Welcome to Durham County Council’s Market Position Statement

Hello and welcome to Durham County Council’s first Market Position Statement (MPS). This document has been produced with input from a number of internal and external stakeholders including service providers and sets out the direction of travel for Children and Adult Social Care over the coming 12 to 24 months.

Although this timescale may appear restrictive for long term business planning I am confident that the key themes of prevention, personal and community resilience and short term interventions are the bedrock of future service requirements.

There will however always be a need for provision of long term care for those people with the most complex of needs but the amount and design of this is expected to change.

I hope that you find this document accessible and useful. It will be revised and refreshed in 2016 and I welcome any suggestions as to how the format content could be improved in future versions. If you wish to feedback contact details can be found at the end of the document.

Jane Robinson
Head of Commissioning
1. Introduction

About County Durham
County Durham is a socially, economically and physically diverse area, home to over 0.5m people in 12 main towns with over 300 smaller settlements, many of which are former colliery villages. The county plays an important role in the economic success and stability of the North East, with key transport links (A1M) and the East Coast main line railway running through it, providing infrastructure vital to local employment and the regional economy. Around 90% of the population lives in the east of the county, predominantly the former Durham coalfield. The more sparsely populated western Dales form part of the North Pennines Area of Outstanding Natural Beauty.

Our population is changing meaning that adult care will see significant demographic changes in the future. In County Durham, the number of people aged over 65 has increased by 13.2% since 2001 and this figure will continue to rise. Predictions are for a fairly stable trend for people with learning disabilities with a level of need requiring statutory social care interventions. Whereas the numbers of people with a physical disability aged between 18-64 is expected to increase overall by 483 people by 2020.

What is a Market Position Statement?
A market is a place (virtual or otherwise) where goods and services can be bought and sold. In this document, the market means individuals and organisations that buy and sell, or may do so in the future, public health and social care services for both adults and children within County Durham. ‘Social care’ is used in its broadest sense and includes activities, groups and services accessed by members of the public as well as those accessed through a statutory assessment of need. This document does not cover Primary Care or housing although it will seek to encompass these areas in the future. This Market Position Statement (MPS) brings together key information about our priorities and upcoming opportunities for the market during 2015/16. However, this MPS does not contain statistical information about all the service user groups that we work with as such information is contained in the Joint Strategic Needs Assessment (JSNA).

Who is the Market Position Statement for?
The MPS is for both existing and potential providers with the purpose of helping them to shape their business plans to support the council’s vision for the future of local social care markets. It will help providers to:

• Decide how to respond to the personalisation of social care
• Identify opportunities that they may tender for
• Develop their services to meet local need and demand

The council is committed to stimulating a diverse market, where innovation and more effective ways of working are encouraged and poor practice is addressed. The MPS will be a dynamic document that will be reviewed regularly to ensure up and coming policy and financial changes are addressed.
We will therefore continue to involve and engage existing and potential providers and other stakeholders in the future versions of this document to ensure the development of credible, realistic and appropriate services.

This document and the overall mission statement below, was shaped by existing and potential service providers from across the social care market:

County Durham’s Market Position Statement strives to provide honest, targeted and useful information that is presented in a clear format, to support the shaping of local business plans for all organisations with an interest in meeting locally identified priorities to improve the lives of vulnerable adults and children in County Durham. Working together the council and the market aspire, through a co-production approach, to deliver entrepreneurial, innovative and quality services supporting independence, choice and control, through the continuous development of mutual respect, a shared understanding of desired outcomes.

How to use this document
This document is a succinct overview giving providers a direction about what we want from the market to help us to meet our local priorities for a range of service user groups. It is part of a suite of documents that provide the key information and statistics on needs, demand and trends for the county. It should therefore be read in conjunction with the Joint Strategic Needs Assessment which contains the detailed demography of County Durham and the Joint Health and Wellbeing and Children and Families Strategies which detail the strategic priorities for the council and its partners.

Other useful information to assist existing and potential providers in their business planning can be found in the documents listed on page 22 of this statement.
2. National developments and local context

National developments

Care Act 2014
The Care Act 2014 represents the most significant changes to adult social care in recent times, it proposes fundamental reforms in how the law on adult social care will work, placing a stronger emphasis on advice and information, prevention and market shaping. The Act introduces new challenges for commissioners and providers which may also realise opportunities for service development. The Care Act places statutory duties on the local authority to facilitate markets that offer a diverse range of high quality and appropriate care and support services, to enable genuine choice to people in meeting their needs.

Better Care Fund
The Better Care Fund will provide £3.8 billion nationally, allocated to local services to give the elderly and vulnerable an improved health and social system through the deployment of pooled budget arrangements. Local plans have been developed for County Durham’s proportion of the funding to join up health and care services around the needs of patients, so that people can stay at home more and be in hospital less.

In addition the council will work with the County Durham Economic Partnership to maximise the benefits of the forthcoming funding through the European Union and identify and encourage opportunities for partnerships, joint working and consortia formation, wherever it will benefit the end user.

