Safe, Supported, Transformed

Adult Services Market Position Statement

2014
Executive Summary

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1 - A Sense of Direction

Background information

North Lincolnshire is a good performing adult social care authority with a clear strategy for meeting local needs.

Since the 2001 census the area has seen substantial growth in the numbers of people aged over 64 with a particularly significant increase in the number of people over 85 years old. We are supporting over 30% of the over 85 population.

During 2013/14 we were faced with a growing demand for services with the number of new referrals and new assessments both increasing.

In response to these challenges we developed a clear Social Care Offer and ensured that it reflected local priorities and national policy direction in preparation for the implementation of the Care Act 2014. Key aspects of the Care Act are as follows:

- Make provision about safeguarding adults from abuse or neglect and provision about care standards.
- Put personal budgets on a legal footing.
- Introduces a limit on the amount people will have to pay towards their own care costs (excluding hotel costs).
- Places a duty on partners to consider the physical, mental and emotional wellbeing of individuals in need of care and support services.
- A requirement for Councils to offer deferred payment schemes.
- Provides new rights for carers including the right to an assessment of their needs and the right to get support if they meet eligibility criteria.
- Places a responsibility on Local Authorities to promote diversity and quality in the provision of services.
- Greater oversight of the market and market shaping.

Influencing the local market

North Lincolnshire Council wishes to stimulate a diverse market for Adult Services offering people real choice of provision locally. We will achieve this through continued dialogue and providing support to existing and potential service providers.

This Market Position Statement is the third to be published following those published in 2011 and 2013. We see this Market Position Statement as an important part of the continuing process to have dialogue with providers and businesses in the area, where we have:

- Services developed that people need and want
- Safe children and vulnerable adults, supported families and carers, transformed lives
- Vulnerable people receiving the right service at the right time in the right place with the right support.
- Improved health and wellbeing outcomes
- Reduced health inequalities
- Integrated services built around individual needs not organisational boundaries

This Market Position Statement should be read alongside the Local Account and the Vulnerable Adults Strategy. It is a key local action to fulfil our commitment to transform the local market. It will support service providers to ensure we achieve our strategic ambitions where partners and organisations come together to plan, provide and support vulnerable adults, their families, carers and the communities in which they reside. Providers will be delivering better services by working together and sharing resources for the greater benefit of vulnerable adults and their families and carers. By working together, we can ensure North Lincolnshire is a place with;

"Aspiring People, Inspiring Places"
and where;
"Vulnerable Adults are safe, families and carers are supported and together we transform lives"
2 - Introduction and Purpose

What is a Market Position Statement?

This Market Position Statement contains information and analysis to support service providers to:

- Make proactive business and investment decisions
- Respond to opportunities that meet the needs of vulnerable adults in North Lincolnshire
- Enable vulnerable adults to live as independent a life as possible.
- Target resources effectively

It is envisaged that providers will use this information to meet local need and enable vulnerable adults to achieve positive outcomes.

Definition and scope

We want to bring about real change and opportunities for vulnerable adults in North Lincolnshire by developing a range of services and solutions that improve people's lives.

The scope of this Market Position Statement is:

- To provide market intelligence to service providers who deliver specialist, targeted and universal support to vulnerable adults including; people with a learning disability, with mental ill health, a disability, a physical disability, an older person or a carer.
- To develop a dialogue and work with service providers who have or would like to develop their Mental Health offer. Over the course of 2014/15 and 2015/16 we expect that there will be an increase in the number of people with mental health needs that have a personal budget.
- To work with providers involved with delivering support according to Public Health Domains:
  - Health Improvement
  - Wider determinants of health
  - To cultivate an environment that supports service providers to work in partnership with one another and North Lincolnshire Council to develop preventative services, reducing and delaying the need for specialist care services

Our intention is to develop a market which is proactive, dynamic and responsive across the continuum of need. By working together we can achieve our vision for North Lincolnshire of “Aspiring People, Inspiring Places and where vulnerable adults are safe, families and carers are supported and lives are transformed”.

Provider Impact

We welcome the opportunity to talk to existing or potential service providers. If you are considering developing opportunities in North Lincolnshire, please contact:

CommissioningProcurementContracts@northlincs.gov.uk
3 - Key Messages

We strive to transform services and ensure local provision is delivered in a sustainable way by working with organisations that meet targeted and specialist needs, alongside developing universal services to people at the earliest possible time in a way that improves health and wellbeing outcomes now and in the future.

To meet people’s needs and improve outcomes, we want to ensure:

- People are equipped and empowered, being self-supporting and promoting resilience to keep healthy, independent and well
- People have access to the advice and information when they need it most to enable them to make informed decisions about the support and housing options available
- Wherever possible, people are able to live in their community of choice.
- People have access to meaningful employment, education, voluntary work and other opportunities
- Services meet the needs of individuals; we recognise that services cannot succeed without the contribution made by families and carers
- The local market supports people at any point in time with support available 24 hours per day seven days per week. This will be achieved with flexible delivery times based on need and agreed outcomes, support will need to be quick acting and responsive, managing non urgent needs in the community
- Support focuses on meeting people’s needs and enhancing their quality of life in a sustained way. Support should adapt to people’s changing level of need, stepping up and down the level of support provided in response to a crisis or more gradual change in a person’s support requirements over time
- The transformation will serve to benefit people with a personal budget, people who contribute and people who self-fund their support. Everyone including people who fund their own care will experience the same increased choice to meet their needs.

What does success look like?

The following point’s present people’s views of the types of services that help people achieve successful outcomes.

