

Market Position Statement for Older People 2015

Help us develop the right care and support
services for adults living in Hertfordshire



1. The market that we wish to facilitate

We want to engage with new and existing health, housing, care and support providers to deliver high quality services for older people in Hertfordshire that:

Offer services that are	Support People to	Meeting the needs
<ul style="list-style-type: none">• High quality• Enabling• Joined Up• Personalised• Integrated• Safe• Promoting healthy lifestyle	<ul style="list-style-type: none">• Stay emotionally well and happy• Have choice and control on their care• Enjoy good quality of life• Access information from other services	<ul style="list-style-type: none">• Of people with dementia• Reducing the need for formal statutory services• Provide services that cater for cultural and religious differences

2. Future commissioning intentions & development opportunities

Social care and health commissioners wish to engage with a variety of providers and partners to:

2.1 Develop services to support older people

1. Reduce residential care placements and increase the availability of Flexicare
2. Commission a new Support at Home lead provider model
3. Increase the availability of brokerage services
4. Increase the availability of short break accommodation
5. Join up preventative services to relieve pressure on acute hospital services

6. To explore the development of support services in reducing loneliness and social isolation for older people
7. Develop processes to measure care home quality and share best practice
8. Review and significantly improve older peoples day Services

2.2 Promoting innovation and better outcomes

1. Increase use of assistive technology to complement care and support
2. Increase older persons confidence to use computer/ tablet technology and the internet
3. Significantly improve service design for equipment services
4. Enhance the voluntary sector role to support health and wellbeing of older people
5. Increase the availability of advice and information to those in their own homes

We will work to Think Local Act Personal Principles¹ which ensure people have greater independence and choice enabling enhanced wellbeing within stronger and more resilient communities.

We are seeking innovation from the market in how we design and deliver these services. We also recognise, in the spirit of localism, that services may look different across parts of Hertfordshire.

¹ http://www.thinklocalactpersonal.org.uk/_library/Resources/Personalisation/TLAP/MakingItReal.pdf

We welcome a dialogue, through this Market Position Statement (MPS) and the associated engagement with all our stakeholders, please contact us on:

olderpeoplemps@hertfordshire.gov.uk

3. Older people population

It is projected that the number of people aged 65 and over living in Hertfordshire will increase by around 8% in the next five years from 190,800 to 205,600. In the same period the number of people aged 85 and over will increase by around 17% from 27,700 to 32,500. This increasing growth in the numbers of older people will place greater demands on health and care services in all areas of Hertfordshire.

3.1 Older people's ethnicity

The 2011 census indicated that less than 4% of older people in Hertfordshire over the age of 65 were from a non-white ethnic group. This is much lower than for adults aged 18-64 where 12.8% identified as being from a non-white ethnic group. So we can expect that as the population ages overall the population aged 65 and over will become increasingly more ethnically diverse. This will challenge us to provide increasingly more culturally sensitive services.

3.2 Older people's health

In 2014 in Hertfordshire for the population aged over 65 it was predicted:

- 45% would have a limiting long term illness
- 27% would have a fall
- 2% would have a fall resulting in a hospital admission
- 26% would be considered obese
- 12% would be diagnosed with diabetes
- 7% would have dementia

So we can expect that more people will live longer with long-term health problems and this will place considerable pressure on existing health and social care services.

For further details on the population, wellbeing and health of older people please refer to Hertfordshire County Council's Joint Strategic Needs Assessment, which outlines what we know about the differing health and care needs of the people of Hertfordshire, link: <http://jsna.hertsllis.org/>

4. Current position and future direction

This section of the MPS provides a description of a range of preventative type services, low level interventions and higher levels of care that are supported by Hertfordshire County Council (HCC) and Health and voluntary sector partners It highlights where we believe there are gaps in service provision and what we might do to address these.

4.1 Future development of technology (digital inclusion)

HCC is committed to supporting more people to get online. With more services going digital, it is important that people who are 'offline' or who lack basic online skills or confidence are helped so they can enjoy the benefits the internet can bring.

A pilot project is underway funded by the Herts Welfare Assistance Scheme (HWAS) under-spend. Activity is focused on helping vulnerable people access the information and services they need to stay independent and improve their wellbeing. The success of the pilot is currently being evaluated.

