

Cheshire West & Chester Council

Adult Social Care Market Position Statement Executive Summary

Refreshed: April 2018



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1. Background and context

1.1 The Local Authority is required to ensure that a Market Position Statement (MPS) is implemented as part of our statutory duties outlined in the Care Act (2014).

1.2 The Market Position Statement is a document which helps the Local Authority to communicate our priorities to the Social Care market. This includes informing the market of any potential service gaps or commissioning opportunities that may be available within the borough.

1.3 It is aimed at providers from a wide range of sectors, which includes the statutory, independent or voluntary sectors; social enterprises and/or other non-profitable organisations.

1.4 The document also outlines the models of care that the Local Authority wishes to encourage.

2. Strategic Direction

2.1 Within Adult Social Care, the direction is to move towards even more personalised services and to invest in forward thinking and creative services that can evidence good outcomes for people, as well as being effective, affordable and efficient. A key agenda which the Council champions in order to support the necessary changes, is called the "West Cheshire Offer".

2.2 The West Cheshire Offer programme seeks to redesign the Adult Social Care system and positively impact staff behaviour and working practices to promote (non-exhaustive):

- ✓ Independence and self-care
- ✓ Early Intervention, Prevention and the use of technology
- ✓ Support and recovery at home/in the community
- ✓ Support for long-term conditions
- ✓ Crisis avoidance

3. Key messages for Adult Social Care in Cheshire West and Chester

3.1 As the number of Older People increases due to increased life expectancy, the potential demand for Adult Social Care services for this service user group is likely to grow in the future.

3.2 The overall number of people with Dementia is likely to increase.

3.3 People with Learning Disabilities are living for longer, which means that there will be a growth in the number of people from this client group that may develop other co-existing conditions related to older age such as Dementia for example. Over the last three years, there has been a continued increase in the demand for Mental Health services commissioned by Adult Social Care. We require effective solutions to support a reduction in the deterioration of people's Mental Health, which also promotes recovery and supports people to stay well in the community.

3.4 In order to successfully manage demand, universal and preventative services will have to play a greater role. This includes Public Health services, as well as services delivered by the voluntary/third sector for example.

- 3.5 We need to build stronger communities in order to target our limited resources at the most vulnerable members of society.
- 3.6 Partnership working between Social Care, Health and Housing commissioners will continue to be strengthened.
- 3.7 In addition to the Market Position Statement, the Council with other partners will develop more detailed client specific commissioning plans (e.g. Learning Disability, Autism, and Adult Mental Health) which will provide the Social Care sector with information about need and demand, a fuller market analysis, and clearly set out our short, medium and long term commissioning intentions. This will allow providers to be better informed when planning services.
- 3.8 Cheshire West and Chester Council will ensure a fair cost of care and will engage with the respective markets to ensure that fee structures are appropriate to support high quality and an appropriately remunerated workforce. This will in turn ensure fair and equitable access for all residents of the borough.
- 3.9 All providers across all sectors are strongly advised to make contact with the commissioning people (adults) service, in order to verify the position should you be interested in pursuing any of the potential opportunities outlined within the Market Position Statement.
- We also strongly advise that any provider wishing to develop any other services, schemes or initiatives not outlined within the Market Position Statement, to contact the Council before resources are committed (e.g. financial) or developments begun. Providers that develop services without having discussions with the Local Authority do so at their own risk. By developing or building services, does not necessarily guarantee that the Local Authority will use these facilities/services or fund care at levels that do not align with our fee structures.

4. Principles

4.1 The guiding principles which establish the way we commission services now and in the future includes:

✓ **Working in partnership**

We will work alongside other public, independent and voluntary/third sector organisations to deliver integrated services wherever possible.

✓ **Quality assurance**

We will monitor and manage services that we buy to ensure that they are of good quality, effective and delivering what is needed. We expect users of services to be cared for with compassion, dignity and respect.

✓ **Value for money**

We will use our commissioning processes to maximise value for money and the benefits for our local residents making the best use of resources.