- Community activities - I would like more opportunities to engage in meaningful activities and have the right support to access them. My support could be through a Personal Assistant or through befriending.
- Social and life skills training - I would like to access training and support that will help me to develop my skills such as social, life skills and managing budgets to increase my independence.
- Employment, education, voluntary work and training - As well as receiving training and support to help me live in my own home, I would like to have opportunities to access meaningful employment, education or voluntary work.
- Back office services - I may wish to employ a personal assistant to help me to manage my support package and I need help with recruiting and employing a personal assistant.
- Information and advice - I want to be independent and live in ordinary housing in the community I choose. To do this I will need information and guidance in relation to my local housing options, financial advice and planning for the future.
- Carers - My family want to have a full family life where they keep well physically and emotionally. Access to short breaks and a range of other support services helps them.
4 – The National and Local Context

National context

The role of local authorities in health and social care markets is evolving. Councils now need to act as facilitators of their local markets as opposed to simply being funders, purchasers and suppliers of care services.

There is a shift away from the delivery of traditional services to a more personalised approach, bringing about the need for greater choice and control for our citizens. People are living longer and therefore demand for support and services is likely to increase. Yet at the same time the economic climate is changing, we need to enable efficiencies to be made and increase what works.

The Care Act 2014 - The Act reforms the law relating to care and support for adults and the law relating to support for carers, makes provision about safeguarding adults from abuse or neglect and makes provision about care standards. The Act introduces numerous changes including putting personal budgets on a legal footing and placing a duty on partners to provide preventive services to support people’s health and wellbeing.

The legislation also introduces a national minimum eligibility threshold, Council-funded social care and a limit on the amount people will have to pay towards their own care costs.

Better Care Fund - The £3.8bn Better Care Fund was announced by the Government in June 2013, to ensure a transformation in integrated health and social care. The fund is a very ambitious programme across the NHS and Local Government. It creates a local single pooled budget to incentivise the NHS and local government to work more closely together around people, placing their wellbeing as the focus of health and care services.

Mental Health – A number of documents, both strategic and best practice inform how services should be delivered and will influence provider’s investment decisions. The Government’s national strategy for mental health “No Health Without Mental Health” in particular can be used as a guide to the direction of travel in provision of support for citizens who have difficulty living independently due to problems with their mental health, common themes include:

- Putting people at the heart of services.
- Personalising the production and delivery of services and support.
- Diversifying the supply of services.
- Equity of access to support.
- Enabling people to exercise choice over their provider and the care and support they receive.

Mental Health Crisis Care Concordat - This document sets out the principles and good practice that should be followed by health staff, police officers and approved mental health professionals when working together to help people in a mental health crisis and prevent a crisis from occurring.

Health and Social Care Act 2012 - Sets out the transfer of Public Health responsibility and ring fenced budget from PCTs to LA’s and the establishment of Health and Wellbeing Board as a statutory committee of the Council to link to Clinical Commissioning Groups.

Transforming Care: A National Response to Winterbourne View Hospital 2012 - Sets our clear, timetabled actions for health and Local Authority commissioners working together to transform care and support for people with learning disabilities or autism who also have mental health conditions or behaviours viewed as challenging.
Local context

The Health and Wellbeing Board is a statutory committee of the Council where numerous representatives from Health and Social Care, the Voluntary and Community Sector and service providers are working together to improve services for the whole community. The vision is that:

“North Lincolnshire is a healthy place to live where everyone enjoys improved wellbeing and where inequalities are significantly reduced”

The Board has responsibility to prepare and publish two key documents which provide an assessment of local needs and outline a plan for how we will address need:

- **Joint Strategic Need Assessment** – providing intelligence to support commissioning and for providers in shaping their business.
- **Joint Health and Wellbeing Strategy** – sets out priorities to make sure services meet people’s needs in an integrated way of working.

The Health and Wellbeing Board have identified six local strategic priority outcomes across the life stages which will inform commissioning and local partnership activity:

- **Safeguard and protect**
  - People feel safe and are safe in their home and protected in their community.
- **Close the Gaps**
  - Inequalities are reduced across all life stages and all communities.
- **Raise Aspirations**
  - People are empowered to make positive choices to help them to be the best they can be.
- **Prevention of Early Deaths**
  - Early detection, prevention and behaviour change linked to the big killers are addressed.
- **Enhance Mental Wellbeing**
  - Good mental health and emotional wellbeing enable people to fulfil their potential.
- **Support Independent Living**
  - People are supported and enabled to live independently to improve quality of life.

Through effective prevention, integrated working, service design and commissioning we expect to see vulnerable adults are **safe** and **supported** and have **transformed** lives.

**Market opportunities**

We would like to work with service providers committed to deliver on this vision for wellbeing. We welcome service providers working together to develop innovative support solutions across all levels of need.

**Vulnerable Adults Strategy 2014 to 2017**

The Vulnerable Adults Strategy makes explicit the strategic priorities and ambition to meet the needs of adults in need of care and support due to disability and or frailty.

The plan is intended to ensure the full engagement of partners to ensure Vulnerable Adults achieve improved health and wellbeing, greater independence and enhanced citizenship.

The principles underpinning the plan are:

- **Early Help, Prevention and building Community Capacity.**
- **Enabling Choice and Control.**
- **Tailoring Support.**
- **Co-ordinating Care and Support.**

The strategy has the following vision:

“Vulnerable Adults are safe, families are supported and together we transform lives”
There are eight strategic priorities that have been developed to ensure this vision is achieved:

- **Vulnerable Adults are safe** and feel safe so that North Lincolnshire is a place where every Vulnerable Adult feels able to exercise their rights to independence safely where ever they are.

- **Support independent living** so that North Lincolnshire is a place that supports people to exercise their human right to living ordinary lives with a quality of life.

- **Nothing about us without us**, so that North Lincolnshire is a place that engages Vulnerable Adults as experts in designing both individual circles of support and strategic community capacity.

