Market Development Strategy for Adult Social Care
1. An introduction to our providers

This Market Development Strategy is aimed at you as providers of social care support. It is the starting point for developing a stronger more effective partnership between the Council and providers, which will be necessary to deliver a person centred, sustainable care and support market that ensures vulnerable adults remain safe. This strategy will help us to deliver the Council’s overarching priorities described in the Camden Plan, by ensuring Camden is a borough where no-one gets left behind.

It presents the Council’s priorities over the next 3 years in the face of significant pressures, by including:

- a snapshot of the current council spend and customer base
- an explanation of market wide financial, demographic and legislative pressures
- an overview and analysis of the current market and areas for development
- how we want to work with you to deliver an effective, efficient support market in Camden

This Strategy is part of the wider work of changing how we do business to ensure that in everything we do we hear from people with support needs and carers. We will be delivering this through following the Making it Real approach. This co-produced approach will ensure that we focus limited resources in the right places and have a market that meets people’s outcomes in a sustainable way. We need to do this together, alongside managing unprecedented challenges in terms of financial austerity, demographic pressures and the new legislative framework provided by the Care Act.

To ensure that we are meeting people’s needs effectively we use a set of ‘I’ statements that tell us what people should be able to expect from support, which are as follows:

- I am able to maintain my independence remaining in my home or with my family
- I am able to make positive contributions to family and community life
- I am able to make connections with others
- I am able to work, learn and take part in leisure activities
- I am supported in my recovery and rehabilitation
- I feel safe and respected
- carers are supported to have a life outside of caring

To live up to people’s expectations and meet these challenges we and you will need to be willing to think and act differently. We will need a mutually trusting relationship, where both parties are open about their constraints and share ideas and approaches. We will also expect you to show us how you are placing residents at the centre of your support and how they are active in shaping the design, delivery and quality assurance of your offer.

The intention of this document is to stimulate new conversations about how we can work together to ensure a safe, sustainable social care market.

What is presented here is a high level direction of travel articulating a continued shift in resources from residential and nursing care to housing with support in the community; ensuring all support promotes individuals’ long term wellbeing and independence, including through maximising reablement,
2. Policy landscape

The policy landscape for health and social care is fast changing. However, one thing that remains the same is commitment to rolling out and realising the potential of Think Local Act Personal and person-centred support (sometimes referred to as personalisation or self-directed support). The policy is supported by all main political parties and is a key tenet of the Care Act. The future delivery of social care services is likely to be affected significantly by the Care Act. It proposes:

- putting in place a duty for Councils to promote wellbeing through all decisions regarding an individual’s care needs
- that Councils should manage and develop the market for support in their area
- establishing a national single definition of eligibility for Council Adult Social Care, replacing the current Fair Access to Care Services thresholds
- creating a new charging framework with a cap that is expected to create additional pressure on local authority funding and assessment processes
- new expectations for Councils to ensure a range of transparent information is available that enables individuals to direct their own support.

Another key policy driver is to further integrate services across social care and health so that support is designed around the needs of the individual, irrespective of which organisation provides or funds it.

We have jointly commissioned services across health and social care in Camden for many years and are well placed to respond to this agenda. The Better Care Fund provides a funding stream for integration.

We have interpreted this policy landscape in developing a local vision for care and support with residents and providers described below.

3. Context in Camden

Camden Plan

The Camden Plan sets out an ambitious 5 year plan for the borough that aims to make sure we are a borough where everyone has the chance to succeed and nobody gets left behind. A major element of delivering the Camden Plan is to think about how we can support individuals and communities to be resilient in the face of challenges. These aims fit well with the national agenda of delivering person-centred support and are embedded in Adult Social Care’s strategic plans.

More information about the Camden Plan is available at camden.gov.uk/camdenplan

The Vision for Support and Making it Real in Camden

In addition to the ‘I’ statements, we have worked with people with support needs, carers and providers to develop a set of vision statements of things that are likely to be important for people with support needs (see appendix I). It has four key areas; independence, safety, community and involvement. We think that you should be able to test your support offer against this vision and make changes accordingly; we will be doing so with our commissioning strategies.

