Market Position Statement for the Care and Support of Older People

October 2014





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Wolverhampton City Council

Foreword

Wolverhampton City Council is committed to supporting all businesses, including social enterprises, co-operatives and not for profit organisations, to flourish and be competitive within our diverse local market.

Our strategy sets the challenge of making Wolverhampton a City that delivers prosperity for all, creating new job opportunities, supporting businesses and communities, and closing gaps in education, skills, health and wellbeing.

This holding document is the second Market Position Statement (MPS) produced by Wolverhampton City Council and is intended to provide a comprehensive base for continued change and improvement. The evidence provided in this document will help the Council and its partners to take a strategic approach to understanding and meeting local need for the care and support of older people. The MPS presents a picture of demand and supply now, what that might look like in the future and details how commissioners will support and intervene in a local or regional market in order to deliver this vision.

S.W. Ears

Councillor Steve Evans Cabinet Member for Adults Services

A profile of Older People in Wolverhampton

- The Wolverhampton population is 248,470; both males and females in Wolverhampton having lower overall life expectancy compared to the national average – 76.7 years for males and 80.8 years for females. In addition, a male in Wolverhampton can expect to live to 58 years free of any disability and women to nearly 61 years – over 3 years less than the national average for males and two years less for females. This means that not only do Wolverhampton residents live shorter lives but they also spend more of their lives experiencing ill health and disability.
- In addition, the need for social care is increasing, mainly because the people who need it most, older and disabled people, represent the two groups growing in size. This is happening at a time when public funding to support these groups is falling, with an 8% cut in spending between 2010/11 and 2012/13 and most councils facing an unprecedented 25% reduction in funding over the next four years.
- Wolverhampton has approximately 41,000 residents aged 65+ and 6,000 aged over 85+. Over the next twenty years there will be a 25.3% increase in the number of people aged 70+ and the 80+ population will increase by 62.5%. 11.8% of older people are Asian and 4.8% are African-Caribbean - both of these populations are set to increase significantly over the next twenty years.
- There are approximately 3,100 people with dementia living in the city, and this figure is set to grow by 44% over the next 20 years.
- 50% of Wolverhampton's wards fall amongst the most deprived nationally and our history of heavy industry has left a legacy, with healthy life expectancy a year shorter than the England average and 10.2% of the population reporting long term limiting illness and poor mobility.
- One in three people aged 65+ live alone; 15% of older people provide care for someone, with 66% of known carers saying that they do not have enough social contact with others. Wider social changes mean that older people are now more likely to be living apart from families, or receiving care from children who themselves have other competing commitments.
- The wards with the highest proportions of older residents are Tettenhall Regis, Tettenhall Wightwick, Merry Hill, Penn and Bushbury North. The wards with the higher numbers of older people also have high proportions of one person households for this age group. The wards with the highest proportion of pension credit claimants are Spring Vale (52.9%), Ettingshall (46.5%), Bilston East (46.0%), Heath Town (45.5%) and Bushbury South and Low Hill (44.7), suggesting a link with deprivation.

Progress on the 2014 Pledges

What we said	What we did
Have had individual discussions with all the major providers in our area about our future strategic direction.	 Completed an annual review of the domiciliary care contract with all commissioned domiciliary care providers through face to face meetings and discussions Engaged in negotiations with all Day Opportunities Providers to revise the day opportunities contract to ensure further efficiencies. The revised contract will commence from 1st September 2014 Engaged with the West Midlands Care Association and work started work to establish a new contract and process for annual fee negotiations Met with all VSH and Sheltered Housing Providers and completed annual contract reviews, including value for money reviews Reviewed a number of preventative services contracts
Have met with any provider who requests an interview and held a number of open forum to which all providers will be invited	Completed a market warming exercises to explore opportunities in relation to Residential and Domiciliary Reablement services and the design for delivery by the end of 2014.
	Completed a market warming exercise in relation to telecare and carelink
Have developed a better analysis of information about people who fund their care	This work will be programmed in for 2015
Have commissioned a market review of care consumer's priorities, including those who self - fund their care provision	This work will be programmed in for 2015
Have worked with the Wolverhampton Clinical Commissioning Group (CCG) to issue a statement about the future commissioning integrated health and social care services	We have worked with the Wolverhampton Clinical Commissioning Group, Black Country Foundation Partnership Trust and Royal Hospital Trust to agree a local plan in relation to Better Care Fund (BCF). A Programme Director Fund has been appointed