Finance and funding
In 2013/14 the council spent over £124 million on adult social care and over £5.7 million on children’s social care in both the independent sector and voluntary and community sector. This figure excludes Direct Payments, where the expenditure in this area for 2013/14 was over £10 million for adults and over £934,000 for children.

Over recent years the council has faced unprecedented budget reductions across the whole Council within a climate of increasing pressure on social care resources. The council is currently on track with its savings plans and by September 2013 over £110m recurrent savings had been achieved. However, with the Government extending the time of austerity past 2017/18 the council is expected to make total recurrent savings of £222m between 2011 and 2017.

In Children and Adults Services, significant savings have been achieved through service remodelling, negotiation with existing providers, some decommissioning and where appropriate reinvestment in more efficient, remodeled services to better fit to meet future needs. Continued support for a wide range of preventative services and a transformation approach in front line children’s services and adult care are helping to ensure that the council’s higher cost social care resources are targeted at those most in need.

Local context

Integration & partnership in County Durham
County Durham has a significant track record of partnership working, the council continues to work proactively with partners including Clinical Commissioning Groups and Foundation Trusts, to integrate services where it is felt we can streamline services and pathways, improve outcomes and minimise cost. This work will be overseen and driven by the Children and Families and Health and Wellbeing Partnership Boards, supported by the Community Wellbeing Partnership which brings together large public sector organisations to carry out this work.
This approach will need to continue with the council seeking further opportunities to commission services more efficiently whilst improving quality standards and an increased front line focus on the development of local community resources, alternatives to traditional resources and supporting the growth of the current reablement, rehabilitation and recovery approach. This MPS sets a clear strategic intention to work closely with the voluntary, community sector and independent sector to creatively address the continued need for preventative and early intervention approaches in a continuing climate of limited financial resources and encouraging and support the attraction of alternative sources of funding.

**Charging for services**

All councils who have decided to charge for services must follow regulations issued by the Government. Within County Durham, those people who are assessed as being eligible for social care services may be expected to make a financial contribution towards the cost of those services depending on their financial circumstances. The council has charging policies in place for the following types of services:

- Residential Services*
- Non-residential Services*
- Stair lift maintenance

Please refer to the council website for further information.

*Excludes those who are assessed as being in need of intermediate care or reablement services

Not all services are currently chargeable, for example advocacy services and carer support. Charging implications for services will be communicated to the people who will access them and the providers that will deliver them.

**Transforming adult care**

The nature of people’s needs is changing with people living longer and needing support with deteriorating health and wellbeing for longer as they grow older.

The council has had a long term strategy in place to support people to remain independent for as long as possible and this approach will continue going forward coupled with building resilience. Prevention and early intervention options will be explored in full, including full use of available local community services. There will be increased use of short term placements for some people with robust goal planning and a focus on supporting a pathway approach where people increase their levels of independence with flexible community based crisis support when needed. When these avenues have been exhausted, adult care will support with services that promote recovery, rehabilitation and independence for those meeting eligibility criteria. This may include increased use of transitional or short term placements for some to enable them to reach maximum independence and supporting those with long-term needs to help themselves wherever possible.

**Transforming children’s services**

Significant reforms are taking place in terms of family justice, adoption and following the Munro review of child protection, the development of a ‘single front door’ to ensure that referrers and families are able to quickly access Early Help services that avoid unnecessary referrals to children’s services.

The unprecedented financial challenges putting increasing and sustained pressure on finite social care services mean a new approach to practice with more effective early intervention coupled with achieving efficiency savings is required.
The Transformation agenda is already yielding results in reducing emergency placements and increasing planned ones, taking a holistic family approach and a focus on prevention and early intervention is building on the strengths of families and their skills development.

Central to this approach is early help “pre-social care”, redeployment and targeting of resources on prevention and support, learning from families’ feedback, with a focus on getting it right first time, building relationships with families and simplified administration processes.

Key to this way forward is the council's Early Help Strategy (2014) focusing on identifying risks and offering early help to prevent escalation of problems, therefore also reducing the need for access to higher cost, more intensive statutory services. The approach is inclusive of pre-natal and pre-statutory interventions targeting multi-agency approaches on prevention and support, learning from families' feedback, focusing on getting it right first time, building relationships with families and simplified administration processes.

**Transforming Public Health**

The implementation of the Health and Social Care Act 2012 transferred a number of former Primary Care Trust (PCT) public health responsibilities to the council from 1 April 2013 together with a ring-fenced public health grant to enable the council to deliver the new statutory duties.

The rationale for transferring public health functions to the council was clearly described in Department of Health reports and the impetus was to transform the way public health works and to have a local focus on people and place. At a local level the public health transformation programme is underpinned by the following:

- The public health services commissioned previously have not impacted on health inequalities in County Durham. Even though health overall and life expectancy have improved for County Durham residents, the gap between County Durham and England remains as does the gap between County Durham communities.

- The rationale for transferring public health to local authorities was to re-focus on tackling the social determinants of health as evidenced in the Marmot report and to work closer with communities.