In order to achieve this vision we know that the Council and providers will need to work in different ways and recognise people with support needs as equal contributing partners. This is often called co-production.

We are now looking at all our processes and services to reconfigure them around co-production. To help us do this we will be implementing Making it Real and publically committing to working as equal partners with people with support needs, carers and providers. The first step to doing this was understanding what experience of support people are having currently and developing a shared action plan for change. You can see this and other useful materials online at: wearecamden.org/careandsupport

A range of residents and providers are already helping us to develop our plans in Camden. If you want to be part of this please contact frank.dove@camden.gov.uk

We expect you to share the ethos of co-production in the development, delivery and monitoring of your support. Providers should consider signing up to Making it Real to make public their commitment. More information is available at: thinklocalactpersonal.org.uk/mir
4. The scale of the challenge – austerity and demographic pressure

Adult Social Care expenditure for 2013/14 was £108.995m1. This funding includes provision of direct support to individuals as well as a range of preventative interventions. This expenditure has reduced significantly from a high in 2011/12 of £117.362m, which reflects funding cuts from central government.

The funding reductions have been managed by focusing support on the most vulnerable residents and through implementing efficiency savings within the adult social care workforce and individual contracts. We are anticipating further significant funding cuts from central government that are likely to require the Council as a whole to make savings of around £70m over the next 3 years.

The total spend on external provision is over £80m, which has increased from £76m in 12/13. This reflects our commitment to supporting a vibrant diverse market of local providers.

### Direct Support

Direct support is currently provided to adults that are assessed as having substantial or critical need under the Fair Access to Care Services Criteria. This was provided to 3,863 people as of 31 March 2013, of which around 75% of social care eligible clients have personal budgets. In the future we will aim for all our residents with eligible needs to have a personal budget managed as a direct payment wherever possible. In 12/13 the Council supported over 1,550 carers through providing an assessment of their needs and provision of support.

### The ‘self funder’ market

There is a significant unseen element to the market of support made up of people that fund their own packages or have a network of family and other support that do not come through the Council. The size of this ‘unseen’ market is significant. The Institute of Public Care has estimated that nationally almost 45% of residential and nursing home placements for over 65’s are taken by self funders, whilst there are around 170,000 older people nationally who fund their own homecare.

Our priority is to develop a better understanding of this market and to estimate and plan for increased pressure arising from the Care Act reforms, including the cap on care costs. In addition Carers UK has estimated that the provision of unpaid care saves the public purse over £100 billion pa.

### The effect of demographic pressure

Changes in the Camden population over the next decade are likely to increase demand for social care support. The table below reflects the level of demand if the change in demographics occurs as predicted and the current proportion of the population requiring services stays the same.

This pressure would amount to providing support to around an additional 466 people by 2018 - 12% of the current client base.3 Much of this rise is projected in the over 85 group, who are significantly more likely to require community care services. This demographic pressure, alongside the reduction in funding and new responsibilities arising from the Care Act reforms, explains why we need to develop a new approach that builds upon work to support people to live independently as outlined in this strategy.

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1 This includes significant contributions from the NHS and from people that fund a portion of their own care and support. These contributions vary year on year.
2 This includes services for asylum seekers, people with HIV / AIDS and people with substance misuse issues.
3 This does not consider any changes that occur from the Care Bill.
4 Assumes the age-specific % of the population supported in the different services remains unchanged from 2013.
5. Categories of support

The following sections provide a high level analysis of the market in 3 different categories:

a. Community based support
b. Home based support
c. Supported accommodation

These categories list firstly, the services we currently commission and secondly, the services we are seeking in the future. As we work with others, we expect new forms of support to emerge that helps people maximise their choice and control, and to maintain their independence.

To support the market place to work effectively we have an online directory, Camden Care Choices, which makes it easier for people to find the right support for them and to contact providers. To be part of this directory you should register with CiNDEX at camden.gov.uk/cindex.