✓ **Local residents**

We will listen to the views of local residents. We will consult and engage throughout the commissioning process to make sure that services are what residents need.

✓ **Outcomes that matter**

We will commission services focussed on delivering good outcomes for communities and individuals.

✓ **Social value**

In all our commissioning, we will champion social value in order to benefit the people of the borough.

✓ **Safeguarding**

We will keep safeguarding at the heart of everything we do. This includes in our commissioning, contracting and procurement processes. We will ensure our legal commitments are met, particularly in relation to the Care Act 2014 and the Mental Capacity Act 2005 for example.

✓ **Promoting independence, choice and control**

We will ensure that the people who need our help feel safe and are offered care and support in a way which optimises their independence, choice and control over the key decisions in their lives.

✓ **Promoting prevention**

We will work with our community, voluntary and charitable sector partners to build on the strengths of communities and to keep people healthy and active for as long as possible.

✓ **Care closer to home**

For people that require high level residential, nursing or other complex services, we will develop sufficient and good quality provision, where the environment and care meets their needs closer to home. We will also work closely with the National Health Services (NHS) to identify needs earlier and provide support to keep people as well as possible for as long as possible.

5. Engagement

5.1 In May 2017, providers were sent a questionnaire asking for their feedback around the Market Position Statement. This was sent out to all our contracted providers across Adult Social Care including the voluntary, community and charitable sector (s). Twenty – six (26) providers responded.

a. Providers were asked about some of the changes they would like to see either within or as a result of this statement. Some of the key themes included (non – exhaustive):

- i. Clearer information about our commissioning intentions and key gaps in provision.
- ii. More detailed information about the state of the Adult Social Care sector as a whole within Cheshire West and Chester.
- iii. Further information about potential business opportunities that may be available across Adult Social Care.

- iv. Providers would like us to engage with them **more** in a variety of ways including specialist events and forums as well as email/online bulletins, with forums being the most popular choice.

b. The main challenges that providers told us that they were experiencing included:

- i. Fulfilling the requirements of the National Living Wage and the impact this has on them as businesses in terms of the rising cost of overheads. Particularly in relation to sleep-in shifts.
- ii. Recruitment and retention of staff.

c. In response to the issues identified:

- ✓ We have reviewed our care rates across the supported living sector in preparation for the 2018/2019 financial year, which includes our sleep-in rates. The proposed rates were communicated to the market in December 2017. Rates have already been reviewed across the residential and nursing care sectors respectively.
- ✓ We are reviewing our Direct Payment policy including the Direct Payment care rates.
- ✓ We are re-introducing provider forums for social care providers.
- ✓ We are committed to communicating with and working collaboratively with providers in a positive way.
- ✓ We have addressed the issues raised about the Market Position Statement, in terms of the Council outlining our future commissioning intentions more clearly. This will be evident within the main Market Position Statement document.

5.2 The feedback has been used to develop the statement and will help to shape our approach moving forward.

5.3 The views of service users and Carers are also included within the Market Position Statement. Although a specific engagement exercise has not taken place with service users and Carers, we have used information from the many consultation and engagement exercises that have taken place over the last 12-18 month period about specific service areas. Examples include the consultations regarding Carers Services as well as Early Intervention and Prevention services.

