

Older People's Social Care

Market Position Statement

April 2016

Contents

Foreword	2
Our Commissioning Intentions over the next two years	11
Older People's Services	11
Domiciliary Care	12
Current picture	12
National/Local Factors	12
Financial and Demographic Factors	13
Future Commissioning Intentions/Desirable Development of the Domiciliary Care Market	14
Residential and Nursing Home Care	14
Current Picture	14
Financial and Demographic Pressures	15
Future Commissioning Intentions/Desirable Development of the Market	15
Day Support Services	15
Current Picture	15
Financial and Demographic Information	16
Future Commissioning Intentions/Desirable Development of the Market	17
Reablement and Complex Services	17
Current Picture	17
National/Local Factors	17
Financial and Demographic Information	17
Future Commissioning Intentions/Desirable Development of the Market	18
Retirement Villages with Care Services (extra care)	18
Housing related support	19
Other services	20

Foreword

Stoke-on-Trent City Council is pleased to present its Market Position Statement (MPS) for Older People which sets out our vision for care and support services and our commissioning intentions moving forward that will be further updated during the summer of 2016. Primarily aimed at providers, it represents a developing dialogue between the council, people who use services, carers, providers and others, about the vision for the future of local social care markets.

Stoke-on-Trent City Council's ethos is 'working together to create a stronger city we can all be proud. Our Stronger Together programme launched in 2015 is beginning to deliver improvements across the City. These include:

- Working together to build stronger communities within Stoke-on-Trent.
- Supporting people to regain confidence and independence by providing short term intensive reablement services
- Developing additional Retirement Villages with Care Services (extra care) during 2016 and 2017
- Close working with health partners to transform services and to deliver more support in the community.

We have an established Health and Wellbeing Board a Joint Health and Wellbeing Strategy 2016 - 2020 which lays the foundations for service improvement and transformation. Our vision is for 'Stoke-on-Trent to be a vibrant, healthy and caring city, which supports its citizens to live more fulfilling, independent and healthy lives' it is ambitious and will require significant change in the way we commission and deliver services.

Stoke-on-Trent City Council is both a commissioner and provider of services in that we directly provide some care services such as enablement, telecare and dementia services but also commission services from independent providers and the voluntary sector such as domiciliary care, day opportunities, respite care and residential and nursing care. Over the past few years there has been a shift toward more services commissioned from the independent sector. This has influenced our relationship with providers as we become more a facilitator than provider of care. Our relationship with providers is important if we are to offer citizens more choice and control and deliver efficient services of a high quality in order to improve outcomes.

The financial challenges ahead are great. Significant financial savings have already been made over the last five years. A further £27m savings needs to be delivered during 2016/17 and further savings expected for the future. Despite this, we are committed to delivering the principles of Stronger Together. We need to continue to work effectively with providers to stimulate a more diverse, active market that is responsive to changing local need, one that promotes dignity and respect, protects vulnerable people and actively involves people, their families and carers in community, economic, and social life.

The Stoke-on-Trent Market Position Statement (MPS)

This MPS is written for providers of Health, Housing and Adult Social Care services and gives an evidence base upon which providers can develop a range of local personalised services which effectively meet the current and emerging needs of the City's residents.

The MPS:

- Shares the views of commissioners about how services will need to respond to changing needs for care and wellbeing in the future
- Considers market opportunities for providers
- Is a starting point for discussion and supports more effective engagement and relationships between commissioners and independent service providers
- Provides an approach to market and service development that is inherently responsive to individuals' needs and preferences
- Supports continuous improvement by encouraging innovation and best practice



A Sense of Direction

The current economic climate and push for greater personalisation of services requires the local authority to rethink and reshape its role in relation to the provision of health and wellbeing services. Stoke-on-Trent City Council wishes to stimulate and promote diversity and quality in the provision of services within the local care market in order to offer people real choice and control. To achieve this, the authority needs to know how best it can influence, help and support the local care market to achieve better outcomes and value.

Considerable change is underway in health and social care. The Care Act 2014 has modernised the law to put people's wellbeing at the heart of the care and support system. It brings together existing care and support legislation into a new, modern set of laws and builds the system around people's wellbeing, needs and goals.

The Act seeks to:

- Clarify and enhance the social care support to clients and carers (including people who fund their own care) with a strong emphasis placed on the promotion of wellbeing and on preventing, reducing and delaying the need for care
- Ensure a diverse, high quality and sustainable market for care and support services

- Organise available resources in a way that ensures better integration across health and social care provision
- Introduce funding reforms that cap individual care costs and allow for the deferral of payments for care and support
- ‘Protect’ elements of the whole system (specifically social care) in the context of significant financial challenges.