We are planning to develop our information offer in response to the Care Act and move towards more of an E-Marketplace solution enabling providers to update their information, people to book and pay for support online and provide feedback on services. We are also planning to improve the general information on the site and to develop tools for people to self-assess effectively. This will be supported by knowledgeable professionals, community organisations, carers and peers advising one another and developing individualised packages of support.

a. Community based support

Universal services

People have told us that being active and involved in the local community is important and that there are “lots of great things going on in Camden and everyone should be able to join in” (see appendix I). This means we need a range of inclusive age and disability friendly places such as community centres, libraries, cafes and cinemas that welcome people and respect individual differences. A number of places are already achieving these expectations, but we want to extend this. We know that physical accessibility can be an issue with some facilities and we will address this. We believe that support better orientated around individuals could increase access to universal services.

We are investing in approaches that will support people to be resilient, through being better connected to their community and dealing with problems as they arise. These approaches will help people to stay well and have less need for more intensive statutory services. It is important that you are aware of and support people to access services that promote people’s independence.

Recently launched support includes:

OurCamden: A social enterprise and membership scheme that will support people aged over 50 to take part in social events, learn new skills, access discounts on a range of places and products in Camden and access practical support in the home and garden.

Find out more at: ourcamden.org

Camden Hub: A new service that will support people with mental health issues through providing targeted support when people feel they need it. Timely low intensity support and interventions will reduce the number of customers who require ongoing support services.

Find out more at: camdenhub.org.uk

Mental Health Working: An employment service providing a pathway to access support for anyone with a mental health issue in the borough.

Find out more at: remploy.co.uk/en/partners/who-we-work-with/mental-health-working

A major opportunity coming up is the development of a Centre for Independent Living (CIL) that will be part of the Greenwood Centre. This will be an organisation or a network of organisations that will be led by people with disabilities with the aim of promoting people’s independence. The tender process is scheduled to begin in Autumn 2015 and more information is available at: camden.gov.uk/greenwood

Day opportunities

One area where we are looking to broaden the market is around things to do in the day across all client groups. Camden spends around £7m on day opportunities of which the vast majority is traditional resource centre provision. We are looking to see the development of support that recognises people as assets and supports them to build their skills and networks. We also think there is the opportunity to develop support closer to people’s homes through accessing universal services.

Employment outcomes are low for people with support needs in Camden and we would like to see more effective provision developed, especially for those with higher needs. We will develop new approaches to day opportunities to address these issues and will continue to develop the market of high quality personal assistants that can support people through Camden’s PA Register: Find out more at: camdenpas.org.uk

Advocacy, advice and user involvement

We will be looking to refresh Camden’s advocacy offer in line with changing expectations and the requirements of the Care Act. It is likely that the CIL will have a major role to play here. In addition we will continue to work with Camden’s Advice partnership to ensure that it is meeting the needs of people with different support needs in the borough. Our intention to work in partnership with people with support needs and carers through Making It Real is above. We will also explore opportunities to develop increased peer support in the borough.
Transitions
There is an opportunity to improve outcomes for young people transitioning to adulthood. Currently services are fragmented in some areas and not always user-centred. We are working with providers of young people’s services to look at opportunities to extend provision up to the age of 25. This includes making a major investment into a new college for people with learning disabilities and the Minding the Gap project which will create a more straightforward, responsive and easy access referral pathway for clients under 25 years with a mental health or substance misuse need.

Community health services
The Council, CCG and Public Health are aligning their Prevention Strategies into one workstream that will respond to the requirements described in the Care Act. This will involve mapping current preventative support and developing new provision to increase efficiency and address gaps.

We expect providers to develop joined up approaches across health and social care so that people can access the support they need where and when they need it. We expect the market to respond seamlessly around the needs of the individual irrespective of organisational boundaries or whether support is commissioned through the NHS or Council. Successful providers will develop approaches that move from crisis management to long term care and support that is able to respond to fluctuating needs. This is a challenge across all client groups and we will need you to trial joint initiatives and new approaches at times. The Better Care Fund is a key enabler for this and you should be aware of the opportunities and implications it raises.