- Public health commissioned services are subject to review as the public health transformation agenda is implemented and the grant allocation is shifted to include a focus on upstream activity to address the social determinants of health as well as mandated and other public health responsibilities.

- The wellbeing for life approach has a strong evidence base and the phased approach being progressed in Durham will facilitate service integration, partnership working and links with the 14 Area Action Partnerships across the county.

- The focus will be on the most deprived communities with outreach services and operate holistically around the individual and families.
4. Quality

Key messages:

• We will continue to meet our statutory duty to measure and assure quality for the people of County Durham

• Ensuring the quality of both commissioned and non-commissioned services is a priority for us

• Best value principles will continue to be important in our future commissioning of services, as we require effective but efficient services

• Demonstrating improved outcomes through service delivery will be key

• We expect service users / carers to be involved in the development of services that they access

• Providers need to be able to respond to the increasing Direct Payments market, offering flexible service provision and clear pricing structures

Market opportunities

The following suggestions are ways providers can improve the quality of the services they deliver:

• Work with stakeholders - Involve relevant council staff, service users and their carers/family in the design and development of any services, their feedback is key to improving the quality of your service. Consider how feedback can be applied practically to develop new/improve existing services. Apply the learning from feedback surveys and complaints to develop new/improve existing services.

• Monitor and review performance – Tracking performance and auditing of key areas of service delivery ensures areas for improvement can be identified to improve quality, identifying best practice and benchmarking with others ensures learning can be applied leading to service improvement. Clear standards, consistency and compliance to service delivery expectations ensure quality assurance. A cycle of plan-do-check-act ensures improvement is monitored and can be demonstrated.

• Review marketing tools used – Providers can promote their service in the most effective places (eg County Durham eMarketplace). Consider whether information provided to people regarding services is accessible and easy to understand.

• Improving outcomes for people – As part of the increased focus on quality for service users, there is a new emphasis by commissioners in ensuring good quality outcomes for people. We will be looking for providers who can deliver flexible person centred services and from a broader point of view we will expect good providers to recognise that the people using their services and their carers are experts in their own lives and are therefore essential partners in the design and development of services.

• Focus on workforce development – Appropriately trained, qualified and competent staff who are well supervised and managed improves the quality of the service delivered. Tyne and Wear Care Alliance can support providers in the independent sector with training (www.twca.org.uk) and Voluntary Organisations’ Network North East (VONNE) advertises training for VCS organisations (www.vonne.org.uk).
Quality assurance
The Safeguarding Practice Development team, Commissioners, Infection Prevention and Control (IPC) nurses and Care Quality Commission (CQC) work closely together, having regular information sharing meetings to discuss the quality of locally registered services, agree ways to improve this where required and plan how to respond to developing problems.

CAS Commissioning services monitor contracted providers to assess the quality of service provision using relevant evidence based measures and to ensure contractual compliance.

We will continue to have in place and further develop effective processes for ensuring the quality of services that are not registered with CQC. We will ensure that the County Durham eMarketplace continues to indicate where a service is CQC registered or accredited with the council to help service users make informed choices when they are choosing a care home or other service, funding their own care or are in receipt of Direct Payments.

We will also continue to explore whether eMarketplace entries can be linked to other quality assurance schemes. The eMarketplace currently has a link to places or services that have been assessed for disability access by Disabled Go.

Ideas for staff training
In County Durham, we have identified the following areas of training for relevant providers:

- Make sure staff are trained in the procedures for recognising and reporting a safeguarding concern
- Take up training opportunities provided by carers service providers
- Ensuring staff are properly trained to put them in the best position to identify children, young people and families who need additional support
- Training for supported living, residential & nursing care staff to recognise the signs and symptoms of early onset dementia in people with learning disabilities
- Training for a range of front line services to educate and help develop skills for anyone with autism
Wellbeing/building stronger communities

There are several, often competing and contested definitions of wellbeing. Wellbeing is taken within this document to refer to:

- A positive and subjective concept;
- It is about enabling people to achieve optimal functioning;
- It is about reaching and realising full abilities;
- About making a purposeful contribution;
- Creating and maintaining good relationships and connections with others and having good social support.

We recognise that people’s lifestyles and the conditions in which they live and work act together to influence their health and wellbeing.

Poor socio-economic circumstances can affect health and wellbeing throughout life, resulting in health inequalities.

We are therefore entering into a ‘strengths based’ approach that acknowledges and builds upon the strengths, skills and capacities of people to live healthy lives alongside the assets within the local community (Liverpool PHO 2010).

Prevention

The term “prevention” means different things to different people. However, for the purpose of this document prevention is defined as those services and support that contribute towards preventing or delaying the need for care and support and also reducing the need for care and support. Preventative work varies depending on the level of support, as detailed in the following table.