The current BCF submission document can be viewed at the following address:
<http://www.moderngov.stoke.gov.uk/mgConvert2PDF.aspx?ID=62797>

The Government’s vision is:

- For people to be better informed in order to plan ahead
- For the promotion of wellbeing and independence
- For people to have control over their own budget and their own care and support plan
- For people to be empowered to choose the care and support that best enables them to meet their goals and aspirations

Both the Care Act and the BCF represent significant reforms for health and social care. The drive for greater integration between social care and health, for seven day working and for support that will prevent, reduce or delay the need for care will require a joined up approach between health and social care commissioners and providers particularly in relation to workforce development.

Information about the Act can be found on the following Government site
<https://www.gov.uk/government/publications/care-act-2014-part-1-factsheets>

National concerns surrounding care delivery within health and social care have been presented in the Francis Report and The Cavendish Review. Staff terms and conditions, training needs and requirements, and core values have been the subject of much debate. The Cavendish review refers to ‘disconnected systems’ particularly in regard to standards of training across health and social care. It proposes a ‘certificate of fundamental care’ that makes a positive statement about caring and that requires a shared set of standards for all workers whether working in a health or social care capacity. A joint approach is required to attract and develop staff that have the right values, competence and skill to deliver personalised support to people with a range of needs, including those with increasing complex needs in their own homes.

The Better Care Fund (BCF) announced by government in June 2014 brings together NHS and Local Government resources into a ‘pooled fund’. The aim of the BCF is to:

- Drive forward integrated commissioning and delivery of NHS and social care services to better meet the needs of vulnerable people.
- Ensure that services (especially those associated with pressures on the acute sector, and urgent care) are planned ‘end to end’, and operate in an efficient, coordinated and coherent way.

Together We're Better Transformation Programme

The Staffordshire and Stoke-on-Trent Health and Care Transformation Board has oversight of the pan Staffordshire Together We're Better Transformation Programme which is part of the National Sustainable Transformation Programme (STP).

The vision is that 'Staffordshire and Stoke-on-Trent will be vibrant, healthy and caring places where people will be as independent as possible and able to live a happy and healthy life, getting high quality health and care support when required'.

To enable the delivery of the vision eight work streams have been identified, these are:

- Frail Elderly and Long Term Conditions
- Urgent and Emergency Care
- Enhanced Primary and Community Care
- Planned Care
- End of Life
- Cancer
- Mental Health
- Prevention and Wellbeing

This is a whole system approach to consider pathways across the systems and develop solutions, to eliminate duplication and reduce health inequalities, and to ensure the long term clinical and financial sustainability of the health and care system as a whole.

Stoke-on-Trent Health and Wellbeing Board

The Stoke-on-Trent Health and Wellbeing Board have set out the commitment to improve the health and wellbeing of the local population and reduce health inequalities. Its vision is for 'Stoke-on-Trent to be a vibrant, healthy and caring city which supports its citizens to live more fulfilling, independent and healthy lives'.

The Board, as well as promoting integrated working between the NHS and the local authority has a number of duties that it has to deliver by law, which includes the requirement to produce a Joint Health and Wellbeing Strategy for the city.

The priorities for the Stoke-on-Trent Joint Health and Wellbeing Strategy 2016 – 2020 are:

- Increase breastfeeding
- Make healthy weight the norm
- Reduce under 18's conceptions
- Control tobacco, and reduce smoking
- Reduce alcohol related health harms
- Improve emotional wellbeing and mental health
- Keep older people safe and well

Underpinning the Health and Wellbeing Board are three strategic partnership groups that play a key role in supporting the delivery of,

and promotion of, the priorities in the Joint Health and Wellbeing Strategy. These groups include the Adults' Strategic Partnership, which has made a strong commitment to work together to improve the lives of adults living in Stoke-on-Trent, especially vulnerable adults, their families and carers. The Adults' Strategic Partnership is also the delivery mechanism for the Health and Wellbeing priority to Keep Older People Safe and Well.