4.2 Future development of assistive technology

As part of the collaborative agreement between HCC and North Herts District Council for the provision of a countywide community alarm service, arrangements have been put in place to include some further preventative Telecare provision. HCC wish to further develop this service and the type of devices offered as part of the package. This will be continuously reviewed to ensure that it offers the most effective solutions to meet service user needs.

4.3 Future development of the voluntary sector

The Community Wellbeing Team (CWB) commission preventative and wellbeing services on behalf of HCC and NHS Hertfordshire and has approximately 110 contracts for around 200 different projects. The value of those contracts is £7.1m.

The CWB has been working with the Clinical Commissioning Groups (CCG's) and Public Health to further develop a joint approach and review our voluntary sectors spend and commissioning arrangements.

The aim is to:

- Ensure that they better meet the changing needs of our local communities
- That the role of the voluntary sector is seen as integral to helping local people stay well and independent
- Reduce health inequalities

During this review process providers will be informed of the future commissioning intentions and propose timelines for commissioning future services with the voluntary sector.

4.4 Future development of Herts Healthy Homes

The Herts Healthy Homes² project is a year round service funded jointly by HCC, our CCG's partners and public health. The service coordinates the delivery of key services to support older people at home, for example identifying falls, offering early interventions that will enhance or maintain resident's health and wellbeing.

For 2014/15 we have commissioned Groundwork's to carry out 860 visits and have agreed with Herts Community Meals to deliver 400 meals to support vulnerable people. £50,000 has been allocated for grant funding to individuals in need. £500K of funding has been identified that will be used to further develop the Herts Healthy Homes project and to increase its capacity to meet the needs of older people. Further information about this funding will be provided in due course.

4.5 Equipment

In 2012/13 76,000 items were delivered to 24,000 service users at a value of £5.5M.

The service now delivers over 200 beds per month to prevent hospital admission and support hospital discharge.

² Herts Healthy Homes: <http://www.hertsdirect.org/your-community/ihertshelp/healthhome/>

There are several key themes that are influencing commissioning activities and future commissioning intentions:

- Focus on prevention, independence and enablement – we can anticipate increased volumes but also innovation in equipment and modes of delivery.
- Responding to changing care pathways - equipment services will need to respond on the same day or within 24 hours. To achieve this there will need to be an overhaul of equipment referral and access arrangements.
- Countrywide portability of equipment - in response to the Care Act people will want and be able to move location with their equipment and thus equipment services will need to adapt to manage the loss and gain of equipment and possible servicing requirements
- Provide acute care in the community - equipment service delivering a wider range of equipment designed to meet greater complexity of need.

4.6 Older persons Housing Related Support – alarms and support

HCC has ambitious plans to support older people in commissioning a new model that is more aligned to the council's Ageing Well strategy³, as contracts for housing related support will cease by March 2015. The key elements for the new commissioning model are:

³ Ageing Well Strategy - <http://www.hertsdirect.org/docs/pdf/a/aws.pdf>

- **Development of a single countywide community alarm service**
- **A voluntary sector capacity building programme within Herts Healthy Homes**
- **Support the conversion of existing sheltered housing to Flexicare**
- **Develop a single social enterprise vehicle to deliver a range of support**

Other initiatives that are available:

- Herts Help⁴ which is the gateway for all Hertfordshire residents to access information and advice about all services available across Hertfordshire. Further information is available on Herts Direct link.
- The Community Navigator Scheme⁵ (in Herts Valleys area) aims to support both the general public and statutory services by ensuring that the community and voluntary sector are fully integrated into the development local blueprint for services. Further information is available on Herts Direct link.

4.7 Support at home (domiciliary care)

Since November 2013 Health and Community Services have been commissioning a number of more targeted support at home services to support rapid discharge from hospitals.