- **Enhance mental wellbeing** so that North Lincolnshire is a place that recognises and supports the emotional and spiritual wellbeing of its residents.

- **Raise aspirations** so that North Lincolnshire is a place where every Vulnerable Adult wants to be the best they can be and achieve their potential.

- **Close the gaps** so that North Lincolnshire is a place where there is equality of opportunity for all and no Vulnerable Adult and family is disadvantaged.

- **Prevention of early deaths** so that North Lincolnshire is a place to live well, age well and die well in their place of choice.

- **One vision one workforce** so that North Lincolnshire is a place where services are person centred acceptable, accessible and available at the right place at the right time.

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**Provider Impact** - The impact for service providers operating in North Lincolnshire is the expectation that providers will continually examine and challenge their approach to service delivery in line with the priorities above.

We will know we are successful when Vulnerable Adults say:

- I am supported to maintain my independence for as long as possible.
- I understand how care and support works and what my entitlements and responsibilities are.
- I am happy with the quality of my care and support.
- I know that the person giving me care and support will treat me with dignity and respect.
- I am in control of my care and support.

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**Transforming the way that we operate**

In line with the vision and priorities identified in the Vulnerable Adults Strategy, an Adult Social Care Offer has been developed to encourage community and individual resilience with an emphasis on an enabling approach that supports individuals, their families and the local community to determine their own futures.

The Adult Social Care Offer is entirely compatible with the Care Act 2014 and focuses on people’s well-being, supporting them to live independently for as long as possible.

The collective ambition in North Lincolnshire, established through the Health and Wellbeing Board, is to transform services according to the three tiers of the Single Organisational Model, using the model will ensure:

- That approaches and services are person centred and designed around the needs of the individual or family.
- Needs are identified early and support is harnessed using universal community solutions or delivered at the earliest point.
People are self-supporting, resilient and self-managing.

For those who need services, services are targeted to meet assessed need and implemented locally.

We actively collaborate and engage with service users in assessment, decision making and planning.

That support plans are outcome focussed.

The three elements of the model are as follows:

**Universal Services** - accessible to everyone in North Lincolnshire. Many of these services can be found within the Community Wellbeing Offer. We focus on wellbeing, providing access to early advice and interventions to create a more resilient population.

**Targeted Services** - short-term services to enable independence. These include Access to care and support rehabilitation and reablement and Intermediate Care and support will continue to be provided with an emphasis on delaying and preventing the need for specialist support and intervention. The aim is to support adults to continue to live independently and lead fulfilling lives.

**Specialist Services** – A proportion of the population will require a level of support that cannot be met through Universal and Targeted services alone. Specialist support is available to people with learning disabilities, physical disabilities and mental health needs. Support is available for older people through home support and in care homes. The aim is to reduce the number of permanent placements in residential and nursing care as people are enabled to access home-based and community-delivered services that meet their particular needs. These target the intended outcomes of the Better Care Fund across health and social care.

**Provider Impact** - The impact for providers is to develop new ways of working with and between different providers. The model does not represent a hierarchical pathway. We will actively work to ensure vulnerable adults and their families & carers are as independent as possible with the lowest level of support required and by the least intrusive means.

We want to work with providers who are able to deliver the right service being offered at the right time. For some people this could mean specialist services are delivered from the start of someone’s care. For other people they may need a very low level preventative or befriending support service at an early stage.

**Mental health**

North Lincolnshire’s Adult Mental Health and Wellbeing Strategy has developed in partnership with stakeholders; ‘Moving Forward Together’ is North Lincolnshire’s Adult Mental Health and Wellbeing Strategy for 2011 to 2016.

Building on the good practice from past and current mental health guidance, ‘Moving Forward Together’ proposes a number of significant initiatives to improve the quality of mental health services in North Lincolnshire and addresses the following key priorities:

- Well-being, Prevention, Access & Personalised Care.
- Personal Budgets in Mental Health Services.
- Modernising Mental Health Services in North Lincolnshire.
- Mental Health Services in Primary Care.
- Rehabilitation and Recovery and Local low secure care.
- Reducing Over-reliance on Acute Inpatient Beds.
- Housing Related Support.
The aim of the strategy is to outline the vision and outcomes for people with mental health needs and the emotional wellbeing of the population. Themes emerging from this strategy have been used to inform this market position statement.

The Mental Health Crisis Care Concordat; improving outcomes for people who experience mental health crisis (February 2014), gives a commitment to improve the system of care and support locally so that people in a crisis are kept safe and helped to find the support they need.

Under the principles described in the Concordat, local agencies will work together to prevent people experiencing a crisis and focus on prevention.

5 – Understanding Demand and Needs

Our People

This section includes an outline in terms of the people living in North Lincolnshire, the analysis indicates how service providers may have or be able to identify opportunities to develop services that will meet the need.

The latest mid-year population estimates for North Lincolnshire, (2013, ONS), suggest there are currently 168,700 people resident in the local authority district. This represents more than a 10% growth since 2001. The largest growth has been amongst our older population.

Provider Impact – There is expected to be an increase in the number of people aged 85 years and over with relatively poor physical and/or mental health and they are likely to require significant support whether living in the community or in residential care.

There is an expectation that there will be a significant increase in the opportunities for service providers who offer a range of support needs for older people in our communities.

The graph below shows the population of North Lincolnshire split by each of the five localities:

Age profile - Although birth rates increased between 2001-11, the local population remains slightly older than the national and regional average, and this trend looks set to continue for the next 20 years. Between now and 2020 the population is projected to rise by a further 4% and the 65+ population by a further 19%.

Compared with the national average, North Lincolnshire has more people in their middle years, and a growing number of people aged 85 years and older. 15% of this age group are living with at least three long term conditions.

