, detection, and formal diagnosis of dementia. Adult Social Care continues to take the lead on the Health and Wellbeing Dementia Project Group. The Dementia Project Group oversees provision in St.Helens ensuring that there is sufficient capacity within the borough.

The key Actions supported by the project group include:

- To improve the public awareness and understanding of dementia, this includes increasing the number of dementia friends in St.Helens.
- To increase dementia diagnosis rates and referral to diagnosis times.
- To improve pre and post diagnosis support for service users and carers.
- To ensure that there is sufficient specialist professionals to assist and support people with dementia.

	2015	2016	2020	2025	2030
Total population in St.Helens aged 65 and over predicted to have dementia	2,246	2,314	2,631	3,087	3,581
Males	803	873	1,028	1,210	1,416
Females	1,397	1,441	1,603	1,877	2,165

Source POPPI 2014

Direction and possible business opportunities

In terms of long term placements the Council/Dementia Sub-Group are satisfied that the current provision of residential and nursing provision for older people diagnosed with dementia within the Borough is sufficient and would not currently identify this as an area requiring further growth.

Early Onset Dementia

Dementia affecting younger people is called early onset dementia. The number of people within the borough aged 30-64 with dementia is predicted to remain fairly stable throughout the next decade. Service provision is within existing resources and this meets current demand.

Early Onset Dementia Projections in St.Helens aged 30-64	2015	2016	2020	2025	2030
Early Onset Dementia total population	47	47	50	51	49
Male	28	28	30	30	29
Female	19	19	20	21	20

Source PANSI, 2014

Direction and possible business opportunities

Existing services are meeting the current demand.

People with Learning Disabilities

The size of the adult population in St.Helens with a learning disability age 18-64 is estimated at 2,577 (2015) with a slight predicted decline by 2020, although there are still significant demographic pressures trends that will create some additional pressures on care services.

Estimates of learning disability in St.Helens	2015	2016	2020	2025	2030
Total population aged 18 and over predicted to have a learning disability (LD baseline estimate)	2,577	2,574	2,561	2,536	2,510
Total population aged 18 and over predicted to have a moderate or severe learning disability	684	687	691	693	702

Source: PANSI, 2014

Adult Social Care will continue to prioritise resources to support people with the highest need. This may mean that some needs may be met in different ways in the future.

St.Helens Council is committed to supporting people with a learning disability to live as independently as possible and have choice and control over the support that they receive. There are currently approximately 490 people with a learning disability who are in receipt of a long term service.

Whilst numbers of eligible adults with learning disabilities will remain relatively constant, people with complex health and social care needs are living longer and the numbers of older people with learning disabilities will increase. People with learning disabilities also have high levels of associated conditions such as high levels of prevalence of dementia, epilepsy and sensory impairments. The service provision will also need to adapt to these specific changes.

Direction and possible business opportunities

In this challenging economic climate the Council would be interested in preliminary discussions with providers who can offer local, St.Helens based, innovative and cost effective delivery models of Learning Disability Services which provide high quality support, which maximises independence and which offer improved value for money.

Young People Moving Into Adulthood (Transitions)

A key priority for the Department is to support young people coming through transition to be able to access high quality, value for money services to enable them to maximise their choice and to have as much control over their lives as possible.

Estimated number of young people moving from Children’s to Adult Social Services

	Learning Disability	Mental Health	Physical or Sensory Disability
2015/16	17	1	1
2016/17	10	0	0

Source: Adult Social Care and Health 2015

Direction and possible business opportunities

The Council would be interested in preliminary discussions with providers who can deliver expertise and positive outcomes for young people, while ensuring borough based cost effective services that are competitive and offer value for money.

People with Autism Spectrum Disorder

It is estimated that there are around 1055 people aged 18-64 with a diagnosis of Autism Spectrum Disorder with over 90% being male. Not every newly diagnosed person requests or requires a social care assessment; there will also be a demand for support from young people whose support needs have been met within educational services sometimes up to the age of 21.

People age 18-64 predicted to have Autism Spectrum Disorder in St.Helens

	2015	2025	2030	2030
Male	950	936	925	925
Female	107	104	103	103
Total	1057	1040	1028	1028

Source: PANSI 2014

Direction and possible business opportunities

The Council would be interested in preliminary discussions with providers who could deliver local, St.Helens based day care for people on the autistic spectrum.

