

# Market Position Statement

## Older Peoples' Social Care

Market Position Statement - 7 March 2014

- Make Stoke-on-Trent the place to bring business
- Support and develop existing business
- Work with people to promote independence and healthy lives
- Make Stoke-on-Trent a great city to live in

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# Foreword

Stoke-on-Trent City Council is pleased to present its first Market Position Statement (MPS) for Older People which sets out our vision for care and support services and our commissioning intentions over the next two years. Primarily aimed at providers, it represents the start of a dialogue between the council, people who use services, carers, providers and others, about the vision for the future of local social care markets.

Stoke-on-Trent City Council's ethos is to make Stoke-on-Trent a great working city whilst continuing to help the most vulnerable members of our society. Our Mandate for Change programme launched in 2011 is beginning to deliver improvements across the City. These include:

- Supporting people to regain confidence and independence by providing short term intensive reablement services
- Plans to provide additional Retirement Villages with Care Services (extra care) over the next 2-3 years
- Close working with health partners to transform services and to deliver more support in the community.

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

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

The financial challenges ahead are great. Significant financial savings have already been made over the last three years. A further £20m savings needs to be delivered during 2014 /15 and further savings expected for the future. Despite this we remain committed to delivering the principles of Mandate for Change and delivering our vision of a vibrant, healthy and caring city. We need to continue to

work effectively with providers to stimulate a more diverse, active market that is responsive to changing local need, one that promotes dignity and respect, protects vulnerable people and actively involves people, their families and carers in community, economic, and social life.

### **Stoke-on-Trent Pledge**

By April 2015 we will:

- Share our strategic direction and plans for the next two years with care providers.
- Understand people who fund their own care better.
- Continued to consult with care consumers to shape local services.
- Predict future demand for publicly funded social care including additional demand arising from legislative reform.
- Engage with the local care market to prepare for the changes introduced by the Care Act 2014.
- Work with NHS Stoke on Trent Clinical Commissioning Group to better integrate health and social care services, establish seven day working and develop a competent, skilled workforce across health and social care to effectively support people to live at home.
- Produce a clear statement of the City Council's intentions regarding wellbeing and prevention.

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

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

The MPS:

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

### **A Sense of Direction**

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

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

### **The Act seeks to:**

- Clarify and enhance the social care support to clients and carers (including people who fund their own care) with a strong emphasis placed on the promotion of wellbeing and on preventing, reducing and delaying the need for care
- Ensure a diverse, high quality and sustainable market for care and support services
- Organise available resources in a way that ensures better integration across health and social care provision
- Introduce funding reforms that cap individual care costs and allow for the deferral of payments for care and support

The Government's vision is:

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

Information about the Act can be found on the following Government site

[www.official-documents.gov.uk/document/cm86/8627/8627.pdf](http://www.official-documents.gov.uk/document/cm86/8627/8627.pdf)

The Better Care Fund (BCF) announced by government June 2013 brings together NHS and Local Government resources into a 'pooled fund'. The aim of the BCF is to:

- Drive forward integrated commissioning and delivery of NHS and social care services to better meet the needs of vulnerable people.
- Ensure that services (especially those associated with pressures on the acute sector, and urgent care) are planned 'end to end', and operate in an efficient, coordinated and coherent way.
- 'Protect' elements of the whole system (specifically social care) in the context of significant financial challenges.

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

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

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

## **Vision for Older People Services**

Stoke-on-Trent aims to be a vibrant, healthy and caring city which supports citizens to lead a fulfilling, independent and healthy life.

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

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

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

To achieve this, health and social care commissioners will:

- Place greater emphasis on prevention and early detection / intervention
- Simplify access to care
- Improve the coordination of care
- Place greater emphasis on reablement, rehabilitation and recovery
- Deliver integrated local care teams
- Work with providers to develop and deliver capable community services

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

## 'A great place to grow older'

It promotes active ageing through:

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

The City Council is working with a number of organisations and businesses to promote active ageing and achieve Age Friendly City status and with local people and communities to support co production and community development at a local level. Examples include small grants schemes and the development of community champions to achieve change at a local level.