Another enabler is that some individuals with significant ongoing support needs are now eligible for Personal Health Budgets. These operate in a similar way to social care personal budgets in giving individuals greater discretion over the support they receive and who provides it. It is also likely to open the market, to some extent, to a wider range of options.

b. Home based support
We know that people with support needs would prefer to live in their own homes for as long as possible and we have had significant success already in supporting this. We want to continue this good work by developing flexible support that enables people to live independently, manage their tenancy and take an active part in local community life. Over the next 3 years we will be reviewing our accommodation arrangements for all client groups and reconfiguring arrangements to promote a continued shift in resource towards community based accommodation, maximising the number of people that can live in their own homes and minimising the number of people in residential and nursing care. This will include working closely with providers to ensure housing with support is able to support people with more complex needs.

Domiciliary care
An area where we have worked with the market to shift to a more enabling model is homecare. We have recently commissioned a framework of providers that will work in a more supportive and facilitative way. In line with other services, it is likely that in future we will focus homecare contracts and payments further around outcomes. In addition, Camden now has a register of personal assistants that can support people in the home and community. This enables people to have greater flexibility in choosing who, how and when they are supported. Find out more at camdenpas.org.uk

Reablement, equipment and telecare
Camden has a range of reablement services that are designed to support people to become more independent following an accident or a decline in their condition. We will work with providers to continue to understand the impact of reablement on promoting independence and to understand opportunities in the pathway of support where reablement could be of additional benefit to people with different support needs.

Reablement is supported by an investment of over £3m p.a. on equipment and telecare that give people confidence to remain in their own homes.

Floating support services
Floating and tenancy support services enable people to sustain their tenancies and become more independent. We have a range of these types of service in Camden and we will work with providers to ensure they meet the range of needs across the borough and are well coordinated.

More information is available at camdencs.org.uk

c. Supported accommodation services
In addition to supporting people to remain in their own homes we will also develop a range of accommodation options for all client groups, such as Extra Care and Supported Living that enable people to live stable lives in community settings.

Support for carers
Carers offer vital support for people to maintain their independence and quality of life and it is equally vital that as a Council we are able to support carers to have a good quality of life themselves. To do this effectively providers need to ensure that support is flexible and can be tailored around the needs of the family. We have also invested in a range of services that will find new carers not currently receiving support and offer support for people to maintain their caring role and to have a life outside of caring. This will be supported through the provision of short breaks services.

More information is available at camdencarechoices.camden.gov.uk

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5. Personal Health Budgets are available to NHS funded Continuing Care clients.
Supported Living
Camden currently has 340 units of supported accommodation for people with learning disabilities and mental health needs. Our unit costs for supported living remain higher than most of our neighbours and whilst we want to support people to live independently, we need to ensure provision remains affordable. We are keen to further develop arrangements that extend choice for individuals and give providers greater flexibility to meet individual needs. For example by embedding good practice in the use of Individual Service Funds.

There are a significant number of Camden residents under 65 who are living out of borough, including a number in care homes. We want to build on success that we have had in supporting people to move out of care homes into more independent settings with the right support around them. This will require providers that can respond to people with high support needs and can develop sustainable support packages that deliver good outcomes in community settings. We will look to develop targets, and incentives, that reflect this.

Extra Care
For over 65’s we have been developing Extra Care housing schemes as a genuine alternative to residential care and responding to the rise in the number of people with multiple long-term conditions. The eligibility threshold for extra care has increased in recent years – because the needs of new customers tend to be higher, but also because the needs of people who have lived in these schemes for a number of years have increased. Providers therefore need to recruit and retain staff with the skills and approach to work with these people.

There are currently 135 places of which around half will go to people that may otherwise be in residential care. Our understanding of people in later life’s aspirations and the impact of changing demographics suggests that we are likely to need between 80-100 new extra care places in the next 5 years.

We have one site in mind to develop half of this additional demand, but we would be interested in hearing from providers about their plans to provide high-quality, affordable extra care in Camden. We are particularly interested in:

- developing models of extra care which support people with dementia
- using extra care housing as a short-term, enabling environment for people who could benefit from reablement
- exploring innovative ways of providing accommodation, care and/or support for over 65’s with long-term functional mental health problems.

Residential and nursing care
We have had significant success in reducing admission rates to residential and nursing care and our rates are much lower than the national benchmark. On 31 March 2013 we were supporting 617 people in this way, around half of these were over 75, whilst approximately 530 of the places are provided in borough.