The Health and Wellbeing Board also has a duty to produce a Joint Strategic Needs Assessment (JSNA). This comprises of a range of reports which look in more detail at social and environmental factors, economic factors and levels of deprivation as they apply to the city and:

- describes the local community's current and future health, independence and wellbeing needs.
- provides information so that commissioners are enabled to set strategic priorities and formulate solutions for service delivery and redesign to reduce health inequalities and improve health and wellbeing outcomes
- highlights local issues based on the analysis of available information and identifies where needs are not being met, describing these as themes for action
- looks at information and trends and provides an insight into the years ahead

www.stoke.gov.uk/healthandwellbeing

Vision for Older People's Services

Our aim for older people in the City is that they:

- Live in a good quality home, in an area which they like and in an environment in which they feel safe
- Have a positive experience of ageing in the city and are supported to live independent, inclusive fulfilling lives
- Have access to preventative health and wellbeing services and are supported to live healthy lives
- Are treated with dignity and respect

The Local Health Economy is in the midst of a programme of change. Acute care services are struggling to meet demand and the appropriate community services required to support people with frailty, multiple long term conditions and increasingly complex need are lacking. There needs to be a real shift of activity, capacity and resource from the acute sector to the community; from reactive to proactive care and support.

To achieve this, health and social care commissioners will:

- Place greater emphasis on prevention and early detection/intervention
- Simplify access to care
- Improve the coordination of care
- Place greater emphasis on reablement, rehabilitation and recovery

- Deliver integrated local care teams
- Work with providers to develop and deliver capable community services

The World Health Organisation (WHO) developed the concept Age Friendly City (AFC) based on research with older people and their experiences of growing older. WHO defines an AFC as a city that encourages active ageing through optimising opportunities for health, participation and security in order to enhance quality of life as people age. Stoke-on-Trent was accepted as a member of WHO global network of AFC in April 2014 in recognition of our commitment as a city to improve the quality of life of older residents. Stoke-on-Trent is working towards gaining designated 'Age Friendly City' status which in essence means:

The vision in Stoke-on-Trent is: A great place to grow older

Promoting active ageing through:

- Recognising the wide range of capacities and resources among older people
- Anticipating and responding flexibly to ageing-related needs and preferences
- Respecting their decisions and lifestyle choices
- Protecting those who are most vulnerable
- Promoting their inclusion in and contribution to all areas of community life

Initial priorities in Stoke-on-Trent are:

- Social participation
- Transport
- Personal safety at home and in the community

The City Council continues to work with a number of organisations and businesses to support the AFC agenda. Older people are at the centre of our work to address these priorities. Current programmes include:

- Age Friendly Commitments programme - Beth Johnson Foundation is working with organisations, venues and businesses to support them to make at least one change to become more Age Friendly. A Senior Think Tank has been established to support the development of the programme with older people for older people.
- Age Awareness Training - an Ageing Studies Certificate for professionals and managers, and Age Friendly Awareness Course for anyone to attend.
- AFC Small Grants Fund - a programme of grant funding to support the activity of local groups and organisations to tackle loneliness and increase social participation among older people in the city
- Campaign to end loneliness - event held 18 May 2015

Our vision for older people applies to all older people including those with organic mental health conditions such as dementia.

In Stoke-on-Trent we want to create an environment where people living with dementia and their carers are empowered and are supported to live well in their communities knowing that they will be met with understanding and respect. To help achieve this, in October 2014 Stoke-on-Trent successfully joined the recognition process for dementia friendly communities and as a result is recognised as 'working towards becoming dementia friendly'.

This commitment has been further reinforced in Stoke-on-Trent City Council and Stoke-on-Trent CCG's joint dementia strategy 'Living Well with Dementia' (2015) which outlined the overarching vision for Stoke-on-Trent to become a Dementia Friendly Community. Consultation with partners and the public including people living with dementia and their carers identified the following key priorities for improvement:

- Schools and education
- Transport
- Local organisations, shops and supermarkets
- GP practices, health centres and hospitals

Work is on-going to deliver against these priority areas and is over seen by the multi-partner Stoke-on-Trent Dementia Friendly Communities Working Group and Staffordshire and Stoke-on-Trent Dementia Action Alliance.

Carers

The Care Act introduced significant reforms for carers. For the first time, carers are recognised in law in the same way as those they care for and all carers are entitled to an assessment of their own needs.

Stoke-on-Trent City Council has developed a joint strategy with NHS Stoke-on-Trent Clinical Commissioning Group (CCG).