We would also welcome initial discussions with providers regarding local, value for money supported living services for people with autism.

People with Physical Disability

It is estimated that there are 2,554 people with a serious physical disability in St.Helens aged 18-64 in 2015. The projection goes up to 2,611 in 2020 (PANSI 2014). It is also estimated that there are approximately 8,536 people with a moderate physical disability aged 18-64 in 2015, which will rise to 8,643 in 2020 (PANSI 2014).

Not all people who have a physical disability would be eligible for Adult Social Care. Generally the number of people with a physical disability is projected to increase in line with the population as a whole, although the numbers of people with a severe disability is expected to rise at a slightly higher rate. There is a wide range of support available for people with physical disabilities including direct payments and assistive technology. Consideration is given to the specific needs of people with physical disabilities when we commission new services.

	2015	2020	2025	2030
Total population of St.Helens 18-64 predicted to have a moderate disability	8536	8643	8614	8392
Total population of St.Helens 18-64 predicted to have a serious disability	2554	2611	2638	2566

Direction and possible business opportunities

The Council do not have any evidenced gap in provision for people with a physical disability. However we continue to consider the needs of people with physical disabilities when commissioning services and support.

People with Sensory Impairment

People are living longer in St.Helens and with this increased life expectancy there is expected to be a rise in the numbers developing a sensory impairment. It is predicted that there will be a significant increase in people aged 65-75+ years in St.Helens who will experience moderate to severe visual impairment and have registered eye conditions with the projected figures also showing an increase in those experiencing moderate to severe hearing impairment (PANSI/POPPI2014).

Direction and possible business opportunities

The Council have not identified any evidenced gap in provision for people with sensory impairments.

People with Mental Health Problems

Mental Illness affects one in four people at some point in their life. It is estimated that there are approximately 17,120 people aged under 65 experiencing a common mental health problem in the borough. This is predicted to remain stable over the next decade.

The majority of people experiencing mental health problems are managed in Primary Care settings. For those who need a specialist intervention, secondary mental health services are provided by the Council in partnership with the 5 Boroughs Partnership NHS Foundation Trust, with the Trust taking the lead on the majority of interventions and service provision.

Direction and possible business opportunities

There are currently a number of people supported out of borough. St.Helens Council and St.Helens CCG intend to commission services within St.Helens, as an alternative to Out of Borough hospital placements. The Service will support some of St.Helens' most excluded individuals, namely those who have severe and enduring complex mental health needs.

7) Details of Services and Possible Business Opportunities

We have categorised the market into the following 3 areas:

- Information, Advice and Preventative Services.
- Community Based Services.
- Accommodation Based Services.

Current Services

Information, Advice and Preventative Services

Information, Advice and Advocacy

Information and advice is central to enabling people, carers and families to take control of and make well informed choices about their care and how they will fund it. Good information and advice helps promote people's wellbeing by increasing their ability to exercise choice and control.

Some people may only need to be provided with information and guidance, and it is important that this is of a high quality and can be provided in a number of different ways.

The Council has a contract with voluntary sector providers to deliver information, advice and advocacy and this is compliant with the Care Act. The Service is known as St.Helens Advocacy and Information Resource (SHAIR) and the contract runs to 1 April 2016 with the option to extend for another 2 years. In addition, information and advice leaflets on a range of Adult Social Care services are available from a number of outlets across St.Helens including Council offices and local libraries. Information is also available from our website: www.sthelens.gov.uk

Direction and possible business opportunities

Existing services are meeting the current demand, however we are keen for ongoing work across the sector in order to avoid duplication and improve access to information and advice.

Preventative Services

Preventative Services are aimed at individuals with no or low level, health or care and support needs. These are universal services and include befriending services which improve wellbeing, safer neighbourhoods and the promotion of healthier life styles. These may also include more targeted interventions including falls prevention and handyman services.

Direction and possible business opportunities

The Council encourages the voluntary, charity and faith sectors to become involved in low level preventative work.

Carers Service

As the numbers of people supported to remain in their homes increases the numbers of carers requiring support is likely to increase.

Carers have a really important role in providing invaluable support to someone they care about who may have a long-term illness or disability.

St.Helens Carers Centre is an independent charity, which has a contract with the Council and provides a range of activities to provide support to carers.