Diversity - The local Black and Minority Ethnic (BME) population is relatively small compared with other local authorities in the Yorkshire and Humber region, representing an estimated 7.3% of the resident population, compared with 19% nationally. This population is growing and becoming increasingly diverse; the largest growth being amongst White Europeans. By 2030, our BME communities are projected to grow by a further 30%.
Health and wellbeing profile - Looking at the health and wellbeing of North Lincolnshire’s population as a whole, it is improving year on year. Life expectancy at birth is now much closer to the national average, at 78.8 years for men and 82.2 years for women. However, we know that people are living longer with long-term conditions and often in ill health.

Health inequalities - We know that these averages mask significant inequalities in North Lincolnshire, including a 6.5 and 10.5 year gap, respectively, in average male and female life expectancy at birth between residents living in our least and most deprived 10% of neighbourhoods.

Public Health Needs – Lifestyle, The number of people at risk of lifestyle related diseases in North Lincolnshire remains above the national average, including:

- Higher rates of adult smoking, (including in pregnancy) and smoking related diseases.
- Higher rates of high blood pressure, adult obesity and physical inactivity in the adult population.

These lifestyle factors plus the ageing population all contribute to:

- Higher rates of Type 2 diabetes, chronic kidney disease and coronary heart disease in the adult population.
- Higher emergency hospital admission rates for chronic long term diseases.
- Higher premature death rates from causes considered preventable.

Living arrangements - An estimated 4% of people aged 65+ in North Lincolnshire live in care homes, this rises to 16% of all people aged 85+.

The vast majority of our older (85+) population live at home, with informal and formal support, and want to remain living independently in their own homes for as long as possible.

Care homes - There are 61 registered care homes in North Lincolnshire, with a capacity of 1812 beds. This represents less than 4.6 homes, per 1000 people aged 75+ and compares with 4.2, homes per 1000 people nationally.

The graph below shows information relating to care homes that have provided statistical information regarding the number of registered beds, vacancy rates and funding types for the people currently resident.

Provider Impact – We expect to see a continuation in the increase in numbers of people from the Black and Minority Ethnic Community living in North Lincolnshire.

For service providers this means they need to be able to cater for this growing group of people according to cultural need and tailor made support.

Provider Impact – The increased population of older people will not necessarily translate into a growing demand for residential care capacity.

As more and more older people choose to remain living in their own homes for longer, and take more control over their own care, the demand for informal community and home based independent living services, including transport, smaller, adapted housing, befriending, leisure and social activities is likely to rise.
Carers - According to the 2011 Census there are just over 18,000 people providing unpaid care for relatives or friends in North Lincolnshire. 80% are of working age. It is estimated that demand for care will rise rapidly in line with increasing life expectancy, putting additional pressure on the working age population.

This trend is already apparent in North Lincolnshire. Since 2001 the number of carers has grown by 14%. This is faster than the general growth in the population which was just under 10%.

**Provider Impact** – The largest growth area is in carers providing 50+ hours a week. The recommendations listed in the Commissioning Strategy for Carers are summarised as:

- We need more:
  - Opportunities to identify carers – in particular targeting “hard to reach” carers, including BME backgrounds.
  - Opportunity for Carer Breaks
  - Engagement with carers who support people with mental health needs and learning disabilities
- We need to start supporting carers education and training needs and to remain in or return to employment
- We need to keep services which have been commissioned to focus on carer’s health – but give greater consideration to alleviating stress and focus on carer health checks.

**What do vulnerable adults and their carers say?**

We have established the views of people who use services and their carers through a number of engagement events and feedback on the services people receive.

The aggregated themes emerging in order to ensure people are able to be well, stay well and able to live an independent life to the full are as follows:

**Independence keeps people well**, people want to remain independent for as long as possible and they want to use services as little as is necessary.

**Strong Support Networks**, people want to be independent and choose how to live their life, but when they need support the clear message is that this needs to be delivered closer to home, in the community and by trusted family, friends or carers.

**Tapping into community and life expertise** will yield rewards in relation to increased ownership of those who may be more vulnerable. The engagement demonstrated that there is an appetite amongst the communities and localities to support each other.

**Residential Care**, people living in a care home have told us they want to:

- Make their own choices.
- Be involved in the community and join in activities in the care home.
- Maintain their mobility, independence and skills.
- Have information that is easy to understand.
- Compare cost and quality to know which are the best services.
- Know where to find information and that it is consistent and up-to-date.
- Have a network of people who provide support, including carers, family, friends, community and support staff.

**Carers**, carers and partners of people living in a care home want to:

- Know that their relative is enjoying themselves on a break.
- Participate in activities with their relative and have support provided so that the family carer and the person living in the care home can both enjoy themselves.
- Have a say in the way that care is provided.

**Quality and Review Feedback Form**

People who live in care homes and their carers are asked to complete an annual ‘Quality and Review Feedback Form’. Key themes include:

- I am happy with staff who I can have a laugh with.
- I would like the quality of the food to improve and be more consistently better.
- I am happy with my home.
- I would like to go out on activities. It is a pity there is no transport.
- I would like more opportunities to go out.

**People with a Learning Disability**

We have an ageing learning disability population and more young people transitioning into adulthood with learning disabilities and complex conditions.

The prevalence of working age people with a learning disability is approximately 2.22% to 2.71% of the population. The prevalence of working age adults with Autistic Spectrum Disorder was found to be 1.0% of the adult population in England. The prevalence of working age people with Downs Syndrome is approximately 6.25 per 10,000 population.

The demographics continue to have an impact on our commissioning intentions and priorities as North Lincolnshire Council continues to prioritise resources to the most vulnerable people. We are focusing transformation activity on developing high quality services that help people to help themselves. These services support people to remain independent and resilient.