Numbers in residential or nursing care have been reducing significantly year on year and spend on this category has fallen as an overall proportion of expenditure from 38.65% in 10/11 to 28.94% in 13/14. We expect spend to continue to fall across all client groups in the immediate future as we develop new housing options. In time the growth of over 85’s will create a pressure on nursing care, however, rates will drop first. Therefore, we are not seeking additional capacity across nursing or residential care.

Existing care homes will need to change their model as people’s expectations shift. It is likely that in the future personal budgets will be extended so that they can be used in residential and nursing care, which will give individuals more discretion. Providers able to offer more person centred, enabling approaches are likely to be best placed to respond.

6. Our ambitions for Camden’s support community
Our aim is to work with you to develop an effective and efficient support community. This will need changes in how both we and you operate, some of which are outlined below. We think there are four key components to deliver a vibrant support community, which are described on the next page.
What we are trying to achieve in Camden

Outcomes focused

Commissioners and providers focus on the difference support makes

Commissioners will use a combination of local outcomes and the Adult Social Care Outcomes Framework to articulate quality

Support focuses on wellbeing, emphasises prevention and builds people’s strengths and networks

Care management lead this by developing flexible aspirational support packages

Commissioning will be based on outcomes and meeting needs, rather than client groups

Procurement processes are proportionate and accessible to the widest possible range of providers

Contracts will increasingly be arranged around delivery of outcomes, which may mean new financial models

Sustainable

Market Position Statements help you to understand your place in the market

Commissioning intentions are articulated in a timely fashion and providers have the opportunity for dialogue

You work with us to understand changing and emerging needs

You are open with us about the real cost of support, your business models and your strategies going forwards

You are open with us about major financial or performance difficulties and we have robust plans in place in case of provider failure

We provide a register of contracts and a procurement forward plan

We share risk where appropriate, however, providers operate in a commercial competitive market and the spend on block contracts will reduce

Responsive and accessible

Support is easy to navigate across the provider market and is integrated across health and social care

You are aware of the wider market of support and work cooperatively with others to ensure support is coordinated around individuals

Formal and informal partnerships deliver added value through delivering comprehensive suites of support and leveraging in wider resources

Support flexes around people’s changing aspirations and needs

We make people aware of the amount of their personal budget

You are clear about your menu of support, what outcomes it can deliver and at what cost - costs are transparent to all - we offer opportunities for you to describe your offer

Support offers choice and flexibility for all, whether individuals have a direct payment or not

Quality assured

You demonstrate how you are delivering outcomes to the Council and people with support needs.

The Council and providers use the Making it Real process to affect change and your customers are a key partner in your quality assurance process

Good practice and innovation is shared and celebrated

The Council and providers work collaboratively to tackle market wide issues

Commissioning and monitoring arrangements promote a strong workforce supported through Camden Training and Development Service’s offer - you ensure staff are equipped and supported to deliver high quality support

You have robust procedures to ensure high quality support and respond to safeguarding concerns - customer safety is a priority for all providers

We increasingly focus monitoring arrangements around the delivery of outcomes

Camden’s support community
8. How will we achieve this together?

We know to achieve the type of effective, efficient support community described above we need to build a strong partnership with you based on mutual trust, shared priorities and underpinned by good information on both sides. We want you as providers to share this strategy and these challenges with us. We want to understand how we can work together to achieve this and to develop plans to make it happen.

This is likely to include:

- reviewing existing engagement structures with you to ensure they are strategic and impactful
- understanding how we can support and encourage you to deliver more personalised services
- joint work around developing new models
- ensuring providers are included in the Making it Real approach
- developing more consistent and helpful information and clearer referral pathways
- ensuring we have a high quality and sustainable workforce.
Appendix A

What sort of things should be in a vision for people with support needs?