<http://www.stoke.gov.uk/ccm/content/social-care/adult-social-care/stoke-on-trent-joint-carers-strategy-2013--2018.en>

Our aim is to support the health and wellbeing of carers. Our strategic priorities (subject to agreement) to achieving this are:

- Improved use of resources
- Improved market of services available to carers, with more choice and quality to meet a range of needs
- Carers and professionals are aware of what is available and can obtain, give improved advice and support
- There is improved identification of and support for carers including those in hard to reach groups

From 1 October 2015 a jointly funded and commissioned Carers Hub has been established in Stoke-on-Trent and Staffordshire. The intention and spirit of

the Carers Hub is for the provider to work with a range of statutory and 3rd sector and independent providers to provide a range of services to carers. The aim of the service is to:

- Support people with caring responsibilities to identify themselves as carers at an early stage, recognising the value of their contribution and involving them in designing local care provision
- Enabling people with caring responsibilities to fulfil their educational and employment potential
- Personalised support both for carers and the people they support enabling them both to have a family and a life outside of caring
- Supporting carers so that they are able to fulfil their caring role
- Supporting carers to address financial inequalities
- Supporting carers to remain physically and mentally well
- Children and young people will be thriving and protected from inappropriate caring roles



The views of local people and providers

The City Council actively seeks to work with providers, the voluntary sector and the public to influence the design, commissioning and delivery of services. This is crucial for the City Council to fulfil requirements within the Care Act to 'promote the efficient and effective operation in its area of a market in services for meeting care and support needs with a view to ensuring that any person wishing to access services in the market:'

- Has a variety of providers to choose from
- Has a variety of high quality services to choose from
- Has sufficient information to make an informed decision about how to meet the needs in question

The level and type of engagement varies depending on the stage within the commissioning cycle. Regular engagement with commissioned providers occurs through service specific forums. Broader engagement with the public and all providers (those we commission services from and those we don't) occurs through a variety of means and include:

- Face to face discussion
- Workshops
- Surveys
- Service specific reviews
- Engagement forums
- Peer support groups
- Awareness events

What providers say about working with the City Council

Providers welcome high level strategic engagement but believe there is inconsistency in approach across the council as a whole. Providers would welcome engagement at a much earlier point in the commissioning of services so that they can co design services where possible with commissioners. Providers believe they are a valuable source of expertise and welcome the opportunity to share this with commissioners in order to deliver the right services to support people. More support to develop capacity amongst smaller organisations is welcomed.

What service users and carers say about the care and support that they receive

Service users and carers views about local services and support include:

- Support for more joint working arrangements and a point of contact
- Referral routes and care pathways need to be clear for each client group and type of service provision
- Better information should be made available that is clear and in an easy to understand format
- Support for extended support over 7 days
- More support to help people in the community
- Volunteering opportunities should be expanded

- Support for people to stay in their own homes for as long as is possible
- People want to feel safe and secure
- Increase the range of housing options with care including extra and sheltered
- Dedicated support worker/social worker to assess and arrange care
- Continuity of care when a person is in receipt of home care services
- More training for care staff
- Support to consider housing options at the earliest opportunity
- Respite and breaks for carers are important

Self-funders

Nationally, it is estimated that 50% of people in receipt of care services fund their own care.

Local authorities will undertake a financial assessment to determine level of contribution that customers may have to make towards the cost of their care.

Under the Care Act commissioners need to consider the self-funder market. With a cap on care costs more people will seek the support of the local authority to ensure that their eligible care needs are identified and that any associated costs in meeting those needs recorded.

The self-funder market is growing and whilst the City Council has some understanding of self-funders within residential and nursing

care, there is no information about self-funders within the community. The City Council needs to understand more about the self-funder market to be able to provide appropriate information, advice and support for long term planning to avoid crises where savings and capital fall to a level of concern.

Our Commissioning Intentions over the next two years

The City Council intends to redesign and commission future services as detailed below to ensure that our vision is achieved:

Older People's Services

Introduction

Older People's Services are one of the largest areas of service delivery and spend in Stoke-on-Trent City Council.

The following key areas will influence the market and delivery of future older people's services:

- Redesign the domiciliary care service to improve focus on meeting outcomes and personalisation.
- Increase the range of housing options with care (extra care and sheltered housing) in the City.
- Pricing Review of residential and nursing fees.

- Ensure that carers have support, advice and information to enable them to maintain a balance between their caring responsibilities and their life outside of caring whilst supporting the person they care for to achieve their own outcomes.
- There will be a focus on identifying the requirements of different carer client groups, e.g. dementia carers
- Delivery of services collaboratively with Health within an overarching locality based model.
- Design and implement integrated reablement and intermediate care service in line with Better Care Fund Plan.
- Continue to develop and improve pathways for dementia services and support.
- Remodel the provision of advocacy services
- Retender of Day Support Services
- Review delivery of the existing Home Improvement Agency service in the City, which incorporates elements that help to facilitate hospital discharge, falls and accident prevention and supports older people to remain in their homes.