<table>
<thead>
<tr>
<th>Levels of support to consider</th>
<th>Durham County Council’s role</th>
<th>What can providers do?</th>
</tr>
</thead>
</table>
| **Universal Access:** Members of the public who need information, advice and signposting to local community services. They are usually able to find their way through the system with minimal support, so long as it is made accessible to them. | • Ensuring information and advice services are easy to find and there are widely promoted key points of access to more detailed information | • Register on the County Durham eMarketplace  
• Identify current services that provide information and advice to general public  
• Promote the main points of access to help people find the information they need at any given time |

This is also known as Primary Prevention
<table>
<thead>
<tr>
<th><strong>Identifying gaps in information and advice available locally and working with the market to address the gaps</strong></th>
<th><strong>Help identify gaps in current universal services available to the general public or access problems</strong></th>
</tr>
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<tbody>
<tr>
<td>Network with other local providers in your area. Share information about what you do and facilitate promotion of other providers services as well as your own.</td>
<td>Work alongside the council to maintain and develop appropriate initiatives and services that are accessible to the public.</td>
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<tr>
<td>Work jointly with other organisations to ensure efficient use of resources, network and ensure complementary rather than duplication of resources.</td>
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</tbody>
</table>

**Targeted support:**
People who have a need for support in one or more areas of their life. These people do not meet statutory eligibility criteria.

Reasons for support will be varied but may include, for example, diagnosis of illness, deterioration in health and wellbeing, moving home, change of circumstances, socially isolated, lacks confidence or motivation, mobility difficulties, risk of falling, feeling vulnerable within community, difficulty in coping, don't know how or where they can get help.

This is also known as **Secondary Prevention**

**Active signposting and referrals to services and interventions that are designed to support the individual's identified needs**

- These may include intermediate care, home improvement agency, short term outreach or floating support, short term accommodation based support, health promotion services and community health teams.
- Working with the market to ensure appropriate and accessible provision of early intervention services.

**Develop local knowledge of local community services providing targeted information, advice or interventions to people who need some support in or more area of their life**

- Direct people to targeted information and advice specific to their needs.
- Work alongside the council to maintain and develop appropriate targeted initiatives and services.
- Work jointly with other organisations to ensure efficient use of resources, network and ensure complementary rather than duplication of resources.
Levels of support to consider

| Eligible for Statutory Care and Support: People who have an assessed need for statutory social care support in one or more area of their life. These people often also have universal or targeted needs in other areas of their life. The council determines whether an individual has identified statutory social care needs by undertaking an assessment. To be eligible for statutory social care support they must have substantial and/or critical needs in one or more area. This is also known as Tertiary Prevention |
| Durham County Council’s role |
| What can providers do? |
| • Social Worker support to help people find appropriate types of support to fulfil their assessed needs |
| • The range of services accessed are varied and may include Direct Payments, virtual budgets, personal care at home, housing support, supported accommodation, residential care |
| • Signposting and referrals to universal and targeted services |
| • Embrace the development of universal and targeted information, advice and interventions to help individuals retain their independence for as long as possible |
| • Register on the NEPO Portal (see ‘Get Involved’) and take advantage of supplier training events to understand how the council buys services |
| • Take part in provider events about specific commissions and opportunities to work together jointly to resolve specific commissioning issues |
| • Familiarise themselves with the service area pages of this MPS as relevant to their business |
| • Make changes to how they deliver services to help achieve current and future priorities for vulnerable children, young people and adults in County Durham |

Social value

The council are fully committed to the pursuit of the economic, social benefits and the environmental wellbeing of County Durham and have fully embraced the duties set out in the Public Services (Social Value) Act 2012. Indeed we have applied the duties wider than the legal requirements set out in the Act and also consider opportunities for social value via the specification, specific clauses or evaluation criteria for all commissioning and procurement opportunities including goods and works above a spend threshold of £50,000.

The council will continue to promote and embrace the requirements of the Public Services (Social Value) Act 2012 and although the Act offers no definition of what it means by “economic, social and environmental wellbeing”, these have long been recognised as the three ‘pillars’ of sustainable procurement. The Sustainable Commissioning and Procurement Policy sets out the council’s approach to achieving positive economic, social and environmental outcomes including maximising volunteering, apprenticeships and other means of supporting communities.
**Self-funders**

We anticipate that there may be an increase in the numbers of self-funders in the future and also an increase in self-funders who become known to the council as a result of the Care Act 2014. The council has a duty to support those people who choose to fund some or all of their care and support. We will continue to develop information and improve support and advice on the options available to self-funders, exploring whether brokerage services would be beneficial in County Durham. The council will extend their information services to provide the opportunity for interested parties to both search for and purchase services online through an eMarketplace.

**Voluntary and Community Sector (VCS)**

In the longer term it is expected that the council will seek to signpost an increased number of people to services in the community and an assessment will be made about the scope and ability of small and medium VCS providers to meet this requirement. The role of the VCS in combating social isolation is increasingly important and VCS providers across the county will be encouraged to work responsively in their local communities.