These include the Home from Hospital services that support discharges from Watford, Lister and Princess Alexander hospitals. Hertfordshire has developed a new lead provider

⁴ Herts Help: <http://www.hertsdirect.org/your-community/ihertshelp/>

⁵ Community Navigators Scheme: <http://www.hertsdirect.org/communitynavscheme>

“Support at Home” model that will support the delivery of local personalised care and so a move away from “Time and Task” focussed homecare calls. There are twelve Lead Providers in Hertfordshire, one for each district and two additional Lead providers to provide Support at Home in rural areas. As well as delivering community based homecare to service users, the Lead provider will work closely with local voluntary and community groups to ensure a wider range of support is available close to home and to encourage innovation by working more closely with community based services.

4.8 The Hertfordshire Care Standard

From April 2015 all domiciliary agencies commissioned by Health and Community Services will need to meet the Hertfordshire Care standard – this is a new Standard developed by commissioners, carers and service users to ensure that domiciliary care agencies are paying a sustainable wage, pay travel and training time, and that service users and their families are treated with kindness, dignity and respect.

The standards include:

- **A sustainable wage to attract staff who can deliver a quality service**
- **Payment for travel and training time**
- **A choice in the type of work contract**
- **An hourly rate that supports good quality mandatory training**
- **Provides career progression opportunities**
- **A recruitment process that establishes a compassionate and kind work force**

The standards will also include finance and legal checks, insurance checks, questions around care planning and personalisation

4.9 Accreditation process for spot providers

Health and Community Services are committed to driving up quality across all domiciliary care provision and will continue to work closely with the Hertfordshire Care providers Association (HCPA) and providers to roll out the Hertfordshire Care Standard throughout 2015/16. This will include launching an Accreditation process for spot providers in March 2015 that will ensure that the quality of spot provision is the same level that's being delivered by the lead provider for each district. The market will continue to be shared across the lead provider (guaranteed volume of hours each year according to local demand and pressures) and the "spot" market where no guaranteed hours are agreed.

4.10 Future of day-care services

HCC currently commission day services for older people, across Hertfordshire, the table below provides a breakdown.

Provider	Total
In house services	£1,566,939.30
Voluntary sector as spot contract	£74,653.00
Providers as block contracts	£1,910,748.00
Total	£3,960,256

In line with the Ageing Well Strategy 2015-2019, day services for older people across the county are being reviewed during 2015. This review will establish whether a suitable range of support and activities is available, so that older people, with their carers and families, are well supported to lead independent, fulfilling lives. For example one key ambition is to pilot "living well centres" in some localities throughout 2015, - these centres will be integrated with health and voluntary sector services and will work together to support older people to age well with positive health outcomes.

5. Residential and nursing care home spend

Health and Community Services plan⁶ aims to reduce the proportion of older people we support in residential care. However due to population growth we will still see increases in the number of residential beds needed in Hertfordshire.

Nos. of care homes registered for older people in Hertfordshire (June 2014)		
By CCG area	East & North Herts CCG area	Herts Valleys CCG area
	63	82
Total	145	

⁶ Health and Community Services plans http://www.hertsdirect.org/docs/pdf/h/HCS_plan_2012-15.pdf

5.1 Residential care home spend

By Category	OPPD Nursing	OPPD Residential	Total
Nos. of care homes registered for older people in Hertfordshire (June 2014)	52	93	145
Nos. of care beds registered for older people in Hertfordshire (June 2014)	3228	4114	7342
HCS funded clients (approx. 55%)	1775	2263	4038
Expenditure 2012/13	£25m	£75m	£100m

5.2 Future of nursing and residential services

More nursing beds are needed in the future and providers should consider providing nursing rather than residential care, or being dual registered. CCG's have identified a particular need for nursing care provision close to acute hospitals.

There is an expectation that care homes in the future will need to be much more flexible and more integrated with the local community and that providers should also look at opportunities to provide domiciliary care to surrounding neighbourhoods.

The Complex Care Premium introduces a weekly enhanced rate – or premium – to support care homes in the care of residents with complex conditions. The Complex Care Premium is supported by the Better Care Fund⁷ and will be open in the first instance to 10 residential and 10 nursing homes across the county. Qualifying criteria for care homes includes:

- Having a current contract with HCC
- Being CQC compliant in all 5 domains
- Holding, or agreeing to hold, 'membership plus' with Hertfordshire Care Providers Association (HCPA)

6. Future of care home short break services

HCC want to commission nursing respite hubs to provide centres of excellence, allowing carers to secure future bookings and enabling more flexible options such as shorter stays. The purpose of these services is to reduce the pressures for our carers, allowing for service users to access these services to stay somewhere for the short term.