Stoke-on-Trent City Council has faced year-on-year cuts from Central Government of approximately £20m per year for the past four years and will face future continued financial cuts in the years ahead.

This has resulted in a reduction in the Social Care budget of approximately £25m since 1st April 2011.

Although further savings are needed for the future, many of these will be achieved through pooling budgets across Health and Social Care to reduce duplication of spend. A key strategy in realising this will be from the implementation of the Better Care Fund (BCF).

Domiciliary Care

Domiciliary care is crucial to achieving the City Council's aims under the Care Act 2014.

Current picture

- The City Council has contracts with 12 organisations to provide domiciliary care within Stoke-on-Trent.
- Approximately 1,300 people receive domiciliary care through Stoke-on-Trent City Council's contracts
- Approximately 24,000 care visits take place every week.
- The current contract will end October 2017. A tendering exercise will commence in late 2016.
- The minimum rate paid to providers is £15.45. This is above average for our comparator group, and is clearly indicative of Stoke-on-Trent's commitment to try to ensure that the care staff are fairly remunerated for the service that they provide.
- The annual gross spend on domiciliary care in Stoke-on-Trent is approximately £9.5m.

National/Local Factors

The City of Stoke-on-Trent has put measures in place to enable their provider market to pay the national living wage to staff.

There are national pressures on recruitment and retention of care staff which is mirrored locally in the city, to combat this, the city are:

- Piloting an NOCN accredited employability course with work placement and guaranteed interview
- Working with the Princes Trust to support young people to 'get into care' including a work placement
- Developing a Communication Plan specifically for domiciliary care, including recruitment, workforce development, and suite of promotional avenues e.g. social media
- Continue working with health, social care and third sector to raise awareness
- An increase of 19% to the minimum rate paid will increase and improve terms and conditions for staff
- Piloting new commissioning approaches during 2016/2017 to support recruitment and retention of care workers



Financial and Demographic Factors

Domiciliary Care in Stoke-on-Trent has been growing steadily year on year to the current picture of approximately 1,300 people in receipt of domiciliary care and 13,350 care hours delivered per week. This is in contrast to the national trend that has seen a reduction in the number of people accessing care in the majority of localities throughout England.

During 2016, the local authority is commissioning an independent assessment of pay rate, terms and conditions required to give domiciliary care providers a competitive advantage over other sectors within Stoke-on-Trent. The research will also estimate future market capacity/demand modelling across the local health economy to inform future commissioning

Future Commissioning Intentions/ Desirable Development of the Domiciliary Care Market

A new model of domiciliary care is currently being developed. This will encompass principles of enablement to support service users to achieve positive outcomes. The new service will commence in October 2017.

There are 41 providers registered to supply domiciliary care in the City. The domiciliary care framework contract currently covers 11. The City Council will continue to develop new ways of working with organisations to encourage them to respond to and support the identified priorities.

Residential and Nursing Home Care

Current Picture

There are approximately (as of May 2016) 1,323 people living and receiving care within Residential and Nursing Homes in Stoke-on-Trent, exclusive of self-funders. A total of 418 nursing and 905 residential. A Valuing Care Financial Manager survey was undertaken in 2013 it is estimated that there are approximately 490 self-funders in Stoke-on-Trent accessing residential and nursing services.

There have been 359 new residential and nursing placements made in 2015/16 (of which 315 for people 65 years and over, and 44 for people aged under 65 years) compared to 420 placements for 2014/15. The demand for Residential and Nursing services is remaining constant despite a greater strategic emphasis towards meeting customers' needs in the community.

There are currently 43 residential and nursing homes within the City, providing a total of 1678 beds. In recent years the City Council has slowly reduced its own directly provided residential and nursing provision. As result of this there are no residential and nursing care homes in-house. All Residential and Nursing Care Homes are owned and run by the Independent Sector.

National/Local Factors

The level of fees are fundamental in ensuring a balance between the provision of quality services and maintaining affordability. Work has been undertaken recently to better understand the true costs of care provision including the National Living Wage (NLW) to inform future decisions around a fair price for care.