6. How the Market Position Statement is structured and what is included:

6.1 The statement is broken down into seven core chapters. The areas covered included:

Chapter	Title:	Key Content / Sub Title:	Page No.
1.0	Introduction and context	<ul style="list-style-type: none"> • Introduction • What is the market position statement • Strategic alignment • Key messages in Adult Social care in Cheshire West and Chester • Current context • Provider engagement 	3-6
2.0	Our priorities and service transformation	<ul style="list-style-type: none"> • Transforming partnership working and integration • Transforming commissioning and contract management • Commissioning principles • Our priorities • Impact of legislative and national policy changes 	7-15
3.0	Funding and demographics	<ul style="list-style-type: none"> • Council funding across Adult Social Care and the demand for services • Self-funders • Demographics and key statistics 	16-26
4.0	The social care market and workforce	<ul style="list-style-type: none"> • The Adult Social Care market in Cheshire West and Chester • The Adult Social Care workforce in Cheshire West and Chester 	27-32
5.0	Early intervention and prevention including services that promote access and cohesion	<ul style="list-style-type: none"> • Commissioning prevention • Integrated early intervention and prevention model • Community legal information and advice services • Advocacy • Assistive technology • Carers services • Physical and sensory disability services (including access services) 	33-43
6.0	Public Health services	<ul style="list-style-type: none"> • Public Health and wellbeing services (e.g. substance misuse, sexual health etc.) 	44-47
7.0	Community based support and accommodation based services	<ul style="list-style-type: none"> • Residential and nursing care services • Care at home services (domiciliary care) • Dementia services • Extra care services • End of life care • Direct payments and self-directed support • Shared lives services • Adult Mental Health services • Learning Disability services (Adults) • Services for people with needs identified on the Autistic Spectrum (Adults) • Arrangement of care/brokerage services 	48-73
	Appendices: How we do business with care providers, procurement, contracts and quality monitoring	<ul style="list-style-type: none"> • Contracts and quality • How is quality measured? • Process of reviewing providers • Multi-agency risk and safeguarding database • Governance • Health and social care disruption/failure policy • Provider quality in Cheshire West and Chester • Procurement • Safeguarding • Provider forums • Analysis of customer feedback • Useful information 	74-84

6.2 **Appendix 1** of this document provides a summary of the potential opportunities discussed within the main Market Position Statement.

Appendix 1 - What potential opportunities are discussed within the Market Position Statement?

Area/Contract	Direction and potential opportunities	Where can further information be found (Page numbers)
1. Healthwatch	The current contract commenced in April 2017 and is for three years with the potential to extend for a further two years. We currently have adequate capacity in regard to this service.	14-15
2. Early Intervention and Prevention	<p>Although we have adequate provision in terms of the commissioned Early Intervention and Prevention contract, the council always welcome discussions with Providers who can offer good quality, cost effective and innovative solutions aimed at early intervention and prevention, in order to support:</p> <ul style="list-style-type: none"> ➤ Peoples independence, choice and control ➤ A reduced reliance on intensive/high cost services and acute services (e.g. hospitals). 	33-34
3. Community Legal Information and Advice services	We have adequate capacity at this present time. Please continue to monitor the CHEST procurement portal regarding any future opportunities in relation to this contract. The existing contract expires in 2019.	34
4. Advocacy	We have adequate capacity at this present time. Please continue to monitor the CHEST procurement portal regarding any future opportunities in relation to this contract. The existing contract expires in 2019.	35
5. Telecare	<p>We have adequate capacity in terms of our commissioned contract. However the Council always welcomes conversations with the market regarding new and innovative technology (including digital solutions) that can demonstrate value for money, good quality and safety. Providers must clearly demonstrate how potential solutions can safely promote:</p> <ul style="list-style-type: none"> ➤ Self-management ➤ A potential reduction in people accessing primary, secondary/acute and social care services. The existing contract expires in 2019. 	35-37
6. Carers Services	<ul style="list-style-type: none"> ➤ The Council and our NHS Clinical Commissioning group partners in West Cheshire and Vale Royal are in the process of commissioning a new integrated model for Carers services within the Cheshire West and Chester area. ➤ The new model will comprise of one lead organisation that is responsible for sub - contracting all the services identified within the new model. The 	37-40