**Adults with Complex Care needs**

There are currently a small number of people with complex care needs with behaviours that challenge for whom it has not been possible to meet their needs locally in a community setting, as such people are currently residing in out of area settings or in local independent specialist provision.

A number of people have expressed a desire to move into a community setting in North Lincolnshire. To make this possible, the support available locally will need to diversify to match the demands of people with complex care needs.

Our ambition is to develop the market to enable people to live close to home and prevent people from having to move away from their local area.

**Market opportunities**

The market opportunities for people with complex care needs are explained fully in the North Lincolnshire Complex Care MPS. The scope of people who are included in the Complex Care MPS are:

“**Young people, adults and older people with a learning disability and/or autism who display or are at risk of displaying behaviour that challenges**

**And**

**People who without receiving proactive prevention, via the identification of additional risk factors for development of behaviour that challenges, would go on to be included in the above”**

**Mental health**

There are just over 2,000 people of working age who are unable to work and claiming incapacity benefits in North Lincolnshire as a result of mental ill health.

An estimated 12,000 16-64 year olds suffer from common mental health disorders in North Lincolnshire. Depression is also estimated to affect between
11-15% of our older population, (2,900-4,300 people), with between 3-5% (870-1,450) experiencing depression in its most severe form.

There are estimated to be 480 adults and 70-140 older people in North Lincolnshire with schizophrenia.

Currently there are an estimated 2050 people with dementia in North Lincolnshire, of which an estimated 15% (300) will have the most severe form of the disease. The expected prevalence of severe mental disorders, such as dementia and psychosis, amongst our older population will rise significantly, as a result of increasing life expectancy.

Loneliness and social isolation can have a significant impact on people’s mental health. This can be a particular difficulty for people who live in the more rural areas of North Lincolnshire. People who are socially isolated experience more stress, have lower self-esteem and are more likely to have sleep problems than people who have strong social support. All of these things can have a negative effect on people’s general wellbeing and can affect anyone at any age. We welcome working with providers to reduce social isolation.

Extra Care housing

A need has been identified for alternative housing options that can reduce social isolation and facilitate support that offer increased choice for people maintaining their own tenancies.

Extra Care is a housing and support model that is seen as an ideal solution that is designed to help frail, elderly and disabled people live as independent a life as possible within the community.

A proposal has been developed for a scheme that will make our communities safer and stronger by bringing together a housing solution with community based care and support, helping us deliver on our priorities to deliver care closer to home. The scheme should support people’s wellbeing, including their mental and physical wellbeing, supporting people to access employment in the community.

The scheme will support people at all levels of need in the Single Organisational Model as follows:

- Universal, providing access to meals and group activities.
- Targeted, crisis response to a fall or other critical situation where intensive support is required.
- Specialist, planned interventions to meet a person’s assessed needs and outcomes.

Provider Impact – There will be implications for current providers and we will need to work with them to make sure their services are focussed on outcomes around maximising access to mainstream activities, reducing loneliness and working to ensure positive mental health for services users. There may also be opportunities for service providers diversify.

We want to work in partnership with providers to promote the health, wellbeing and physical needs of the whole population, with the following themes:

- Emotional health, wellbeing and prevention
- Targeted mental health promotion and prevention in older people, including age appropriate early diagnosis and intervention.
- Support for employment.
- Increased access to Personal Budgets
- Personalised social care services, including developing care homes and domiciliary care providers with specific expertise in working with people with severe and enduring functional mental health problems.

Provider Impact – We would welcome dialogue with landlords and with support providers to support them to work in partnership to develop new supported living arrangements, which could include Extra Care Schemes.
6 - The Current State of Supply

This section describes a number of services provided locally for vulnerable adults. Service provision has been listed against the three levels of need within the Single Organisational Model. The information identifies potential development opportunities for providers to respond to local need.

The opportunities highlighted below show a move away from traditional models of support to community solutions offering flexible support to people who are part of the community.

Universal

Universal services are those services that are available to the whole population in North Lincolnshire. Services include Council managed services such as leisure centres, libraries and museums as well as wider provision such as GPs, dentists, community policing and community centres. Vulnerable adults will benefit in the same way that the wider community benefit from using these services and may need targeted or specialist support to access universal services.

Community Wellbeing Hubs - North Lincolnshire Council has established four Community Wellbeing Hubs, these are in Scunthorpe, Barton, Brigg and Epworth. The Hubs will provide a model of delivery based on an ‘early help’ approach, offering universal services to the majority whilst targeting resources to those who are most vulnerable in the communities. Targeted and Specialist support will also be available within the Hubs.

Market opportunities

We want to begin dialogue with service providers who want to offer services and activities from within the Community Wellbeing hubs focussing on prevention, early help, information, advice, guidance and resilience.

Health Improvement In response to the lifestyle risks identified, the local coverage of some key public health programmes for adults including older people, such as bowel and breast cancer screening, remain above target. The following initiatives are currently active:

- **Smoking.** Adult smoking rates are falling in North Lincolnshire, but more slowly than nationally and remain above the England average. North Lincolnshire Council has a tobacco control strategy that sets out how people can make their homes smoke free and provides information to employers to realise the economic benefits of helping their employees stop smoking.

  The Smokefreelife service has been commissioned to deliver a free stop smoking service operating throughout North Lincolnshire. The service is available for everyone, no matter what age people are or how long people have smoked. The service provides professional support, face-to-face, online and through text or email.

- **NHS Health Checks.** The NHS Health Check programme is a service that is delivered by the NHS and aims to prevent, detect and reduce the impact of heart disease, stroke, diabetes, kidney disease and certain types of dementia amongst the middle aged population. People between the ages of 40 and 74 years are invited for a free check.

