

Market Position Statement **Ageing Well**

Adult Social Care 2018



1. Introduction

This Market Position Statement is intended to supplement our Ageing Well strategy, with a particular focus on the care and support outcomes that we want older people with support needs to experience and the quality, capabilities, capacity and range of services and offers available to support achievement of these outcomes. Our strategy is an ambitious one and successful delivery requires an equivalent scale of ambition in the services and offers available to older people locally.

If you want to know more about our borough, the key demographic trends, our current plans for service for older people and / or find out what services we currently commission you will find these links useful:

- For our Ageing Well Strategy and associated action plans;
- For the borough's Community Plan; and for the Council's Strategic Plan;
- For information about the Council's Community Commissioning Programme;
- For the North East London Strategic Transformation Plan; and for the Tower Hamlets Clinical Commissioning Group's Transformation Programme;
- For our Joint Strategic Needs Analysis, including the outputs from various research projects specific to the older population of the borough;
- For access to the Institute of Public Care's Projecting Older People Population Information (POPPI) system, which is the source of data used in this document;
- For more general statistics and research relevant to the borough;
- To find out more about Tower Hamlets Together, our Integrated Care partnership;
- For a list of our current commissioned services, with information about contract values and expiry dates;
- If you are interested in bidding for future contracts and wish to register with our online procurement portal. Once registered you will be able to set up alerts so that you are notified when relevant future opportunities are advertised.

We look forward to working with current providers of care and support and with organisations who want to bring new ideas and new ways of delivering services to the borough to deliver the ambitions set out on the following pages.



2. Commissioning for quality outcomes – future social care services for older people

The Ageing Well strategy defines the priorities for improving the wellbeing of older people in Tower Hamlets over the period 2017 to 2020. During 2018, more detailed plans are being finalised to deliver the strategic shifts outlined in the strategy. These plans are being published as a supplement to the strategy in 2018 and will provide an additional layer of detail for providers regarding our future intentions and requirements. During 2019-20 a new iteration of the Ageing Well Strategy will be co-produced with older people and other stakeholders to cover the period beyond March 2020. This will be supported by an updated JSNA to be completed during 2019.

This market position statement describes the social care market we want to see in Tower Hamlets over the next five to seven years – following delivery of the Ageing Well Strategy and associated commissioning plans.

We have organised this market position into three broad service settings to enable providers with an interest in a particular setting to focus in on the relevant content.

For each setting we have summarised what we expect the market to look like in five to seven years' time and what needs to change for that vision to be delivered. The three broad settings are:

- Accommodation based services;
- Services provided in a person's home; and
- Services provided in the community

We also expect to publish a refreshed version of this Market Position Statement, by September 2019 that incorporates equivalent content for community health services and sets out our integration aims and priorities.



2.1 Residential and nursing care home provision; extra care sheltered housing (ECSH) and other forms of accommodation based care

What we want the market to offer over the next five to seven years

- We want to ensure that there is sufficient supply of nursing care and residential dementia care beds in the borough so that every older person who needs a nursing / residential placement is able to access a suitable local option if that is their / their family's choice.
- Population projections in POPPI indicate that we will need to increase bed capacity by around 25% (from a current figure of 303 beds) by 2025 to achieve that ambition.
- We want to ensure that all of this bed capacity is delivered in care homes that have at least a Good rating from the Care Quality Commission.
- We expect Extra Care Sheltered Housing to become the default placement option for older people for whom (non-dementia) residential care would previously have been the appropriate placement option. (Included in the 25% capacity increase referred to above).
- We expect, through a combination of capacity, flexibility of service model and responsiveness of assessment and admission processes (on a 24/7 basis) that no discharge of an older person from hospital will be delayed by non-availability of provision.
- We expect admissions to hospital from care homes to reduce so that rates for all homes are below a baseline level reflecting the best performing homes in 2017/18.

What needs to change for this future vision to be delivered?

We will work with existing operators to effect a strategic realignment of existing Extra Care Sheltered Housing provision, residential care home capacity and nursing care home capacity in the borough. Our aim in doing this is to ensure that we have the right balance of resources across these different accommodation options to meet current and future requirements. In particular, this will include specific work to ensure that available nursing care home capacity in the borough is sufficient to meet future demand both from the council and from our NHS partners in respect of their Continuing Care responsibilities. This programme of work will incorporate a wider programme of partnership quality improvement activities related to the 'Enhanced Health in Care Homes' NHS vanguard programme and the recently published framework linked to this programme.

If this work does not in itself produce the right quantity and type of provision we require for the future we intend working to identify suitable options for the development of additional capacity of the right type – most likely to be nursing care. We may do this at a scale that allows for broader sub-regional capacity requirements to be delivered and to work in partnership with neighbouring health and social care systems (within the Strategic Transformation Partnership footprint) for this purpose.

We do not expect that, over the next five years, the overall number of placements commissioned by ourselves, in and out of borough, will increase from current levels. Any reconfiguration of in borough capacity and/or additions to in borough capacity will be designed to reduce our reliance on out of borough placements and to ensure that in borough capacity is as fully utilised as possible. We will also continue to seek ways of increasing our ability to support older residents to live in their own homes for longer, and to increase capacity in extra care sheltered housing provision, in order to avoid what might otherwise be increasing demand for residential care.

Working in partnership with the CCG, we will continue to develop the use of care homes and Extra Care provision to support hospital admission avoidance and timely discharge programmes. This is likely to mean commissioning bed spaces/units to meet a range of different uses, including:

- Step up / step down (including discharge to assess);
- Respite;
- Rehabilitation;
- Emergency access.