- Advice/information
- Training courses/events
- Therapy Sessions
- Outreach
- Support groups
- Carer breaks
- Income maximisation
- Newsletter/publicity
- Carers Emergency Card

The contract commenced on 1 October 2013 and will run for 3 years with an option to extend by two further periods each of a single year.

This service delivers an Integrated Carer Support Service for Adult Carers and Young Carers incorporating the use of paid staff and volunteers to provide a comprehensive support service for all carers within the borough.

The Service aims to be outcome focused and personalised in order to promote choice, control and independence for carers, tailoring solutions to Carers specific needs as far as possible.

Direction and possible business opportunities

Existing services are meeting the current demand.

Assistive Technology

Assistive Technology is a term used to describe devices and sensors that are installed into someone's home to enable them to maintain their independence for as long as possible.

Careline is one very popular example of Assistive Technology but other devices and sensors include Falls Sensors and Epilepsy Sensors, which can detect when a person is at risk and may need assistance. Careline in St.Helens links through to a 24 hour response team that can attend if a user has activated the lifeline pendant or where the detectors have identified a potential issue.

The use of Telehealth systems is also increasing, allowing individuals with a number of long-term conditions (such as diabetes, hypertension and chronic obstructive pulmonary disease) to monitor their own condition at home. Telehealth equipment allows for a consistent, reliable and accurate monitoring of vital signs and ensures that any deterioration can be quickly identified and required intervention to take place. This also enables people to manage their own health conditions more effectively and improves understanding and awareness of their conditions.

Assistive Technology is actively promoted as part of packages developed to meet a person's support needs.

Direction and possible business opportunities

The Council would welcome preliminary discussions with any providers that can offer innovative, value for money Telecare and Telehealth solutions that can support any identified commissioning priorities.

Community Based Services

A range of community based support helps vulnerable adults to be independent and remain living within their community. This includes domiciliary care, day care, short-term breaks and intermediate care.

Current Services

Day Services

The Council has three in-house day services provisions.

Kershaw Day Centre is based in Newton Le Willows and provides services for older people. The service supports 190 service users the majority of whom have a dementia related illness. The service enables older people to remain in their own homes and communities while providing respite for carers.

Stephenson Day Centre for people with learning disabilities is based in Rainhill and provides services for people with learning, physical and sensory disabilities. It offers a range of community based venues with social, leisure and work related activities. Also based at Stephensons are New Ventures and the Supported Employment Service which offer volunteering and employment options for adults with learning disabilities. The service also offers work placements/experience to disabled students from local schools and colleges.

Brookfield Support Centre can provide day care for older people who are frail due to age related conditions. This support enables them to remain independent and living in the community. Some service users are frail due to age related conditions.

Direction and possible business opportunities

Day Opportunities for People with Learning Disabilities

The Council is looking to develop day opportunities for people with autism in the borough for the future. There may be opportunities for a small block contract given the right set of circumstances (i.e. financially competitive). Any interested providers in the first instance should contact our Commissioners.

If a block contract opportunity arises it will be advertised on the e-tendering portal, the CHEST but it is important to note that particularly in the current difficult financial climate any commissioning will only progress if services available are competitive and offer value for money.

Intermediate Care

Intermediate Care refers to a range of time limited services delivered in various settings. Intermediate Care can be bed based or home based. In St.Helens Intermediate Care is provided by Adult Social Care and Health, Bridgewater Community Trust and 5 Boroughs Partnership NHS Foundation Trust.

The aim of intermediate care services are to:

- Help people to remain at home and be as independent as possible
- Prevent unnecessary admission to hospital
- Help people recover faster from illness
- Support discharge from hospital
- Prevent unnecessary admission to long-term care

Integrated Access St.Helens (IASH) - Range of Services

The IASH range of services is managed by Adult Social Care and Health and make up some of the Intermediate Care Provision in St.Helens. The IASH range of services include: - an IASH Community Assessment Team, Brookfield Resource Centre, the Transport Service and an IASH Accident and Emergency pilot at Whiston Hospital.

IASH Community Assessment Team

The IASH Community Assessment Team is a multi-disciplinary team that include a rapid response function. The team provide an integrated access approach across the local health and social care economy. The team make onward referrals and provide advice, information and signposting to clients, carers and professionals. This multi-disciplinary approach to assessment means that clients are seen by the person most appropriate to their presenting needs - a Social Care Worker, Nurse or Therapy Assessor.