Progress on the 2014 Pledges continued

What we said	What we did
Have developed a strategy document outlining the future model of community based and preventive services ready for discussion with interested providers	This work will be programmed in for 2015
Have refreshed our Reablement Forward Plan to provide more details about how we are further developing reablement and prevention in partnership with providers.	The Joint Reablement and Intermediate Care Strategy 2014- 2016 has been agreed and signed off by all four key partners – BCPF, RHWT, CCG and WCC. This strategy details the reablement and intermediate care intentions of Wolverhampton's health and social care economy. The aim is for the principles, outcomes and metrics to instill a preventative philosophy that enables independent living.
Have produced a more detailed paper based on our joint health and social care strategy for dementia, which will outline our specific expectations and requirements of the market when delivering a range of opportunities for people with dementia and their families.	The Joint Dementia Strategy 2014 - 2016 has been refreshed, this will retain a focus on the delivery of a person centered approach for people with dementia, utilising the NICE quality standards to measure its success
Have reviewed our existing arrangements for engaging older people in discussion and involvement in service development and delivery	This work will be programmed in for 2015

Wolverhampton's current state of supply:

Care Homes

There are currently over 92 private care homes for older people in Wolverhampton and 2 owned by the Council. The majority of care homes are located in the South of the City and the Council currently 'spot' purchases over 1400 places at the rates shown in the table below:

Type of Care Home	Shared (only when requested by couples)	Single
All Nursing Home Care	£468.65	£481.11
(Excluding Physical Disability)	(£66.95 per night)	(£68.73 per night)
Residential Care Homes; Older	£368.13	£379.54
People (High Dependency)	(£52.59 per night)	(£54.22 per night)
Residential Care Homes; Elderly Mental III / Dementia Care		£432.46 (£61.78 per night)

We will:

- Work with Registered Social Landlords to review the existing sheltered housing stock in the City
- Continue to stimulate the growth of Very Sheltered Housing options
- Encourage the development of small providers who can offer low level housing related support services
- Work with suppliers offering a range of products to support independent living.

Very Sheltered Housing

Very Sheltered Housing (VSH) is rented housing provision that delivers flexible care and support services. The aim of VSH is to provide supported living so that people have the opportunity to live in their own self-contained property whilst having on sited access to care and housing related support in accordance with assessed needs.

The Council has nine contracts in place with VSH providers and the care services provided under these contracts are provided on a 'block' basis. Places are allocated to people who have eligible care needs that have been assessed in accordance with Fair Access to Care Services criteria.

The existing Wolverhampton model is delivered through schemes that have the following components:

- Self-contained flats and bungalows with security of tenure
- A 24 hour on-site domiciliary care and support team
- A café/restaurant where all users can purchase meals at a cost
- An integral social club, open to tenants of the scheme and older people from the local community
- Integrated scheme management between a Registered Domiciliary Care Provider and Registered Social Landlord

Currently all schemes are under-going a quality of service and a value for money review.

Supported Housing

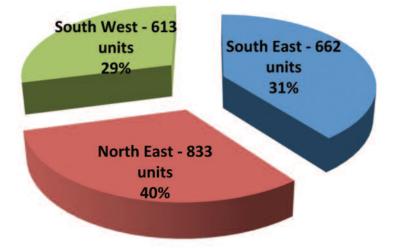
Our population and demand data shows us that there is a significant customer base for both rental and purchase of supported housing options. For example, older people tell us they want to rent or buy more two bedroom bungalows and two bedroom low rise flats.

There are also many opportunities for providers to market a range of products and services to people who wish to remain in their life time homes. We want to work with local registered social landlords who are operating Sheltered Housing schemes in the City to develop on-going housing and care partnerships.

Wolverhampton has 72 Sheltered Housing schemes across the City, offering housing support services to older people; responding to individual needs and working with service users to maintain independent living. The schemes assist service users to access preventative services and establish social links within the wider community. The schemes provide housing support to older people who:

- have housing support needs
- are at risk of losing independence
- may have to be provided with a care package if support is not put in place
- are willing to engage with the support service.

The current distribution of theses is shown in the following table by the social care area split:



Preventative Services

Preventative services have a key role to play in maintaining independent living and quality of life. There is a wide range of services either directly provided by the Council or commissioned through the private/voluntary sector including the following:

- Information, advice and support
- Shared experiences allowing people to review and comment on equipment, trades people and participate in social events
- Dementia Cafes
- Day Opportunities

Reablement and Intermediate Care

The Council is committed to supporting and stimulating a diverse market for care and support by offering a real choice of opportunities and services that enable people to continue living independently.