2.2 Commissioned care in the person's own home

What we want the market to offer over the next five to seven years

- We want to ensure that the home care market locally is sustainable, has sufficient capacity and is supported by a stable and high quality workforce.
- Population projections in POPPI suggest that by 2025 there will be a 25% increase in the older population that is unable to manage at least one self-care task on their own. This in turn suggests a continuing increase in demand for home care services.
- We intend, by 2020, to be commissioning only with providers who have at least a good rating from the Care Quality Commission.
- We expect all home care provision to be delivered on a flexible basis, as directed by the service user, with fixed time visits only used when specified by the service user.
- Linked to this, we intend developing new approaches to micro-commissioning including the increased use of Individual Service Funds (both individually and in pooled arrangements).
- We expect all home care provision to support the maximisation of individuals' independence and to work to an ethos of Reablement.
- We expect the provision of home care to be increasingly supported and supplemented by the use of technology and aids to daily living in a way that minimises the impact of projected increasing demand.
- As our integrated service delivery approach develops at a locality level we expect home care providers to be an integral and proactive member of the wider multidisciplinary team.

What needs to change for this future vision to be delivered?

The service specification for home care services emphasises a shift away from 'time and task' based approaches to individual packages of care, and towards a more person centred and flexible approach to supporting individuals to achieve their desired outcomes. The specification also requires providers to fully implement the Ethical Care Charter.

Our approach to our ongoing relationship with our home care providers is a partnership based one. We are developing with those providers a programme of collaborative work designed to enable continued improvement in the quality and consistency of service delivery as well as to enable efficiencies to be realised by providers. We are, for example exploring collaborative training arrangements for care staff, as well as the potential to develop a shared bank staff scheme.



As we develop this work we will invite home care providers who have registered premises in the borough and who are offering services to privately paying residents and/or residents using Direct Payments to participate.

During 2018 we will tender for a new provider in the North West of the borough. The likely volume of activity to be tendered will be up to a maximum of 3,200 hours per week (from a baseline of 0 hours, so building over time), and the contract will commence in February 2019 to run for a three-year period.

Although our existing home care contracts are scheduled to run until February 2020, with the option to extend to February 2022 we intend during 2018 and early 2019 exploring different approaches to the provision of care to people in their own homes, such as the increased use of Individual Service Funds.

2.3 Community based services

What we want the market to offer over the next five to seven years

- Flexible and localised services that people are able to access at times and in location that suit them;
- High quality information and advice that supports the maximising of independence embedded in all service offers – based on a ‘no wrong door’ approach;
- Locations that offer a focal point for multi-agency, multidisciplinary engagement with older people

What needs to change for this future vision to be delivered?

Community-based provision focusing on older people in Tower Hamlets includes both preventative and day opportunities services which support people with higher needs. Some of these services are currently funded through a grants process which during 2018/19 are being remodelled as a community commissioning programme.

Preventative Services

All of the currently commissioned preventative services (LinkAge Plus, Handy Person, Vietnamese and Chinese Support Services for Older People) have been recently recommissioned. Contracts have been awarded for an initial period of three years with the option to extend for a further two, so are likely to be in place until 2022.

The Mainstream Grants (MSG) Programme has been one of the council’s main funding sources for third sector organisations within the borough for many years. The programme in its current form has been in operation since 2009, delivering over a three year rolling cycle. In the Community Engagement Strategy, the council committed to introduce a ‘Co-production Framework’ to help us work together with communities to develop council plans and commission services, including the current Mainstream Grant funding stream. During January 2018, workshops took place where all stakeholders worked together to co-design a Community Commissioning Outcomes Framework. Commissioning for the services is expected to begin in late 2018/19, with new contracts commencing in September 2019, for a four-year term.

Day Opportunities

During 2018 we are developing a new commissioning strategy for day opportunities. The starting point for the proposed commissioning strategy is an understanding of the outcomes that are typically intended to be achieved, in response to assessed need, when a day service is specified as part of an individual's support plan. The first phase of the delivery plan will, therefore, include a detailed definition of this set of outcomes, but an initial analysis suggests inclusion of the following:

- Reduced loneliness and isolation;
- Improved mental and physical wellbeing;
- Improved nutritional support;
- Maximised independence, including rehabilitation;
- Better advised and informed;
- Kept safe;
- Improved mental and physical wellbeing and independence for family/carer.

From this defined set of core outcomes a delivery model will then be co-produced with older people and other stakeholders. During 2018 we will commission a co-production partner to work with service users, their carers and other stakeholders to co-design and develop the new delivery model during 2019 prior to this new model being commissioned in 2020.

Ultimately what is envisaged in terms of the service delivery model could be described as an enhanced 'Brokerage' offer that brokers access to existing community solutions; coordinates effort by volunteers and community groups (formal and informal), secures access to building space as required and creates solutions in response to identified outcomes where existing solutions cannot be sourced.

In particular, the aim is to develop a range of community based and community generated opportunities for older people, especially those at risk of, or experiencing, loneliness and isolation, to connect with their local communities with the aim that these localised offers provide a direct alternative to accessing traditional day services.

The council will also utilise existing resources already deployed in the community to test and learn new ways of engaging with vulnerable older people that build on the valuable work already undertaken by LinkAge+, Idea stores, one-stop shops and a range of VCS organisations. All of these activities will utilise an assets based approach to identifying strengths and opportunities at local level and building on these to develop sustainable solutions for local residents and will be consistent with the wider corporate work on localisation.