Financial and Demographic Pressures

Work has taken place within the City Council to understand true costs of care across all sectors. The concept that residential and nursing homes are a costly solution to meeting needs has been challenged and it is now recognised that individuals with high care needs can be economically and safely met through good quality residential and nursing provision.

However, the City Council also recognises that there are a number of people currently receiving residential and nursing care whose needs could be better met through different services.

It is essential therefore that people access the service that most appropriately meets their needs. In future this could mean that high cost, high care customers who currently reside in community settings are redirected into residential and nursing care. Conversely, customers who do not need residential and nursing care may be supported to return to the community from where they can access appropriate locally based services.

Future Commissioning Intentions/ Desirable Development of the Market

Although there is a very clear focus on community based care, it is clear that this is not appropriate for all. Higher numbers of older people are predicted to live longer with more complex conditions; therefore it is crucial that the residential and nursing market is effectively developed to meet future needs safely and economically. The current contract commenced on 18th December 2014 for a period of three years plus two year's extension.

A further review of fees is currently planned to commence during 2016/17. It is anticipated that this will lead to fee recommendations for 2018 and beyond.

Opportunities for commissioning some services on a block contracted basis will be explored, particularly in relation to short breaks.

With the support from Skills for Care, it is anticipated that a Registered Managers Network will be developed. This will offer Registered Managers a forum whereby they can share ideas and examples of best practice.



Day Support Services

Current Picture

There are approximately 160-170 people in receipt of Day Support services in Stoke-on-Trent and it is predicted that there will be approximately 80 new referrals a year into commissioned services. However, it is not possible, at this point, to accurately know the rate of attrition of existing customers to understand how much growth the service will see.

Changes to the council's social work assessment process through the introduction of the Community Wellbeing service has led to a reduction in the dependency on commissioned Day Support services as social work teams exhaust alternative services and networks before putting services in place.

The current contract commenced on 21st January 2013 for a maximum period of four years.

National/Local Factors

The overall approach adopted sought to empower organisations to be flexible and innovative in terms of how they operate their services across the different client groups and service settings. The current service has successfully delivered:

- An improved range and choice of services and organisations available.
- New job and business expansion opportunities through market stimulation.

- Increased availability of services closer to where people live.
- Promotion of independence by increasing opportunities to reduce social isolation and helping people to access their local communities and support networks.
- A market now capable of providing in up to of 500 places per week for group based services and 250 One-to-One sessions per week delivered on an individual basis.
- The service contributes to the strategic aims as described within the City Council's Stronger Together message.

Financial and Demographic Information

The Local Authority has improved cash flow for small Day Support suppliers by reducing payment terms to 10 days if they have less than 250 employees. If the supplier has less than 10 employees we will in some instances update to prompt terms.

Low referral rates have been received for two of the newer one-to-one outreach support services and community based service elements of the current contract. The reasons are due to for this will be investigated to assess implications for future commissioning decisions.

Lower referral rates have been received across the service. The reasons for this are due to the introduction of the community wellbeing model that works with people at an earlier stage to reduce future need for residential, domiciliary and day support services.

By working with people earlier and in a more flexible personalised and responsive way, the council is aiming to reduce the need for residential, domiciliary and day care. The new working model is expected to have a positive impact on individuals, carers and the wider community by ensuring that people receive the most appropriate form of care and receive support to live at home independently.

Future Commissioning Intentions/ Desirable Development of the Market

The Day Support Service will be retendered in 2016, likely commencement date May 2017 on largely the same basis as the existing service delivery model. The new contract is expected to commence in January 2017 with an initial term of three years with the option to extend up to three further years (six years in total).

The new contract will continue to offer successful providers the same flexibility that the current contract offers enabling them to adjust elements of service delivery in line with changes in market demand over the life of the contract.



Advocacy

Current Picture

The Local Authority currently commissions a range of advocacy services:

Care Act Advocacy

To provide independent advocacy from the first point of contact with the local authority and at any subsequent stage of the assessment, care and support planning, care review, safeguarding enquiry or safeguarding adult review where the person has substantial difficulty in being involved and, there is no appropriate individual to support them.

Independent Mental Capacity Advocacy (including the Deprivation of Liberty Safeguards)

To provide an Independent Mental Capacity Advocate for people who lack capacity to make specific important decisions (including decisions about where they live and serious medical treatment), where there is no one appropriate to represent them. The local authority also has a duty to ensure that the Independent Mental Capacity Advocacy Service it commissions meets the requirements within the Deprivation of Liberty Safeguards process. These Safeguards add an extra requirement for Independent Mental Capacity Advocates to represent people's interests throughout the assessment process (if the person being assessed has nobody other than a paid carer to fulfil this role or as a support to those family members/friends).