	<p>services that will be delivered within the model are outlined in the main Carers services section (above).</p> <ul style="list-style-type: none"> ➤ The contract will be commissioned for 3 x years with an opportunity to extend by a further 2 x years. In addition to the introduction of the new model of commissioning in 2018/2019 we will also jointly contribute additional resources for Carer breaks, utilised from the Better Care Fund. Of this funding approximately £355,000 will be invested to operate a Carer break/grant scheme, which third sector providers can apply for up to £37,500 to deliver local services. The next grant scheme will open in November 2018. ➤ The Council will communicate with the market pertaining to how providers can bid for potential opportunities encompassed within this contract. 	
7. Low level sensory services (Visual/Hearing impairment)	In October 2017 the Council commissioned 2 x local Voluntary/Third sector services as part of the Early Intervention and Prevention model, to support people with low level vision and hearing problems. The contract is for 3 x years and runs until 31 September 2020 with a potential extension (option) of a further two years. Therefore we have adequate capacity at present.	40-41
8. Shopmobility	The current Shopmobility contract commenced in 2014 and has 3 x options to extend for one year. The service will be recommissioned by no later than the 2019/2020 financial year. We have adequate capacity at present.	41-42
9. Online Accessibility Information	We would welcome conversations with the market regarding any potential opportunities for developing good quality, innovative and cost effective online accessibility information. This includes through the use of apps and other digital platforms. Please continue to monitor the CHEST procurement portal regarding any future opportunities in relation to this contract. Interested Providers are also encouraged to contact the Council for further discussion.	42
10. Home improvement services	<p>The contract is due for re-commissioning in the 2019/2020 financial year. This process will be conducted via the CHEST Procurement portal. At this moment in time we have adequate capacity.</p> <p>Please continue to monitor the CHEST procurement portal regarding any future opportunities in relation to this contract.</p>	43
11. Public Health services (e.g. weight management, health checks, substance misuse services)	<ul style="list-style-type: none"> ➤ The Local Authority is in the process of re-tendering the commissioned Public Health Services (March 2018). The tender is being conducted in accordance with the Council's procurement policy and is advertised via the CHEST procurement portal. The Council has encouraged and welcomed providers to participate in this exercise who have innovative ideas, creative solutions and a proven track record of delivery within an 	44-47

	<p>identified financial envelope.</p> <ul style="list-style-type: none"> ➤ The Council encourages all prospective bidders to think about how it engages with wider health partners in order to establish strong pathways. We will also require the successful provider to work with the voluntary, community and charitable sector (s) to focus on early intervention and prevention work that reduces demand on health and social care and provides value for money. It is essential that any future bidders can demonstrate the effective use of resources and have an operating model that positively balances quality, efficiency and responsiveness. ➤ It is essential that providers work in partnership with local communities, in order to make Public Health everyone's business in order to promote self-care and resilience. 	
12. Residential and Nursing Care services	<ul style="list-style-type: none"> ➤ Once the Council's care home market strategy has been produced, we will share this with the appropriate markets. This document will outline our direction clearly. ➤ We are interested in conversations with market providers that have innovative ideas and a shared vision regarding the care and support of Older People (particularly those with complex needs) to remain within their own homes for as long as possible. 	48-50
13. Domiciliary Care services (Care at Home)	<p>The Council will be conducting a recommissioning exercise of the care at home contract in 2018/early 2019. We will be advertising this opportunity via the CHEST procurement portal. We welcome applications from all interested providers, who can meet the requirements of the service specification and contractual requirements. Providers are encouraged to regularly monitor the CHEST procurement portal in relation to this opportunity.</p>	50-51
14. Dementia Services	<ul style="list-style-type: none"> ➤ Health and Social Care Commissioners would welcome structured discussions with providers, pertaining to Dementia services across the borough over the next 3-5 years, particularly within the Vale Royal area where demand is estimated to increase more significantly per head of population, compared to other areas of the borough. The focus will be on reducing EMI and hospital admissions by ensuring that we have a robust community offer focused at supporting people with Dementia. ➤ During times of crisis the Council and health services will consider respite provision within community based alternatives rather than utilising a bed in a hospital which will provide better outcomes for those diagnosed with 	51-54