The rapid response function of the service is a crisis response and aims to be with clients within two hours of referral and following assessment time limited interventions can be put in place to support the service user or carer. The IASH Community Assessment Team operates 7 days a week, 8.00am to 10.00pm. Assessments may be carried out in a person's home or within Whiston Accident and Emergency Department.

Reablement

Reablement is a home based intermediate care service, managed by IASH, that supports individuals who are 18 years of age or older to remain as independent as possible. The team comprises of Nurses, Physiotherapists, Occupational Therapists and Support Workers.

Individuals who will benefit most from reablement are those who have recently been discharged from hospital, or people who are at risk of losing their independence due to frailty or illness.

Access to reablement is via the IASH Community Assessment Team or Integrated Discharge Team (IDT) at Whiston Hospital. The reablement intervention is short term and consists of team members supporting individuals to follow a 'reablement programme' that has been designed specifically to meet their needs. The programme can include help with things such as confidence building, improving mobility or personal care tasks, improving diet and healthy living.

Maple Unit

The Maple Unit is a bed based intermediate care service for 12 service users based at Brookfield Resource Centre. The Maple Unit forms part of the IASH range of services. The unit is accessed through the IDT at Whiston Hospital and enables the safe and timely discharge of patients. The unit is staffed by Nurses and Support Workers. The unit provides a more appropriate setting for ongoing care management functions and supports individuals recovering from a stay in hospital prior to returning home.

Acorn Unit

The Acorn Unit is a bed based intermediate care unit also at Brookfield Resource Centre, with access to reablement health professionals as and when required. The 5 bedded unit provides a therapeutic setting for reablement interventions where home based intermediate care is not appropriate. The Acorn Unit forms part of the IASH range of services.

Integrated Discharge Team (IDT)

The Integrated Discharge Team based at Whiston Hospital is responsible for assessing service users over the age of 18 years who may be eligible for Social Care. The team can access a range of services, such as, telecare, packages of care, reablement, intermediate care, transitional care and long term placements in residential and nursing homes. The team will also provide information, advice and guidance for service users and their families/carers regarding informal support services they may be able to access.

Domiciliary Care

The Council contracts with a number of providers of domiciliary care. Priority is given to the 5 domiciliary care providers who were successful following a tender process in 2010/2011.

These are 3 year contracts with an option to extend by 2 further periods each of a single year. The contracts commenced on 1 December 2011 and are awarded on a geographic zoned basis with new packages of care being offered to the successful provider for that zone.

In order to cover instances when the priority providers are unable to pick up a new package a secondary tier of spot contracts is used. This is an open arrangement with new providers able to sign a contract subject to meeting the appropriate vetting, evidencing that they are able to deliver the required specification and agree a price.

The Council currently has spot contracts agreed with 27 providers.

There are currently a total 1614 service users in receipt of a domiciliary care service.

1187 service users are placed with the successful preferred contracted providers.

359 service users are older people placed with the spot contracted providers.

68 service users are vulnerable adults placed with the spot contracted providers.

At the present time there are no capacity issues causing delay to the start of new packages.

Direction and possible business opportunities

Any tender for domiciliary care would take place using the e-tendering portal, the CHEST and appropriate notification would be given. At present there are no plans for general domiciliary care block contracts to be re-tendered during 2015/16.

There may be opportunities for providers who can provide responsive and flexible provision for people at the end of life being discharged from hospital. Commissioners would welcome initial discussions with any providers who are interested in pursuing this. New providers can approach the Council regarding spot contracts at any time. Please contact Contracts and Quality Monitoring if you require any further information.

Extra Care Housing

This is social or private housing that has been modified or purpose built to suit people with long-term conditions or disabilities that make living in their own home difficult, but who do not want to move into a residential care home. It is usually seen as a long-term housing solution as it gives people the opportunity to live independently with the reassurance of 24 hour on-site staffing and the availability of tailored support and assistance with various daily tasks and personal care.

As a result of partnership working between Adult Social Care and Housing Providers there are currently 6 extra care housing settings for the frail and elderly, of which 2 are specialised facilities for people with dementia.