Independent Mental Health Advocacy (IMHA)

To provide an Independent Mental Health Advocate to qualifying patients (people detained under most sections of the Mental Health Act, subject to Guardianship or on a community treatment order) to help them to understand the legal provisions to which they are subject and to enable patients to exercise their rights by supporting participation in decision-making.

NHS Complaints Advocacy

Aims to provide support to people who want to make a complaint about the NHS and, need some support to be able to do this. Support may range from receiving a self-help pack, information and options, to one-to-one support from an Advocate.

National/Local Factors

The Care Act 2014 places a new duty on local authorities to provide independent advocacy to those people who have substantial difficulty in being involved in care and support processes and, who have no appropriate individual (carer, family member, friend) who can support them.

Financial and Demographic Information

The current annual spend across all four of the existing advocacy services is around £284K for 2016/17.

Adult Social Care - Community Wellbeing Team

Since 2015 a new way of working has been introduced for Adult Social Care in Stoke-on-Trent. This model is known locally as the Community Wellbeing Team.

Eight teams are aligned to GP practices and Community Nurses. The Community Wellbeing Team reflects the requirements of the Care Act 2014 and the team will support individuals in the City who require care and support.

Enablement

Enablement services support the Community Wellbeing model and are currently delivered directly by the city council and are short term services designed to optimise a person's level of independence and identify (if appropriate) long term maintenance care and support needs.

It is desirable to see all services currently commissioned by Stoke-on-Trent City Council to have a rehabilitative focus. Additionally, linked to the work around improving access to training, it is desirable to see providers being able to meet more complex needs in the community through higher skilled staff who are remunerated according to their training.

Financial and Demographic Information

The austerity measures give a dual pressure on ensuring that we have effective reablement services. The cost for services, based on increased demand and increasing size of packages, is increasing at a time when available budgets are decreasing.

Therefore it is of paramount importance to ensure that customers are receiving services that are targeted and lean and have the maximum impact on their wellbeing.

Additionally, there is a need to ensure effective discharge from hospital to avoid delays and ensure appropriate use of acute services. Additional costs are incurred by health services when people cannot be discharged effectively. This is often due to the complexity of the package of care. Therefore, work is being undertaken to influence joint funding with Health of complex services that have mutual benefits to health, social care, the customer and, ultimately, through more appropriate funding, the provider.

The current breakdown of expected net expenditure for the current financial year from the city council into older people's services (excluding Learning Disability) is as follows:

Net Budget's 15/16

Domiciliary Care	£7,353,000
Extra Care	£2,196,000
Residential and Nursing Care	£17,609,000
Direct Payments (Older People)	£983,000
Older People's Day Care	£696,000
Direct Payments (Older People's Carers)	£60,000

Future Commissioning Intentions/ Desirable Development of the Market

An additional benefit of ensuring that customers remain as in control of their care (and their lives) as possible through maximising independence, choice and control.

Therefore work is being undertaken to understand how contracts can best incentivise providers to deliver services that re-able customers and, in effect, reduce the service required. The city council will be keen to work with good quality providers to understand how this can be done.

Beyond this, it is desirable to see all care services purchased by the city council to be able to have a reablement focus where appropriate and to be able to respond well to complex needs. Therefore, in addition to exploring bespoke reablement and complex care services, there will be a growing expectation, through contracts, for providers to be able to respond to these requirements in the context of whichever service they provide.

Retirement Villages with Care Services (extra care)

Retirement Villages with Care Services (extra care) is the provision of domiciliary care registered services directly to people in complexes that have been designed to meet their needs. There is support on site 24 hours a day, 365 days a year. Residents within Retirement Villages with Care Services (extra care) complexes range from people with high level care needs through to people with low / no care needs.

To realise greatest effectiveness of services for the tenants and also to ensure that the schemes remain financially viable the aspiration is to have one third of people at each band of care. This is in accordance with the national model of most effective 'extra care' delivery.

The City currently has 5 schemes described as 'Extra Care'.

These are:

- **Berryhill Village**
- **Camoys Court**
- **St Dominic's Court**
- **Rowan Village**
- **West End Village**

Berryhill, Camoys and St Dominic's are the oldest of the schemes, with Rowan Village and West End Village opening in 2008 and 2011 respectively.