7. Future of flexicare

HCC is committed to significantly increase the level of Flexicare provision across the county over the next five years in order to reduce the take up of more costly and less desirable residential care placements. Our target is an increase of 134% by 2020. We will work with providers to identify new build schemes and

⁷ Better Care Fund: <http://www.hertsdirect.org/bettercarefund>

support bids for capital funding. It will also involve working with providers to identify existing sheltered housing schemes that are suitable for conversion to Flexicare.

8. Future of self-directed support

The Care and Support Act 2014 has presented a unique opportunity to promote direct payments under the principle of well-being, supporting creative person centred support planning and changing the way we think about care and support. Hertfordshire are confident that as we evolve, direct payments and the opportunity to choose how your care and support is delivered will become the natural solution.

9. Future of brokerage services

HCC want to see an increase in the brokerage service in partnership with our districts and other providers in order to give people real choice to meet people's diverse needs from a good range of housing options. We know there is a wide range of private and voluntary organisations providing support to people across Hertfordshire in new innovative ways. By strengthening the relationship with our partners on the types of private and often niche service provided, we aim to develop an innovative and self-sustainable market, accessible through the direct payments scheme.

10. Future of dementia services

Dementia is a priority in Hertfordshire's Health and Wellbeing Strategy for 2013-16.

In order to meet future needs health and social care services will need to:

- Identify and diagnose people with dementia early, providing the best advice and information to support them and their families.
- Promote design for dementia principles for new and existing care home and supported housing provision⁸.
- Ensure that every interaction with the health and social care workforce is respectful of the person, their family and the issues they face.
- Change the services that are currently offered so that each one can be personalised for every individual's changing needs.
- Ensure all services are dementia friendly this includes providing good housing, transport and facilities

11. Future of transport services

We currently spend just over 3 million per annum on day services transport which includes the cost of maintaining the fleet and cost of taxis, other contracted transport and transport to voluntary day services and those run by Quantum and Runwood.

⁸ Kings Fund assessment toolkit for developing supportive design for people with Dementia
<http://www.kingsfund.org.uk/projects/enhancing-healing-environment/ehe-design-dementia#tool>

HCC's recent consultation on reducing bus services will have an impact on older people who are dependent on public transport to access services, particularly in areas where older people live alone or where transport links are poor and therefore people will be at risk of being isolated from their communities. We will review current transport commissioning arrangements in order to provide more flexible transport options and we will consider what can be done to further develop and coordinate voluntary sector transport services to create greater diversity in the market.

12. End of life care

Life expectancy in Hertfordshire is improving and is higher than the England average, but varies between men and women and between smaller areas according to levels of multiple deprivation.

We know from feedback from services users, families and professionals, that given the choice, a large majority of people would choose their end of life care and support differently and where possible would choose to die at home. We want to use this information to develop our strategy to ensure people are supported to die well.

For further details on End of Life Care and the principal causes of death in Hertfordshire, please refer to Hertfordshire County Council's Joint Strategic Needs Assessment, link:

<http://jsna.hertslis.org/top/lifstaggroup/>

13. Health and social care integration

Health and social care integration means health and social care organisations working together to deliver quality services that better meet the needs of the communities they serve. The Government has said that the improved integration of health and social care must be at the heart of the new health system. In Hertfordshire, closer joint working with clinical Commissioning Groups (CCG), the voluntary sector and community groups will mean:

- Supporting people to live independently at home to reduce unnecessary hospital or social care admissions.
- Improvement in a person's experience of care.
- Better coordination of services that are arranged to meet the needs of the person, their families and carers.
- Preventing the development of problems to keep people healthy, happy and independent.
- Implementing services that are more efficient, accessible and better value-for-money.

The market position statement will be updated for April 2016, both in response to your feedback and as our information and commissioning intentions change.

For further information regarding HCC's market position statements on other client groups please refer to:

www.hertsdirect.org/hertsmpe



If you would like to receive this information in a larger font size or would like any help in understanding the information in this document, please contact:

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