	<p>Dementia and their Carers. We would welcome basic conversations with providers at this stage around ideas and innovations.</p> <ul style="list-style-type: none"> ➤ Over the last 12-18 months, there has been a small increase in referrals to community Mental Health teams for people under 65, who have early onset Dementia. Some of the referrals are relating to people who have developed Korsakoffs syndrome due to alcohol misuse for example. We would be keen to discuss with providers, any ideas that they may have surrounding safe and effective community orientated models of care for people under 65, who experience early onset Dementia and/or related conditions. 	
15. Extra Care services	<ul style="list-style-type: none"> ➤ The Council strongly advises all providers from all sectors (e.g. Social Care, Housing) to communicate with Commissioners and Housing Strategy services at the earliest stages prior to planning applications and building work being progressed. This is to give the Council the opportunity to outline our specific needs and the strategic demand across the borough. This is to ensure that there is a shared understanding and so services developed are fit for purpose and are designed to meet people's needs effectively. ➤ The Council will be conducting a recommissioning exercise of extra care services in 2018/early 2019. We will be advertising this opportunity via the CHEST procurement portal. We welcome applications from all interested providers, who can meet the requirements of the service specification and contractual requirements. Providers are encouraged to regularly monitor the CHEST procurement portal in relation to this opportunity. 	54-55
16. End of Life Care	<p>We would welcome dialogue with extra care providers regarding how provision for people requiring end of life support can be accommodated within the extra care model.</p>	55-56
17. Direct Payments	<ul style="list-style-type: none"> ➤ We wish to work with a range of key partners (CCG's, independent sector, third sector) around market development and the development of innovative/diverse solutions for direct payment/personal budget holders. ➤ Integrated personal commissioning can potentially provide a real opportunity for third sector providers to develop their service offer for direct payment/personal health budget users. We are therefore looking to work with the sector around this area. 	56-57

18. Shared Lives services	This is a priority area for the Council. We will communicate with the market as and when there are any developments pertaining to shared lives services moving forward.	57-58
19. Adult Mental Health services	<p>We would welcome basic conversations with providers at this stage regarding:</p> <ul style="list-style-type: none"> ➤ Provision that offers flexible models of care and support, which reflects the diversity of the client group concerned. We are moving away from “fixed support structures (hours)”, which can be rigid and inflexible. This is to ensure that we align with the principles encompassed within national agenda’s and government directives including personalisation, increasing the uptake of direct payments/personal health budgets, and the five year forward view for mental health. We need care and support providers to offer flexible care, which is reflective of peoples changing needs. ➤ Innovative technology or digital solutions to support people with mental health conditions to help bolster our “front – door” offer, and to help better manage demand in terms of the numbers of people accessing social care assessments for example. ➤ We would be interested in basic discussions, around what local, robust and community based models of care for people with complex needs might look like (e.g. people being discharged from long term care and support settings, people with complex forensic histories, people involved with criminal justice services). ➤ Although we have adequate capacity in terms of our commissioned early intervention and prevention contract, we always welcome conversations with providers regarding low level services that can support demand reduction across primary, secondary and social care services, whilst keeping people safe and well in the community. <p>As part of our future approach, the Council aims to develop a commissioning strategy for Adult Mental Health (in conjunction with other key stakeholders), which will explore areas such as (non-exhaustive):</p> <ul style="list-style-type: none"> ➤ Crisis Care (including admission avoidance initiatives, including safe alternatives to acute admissions). ➤ Working with strategic housing services around the housing needs assessment for people with Mental Health conditions. 	58-65

	<ul style="list-style-type: none"> ➤ We will communicate with the market regarding our more specific needs once this work has been concluded. 	
20. Learning Disability services	<p>We would welcome basic conversations with providers at this stage around what innovative, good quality and cost effective solutions might look like in relation to the following groups:</p> <ul style="list-style-type: none"> ➤ Services for people in transition from childrens services to adult services, who might need support around areas such as volunteering, employment and skill development. ➤ People who have a Learning Disability and Dementia. We are keen to establish what safe, effective and affordable services might broadly look like. ➤ Care and support for people that have complex needs (e.g. challenging behaviour, people who may exhibit chaotic presentations). <p>We would also welcome conversations regarding services that can reduce the reliance on high end social care services by improving the offer around community orientated initiatives such as youth clubs, book groups, and football clubs for example.</p>	65-70
21. Services for people with needs identified on the Autistic Spectrum	<p>We would welcome structured conversations with the market around the following types of provision for people with needs identified on the Autistic Spectrum:</p> <ul style="list-style-type: none"> ➤ Services within the borough for people with low level needs. Examples include outreach services to provide support to people with Autism and their families, to access local communities, pursue hobbies and recreational opportunities. <p>Council officers will be working with other key stakeholders across 2018/2019 to develop a commissioning strategy relating to Autism services, which will focus on areas such as:</p> <ul style="list-style-type: none"> ➤ The accommodation and support needs of people with Autism and complex needs that are configured to deliver cost effectiveness, whilst maximising independence, choice, control and safety. We will communicate with the respective markets once this strategy has been produced. ➤ Accommodation for people with low level needs including needs that do not 	70-72