- **Older People and Falls** Falls are a significant cause of injury amongst older people and can often lead to further health problems, hospital admissions as well as admissions to care homes. The rate of injuries due to falls in people aged 65 and over remains significantly below the national average in North Lincolnshire. The falls service is delivered in North Lincolnshire by the NHS Core Therapy team.

- **Spotlight on Obesity** Levels of excess weight in adults have been increasing steadily over the last 20 years, from just over 50% of the population in 1993 to just over 60% in 2012. In North Lincolnshire rates are significantly higher than this and in 2012 the comparable rate was 70%.

  From April 2015, the council is planning to commission a Weight Management Service. Tendering for this service will be advertised on the YORtender website.
Targeted

Targeted services include access to a range of care, support, rehabilitation and reablement and Intermediate Care. This is provided with an emphasis on delaying and preventing the need for specialist support and intervention. The service includes The Lilacs, a registered rehabilitation unit, which can be accessed when individuals require a period of rehabilitation. The Community Support Team, our home care service provides support, including personal care, in the individual’s home. The Enabling Support Team which works with individuals in relation to social and practical needs within the home.

Housing Related Support - Following a recent review, a number of Housing Related Support services operate in North Lincolnshire to enable people to maintain their accommodation. A range of fit for purpose accommodation-based and community solutions are currently in place. There is no intention to commission additional capacity for Housing Related Support service imminently.

Support at Home Community

Community Support for You is the arrangement we have to provide homecare through external providers to make support more personalised and outcome focussed. To support people to live in their own homes or in supportive living settings, we want to further develop the range of specialist home support providers.

Residential Care for Adults - There is already an extensive provision of residential homes for older people where learning disability is a secondary need. People are electing to live in their own home rather than in residential settings.

Market opportunities - We want to involve people who use services, carers and service providers in designing future advocacy services for vulnerable adults. Following review any tender opportunities will be advertised on YORtender.

Mainstream housing – People with learning disabilities are also supported to live in mainstream housing, rented from social or private landlords, or owned by themselves or their families.

Market opportunities

We would like to work with landlords and service providers to increase capacity for supported living arrangements with wrap around support provision, the provision of Personal Assistants paid for through people's personal budgets and through Community Support for You options.
North Lincolnshire is one of 17 trailblazer sites piloting the use of direct payments for people in care homes. During 2014-15 it is envisaged that there could potentially be people with complex care needs using this method of payment to purchase elements of support within a care home. This will lead to improved choice for people who use services and innovative services offered by providers.

**Universal / Targeted / Specialist**

**Bespoke Solutions** - People across the full spectrum of needs have been choosing a range of solutions rather than using traditional services, with the emphasis being on achieving individual outcomes through a range of community-based activities and solutions.

**Workforce supply**

Vulnerable adults need a workforce with a focus on preserving and maintaining dignity and providing safe high quality services. The following points are the expectations we encourage service providers to be working towards to ensure a high standard of service is delivered to vulnerable adults:

- Increase safeguarding knowledge and awareness.
- Involving adults and older people in the recruitment process and within training sessions.

**Market opportunities**

The opportunity for existing service providers is to diversify from a residential model to develop community provision or to offer nursing provision at the very high specialist level of need.

- Ensuring staff are trained in safeguarding to a level that is applicable to their role. Including understanding the Mental Capacity Act and Deprivation of Liberty Safeguards (DoLS).
- Ensuring staff value and understand how to provide safe high quality services and are skilled in providing personalised support.
- Providing well-trained and supported staff, deployed in the right places at the right times with the right management.
- Providing accredited training to keep up to date with best practice and maintain professional development.
- Supporting staff to value and use competently the best practice approaches to communication with each individual they support.
- Ensuring all staff receive regular supervision and support.
- Developing staff to understand the Safeguarding Vulnerable Groups Act 2006 legislation. Staff should be aware of their roles and responsibilities and know how to report concerns.

The Health and Social Care Workforce Development Team would like to begin dialogue with providers to understand the level of skill within the external provider market in order to identify specific training needs and develop joint solutions. The team would like to see more local organisations taking on people with a learning disability and mental health needs into paid employment.

We want to encourage service providers to offer a range of bespoke solutions with the use of Personal Assistants that are focussed on individual need will be required, including helping people develop social skills.

The opportunity for existing service providers is to diversify from a residential model to develop community provision or to offer nursing provision at the very high specialist level of need.
Supply and demand – market forecast

The arrows in the table below indicate anticipated changes in demand for local services in terms of numbers of service users supported.

<table>
<thead>
<tr>
<th>Service Area</th>
<th>Market Forecast</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reablement, Intermediate Care &amp; Rapid Access Rehabilitation Services</td>
<td>✓</td>
</tr>
<tr>
<td>Telecare/Telehealth</td>
<td>✓</td>
</tr>
<tr>
<td>Equipment and Adaptations</td>
<td>✓</td>
</tr>
<tr>
<td>Personal Assistants</td>
<td>✓</td>
</tr>
<tr>
<td>Direct Payments</td>
<td>✓</td>
</tr>
<tr>
<td>Provision of Information &amp; Advice</td>
<td>✓</td>
</tr>
<tr>
<td>Carers Breaks</td>
<td>✓</td>
</tr>
<tr>
<td>Integrated Hospital Discharge</td>
<td>✓</td>
</tr>
<tr>
<td>Traditional Day Care</td>
<td>✓</td>
</tr>
<tr>
<td>Community Activities</td>
<td>✓</td>
</tr>
<tr>
<td>Domiciliary Care</td>
<td>✓</td>
</tr>
<tr>
<td>Extra Care Housing Provision</td>
<td>✓</td>
</tr>
<tr>
<td>Supported Housing</td>
<td>✓</td>
</tr>
<tr>
<td>Residential and Nursing Care</td>
<td>✓</td>
</tr>
<tr>
<td>Respite Care</td>
<td>⇔</td>
</tr>
<tr>
<td>Outreach</td>
<td>⇔</td>
</tr>
<tr>
<td>Transition</td>
<td>⇔</td>
</tr>
<tr>
<td>Specialist Accommodation Services (Learning Disability/Mental Health)</td>
<td>✓</td>
</tr>
<tr>
<td>Integrated Health and Social Care Services</td>
<td>✓</td>
</tr>
</tbody>
</table>