Our vision for older people applies to all older people including those with organic mental health conditions such as dementia. In Stoke-on-Trent we have a dementia action alliance group to promote and develop a dementia friendly environment that make it possible for people with dementia and their carers to live better in their communities and to meet their needs and aspirations. The challenge is that all organisations including providers recognise their role in supporting and achieving this aim.

## **Carers**

The Care Act introduces significant reforms for carers. For the first time, carers will be recognised in law in the same way as those they care for and all carers will be entitled to an assessment of their own needs. This could result in commissioners needing to commission more carers assessment and support services.

Stoke-on-Trent City Council has recently developed a joint strategy with NHS Stoke-on-Trent Clinical Commissioning Group (CCG). Our aim is to support the health and wellbeing of carers. Our priorities to achieving this are:

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

## **The views of local people and providers**

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

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

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

- Face to face discussion
- Workshops
- Surveys
- Service specific reviews
- Engagement forums

## **What providers say about working with the City Council**

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

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

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

- Support for extended support over 7 days
- More support to help people in the community
- Volunteering opportunities should be expanded
- Support for people to stay in their own homes for as long as is possible
- People want to feel safe and secure
- More Retirement Villages with Care Services (extra care housing)
- Support for more joint working arrangements and a single point of contact
- Better information should be made available that is clear and in an easy to understand format
- Dedicated support worker / social worker to assess and arrange care
- Continuity of care when a person is in receipt of home care services
- More training for care staff
- Support to consider housing options at the earliest opportunity
- Respite and breaks for carers are important

## **Self-funders**

Many people who require care and support arrange and fund their own care.

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

Local authorities fully fund customers with assets totalling less than £14,250 and part-fund those with assets between £14,250 and £23,250 (figures correct as at 2014).

It is estimated that 24% of self-funders exhaust their resources and fall back onto Local Authority funded services at a cost of approximately £425m nationally.

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

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

### **A Vibrant, Healthy and Caring City.**

**Vibrant City:** A city where everyone will live, work and play in a successful, attractive environment which supports them to live healthy and fulfilling lives.

**Healthy City:** A successful city where children will enjoy the best start in life and everyone will live longer and healthier lives with equal access to health and care services should they need them.

**Caring City:** Everyone is supported to live independent lives with fair access to high quality, integrated health and social care services when needed.

## Our Commissioning Intentions over the next two years

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

### Older Peoples' Services

#### Introduction

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

The following key areas will influence the procurement and delivery of future Older People's services:

- Redesign the domiciliary care service to improve focus on meeting outcomes and personalisation.
- Increased Retirement Villages with Care Services (extra care) in the City.
- The recent Pricing Review of residential and nursing fees.
- Ensure that carers have support, advice and information to enable them to maintain a balance between their caring responsibilities and their life outside of caring whilst supporting the person they care for to achieve their own outcomes.
- Delivery of services collaboratively with Health within an overarching Locality Based model.
- Design and implement integrated reablement and intermediate care service in line with Better Care Fund Plan.
- Modernise and redesign dementia services.
- Commission a range of advocacy services, including Generic Advocacy, Independent Mental Health Advocacy, Independent Mental Capacity Act Advocates and NHS Complaints Advocacy Service.

Stoke-on-Trent City Council has faced year-on-year cuts from Central Government of approximately £20m per year for the past three years and a similar savings figure is required in the Financial Year 2014/15.

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

Although further savings are needed for the future, many of these will be achieved through pooling budgets across Health and Social Care to reduce duplication of spend. A key strategy in realising this will be from the implementation of the Better Care Fund (BCF). The pooled budget is expected to be approximately £47m.

This MPS will focus predominantly on Domiciliary Care services. Future versions of the document will focus on other service areas

## **Domiciliary Care**

Domiciliary care is crucial to achieving the City Council's aims under the Personalisation agenda and the service needs to develop further.