128 service users are within the 4 general extra care schemes. 23 service users are within the 2 specialist dementia extra care schemes. The current contractual arrangements for extra care are between the Council and the housing association who then are responsible for subcontracting for the care delivery component. At the present time there are no extra care housing capacity issues.

Direction and possible business opportunities

The current arrangement is under review and may result in a tender. Should it be the case, it will be undertaken via the e-tendering portal, the CHEST.

Supported Living

The Council currently operates a mixed economy of care for Supported Living, with the in-house provider, providing care to approximately 52 service users and 109 service users in receipt of a supported living service under Council contracts or direct payments.

External providers following successful completion of the vetting process are added to the resource directory which states the specific care needs they are experienced in supporting.

Packages of care are awarded to the provider who is able to evidence that they can meet the individual's needs. Where appropriate this will be following a mini competition.

At the present time there are no capacity issues within Supported Living.

Direction and possible business opportunities

Supported Living for People with Learning Disability

The Council currently operate/commission a number of 1, 2, 3 or 4 bed properties. There are a number of vacancies within these tenancies and no capacity issues are envisaged at the present time. In terms of capacity and ensuring value for money, whilst being mindful of the current economic climate, the Council may consider looking at potentially larger properties in order to achieve economies of scale, for adults coming through Transitions or for older tenants where their current tenancy is no longer appropriate whilst still maintaining high quality care which promotes independence.

The Council may be interested in discussions only at this stage with housing and care providers who can offer the above.

It is expected that if any final decisions are made in this area then the care service will be subject to a competitive tendering exercise. Any appropriate opportunities will be advertised through the e-tendering portal, the CHEST.

Supported Living for People with Autism

A number of Supported Living tenancies within St.Helens support individuals who have autism.

The Council may consider a specialist supported living tenancy for young people coming through transition with Autism, subject to an appropriate property being available, and the service offering competitive, high quality value for money.

Any appropriate opportunities for care delivery will be advertised through the CHEST.

Accommodation Based Services

This includes residential and nursing care homes that provide support 24 hours a day, 7 days a week in a residential setting, which may be permanent or may be for a week or for a few weeks to provide respite care.

Current Services

Residential and Nursing Care - homes within the Borough of St.Helens.

The Council contracts with care homes for the personal care and accommodation in care homes with nursing care, when required, being contracted and paid for under the pooled budget arrangements with St.Helens Clinical Commissioning Group (CCG).

Care homes within borough, subject to meeting the required vetting and agreeing to the Council usual fee, can sign a contract with the Council.

Frail and Elderly.

There are currently 628 service users supported by the Council in 28 care homes within St.Helens.

There are currently the following 1097 beds within St.Helens.

359 Residential care;

255 Residential care Elderly Mentally Infirm (EMI);

359 Residential care with Nursing; and

124 Residential care with Nursing EMI.

Homes are required to provide occupancy information on a regular basis and from the information provided there would appear to regularly be over 5% vacancy levels for all categories.

The Council's information also indicates that approximately 18% of in borough beds are purchased by people who buy their services directly (self funders).

Direction and possible business opportunities

Spot Contracts for Residential / Nursing Care for Older People

A number of new residential and nursing care homes have been built in the borough in the last few years, resulting in a net increase in overall capacity of residential and nursing care beds.

Although it is expected that the numbers of frail and elderly older people will increase in future years, the Council is also seeking, wherever possible, to support individuals within the community. At this stage there are no capacity issues with residential and nursing care beds. It is possible that this position may change due to changing demographics and therefore the position will continue to be closely monitored on an on-going basis.

The Council sets its usual price for care annually. For details of the current prices levels please contact the Contracts and Quality Monitoring Team.

Vulnerable Adults

There are currently 59 service users in 3 care homes within St.Helens.

Direction and possible business opportunities

Residential / Nursing care provision for People with a Physical or Learning Disability

The Council prides itself on the high proportion of people with a Disability that it supports to live within the community. Very small numbers of individuals with learning disability go on to live in residential care. The Council is keen to ensure high quality residential care services, within or close to St.Helens where possible, that provide value for money, affordable care. The current rates paid by the Council for residential care provision for people with a learning disability or physical disability are considered very expensive and the Council is keen for this area of the market to be more competitive.

The Council may be interested in discussions only at this stage with providers who can offer the above whilst still maintaining high quality care.

For initial discussions please contact our Commissioners.