**Carer support**

The introduction of the Care Act 2014 will see an increase in the number of carers asking for support as carers now have a right to an assessment in their own right even if the cared for does not have eligible needs. The council will continue to offer support to adult carers based on the priorities identified in the Carer’s Strategy: Second National Action Plan 2014/16:

(i) Identification and recognition

(ii) Realising and releasing potential

(iii) A life alongside caring

(iv) Supporting carers to stay healthy

Similarly the Children and Families Act 2014 has clarified the law relating to young carers’ ensuring the right to an assessment of needs for support will be extended to all young carers under the age of 18 regardless of who they care for, what type of care they provide or how often they provide it.
6. Working with Durham County Council

**Corporate procurement**
The council’s Corporate Procurement Service provides a range of opportunities and support to external organisations who are interested in working with the council:

- **Supplier training** - covering the NEPO portal, public procurement law and how to complete a Pre-Qualification Questionnaire and sustainable procurement. Anyone from your organisation can benefit from these free sessions which are advertised on the NEPO portal.

- **Market Engagement Days** - run for large procurements when needed, providing information on the procurement, how the process will run and tips for completing the Pre-Qualification Questionnaire.

- **Attending Provider Forums** - for information on how to engage with the Council’s procurement processes targeted at specific groups of organisations.

**Children and Adults Services Commissioning Service**
The CAS Commissioning Service also engages with the market through:

- **Market Consultation Events or Workshops** - enabling the market to feed into design of a new service or the redesign of an existing one.

- **Market Consultation through the NEPO portal** - enables the council to understand the market’s ‘appetite’ for a potential commission and undertake research about potential costs, how much we can buy for the funding we have available and service model options.

- **Market Position Statement Events** - to shape the MPS, to work jointly together to identify solutions to priorities and help monitor progress in achieving priorities for children and adults in County Durham.

For information on up and coming supplier training, market engagement days or to book a place on a course, contact Corporate Procurement on corporate.procurement@durham.gov.uk or telephone 03000 265 428
The council commissions a range of social care services for children and young people, but this MPS seeks to highlight those services that are subject to a strategic review and/or tendering during 2015/16.

**Residential schools**
The council currently has a number of children and young people placed within the independent sector provision for day education and residential placements. The 12 local authorities across the North East and Clinical Commissioning Group partners are joining together to form the NE12+ consortium. This consortium is looking at better ways to commission placements in Department for Education registered, non-maintained and independent special schools and colleges; residential and/or day placements for children and young people 0–25 years. Our aim is to work with providers in a collaborative approach to establish new commissioning arrangements from September 2015. Ultimately the NE12+ group will be seeking to achieve the best outcomes for children and young people.

**Residential care**
The council has a LAC Commissioning Strategy in place which supports the reduction of young people moving into residential care. There are plans in place to remove 8 beds from the overall internal residential services. The council will be looking to create 6-8 teenage fostering placements with wrap around support for young people who would typically move into residential care. A period of service review is ongoing during which time we plan to undertake soft market testing for a 4 bed residential provision and consider options for the future delivery of residential services. Soft market testing will take place during quarter 4 of 2014/15.

**One Point (Early Help) Service**
One Point provides early help services to children, young people and their families across 10 hubs within County Durham. The service works with families, adopting a ‘Think Family Approach’. This approach encourages staff to work with the whole family when carrying out work with children, their parents/carers and wider family as this is more likely to result in positive change.

One Point is also reviewing the services that it delivers and will be identifying future commissioning intentions. This will result in a period of soft market testing in 2015/16 and the commissioning of a range of services. This approach will ensure a coordinated and consistent commissioning framework for One Point.
**Short Breaks for disabled children**

Since April 2011, there has been a legal duty to provide short breaks for disabled children, young people and their families. The aim of short break services is to:

- Provide an opportunity for disabled children and young people to have fun
- Gain independence
- Learn and develop while families take a much needed break from their caring role

The council has developed a menu of short break services. Some of these have eligibility criteria and thresholds and some of these do not:

<table>
<thead>
<tr>
<th>Level</th>
<th>Description</th>
<th>Criteria for access</th>
<th>Areas of Short breaks currently commissioned</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specialist</td>
<td>Breaks for children and young people with severe disabilities and/or complex needs.</td>
<td>Statutory social care assessment required</td>
<td>Direct Payments to directly commission short breaks, outreach day support, overnight breaks in residential settings, activity residential breaks, welfare benefits advice, specialist hospice care.</td>
</tr>
<tr>
<td>Targeted</td>
<td>Aimed at specific groups of disabled children and young people and their families who may require additional support to access short breaks.</td>
<td>Young people/families must meet the criteria set by the service in order to access the short break.</td>
<td>After school clubs within special schools, school holidays clubs within special schools, county-wide carers support, activity based short breaks for children and young people open to the Sensory Support Service.</td>
</tr>
<tr>
<td>Universal</td>
<td>Open to all children and young people with a wide range of disabilities. Creates the same opportunities for disabled children to access universal activities/services as other children and young people.</td>
<td>No eligibility criteria – open to all disabled children and their families. No assessment required.</td>
<td>Activities and trips for all of the family, youth clubs and community groups, out of school activities including sporting activities, arts and drama, holiday clubs and play schemes.</td>
</tr>
</tbody>
</table>
Day short breaks are currently delivered through access to Direct Payments and/or via two commissioned services, community outreach support/group short breaks and domiciliary care. Overnight short breaks are currently provided through access to Direct Payments and/or commissioned services including within a residential setting, domiciliary care within the family home, foster care and hospice care.