One of the options is being considered is to commission an external partner or partners to run some services on the council's behalf . As part of this process the council has initiated a number of market warming exercises.

One of these market warming exercises has been in relation to reablement and intermediate care. The headlines from the result of this exercise are as follows:

- The Council is keen to work in partnership with the market in order to give the opportunity f or providers to influence and shape the direction of travel of services
- Opportunity for providers and businesses to demonstrate and share innovative ways of working
- Engaging with the market provides a two way opportunity for collaborative and partnership working

Home Care Services (Domiciliary Care)

The home care market nationally is valued at £5.5 billion, with six million hours of regulated home care delivered each week; the cost of domiciliary care forecast to rise from 1% of the UK's Gross Domestic Product (GDP) to between 2 and 4% by 2050 (Social Care Institute for Excellence, 2014). The sector also has an ageing workforce, with 50 per cent of workers over 45 years of age (SCIE, 2014).

In 2013/14 the Council purchased approximately £3.9 million worth of domiciliary care framework contracts. The contracts cover a range of domiciliary care elements, delivering services to adults that meet the Fair Access to Care Services threshold of substantial or critical need.

Wolverhampton framework contracts are based on for the provision of domiciliary care based on eight Primary Providers, (allocated one or two zones) and five Secondary Providers (City wide coverage). Any new model is currently being considered and will take in to account a number of national concerns:

- The level of pay received by home care staff and whether or not this equates to the National Minimum Wage or Living Wage
- The degree to which travel time is paid
- The number of 15 minute visits that are commissioned and the quality of care that can be delivered within this time-frame

Carers

In 2011 there were 5.41 million people who provided unpaid care in England. Health and Social Care services are dependent upon the role played by informal carers, and so it is important to recognise the important contribution unpaid carers make to society. A Joint Carers Strategy in partnership with carers and this will be refreshed through a formal consultation process by the end of March 2015.

Self-Directed Support

A high percentage of older people with assessed needs are currently receiving Self-Directed Support via a managed account or Direct Payment. The majority of these people purchase support directly from a provider or employ their own personal assistants (PAs). In line with the requirements of the Care Act 2014 Wolverhampton will ensure that everyone who receives Council funded support will be offered a Personal Budget.

Care Act 2014

From April 2015 Local Authorities will be required to take on new functions as part of the Care Act, ensuring that people who live in their areas receive the following:

- services that prevent care needs from becoming more serious
- information and advice to make good decisions about care and support
- a choice from a range of high-quality care providers.

The Coalition Government has described its vision of a "thriving, social market in which innovation flourishes" and expects local authorities to be actively "stimulating, managing and shaping" this market. The Care Act also sets out a new duty on local authorities to promote the diversity, quality and sustainability of local care services to meet the needs of local people.

In response, the council has issued Market Position Statements, but these will continually change to reflect up-to-date commissioning decisions and, although the current version has been circulated widely to start a dialogue with the supply market, there will be a process of ongoing revision.

Better Care Fund

The Better Care Fund (BCF) will ensure that the Wolverhampton health and social care economy is working in an integrated way to deliver the most efficient and effective response to the needs of all users and patients. It recognises and protects early stage interventions and the contribution they make to restoring and maintaining independence; reducing unnecessary hospital admissions; facilitating discharges back home and improving the quality of care for all.

Where are we now - a summary of supply and demand?

The current position:

- Demand for care and support services is likely to rise but will not be matched by levels of public spending over the next three to four years
- Life expectancy is increasing and entry into all care services are likely to be later in life, but from people with more complex support needs
- There is a gap between the type and quantity of private and social housing available and the identified needs of older people
- There are too few community based services to support people with dementia

Wolverhampton's way forward

Working within the constraints of a £123 million reduction in budget and in order to respond to the challenge of meeting the needs and aspirations of an increasing population of older people, the council will focus its market investment on the following areas:

- opportunities for independent living
- opportunities that focus on quality of life outcomes
- opportunities that deliver savings across the public

Partnership Working

We would like to work with providers who: out of business".