Residential / Nursing Care provision for People with a Learning Disability and Dementia

The Council recognises that there are increasing numbers of people with a learning disability who are developing dementia, in some cases at a relatively young age. The Council would be interested in discussions with existing care home providers of residential / nursing care for older people who may be interested in converting fully or partially into a specialist provision for people with a learning disability and dementia.

We envisage that the wing would be part of the home but with its own separate facilities and lounge and have capacity for about 6 - 8 Service users. It is likely that specialist staff would need to be employed to help support the needs of this client group. For initial discussions please contact our Commissioners.

Residential Respite for Vulnerable Adults

The Council commissioned a 5 bed residential short stay unit.

The contract was awarded to a single bidder following a competitive tender process.

This is a 3 year contract with the option to extend by 2 further periods each of a single year. The Contract commenced on 2 September 2013.

This service provides an overnight 5 bed short breaks service, is based in the borough of St.Helens and is predominantly for adults aged 18 and over with physical and learning disabilities.

Residential and Nursing Care - homes outside the Borough of St.Helens

The Council contracts for the personal care and accommodation in care homes with nursing care when required being contracted and paid for by colleagues in health.

Frail and Elderly

There are a number of care homes that are outside the border of St.Helens which a number of St.Helens residents choose to live in. There are currently a total of 106 service users in 34 care homes outside the border of St.Helens.

The Council enters a contract with the care home for a placement following vetting and normally mirrors the fee usually paid by the host authority.

Vulnerable Adults

There are currently 54 service users in 33 care homes outside St.Helens.

The Council enters a contract with the Care Home for a placement following vetting and this may mirror the fee usually paid by the host authority or for more complex needs the fee may reflect the level of care required and be separately negotiated.

End of Life Care

End of Life Care is support for people who are approaching death. It helps them to live as well as possible until they die and to die with dignity. It also includes support for their family and carers. If you have an incurable illness, palliative care will make you as comfortable as possible by controlling pain and other distressing symptoms, while providing psychological, social and spiritual support. Commencement of End of Life Care support is dependent on people's individual needs. The General Medical Council considers patients to be approaching end of life when they are expected to die within the next 12 months. This includes patients who are expected to die within the next few hours or days, and those with advanced incurable conditions. It can also include people who have:

- General frailty and co existing conditions means they are likely to die within 12 months;
- Existing conditions, if they are at risk of dying from a sudden crisis in their condition; and
- Life-threatening acute conditions caused by sudden catastrophic events, such as an accident or a stroke.

Direction and possible business opportunities

The Council is looking to work with providers both in the community and care home sector to develop End of Life Services within domiciliary care and residential / nursing care. If appropriate this may result in the tender of specialist provision.

Appendix 1: How We Do Business with Care Providers, Procurement and Quality Monitoring

The Council is keen to see a thriving independent sector social care market and wants to continue to see a wide range of choices for people with care needs, alongside a growth in business and employment opportunities for St.Helens residents.

All business opportunities contained within this report must be considered within the context of significant budget pressures and planned reductions in funding for public services over the medium term. There is a need for commissioners and service providers to work more closely in the future to support the development of a sustainable market for Adults that encourages innovation and enables the delivery of outcome based service specifications while achieving required savings.

It is our expectation that all of this will be delivered within a quality framework and that the ethos and principles of providers wishing to work with us is underpinned by the need to secure independence, choice and control for all.

Quality and safety of services is paramount and it is important that people are able to purchase services that are reliable and fairly priced. We will continue to monitor providers to ensure that they are delivering services which meet these standards and which ensure that vulnerable people are safeguarded. The Council is committed to the continued development of a skilled and well-trained workforce to safeguard vulnerable adults. The responsibility for safeguarding vulnerable adults lies with the Council, however the operation of the safeguarding procedure is a collaborative responsibility and all agencies are accountable and must follow the St.Helens Multi-Agency Safeguarding Procedures.

In determining the method of commissioning new services the Council has a number of considerations to take account of including risk / market stratification, quality services, personalisation and choice for individuals and value for money for St.Helens residents.

Where appropriate the Council will test the market to ensure the achievement of value for money and high quality services. This is usually through a competitive tender exercise. There are many occasions where it is not appropriate for the Council to tender for services. In particular this may be when the Council wants to promote a mixed economy of care which allows service users to choose and personalise their own social care services.