### **Current picture**

- The City Council has contracts with 13 organisations to provide domiciliary care within Stoke-on-Trent.
- Approximately 1,300 people receive domiciliary care through Stoke-on-Trent City Council's contracts
- Approximately 24,000 care visits take place every week.
- The current contract will end October 2016. A tendering exercise will commence in late 2015.
- The average hourly rate paid for domiciliary care is £13.20.
- This is above average for our comparator group, and is clearly indicative of Stoke-on-Trent's commitment to try to ensure that the care staff are fairly remunerated for the service that they provide.
- The annual gross spend on domiciliary care in Stoke-on-Trent is approximately £7.6m.

### **National/Local Factors**

The Adult and Neighbourhood Services Overview and Scrutiny Committee commenced a Task and Finish review of domiciliary care in Stoke-on-Trent during 2013 and this concluded in April 2014.

The report, including the recommendations, is available at the following address:

[www.moderngov.stoke.gov.uk/mgconvert2pdf.aspx?id=62891](http://www.moderngov.stoke.gov.uk/mgconvert2pdf.aspx?id=62891)

The following key messages were identified from the review and will influence the future service:

- The most important aspect for most people is that they have care from the same, good quality carers for the majority of care visits. High turnover of staff in contributes to dissatisfaction and is a barrier to Personalisation.
- There are high levels of satisfaction by users of the service.
- Providers feel that Stoke-on-Trent operates a greater level of partnership working than most Council's and believe this was a key factor to success in service delivery.

## **Financial and Demographic Factors**

The Joint Strategic Needs Assessment (JSNA) produced by Stoke-on-Trent can be accessed at the following website:

[www.webapps.stoke.gov.uk/JSNA/](http://www.webapps.stoke.gov.uk/JSNA/)

Domiciliary Care in Stoke-on-Trent has been growing steadily year on year to the current picture of approximately 1,370 people in receipt of domiciliary care and 12,000 care hours delivered per week. This is in contrast to the national trend that has seen a reduction in the number of people accessing care in the majority of localities throughout England.

### **Market Opportunity**

Hospital stays are deemed too long. There is growing demand for domiciliary care services to meet more complex needs to enable earlier discharge home from hospital. This requires a greater degree of contact time and increased staff skill sets.

This growth in demand is coming at a time of financial challenges from central Government funding cuts.

Joint funding of services between the City Council and Health are being explored to address the challenge and realise greater preventative benefits for the future.

## **Future Commissioning Intentions/Desirable Development of the Domiciliary Care Market**

The City Council's key priorities for future domiciliary care services are:

- Services to focus on the individual, their wishes and innovative ways of meeting each person's desired outcomes and to promote independence wherever possible.
- Strong partnership working between the private sector and the Local Authority
- High quality service delivery and reinvestment into services, especially into improved terms and conditions for staff to reduce staff turnover and professionalise the industry.
- Focus on service improvement; reablement, promotion of independence and a creative approach to ensuring efficient and effective services that are of excellent quality.
- Improved training and workforce development for care staff.
- Development of innovative new approaches to deliver outcome-focussed services at affordable prices.

The aspiration is for these developments to take place across the wider market and not just in those services commissioned by the City Council.

There are 37 providers registered to supply domiciliary care in the City. The domiciliary care framework contract currently covers 13 of these with a further 10 organisations contracted through other services (e.g. Group Supported Living and Day Opportunities). Therefore there are currently 14 organisations registered in the City to supply domiciliary care that are reliant purely on privately purchasing customers. The City Council will develop new ways of working with these organisations to encourage them to respond to and support the identified priorities.

## Residential and Nursing Home Care

### Current Picture

There are approximately 743 people living and receiving care within Residential and Nursing Homes in Stoke-on-Trent, exclusive of self-funders. On the basis of a recent Valuing Care Financial Manager survey it is estimated that there are approximately 487 self-funders in Stoke-on-Trent accessing residential and nursing services

There have been 436 new residential and nursing placements made in 2013/14 compared to 468 the previous year. The demand for Residential and Nursing services is remaining constant despite a greater strategic emphasis towards meeting customers' needs in the community.