Work is progressing to ensure that the balance of care needs is maintained in the schemes.

Two further Extra Care Schemes are due to open during 2016/17 in Stoke-on-Trent, funded through Private Finance Initiative (PFI). Stoke-on-Trent City Council has appointed Sapphire - a consortium of construction, housing, facilities management, property development and architect professionals to build and manage 390 apartments for rent at three sites across the city. Designed for people aged over 55, each of the retirement schemes offer residents the opportunity to continue living independently and maintain privacy, but with access to other services and facilities to help them.

The retirement living schemes offer spacious apartments within a community setting, with facilities on site and conveniently located transport links. They are located at

- **Willow Barns, Consett Road, Blurton**
75 apartments opened May 2016
- **Oak Priory, Castle Grove, Abbey Hulton**
175 apartments due August 2016
- **Maple West, Turnhurst Road, Chell**
140 apartments Spring 2017

Housing related support

The council commissions the provision of housing related support, (previously known as the Supporting People Programme) to help people to live independently and prevent homelessness. The programme supports a range of client groups including older people. The Council has approved significant funding reductions in relation to Housing Related Support and around £2.5m worth of savings will be realised in services post April 2016.

Current Housing Related Support services specifically for older people includes:

Housing-Related Floating Support for people over the age of 55:

- Practical help and support to optimise levels of independence and reduce social isolation and loneliness.
- Delivered in the service user's own home, whether they privately rent, rent from the Council or Housing Association or are owner occupiers.
- Support is tailored to meet individual needs and can include help to set up and maintain a home, benefits and budgeting advice, support to access health services, support to access activities to reduce isolation and support to ensure the home is safe and secure.

- Links closely with other local health economy and social care services to facilitate timely discharge from hospital to contribute to the flow and capacity through the Urgent Care System and prevent unplanned acute admission and re-admission to hospital.

Home Improvement Agency

Provides a range of services for people over the age of 55 (whether they privately rent, rent from the Council or Housing Association or are owner occupiers) including:

Housing related support, information and advice:

- Advice and support to identify repairs, maintenance and improvements to their property and provide options available to adapt and repair; including advice on timescales and cost, energy efficiency and welfare benefits.
- Handyperson service including small jobs and practical support to facilitate hospital discharge and fitting minor works and adaptations where required.
- Falls and Accident Prevention, such as home fire risk checks,
- Gardening Help
- Target Hardening e.g. locks and bolts, safety and security checks.
- Navigator scheme - links service users with volunteers to reduce isolation and support access into social care and health services.

Integrated Community Equipment (ICES)

The Integrated Community Equipment Service is jointly funded by Stoke-on-Trent City Council, NHS Stoke-on-Trent Clinical Commissioning Group, and Staffordshire Council and 5 Clinical Commissioning Groups including Stafford and Surrounds, Cannock Chase, East Staffordshire, North Staffordshire, South East Staffordshire and Seisdon Peninsular.

The Integrated Community Equipment Service, loan equipment (free of people) to people with an assessed level of need to help them to maintain their health and independence. Assessments are undertaken by either a health professional or Occupational Therapist, if the person is in agreement to loaning the equipment a referral is made to Medequip who deliver the service on behalf of Stoke-on-Trent and Staffordshire.

There are various types of equipment provided these include:

- Toileting and bathing aids
- Pressure mattresses
- Community nursing beds
- Mobility equipment
- Handling and lifting equipment
- Minor adaptations such as grab rails, stair rails and temporary ramping

The services provided include:

- Delivery and installation of equipment at your home address
- Maintenance of equipment on loan to ensure it stays safe to use according to the law
- Collection service when the equipment is no longer required
- In-depth cleaning of returned equipment, and repair and refurbishment of equipment where viable

The service is operates from 8am - 8pm Monday to Friday and 9am - 1pm on a Saturday. In addition an out of hour's service is available for emergency maintenance and repair.

As the service is commissioned until 31 March 2018, consideration to the future model of Integrated Community Equipment will be developed during 2016 - 2017.

Updates to the Market Position Statement

A further refresh of the MPS will be published during 2016. Specific tendering opportunities will be advertised as they occur by the Corporate Procurement Team through the Bravo electronic tendering system.

Further Information

For specific queries on the content of the Market Position Statement including requests for copies of documents referenced within it or to respond to identified Market Opportunities please email [**MarketPositionStatement@stoke.gov.uk**](mailto:MarketPositionStatement@stoke.gov.uk)