- ✓ service predicted to increase
- ⇔ service predicted to remain at a similar level
- ⇩ service predicted to decrease
7 - Case Study

There are numerous case studies that could have been used to demonstrate the ways in which we would like service providers to develop innovative opportunities to support us to:

- Develop communities where people can live more independently of public services.
- Build on the assets (focusing on what people can do rather than what they cannot do) in our communities and recognising those skills and personal strengths.
- Respond in a joined up way when people need help and support.
- Ensuring that help and support promotes independence and that individuals will have control over their lives.

MR A was admitted to permanent residential care on 19th March 2012 following concerns about his health. Mr A was an alcoholic, lacked poor hygiene and was at high risk regarding his alcohol abuse, smoking, falls and potential for fire due to his smoking. Mr A had capacity and agreed that permanent residential care would be in his best interest, even though he was reluctant to give up his home in the community, he understood the reasons for permanency.

In September 2013, Mr A, who still had capacity, was making requests that he did not want to be in residential care and that he wanted to return to the community. His alcohol intake had reduced and with support from within the home his personal care/hygiene had improved. However there was still the risk of him turning to alcohol again once back in the community. The Enabling Support Team and Occupational Therapists were involved in seeking out a suitable, sheltered group dwelling accommodation. This was found and viewed by Mr A and was happy to accept the property. Practitioners looked at health issues, the potential for alcohol abuse and risk of being targeted by the public if he began drinking again.

The following support services were needed to enable Mr A to sustain his tenancy and live as independently as possible:

- Key Safes - in place at property using the handyman service.
- Information provided of activities within his community that he may like to attend.
- Befriending Service.
- Housing Related Support, this was put in place to support his return back into the community.
- Personal Budget - care agency visits on a daily basis to assist with personal care / dressing.

With this support, Mr A is now able to prepare his own meals and hot drinks with support and guidance of healthy eating from care workers. His return to the community is working well.
8 - Key Commissioning Intentions

This section outlines key commissioning intentions that describe the future commissioning for vulnerable adults.

- **Local community provision**, we will prioritise providing flexible 24/7 care and support in people’s homes and communities, with services that support the right people, at the right time, in the right place with the right support. This includes ensuring adequate provision over nights and weekends and ensuring sufficient coverage of home support services in our market towns and villages as well as urban areas.

- **Providing prevention and early intervention support**, we want people to be supported at the earliest opportunity to avoid their needs escalating.

- **Community led solutions**, develop a market place that is able to respond using community led solutions enabling healthy communities for all. This could include promoting healthy and safe lifestyles and responding to issues relating to isolation and loneliness.

- **Longer term support**, develop a range of longer term, wrap around specialist support within local communities in accordance with the wishes of individuals. This might include home support or recruiting and employing a Personal Assistant (PA).

- **Specialist needs**, developing solutions for individuals with specialist needs that support them to remain active, retain their independence and reduce isolation/loneliness. This could include community or volunteer support in Community Wellbeing Hubs or in other community settings.

- **Dementia**, improve quality of care for people with dementia in care homes and living in the community. Creating dementia Friendly environments and spaces for people with complex needs.

- **A whole life course approach**, services are commissioned according to a whole life course approach at all levels to ensure support is holistic and consistent, meeting people’s needs and outcomes.

- **Contract monitoring**, will involve people who use services and their carers. Contracts will be monitored to ensure services are safe and of high quality and support people to achieve their individual outcomes.

- **Flexible support**, we will commission services that support people to live independently including flexible support solutions.

- **Mental health issues**, we will work with providers to deliver personalised social care services including developing specialist expertise in working with people with severe and enduring functional mental health issues.

- **Specialist services**, we will develop specialist services that are innovative in their field of expertise to provide safe quality care.

- **Mental health and physical health needs**, we will ensure commissioned services provide equal parity to mental health and physical health needs.

- **Maximising independence**, people with specialist and complex needs can access wellbeing services locally with support from staff with the right skills to meet their needs – focusing on promoting and maximising independence.

- **Complex needs**, specialist services should actively support people with more complex needs to access targeted and universal services.

- **End of life care**, improving the quality end of life care across by all sectors of the market.

- **Provide value for taxpayers money**, we will continue to move away from block contracts. New services will be paid according to services actually delivered, or payment from a service user’s personal budget along with their own contribution.

- **Outcome-based commissioning**, services will be defined and paid for on the basis of a set of agreed outcomes, shifting the basis on which services are purchased. Commissioning will no longer focus on processes but on results and the impact on people’s lives.

- **Enhancing quality of life**, people who use services routinely participate in personalised, meaningful activities and services are provided in environments that are suited to people’s needs.

- **Provision for family carers**, services should support family carers to lead a full life and access training and support programmes.
• **Rural provision**, we aim to ensure that anyone who needs care and support services can find solutions to meet their needs. This includes the opportunity to enhance rural provision.

• **Safeguarding and advocacy**, services should be delivered by providers who can clearly identify safeguarding responsibilities in the organisation and support whistle blowing to prevent abuse.

• **Commissioning Strategy for Carers 2014 - 2017 - Priorities for Change**, The strategy sets the direction for future local commissioning and service development, a range of priorities are included in the Commissioning Strategy for Carers.