There are currently 40 residential and nursing homes within the City, providing a total of 1656 beds. In recent years the City Council has reduced its own directly provided residential and nursing provision with only two homes now directly provided by the local authority. The vast majority of homes are owned and run by the Independent Sector

### National/Local Factors

The level of fees is fundamental to ensuring the balance between provision of quality services whilst at the same time maintaining affordability. Work has recently been undertaken to better understand the true costs of care provision to inform future decisions around a fair price for care.

### Financial and Demographic Pressures

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

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

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

## **Future Commissioning Intentions/Desirable Development of the Market**

Although there is a very clear focus on community based care, it is clear that this is not appropriate for all. Higher numbers of older people are predicted to live longer with more complex conditions; therefore it is crucial that the residential and nursing market is effectively developed to meet future needs safely and economically.

## **Day Opportunities Services**

### **Current Picture**

Stoke-on-Trent has recently redesigned its day opportunities services to adapt to changing requirements of customers, evolving national strategy and changing requirements to diversify the market.

There are approximately 170 people in receipt of day opportunities in Stoke-on-Trent and it is predicted that there will be approximately 80 new referrals a year into the service. However, it is not possible, at this point, to accurately know the rate of attrition of existing customers to understand how much growth the service will see. It is predicted, however, that there will be steady growth in the service, year on year, based on JSNA estimates around increases in the ageing population.

The current contract was awarded on 21st January 2013 for four years. A review will take place before the contract expires to assess the effectiveness of current provision and to make recommendations for the future commissioning of day opportunities services.

Full retendering will commence during 2016 and a new contract will be awarded in January 2017.

### **National/Local Factors**

The overall approach adopted sought to empower organisations to be flexible and innovative in terms of how they operate their services across the different client groups and service settings. The new service commenced during January 2013 and has successfully delivered:

- An improved range and choice of services and organisations available.
- New job and business expansion opportunities through market stimulation.
- Increased availability of services closer to where people live.
- Promotion of independence by increasing opportunities to reduce social isolation and helping people to access their local communities and support networks.
- A market now capable of providing in excess of 500 places per week for group based services and 250 One-to-One sessions per week delivered on an individual basis.
- The tender has contributed to the strategic aims of the City Council's Mandate for Change.

### **Financial and Demographic Information**

Low referral rates have been received for two of the newer one to one care and community service elements of the current contract. The reasons for this will be investigated to assess implications for future commissioning decisions.

### **Future Commissioning Intentions/Desirable Development of the Market**

The new contract for Day Opportunities introduced a significant change to the way services are delivered. As the service is still very new, it is difficult to predict at this point what any new service will look like in four years' time.

## **Reablement and Complex Services**

### **Current Picture**

Reablement services are currently delivered directly by the City Council and are short term services designed to see customers move onto maintenance services at the point where their independence has been maximised.

Additionally, in recognition of increasing size and complexity of community packages of care, the City Council is directly providing short term provision for people with complex care needs on a pilot basis.

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

### **National/Local Factors**

There is an additional service provided by our in-house complex and reablement teams insofar as they supply a "safety net" to community services when capacity drops. Therefore any move to expand reablement and complex care services in the community may not necessarily be mirrored by a reduction in the in-house service provision.

## **Financial and Demographic Information**

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

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

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

The current breakdown of expected gross expenditure for the current financial year (2014/15) from the City Council into older people's services (excluding Learning Disability) is as follows:

£8,025,000	Domiciliary Care
£1,085,000	Extra Care
£19,886,000	Residential and Nursing Care
£484,000	Direct Payments (Older People)
£1,096,000	Older People's Day Care
£160,000	Direct Payments (Older People's Carers)

## **Future Commissioning Intentions/Desirable Development of the Market**

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

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

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

## **Retirement Villages with Care Services (extra care)**

Retirement Villages with Care Services (extra care) is the provision of domiciliary care registered services directly to people in complexes that have been designed to meet their needs. There is 24/7 on-site support, 365 days a year. Residents within Retirement Villages with Care Services (extra care) complexes range from people with high level care needs through to people with low / no care needs.