**Independence**

- People should have choice and control in their lives and should decide how they are supported
- People should be as independent as possible and be active and involved in the local community
- Health and other services should be targeted to support groups that need them most
- Everyone should have access to safe, effective and responsive services

**Community**

- People that need extra support to make good, safe choices will be able to get this
- Everybody has assets, skills and interests and support should build on this
- Organisations work together and respond to what people need and want
- People should have a say about what support is available and be able to influence any changes

**Safety**

- Relationships and networks are vital for people to keep well
- The opportunity to learn, make connections and live in good housing is important to everyone
- People should be involved in shaping and sometimes delivering support
- People should be able to say whether they are satisfied with the support they receive and this will be valued

**Involvement**

- There’s lots of great things happening in Camden and everybody should be able to join in
- Everyone should have access to safe, effective and responsive services
Case Study A: Daniel

Daniel is a young man who grew up in Camden and went to school in the borough. When he was 18 he moved out of the borough to a residential institution. Daniel and his family expressed a desire for him to move back to Camden and to live independently. However, this was a challenge because Daniel has high support needs and sometimes displays behaviour that challenges services. Camden learning disability service worked closely with a supported living provider to develop arrangements that could support Daniel. This included supporting him to have an intense package of support initially, whilst supporting him with the move. His family also supported this by visiting Daniel every day immediately after the move to help him settle in. Daniel now has an Individual Service Fund that allows him and his family to have a say over who supports him and how. This has meant that he has been able to find a support worker that shares an interest in football and that watches games with him at a local pub. Daniel’s family also have reintroduced him to some friends that he made at school. Overall Daniel’s support package is significantly lower cost, whilst he says he is happier than he has ever been and his behaviour is less likely to challenge services. The supported living provider has received an incentive payment for reducing the care package significantly.

Case Study B: Carla

Carla has Parkinson’s disease and has been supported for several years with a direct payment from Camden Council. Her husband Rob helps her to manage this and select staff. She has been supported by a team of carers mainly from an agency and one carer that she employs directly as a personal assistant. Recently her needs have increased and she was referred for a Continuing Health Care assessment that confirmed that she had Continuing Health Care needs. Although Carla was pleased that her increased needs had been recognised she was concerned that she would be unable to employ the same care team. Carla was supported to take a Personal Health Budget and to manage it as a direct payment. This means that she can continue to have the same care workers, including employing one member of staff directly. She continues to receive support with the administration from the Direct Payments Support Service.

Case Study C: Amir

Amir is a middle-aged man who had lived and worked as an accountant in Camden for all his life. In the last couple of years he has had a difficult time including losing his job and falling out of touch with his friends and family. He had begun to self harm quite regularly, suffers from sleepless nights and rarely leaves his flat, which had also become difficult to manage. He is not confident to employ someone directly, but does want flexible support when he feels he needs it such as at the weekend or following a therapy session.

A local agency have developed a support service that has the flexibility to agree the support hours a week in advance and has an emergency service if Amir feels he really needs it. The service is also able to help him to manage his flat and regain some skills around living independently. In general Amir slightly underspends on his personal budget to build up a contingency for when he really needs it. Camden Council has agreed he can do this up to an agreed amount.

Amir also accesses a couple of day opportunities from the Approved Provider List. These art and sports based activities make him to feel calmer and also have the effect of helping him to sleep afterwards. He particularly looks for these activities on a weekend. He has also accessed employment support and is hoping to become self employed and begin working a couple of days a week in the next year.

Case Study D: Evie

After Evie’s husband died she started to stay in her flat more and more because her mobility was getting worse and she lived on the 3rd floor. She’s good on a computer so she was able to order food and other things online and manage her accounts this way and she also emailed and skyped her daughter in Australia regularly. Unfortunately her mobility got worse and she had a fall in the winter of 2015. Fortunately Evie was wearing an alarm that she used to alert the health services and she was taken to hospital.

When she left hospital she was given a reablement package that supported her to become more mobile and she was encouraged to do some bits of shopping locally so she would get out and about. The local shopkeeper now gives Evie a call if he hasn’t seen her for a couple of days. The reablement worker told Evie about OurCamden, which she joined because she didn’t see many friends after her husband passed away. She now goes to a number of their free events and on the occasional trip and she has made quite a few friends locally who look out for her. She has also visited the Centre for Independent Living for advice around equipment to support her mobility and to think about housing options such as sheltered housing in the future.
The future of support in Camden – how this might look in 2017

What this might look like for a customer in 2017

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