A strategic review of specialist short breaks was carried out in consultation with parents/carers and children and young people in October 2013. The review made a number of recommendations, which included those linked to Specialist Short Breaks provided by the independent sector providers including:

• Stimulate the market for overnight short break provision and ensure transparency of fees

• Explore the market to ensure we provide a suitable menu of day short break services which offer increased choice and value for money

• Work with parents and carers to improve choice of provision and ensure that the key themes that they identified eg. consistency, choice and promoting independence are reflected in future commissioning of short break services

Direct Payments review
Direct Payments provide disabled children /young people and their parents with the choice and flexibility to independently purchase support to meet their social care needs. Currently there are 139 disabled children and young people receiving Direct Payments and 115 accessing support from a commissioned service at a significantly higher cost. Direct Payments are a cost-effective method of providing support and since 2010 the number of Direct Payment packages has reduced by 17% until recently when there has been a slight increase.

The Direct Payments review seeks to:

• Promote the use of Direct Payments, providing information, advice and guidance to both staff and service users

• Propose a new financial Direct Payments model, benchmarking against regional local authorities, to provide a consistent approach across both Children and Adults Services

• Provide robust and effective audits systems and processes to ensure monies are used appropriately and meet the needs identified with a disabled child/young person’s care plan working together with children/young people and their families and with staff and teams across Children and Adults Services will ensure that a transparent and consistent approach is provided to the processes and funding of Direct Payments. Any increase in Direct Payments is likely to increase the demand for personal assistants in the external market.

Supervised contact
The council has a statutory obligation under Section 34 of the Children’s Act 1989 to promote contact between children and their parents and relevant others. The supervised contact function is currently delivered internally by the Supervised Contact team (63%) and the remaining contacts undertaken by Social Work Assistants (across locality teams (37%). The review seeks to identify potential savings against the Supervised Contact service for 2015/16 and following soft market testing and an options appraisal, we will have:

• A clear understanding of function, process, quality and performance of the delivery of supervised contact

• Collated information and feedback from both internal/external service users

• Benchmarked comparisons with other regional Local Authorities including best practice and models

• A needs analysis - identifying capacity to meet demand, skills to carry out functions etc.

• Identified risks/issues associated with not providing this service

• Appropriate recommendations
8. Messages for providers of care and support to adults

The council commissions a range of social care services for adults, but this MPS seeks to highlight those services that are subject to a strategic review and/or tendering during 2015/16.

The work of DCC Commissioning in relation to adult care and support services will focus on a number of key areas outlined below. This work will be carried out in partnership with other agencies including North of England Commissioning Support (NECS), the Clinical Commissioning Groups and Public Health. Housing providers, encompassing the statutory housing provider, registered social landlords and private landlords, will also play a significant role. Such partnerships and a more integrated approach to service development and service delivery reflect the requirements of the new statutory framework provided by the Care Act 2014.

Prevention
We will be working to put into place a wider range of preventative services, ie those which prevent, reduce or delay the need for statutory care and support services. This will be achieved mainly through remodelling and realignment of current services, though there may be some tendering opportunities in 2015/16.

Reablement/Recovery
During 2015 there will be a strategic review of the ISIS Pathfinder Project including beds, sitting service and single point of access, to determine the future model and procurements. This will also include a review of the current Reablement Service mixed provision model. We will ‘Learn the Lessons’ from the Recovery College project, mainstream and extend the approach, and introduce a Recovery framework in all of our contracted mental health services.

Accommodation
We will carry out a strategic review of all accommodation options in 2015/16 including a review of Extra Care requirements, in partnership with DCC housing and Registered Social Landlord (RSL) partners, with a particular focus on dementia care needs for the future. Based on the outcomes of the review we will develop an accommodation ‘framework’ for future procurement of accommodation based services.

Maximising independence, community involvement and reducing social isolation
Continuing to offer and support individualised options via Direct Payments, individual and virtual budget, we will work with health to combine Personal Health and Personal Care budget options. The emphasis will be on individualised and flexible services and we will look to increase opportunities in the community, reducing the reliance on statutory social care services. Through increased partnership working with the Public Health Wellbeing for Life and Social Prescribing Services and greater emphasis on targeted, short-term interventions we will encourage the building of links between providers to create options and “Pathways” for people to get on with their own lives.

Information/advice/signposting
Key to these approaches is the provision of improved information and advice for service users and the general public. This will be facilitated through a new and improved Durham County Council website/eMarketplace. In future, the principal way for the council to share public information relating to social care and wellbeing services in County Durham will be through a dedicated website.
This website, called Locate, will enable everyone, service users, carers and providers to search for relevant service in a defined area, and identify services that are of interest, improving on and replacing the current Durham Information Guide (DIG).

In the future a key extra facility on Locate, will be the ability to order and pay for goods and services directly with suppliers, through a secure electronic purchasing system (eMarketplace). The Locate website will be live from Spring 2015.