- Have explicit quality standards and who publish results of their independent monitoring
- Are prepared to work to an open book accounting approach
- Are putting forward their understanding of demand and how this is changing over time
- Are able to show the impact of their activities in terms of the outcomes they achieve, rather than in terms of the number of people for whom they provide a service
- Wish to innovate and reduce the demand for care sector

Renewed pledges from April 2015

We will:

- Develop a better analysis of information about people who fund their own care
- Commission a market review of care consumer's priorities, including those who self-fund their care provision
- Develop a strategy document outlining the future model of community based and preventive services ready for discussion with interested providers
- Review our existing arrangements for engaging older people in discussion and involvement in service development and delivery

Summary of future commissioning intentions/priorities 2014/15

In order to deliver all of the above we will:

- Obtain more information about carers of older people and encourage more offers of targeted support where carers are struggling and where older people are at risk of coming into care or having repeat hospital admissions
- Encourage the development of innovative models of service delivery that better meet the needs of both carers and care users
- Ensure that better information about local care and support services is available and accessible to all; better sign-post people to local and national sources of information on quality; and develop our information website to capture user reviews and ensure that the content is jargon free and reflects older people's needs, expectations and outcomes
- Ensure that those who advise older people about their care are also well informed about the range of choices that are available
- Provide more support to self-funders and ensure that people are aware of the range of provision that is available to help them remain living independently
- Work with providers who can move away from time and task approaches with older people to focus their service delivery on outcomes by working with users to identify how best they can be measured and pay according to results
- Purchase from providers who can evidence that they are delivering services which are enabling older people to keep their independence
- Develop further opportunities for people who want to purchase their services directly and to support people to take direct payment whenever possible.
- Develop ways to make the Direct Payment process simpler but without lessening Council responsibility for ensuring public money is well spent
- Continue to promote the take up of individual service funds for certain types of care services
- Work with all providers to develop our market intelligence about the current and future housing requirements; the development of smaller regulated and non-regulated providers who will provide direct access to consistent sitting services or supported activities and to develop a range of preventative services and promote access to preventative services for older people
- Work with all sectors to further develop the way in which we deliver reablement and respite services to ensure that wherever possible, older people who develop needs for more specialist care and support are supported to access suitable short term services

- Develop more community based services to support the growing number of older people with dementia
- Work with the commercial sector to ensure that people with dementia have the same access to opportunities and services as everyone else
- Ensure that reablement and/or intermediate care options are considered before admitting anyone permanently to a care home straight from hospital
- Encourage the development of specialist providers and promote innovative models of service delivery
- Focus on early intervention and prevention for people experiencing memory problems.
- Work with providers to review the services they offer and ensure that we are not funding services which may ultimately increase the demand for care
- Reduce the reliance on state funded long term residential care. we recognize that in order to ensure that our providers can afford to deliver quality care to people for whom there is no viable community alternative; we need to continue to negotiate the fees paid by the Council in a spirit of partnership. We will also work with the sector to identify other ways in which the care home market can diversify to support older people continuing to live in their own home; and agree together for whom long term care placements are most appropriate
- Improve end of life services, in order to give older people more choice about where they receive their care
- Look to commission more care jointly with the new Wolverhampton Clinical Commissioning
 Group
- Work with providers to ensure more comparative data about care and support both for consumers and for providers
- Work with providers who can develop more services to meet the range of specific needs of older people in the Black and Minority Ethnic communities.

In order to deliver the above the council has:

- A strong desire to forge a new relationship with providers which works well for all who need care in our city. We also wish to ensure that there is a 'level playing field' across all providers, whether private or voluntary, large or small, whilst at the same time developing a diverse market that offers real choice for older people at its heart
- The Council will be funding fewer services. However, we wish to use our funding to stimulate new forms of care and support activity rather than wholly fund social care service provision.

Looking forward

Further budget reductions are projected over the next couple of year and the resources within which we need to operate will continue to be extremely challenging. However there will still to be a requirement to meet the needs of citizens in delivering services to the most vulnerable in our City.

This publication is one of a series of Wolverhampton City Council's Market Position Statements aimed at the social care market.

Next Steps

If you would like to discuss with us any of the information in this publication, or you have ideas about ways we can improve our communication with providers and potential providers, or improve and extend the coverage of this statement please do not hesitate to contact us. For further discussion you or your organisation can book an appointment to discuss how we can work with you as a potential care provider in the development and delivery of services to the citizens of Wolverhampton.

We look forward to hearing from you.

For further information contact

Stephen Brotherton - Head of Commissioning (Older People) Community Directorate steve.brotherton@wolverhampton.gov.uk 01902 555318