	trigger the Carer Act threshold.	
22. Arrangement of Care (formerly known as brokerage)	The existing Arrangement of Care (formerly known as brokerage) contracts with the existing providers expires in March 2018. The new service will be commissioned for three years from April 2018 with the option to extend for a further two years. Therefore we have adequate capacity at this time.	72-73

Appendix 2 - Useful Information

Market Position Statement Database – Access to Local Authority Market Position Statements across England

<https://ipc.brookes.ac.uk/what-we-do/market-shaping/what-we-do/market-shaping/market-position-statement-database.html>

Cheshire West and Chester Council main website

<https://www.cheshirewestandchester.gov.uk/Home.aspx>

West Cheshire CCG website

<https://www.westcheshireccg.nhs.uk/>

Vale Royal CCG website

<http://www.valeroyalccg.nhs.uk/>

Care Quality Commission website

<http://www.cqc.org.uk/>

Care and Social Services Inspectorate Wales website

<http://cssiw.org.uk/splash?orig=/>

Cheshire West and Chester Local Safeguarding Adults Board website

<https://westcheshirelsab.co.uk/professional-area/>

Cheshire West and Chester Local Safeguarding Children Board website

<https://www.cheshirewestlscb.org.uk/>

Cheshire Constabulary

<https://www.cheshire.police.uk/>

Cheshire and Wirral Partnership NHS Foundation Trust

<http://www.cwp.nhs.uk/>

Countess of Chester NHS Foundation Trust

<http://www.coch.nhs.uk/>

The Care Act Fact Sheets

<https://www.gov.uk/government/publications/care-act-2014-part-1-factsheets>

Co-production

<https://www.thinklocalactpersonal.org.uk/browse/co-production/>

Local Healthwatch

<http://www.healthwatchcwac.org.uk/>

West Cheshire Local Offer

<http://www.westcheshirelocaloffer.co.uk/kb5/cheshirewestandchester/directory/home.page>

Cheshire West and Chester Joint Strategic Needs Assessment

<https://www.cheshirewestandchester.gov.uk/your-council/key-statistics-and-data/isna.aspx>

West Cheshire Local Offer

<http://www.westcheshirelocaloffer.co.uk/kb5/cheshirewestandchester/directory/home.page>

Appendix 3 - Cheshire West and Chester Council's Adult Social Care key contacts

Commissioning People Service Tel: 0300 123 7034

Email – commissioningandcontracts@cheshirewestandchester.gov.uk

Contracts and Quality Monitoring service – Telephone: 0300 123 7034

Email – commissioningandcontracts@cheshirewestandchester.gov.uk

Gateway Team

Email: accesswest@cheshirewestandchester.gov.uk

Telephone: 0300 123 7034

Emergency out of office hours number

Use the telephone number and email address below from 5pm - 8.30am Monday - Thursday and from 4.30pm on Fridays until 8.30am and 24 hours weekends and bank holidays.

Telephone: 01244 977277

Email: emergencydutyteam@cheshirewestandchester.gov.uk

Document revision history

Which chapter/section (s) have been revised	Officer in charge of revision	Director	Department	Date of approval	Approver (Which Group or Director has approved the changes/amendments)	What is the revised version number of the document
All chapters/sections	David Pye	Alistair Jeffs	People (Strategic Commissioning)	22 February 2018	Cheshire West and Chester Council Adults Directorate Management Team	v.1.5

Accessing Cheshire West and Chester Council information and services.

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