**Responding to the Winterbourne View /Transforming Care agenda**

We are currently working with Health colleagues in NHS England, NECS and the CCGs to identify how services for people with complex and challenging needs can be provided in the community in ways which prevents or delays hospital admission or readmission. For some people this will require the development of new, integrated services involving health and social care input, as the needs of some people go well beyond that which a social care provider can meet on their own. Following on from the Winterbourne View Enquiry, Care and Treatment Reviews have been carried out for around 35 people currently in hospital, secure settings or assessment and treatment units. The information from those reviews will inform future tendering and procurement activity.

A significant number of the individuals have learning disability, challenging behaviour, autism or forensic needs so a number of specialist providers will be required in 2015/16.

Alongside those service developments and key to their success will be the shift of resources from within hospital to community settings, in order to strengthen support services in the local community.
The council commissions a range of Public Health services, but this MPS seeks to highlight those services that are subject to a strategic review and/or tendering during 2015/16.

The target population for the service is anyone aged over 40 years, with no known cardiovascular disease and who has not had a Health Check in the previous 5 years. In 2015/16 the intention is to encourage all GP practices to transfer to the Check4Life programme.

Stop Smoking Service
In County Durham, the Stop Smoking Service includes universal service delivery and provision for key target groups. It is also aligned to the 30% most deprived geographical areas, which warrant prioritised health improvement intervention. Although services have been experiencing a change in demand, particularly over the last three years and as a result nationally, regionally and locally there has been a reduction in the number of people accessing stop smoking services. There is a need to maintain a quality assurance stop smoking service that is responsive and adaptable to support today’s tobacco users to quit.

Following review, market testing will be undertaken in order to agree the service design and provision required in 2016/17, based on local need and the latest tobacco control/smoking cessation guidance, policies and review protocols.

Health checks
Health checks are a mandated Public Health service and the aims of the service are to help prevent heart disease, stroke, diabetes, kidney disease and certain types of dementia. Everyone between the ages of 40 and 74, who has not already been diagnosed with one of these conditions or have certain risk factors, will be invited (once every five years) to have a check to assess their risk of heart disease, stroke, kidney disease and diabetes and will be given support and advice to help them reduce or manage that risk.

In County Durham we operate a Check4Life programme in a range of community settings, which provides both a full health check for those who are eligible and a modified mini health ‘MOT’ for those who are outside of the age range for a full health check. In County Durham, every GP practice also provides an NHS Health Check. We are currently in the process of transferring GP practices to the Check4Life programme.
School nursing

The school nursing service is available to all school aged children (4 to 19 years) within County Durham in a range of settings from pupil referral units, through to academies, schools and nurseries. The school nursing team currently deliver a wide range of emotional health and wellbeing support for children and young people, key activities include:

- Health assessments for children in reception/year 1;
- National Child Measurement Programme;
- Emotional health, psychological wellbeing and mental health promotion;
- Hearing and vision screening;
- Transition reviews for children/young people at age 10-12 years to identify vulnerability and support required
- Undertaking regular reviews of immunisation status, and providing immunisations when appropriate against diseases such as a tuberculosis, hepatitis B, seasonal influenza vaccinations, tetanus, diphtheria, polio, meningitis C booster.
- Offering girls aged 12–13 the Human papilloma virus (HPV) vaccine which protects against cervical cancer.

The school nursing service within County Durham also provides for the Family Initiative Supporting Children's Health (FISCH) Service. This service is a tier 2 lifestyle weight management programme that focuses on reducing excess weight in children and is aimed at stabilising weight and preventing young people from requiring specialist care and/or support after specialist intervention has been required. The service is delivered in primary schools for one term for approximately 10 weeks, within curriculum time, and includes both physical activity and theory-based sessions in relation to healthy lifestyles.

The school nursing service was reviewed prior to the transfer of Public Health responsibilities to the council. However, since that time there has been a range of changes to the pathways of care for children and young people.

We therefore wish to undertake a strategic review of the purpose and focus of the service and undertake a re-commission in 2015/16 to ensure that we have the best possible school nursing services for children and young people in County Durham.

A key focus of our Public Health work is to ensure that there is early intervention and prevention on health and wellbeing issues, as well as high levels of integration between services providing support especially for those working for children and young people. These aims will underpin the review of the school nursing service.

Teenage pregnancy prevention

Teenage pregnancy is associated with poverty, social isolation, low education, training and employment levels, poor housing, poor mental and physical health, repeat pregnancies and higher rates of abortion.

According to the Office of National Statistics, the County Durham under 18 conception rate is lower than the North East average and higher than the national average. There is countywide variation at district and ward level, with higher rates of under 18 conceptions in the most deprived areas.

National evidence shows that the two most important interventions to reduce teenage pregnancy are:

- Comprehensive information advice and support from parents, schools and other professionals and;
- Accessible, young people-friendly sexual and reproductive health services.

Universal prevention work is needed as well as targeted work with young people who are at higher risk of teenage pregnancy.