The Council promotes the use of Direct Payments for individuals and encourages potential providers to market themselves at risk to provide high quality services which individuals can access using their Direct Payment.

The Council will also consider the market mix of providers to ensure market risk is minimised and choice for the individual is maximised.

We would strongly recommend that any provider wishing to develop a new service contacts the Council before they commit resources to it.

Procurement

The Council has a Corporate Procurement Strategy which is accessible via the Council website. This contains details as to how the Council commissions and procures both goods and services.

The basis for all procurement decisions has to be value for money. The Council recognises this, but also recognises that value for money is not the same as lowest cost. It is crucial that procurement decisions are made with a longer and broader view than simply immediate cost. The Corporate Procurement Strategy demonstrates the Council's commitment to a 'whole of life' approach to procurement, and demonstrates how processes and procedures can be used to secure long term value for money and quality of provision.

The Corporate Procurement Strategy has been established with the vision and objectives of the Council and its partners in mind. It identifies six key principles, which will be applied to the procurement process throughout the Council and will provide a framework for all procurement decisions.

Legality: To ensure that the Council acts in a lawful manner, in full compliance with relevant legal requirements in the purchase of goods, services and works from external parties.

Value for Money: To ensure that the Council receives full value for money through the procurement process.

Supporting the Local Economy: To use the procurement process to encourage local entrepreneurial activity, and to provide opportunities for employment and training within the borough, where possible.

Making best use of the Voluntary Sector: To engage with the voluntary sector in St.Helens to ensure that the Council makes best use of the service provided by the voluntary sector and encourages the development of social enterprise within the borough.

Sustainable Procurement: To procure goods and services in a way that encourages sustainability of supply and ethical sourcing of materials to minimise the negative impact of economic activity on the local environment.

Promoting Equalities: To ensure that the Council's resources are not spent on practices that lead to unlawful discrimination, harassment or victimisation, and instead are used to support and encourage equal opportunities and good community relations.

The Departments vision for how we want Adult Social Care to be delivered in St.Helens is covered by the acronym SOPHIAA and this fits with the Corporate Procurement Strategy.

Safe.

Outcome Focused

Personalised

Healthy

Inclusive

Accessible

Affordable

Procurement Process

The Council's Corporate Procurement Strategy is implemented through Financial Instructions, Scheme of Delegation and Contract Procedure Rules.

Contract Procedure Rules set the requirements for choosing the appropriate process to follow when looking to contract and the details of that process.

If existing contracts can be utilised then these should be used as the first option.

Depending on the nature of the service and the projected cost then an appropriate tender exercise may take place.

Tender exercises will generally be undertaken utilising the online e-tendering web portal, the CHEST, and details of such opportunities will be advertised appropriately.

The CHEST can be found at the following - <https://www.the-chest.org.uk/cms>

The CHEST was created to bring together buyers and suppliers making it easier for businesses to find out about new sources of potential revenue and to grow and develop to the benefit of the local economy.

Providers can register online via the Suppliers' Area to receive email updates on opportunities that match their capabilities.

Contracts

The Council will have a contract in place for the delivery of each service.

Prior to agreeing any contract the provider would need to meet the required vetting standards for that service. This will generally include as a minimum evidence of appropriate registration, insurances, financial viability, experience, policies and procedures.

Contracts will generally include the description of the service, the applicable terms and conditions, the service specification, pricing details and period of the contract with each contract being signed by the Council and provider.

Safeguarding

All Providers in St.Helens must demonstrate commitment to Adult Safeguarding and compliance with the St.Helens Multi-Agency Safeguarding Adults Policy, Procedures and Good Practice Guidance (April 2015).

The Provider will ensure that all staff members receive the appropriate level of Adult Safeguarding training that is consistent with St.Helens Multi-Agency approach. This training must be delivered in accordance with individuals job role and responsibilities i.e., Induction, Foundation and Refresher for frontline staff and St.Helens Multi-Agency Safeguarding Adults Policy, Procedures and Good Practice Guidance (April 2015) for Line Managers and Supervisors.

Through training and supervision Providers will ensure all staff maintain an understanding of what is meant by a "Safeguarding Concern" and are aware that they have a duty to report any such concerns ie. suspicions, allegations, observations or disclosures of abuse or neglect. Safeguarding Concerns must be reported to the Line Manager/Supervisor within 1 hour, or if the Line Manager is likely to be unavailable within timescale, directly to St.Helens Council Contact Centre.