• **Residential Care Alternatives**, we want providers to work with us to develop a range of targeted and specialist community solutions such as:
  - Accessing activities, information, advice and guidance offered in the Community Wellbeing Hubs.
  - Employing a Personal Assistant to provide a range of support such as; enabling people to undertake meaningful activities, understand people’s support needs, help manage people’s support package, manage their finances and help people purchase home support through a Community Support for You provider.
  - Short breaks for carers.
  - Wrap around support that enables a person to live in their own home including purchasing home support or with support recruiting and employing a Personal Assistant.
  - We want to work with providers to enable people to live in the community with the least restrictive support, to enable people to live their lives independently with choice and control. The opportunity for service providers is to develop innovative support solutions that people with a personal budget will want to choose as alternatives to living in residential care.

  - Service providers should note there are an increasing number of people who want to spend their budget making decisions and choosing innovative support solutions in the community. We want to work with providers who can offer flexible support solutions. For some people who are unable to live independently, this could include living in a ‘Shared Lives’ model, where carers offer accommodation and support.

    We will reduce admission numbers and spend on registered residential care and provide more community based alternatives.

**Provider Impact** – We want to work with providers to increase the availability of choice of services and choice of service providers with organisations who have staff with the necessary skills and experience.

The following references to earlier sections highlight key areas of interest for service providers:

• **The Care Act 2014** - The Act reforms the law relating to care and support for adults.

• **Better Care Fund** - Ensure a transformation in integrated health and social care.

• **Mental Health** – The national strategy for mental health “No Health Without Mental Health” and the Mental Health Crisis Care Concordat.

• **Joint Strategic Needs Assessment** – providing intelligence to providers in shaping their business.

• **Joint Health and Wellbeing Strategy** – How agencies will work together.

• **Community Wellbeing Hubs** - Providing a model of delivery based on an ‘early help’ approach.

• **Personal Assistants** - Enabling people to remain independent.

• **Supply and Demand** – Market Forecast.
9 - Key Market Development Opportunities

The list of indicative commissioning activities planned for 2014-15 for North Lincolnshire Council are published in Appendix B of North Lincolnshire Councils Market Position Statement 2014-15. At present this list includes the following:

- Community Support for You, providers wishing to deliver Community Support services in North Lincolnshire should register on the YORtender website, selecting the Health and Social Care Services category. Opportunities to join the arrangement are advertised on a bi-monthly basis.

- Installation and Monitoring of Telecare/ Telehealth Equipment.

- Provision of Advocacy services including IMCA, IMHA and Generic.

- Provision of Domestic Abuse Service.

Support is available to service providers through the following key partnerships active in North Lincolnshire.

- **North Lincolnshire Learning Disability Partnership Board** - is a multiagency group of people who meet to decide what needs to happen to make the lives of people with a learning disability better. It includes people with a learning disability, their carers and advocates and other professionals.

- **Carers Advisory Partnership** - is an influencing body concerned with improving the lives of unpaid carers in North Lincolnshire. The group has the ability to influence decisions that will be made about developing and improving services for carers.

- **Health and Social Care Workforce Development Team** – provide support for providers of social care at the targeted and specialist level of need.

- **North Lincolnshire Council Economic Development Team** - actively supports businesses and their development by providing free and confidential services including information, advice and signposting. The team works extensively with local businesses and investors to act as a single access point of contact to simplify the process of business support by liaising with other Council departments on behalf of clients.

- **Buy4northernlincolnshire**, is an initiative by public and third sector organisations in North and North East Lincolnshire to promote contract opportunities to interested businesses. The website is designed to make it easier for businesses to access contract opportunities.

- **Community Safety Partnership** - the partnership investigates hate crime incidents and if appropriate will explore surrounding issues regarding individual localities. Training and Support is available to the partnership on working with people with complex needs.
**Internet Links**

Social Care Offer  
http://www.northlincs.gov.uk/EasySiteWeb/GatewayLink.aspx?alId=14231

Health and Wellbeing Board  

Joint Strategic Needs Assessment  
http://nldo.northlincs.gov.uk/IAS_Live/sa/jsna/

Joint Health and Wellbeing Strategy  

The Care Act 2014  
http://services.parliament.uk/bills/2013-14/care.html

Better Care Fund  

Community Support for You  
http://www.northlincs.gov.uk/people-health-and-care/services-for-adults/solutions-for-you/support-at-home-introducing-community-support-for-you/

YORtender  
https://www.yortender.co.uk/

The Cross Sector Provider Partnership  
http://www.northlincs.gov.uk/people-health-and-care/information-for-professionals/policies-procedures/cross-sector-provider-partnership/

North Lincolnshire Safeguarding Adults Board  
http://www.northlincs.gov.uk/people-health-and-care/information-for-professionals/safeguarding-procedures/safeguarding-adults-board/

Health and Social Care Workforce Development Team  

North Lincolnshire Council Economic Development Team  
http://www.northlincs.gov.uk/jobs-business-regen/regeneration/

Buy4northernlincolnshire  
http://www.buy4northernlincolnshire.co.uk/

Indicative commissioning activities  
http://www.buy4northernlincolnshire.co.uk/buy4northernlincolnshire/assets/documents/market-position-statement-2014

Commissioning Strategy for Carers  
http://www.northlincs.gov.uk/people-health-and-care/carer-support/family-carer-team/support-for-carers/

Mental Health Crisis Care Concordat  

Local Account  

Joint North Lincolnshire Mental Health and Wellbeing Commissioning Strategy 2011 - 2016  

Public Health Outcomes Framework  
http://www.phoutcomes.info/public-health-outcomes-framework/domain/2)

North Lincolnshire Complex Care Market Position Statement  