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

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

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

Berryhill, Camoys and St Dominic's are the oldest of the schemes, with Rowan Village and West End Village opening in 2008 and 2011 respectively. The first three schemes and Rowan Village has recently been retendered.

Work needs to be undertaken at all of the schemes to ensure that the balance of care needs is restored.

Three further Extra Care Schemes are to be opened over the next three years in Stoke-on-Trent representing a further 390 flats throughout the City. Funded through Private Finance Initiative (PFI), this will generate further choice of care services whilst supplying improved housing options for older people in the City.

### **Market Opportunity**

The City Council will be tendering for providers to supply care at each of the new sites. The care may be provided by one provider across all three sites or three separate providers operating at different schemes. The City Council will be looking for dynamic and cost effective service delivery to deliver modern and flexible methods of meeting the care needs of the tenants.

## **Housing related support**

The council commissions the provision of housing related support (Supporting People Programme) to help people to live independently and prevent homelessness. The programme supports a range of client groups including older people. In February 2014, elected members approved a proposal to revise priorities for investment in the Supporting People programme from 1 April 2015 to achieve required savings. Work is now underway to determine future priorities. Current provision includes:

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

- Practical help and support to optimise levels of independence and reduce social isolation and loneliness.
- Delivered in the service user's own home, whether they privately rent, rent from the Council or Housing Association or are owner occupiers.
- Support is tailored to meet individual needs and can include help to set up and maintain a home, benefits and budgeting advice, support to access health services, support to access activities to reduce isolation and support to ensure the home is safe and secure.
- Links closely with other local health economy and social care services to facilitate timely discharge from hospital to contribute to the flow and capacity through the Urgent Care System and prevent unplanned acute admission and re-admission to hospital.

## **Current provision includes**

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

- Practical help and support to optimise levels of independence and reduce social isolation and loneliness.
- Delivered in the service user's own home, whether they privately rent, rent from the Council or Housing Association or are owner occupiers.
- Support is tailored to meet individual needs and can include help to set up and maintain a home, benefits and budgeting advice, support to access health services, support to access activities to reduce isolation and support to ensure the home is safe and secure.
- Links closely with other local health economy and social care services to facilitate timely discharge from hospital to contribute to the flow and capacity through the Urgent Care System and prevent unplanned acute admission and re-admission to hospital.

## **Home Improvement Agency**

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

Housing related support, information and advice

- Advice and support to identify repairs, maintenance and improvements to their property and provide options available to adapt and repair; including advice on timescales and cost
- Handyperson service
- Falls and Accident Prevention
- Gardening Help
- Target Hardening eg locks and bolts
- Navigator scheme - links service users with volunteers to reduce isolation and support access into social care and health services.

### **Other services**

There are further Adult Social Care services that are provided by the City Council that will be detailed in future updates of this document.

These include:

- Integrated Equipment
- Aids and Adaptations

### **Updates to the Market Position Statement**

The City Council aims to refresh and update the Market Position Statement on an annual basis. Specific tendering opportunities will be advertised as they occur by the Corporate Procurement Team through the Bravo electronic tendering system.

Further data on the needs of people in Stoke on Trent can be found in the City's Joint Strategic Needs Assessment (JSNA) which can be accessed through its dedicated website at [www.webapps.stoke.gov.uk/jsna/](http://www.webapps.stoke.gov.uk/jsna/)

#### **Further Information**

For specific queries on the content of the Market Position Statement including requests for copies of documents referenced within it or to respond to identified Market Opportunities please contact Scott Macdonald, Business Manager:  
**[scott.macdonald@stoke.gov.uk](mailto:scott.macdonald@stoke.gov.uk)**