To comply with this Providers must identify Line Managers/Supervisors within the organisation to which Safeguarding Concerns must be reported and ensure all staff understand this.

Identified Line Managers/Supervisors must undertake responsibilities as outlined in the Multi- Agency Procedures, participating in Safeguarding Enquiries as directed by the Safeguarding Coordinator within Adult Social Care and Health. This can include sharing information via telephone discussion, facilitating access to records and attending Safeguarding Meetings as required.

Should an allegation of abuse or neglect be made against an employee or volunteer within the Provider organisation a Safeguarding Concern must be reported to St.Helens Council Contact Centre and the Provider must act in accordance with its own Disciplinary Procedures and consider suspension from duty. Providers must be mindful of a potentially criminal investigation and take advice from the Adult Safeguarding Coordinators.

Where the Providers Disciplinary procedures are agreed to be the appropriate route to respond to the Safeguarding Concern ongoing feedback to the Adult Safeguarding Coordinator within Adult Social Care and Health is required.

The Provider must demonstrate a proactive preventative approach to Adult Safeguarding which will be evidenced through a range of robust policies and procedures that minimise the potential for abuse and neglect and embed understanding and responsibility throughout.

There may be occasions when Provider employees have concerns for the safety and wellbeing of a child or young person under the age of 18 years. These concerns must also be reported to Line Managers and passed to St.Helens Council Contact Centre where an appropriate response can be made via Children's Safeguarding processes.

Provider Forums

The Council has separate forum meetings on a regular basis with the providers of the following services -

- Personal Care and Accommodation in Care Homes
- Domiciliary Care
- Supported Living
- Voluntary Sector
- Faith Sector

Forums assist the building of positive relationship with providers. These are used to provide updates and information around a range of topics that are of interest to all parties.

Contract and Quality Monitoring

The Council requires all of its providers of social care to deliver high quality services that meet the assessed needs of individuals in a safe, personalised and cost effective way, in line with their contract.

The Council assures itself of the quality of care through robust contract and quality monitoring which closely monitors the performance of providers through the use of contract monitoring, compliance with KPIs, quality monitoring visits, spot checks, and service user surveys.

The Council works closely and shares information with a number of statutory bodies including the regulator of care services, the Care Quality Commission.

Contract monitoring includes checks on registration, insurance, the existence of required policies and procedures etc are in place and in accordance with the contractual requirements throughout its life.

Quality monitoring relates to the quality of service delivered and quality monitoring visits usually result in a quality improvement action plan which will contain a number of areas that require action in order to achieve improved outcomes for service users. The Contracts and Quality Monitoring Section, which undertakes quality monitoring visits works closely with providers in a proactive way to support them in improving services.

Monitoring of providers is a positive activity which aims to raise the quality of Adult Social Care provision across St.Helens.

Contract Default and Termination

Each contract contains appropriate clauses relating to the range of actions that the Council can take should a provider fail to deliver the service to the required standard.

The default process links closely into quality monitoring and there is a method of escalating this should providers fail to take the actions necessary to achieve the required improvements. The ultimate sanction that the Council can take is to terminate its contract and this has been used recently.

Analysis of Customer Feedback

It remains important that St.Helens Council continues to commission high quality services to the Borough. This emphasis on quality, we believe, is reflected in the feedback we receive from our service users, the overwhelming majority of which is very positive.

The Personal Social Services Adult Social Care Survey for England is an annual survey that seeks to learn more about how effectively services are helping service users to live safely and independently in their own homes, and the impact of services on their quality of life. Likewise, the Personal Social Services Survey of Adult Carers in England is a biennial survey providing the thoughts and opinions of carers on a number of topics that are considered to be indicative of a balanced life alongside their caring role.

The information provided gives an overview of the responses from St.Helens and indicates that on average St.Helens respondents had a higher than national average score against critical areas such as satisfaction with the social care services they receive; being in control; feeling clean and able to present themselves the way they liked; in access to information; in carer related quality of life; and in carer satisfaction with the services being delivered. This is indicative of the quality of the support that is expected. All feedback is important to help commissioners and providers understand how well services are being delivered and where they need to improve.



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Please contact us to request translation of Council information into Braille, audio tape or a foreign language.