In order to support the reduction of the under 18 conception rate in County Durham, we intend to market test and procure a new service commencing in 2015/16, which supports improvements in Sex and Relationship Education (SRE) in secondary schools and access to available support across County Durham. This will prioritise schools in areas where there are higher teenage pregnancy rates. Interventions will be delivered in line with evidence, best practice and national SRE guidance.
10. Sources of information

National information

• Care Act 2014
• Care Quality Commission
• Department of Health
• No Health without Mental Health
• Office for National Statistics (ONS)
• Projecting Adult Needs and Service Information (PANSI)
• Projecting Older People Population Information (POPPI)
• Recognised, Valued and Supported: next steps for the carers strategy
• Social Care Institute for Excellence (SCIE)
• Working with troubled families: a guide to evidence and good practice

Local information

• Children and Adults Services Service Plan 2014/17
• Children, Young People & Families Plan
• Corporate Strategy for Commissioning and Procurement
• Council Plan 2014/17
• County Durham Alcohol Harm Reduction Strategy 2012/15
• County Durham COMPACT
• County Durham Joint Strategic Needs Assessment (JSNA)
• County Durham Joint Health and Wellbeing Strategy
• Early Help Strategy
• Looked after Children Reduction Strategy
• Safe Durham Partnership Plan
• Stronger Families Webpage (www.durham.gov.uk/strongerfamilies)
## 11. Planned procurements and reviews for 2015/16

Although the following procurements are planned to start during 2015/16, the council reserves the right not to tender for such services or change the tender start date if required.

<table>
<thead>
<tr>
<th>Service</th>
<th>Anticipated Procurement Initiation Date</th>
<th>Anticipated Contract Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alternative Provision for Schools To enable Special Schools to purchase work-based placements and alternative education packages through a framework agreement.</td>
<td>May 2015</td>
<td>1 September 2015</td>
</tr>
<tr>
<td>One Point Commissioning Early help services for families across County Durham.</td>
<td>Various commissioning throughout 2015/16</td>
<td></td>
</tr>
<tr>
<td>Independent Special Schools &amp; Colleges 0-25 A framework approach enabling the local authority to purchase specialist placements with independent special schools and colleges.</td>
<td>August 2015</td>
<td>December 2015</td>
</tr>
<tr>
<td>Supervised contact Providing supervised contact for children and young people.</td>
<td>April 2015 (Soft market testing)</td>
<td>To be informed by soft market testing</td>
</tr>
<tr>
<td>Outreach service (May link with day care framework)</td>
<td>April 2015</td>
<td>1 July 2015</td>
</tr>
</tbody>
</table>

The following services are subject to a review during 2015/16:

- HIS Stop Smoking – supporting adults to stop smoking by providing targeted interventions.
- School Nursing – the provision of school nursing, Hearing and Vision Screening, School Child Measurement Programme and Family Initiative supporting children’s health.
- Children’s participation service - The provision of a range of services which encourages the participation of Durham’s Looked After Children.
- VCS Consortia Framework - supports children and adults to engage with the voluntary sector in County Durham.
- Volunteer Drivers - provision of transport services to looked-after children.
- Learning Disability Framework - care and support for people with learning disabilities.
- Mental Health Services - care and accommodation for people with mental health needs.
### Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>CAS</td>
<td>Children and Adults Services</td>
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<tr>
<td>CCG</td>
<td>Clinical Commissioning Group</td>
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<td>CDYOS</td>
<td>County Durham Youth Offending Service</td>
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<tr>
<td>CQC</td>
<td>Care Quality Commission</td>
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<tr>
<td>DCC</td>
<td>Durham County Council</td>
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<td>DIG</td>
<td>Durham Information Guide</td>
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<td>FISCH</td>
<td>Family Initiative Supporting Children's Health</td>
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<td>GP</td>
<td>General Practitioners</td>
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<td>HIS</td>
<td>Health Improvement Service</td>
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<td>HPV</td>
<td>Human papilloma virus</td>
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<td>ISIS</td>
<td>Integrated Short-Term Intervention Service</td>
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<td>JSNA</td>
<td>Joint Strategic Needs Assessment</td>
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<td>LAC</td>
<td>Looked After Children</td>
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<tr>
<td>MPS</td>
<td>Market Position Statement</td>
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<tr>
<td>NECS</td>
<td>North of England Commissioning Support</td>
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<tr>
<td>NEPO</td>
<td>North East Procurement Organisation</td>
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<tr>
<td>NHS</td>
<td>National Health Service</td>
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<tr>
<td>PANSI</td>
<td>Projecting Adult Needs and Service Information</td>
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<tr>
<td>PCT</td>
<td>Primary Care Trust</td>
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<tr>
<td>POPPI</td>
<td>Projecting Older People Population Information</td>
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<tr>
<td>RSL</td>
<td>Registered Social Landlord</td>
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<tr>
<td>SRE</td>
<td>Sex and Relationship Education</td>
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<tr>
<td>VCS</td>
<td>Voluntary and Community Sector</td>
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<tr>
<td>VONNE</td>
<td>Voluntary Organisations’ Network North East</td>
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</tbody>
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Children and Adults Services
Market Position Statement
2015/17

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