

Adult Social Care Scrutiny Commission

Adult Social Care Commissioning Intentions 2016/17

Date: 12th July 2016

Lead director: Steven Forbes



Useful information

- Ward(s) affected: All
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1. Purpose of report

- 1.1 To provide the Adult Social Care Scrutiny Commission with an overview of the Commissioning Intentions for Adult Social Care (2016/17).

2. Summary

- 2.1 Adult Social Care is responsible for the planning and commissioning of services for vulnerable adults, and for substance misuse.
- 2.2 The Department has set out its commissioning intentions (2016/17) in the attached document, which will be published and available for stakeholders to view.
- 2.3 The commissioning intentions support delivery against the Departments commissioning aims to commission evidence based quality services that safeguard users; and prevent, postpone and minimise the need for formal care and support.

3. Recommendations

- 3.1 The Adult Social Care Scrutiny Commission note the content of the report and the commissioning intentions document for publication.

4. Report/Supporting information:

- 4.1 ASC commissioning intentions are driven by the wider strategic picture in the City, taking into account a wider set of strategies such as Better Care Together (BCT), Closing the Gap, and The Manifesto. In addition the commissioning intentions support the delivery of the Departments recently agreed strategic priorities for 2016/17, namely:
- 1) Improve the experience for our customers of both our own interventions and the services we commission to support them
 - 2) Implement a preventative and enablement model of support, to promote wellbeing, self-care and independence and recovery into an 'ordinary life'
 - 3) Improve the opportunities for those of working age to live independently in a home of their own and reduce our reliance on the use of residential care, particularly for people with learning disabilities or mental health support needs

- 4) Improve our offer to older people supporting more of them to remain at home and to continue to reduce our reliance on the use of residential care
 - 5) Improve the work with children's social care, education (SEN) and health partners to continue to improve our support for young people with care and support needs and their families in transition into adulthood
 - 6) Continue to develop our understanding of the benefit to our customers of what we do, and to learn from this information so as to improve and innovate
- 4.2 Scrutiny Commission have already reviewed the Strategic Priorities for 2016/17 at its meeting in May 2016.
- 4.3 The Strategic Priorities alongside legislation and national policy, the Joint Strategic Needs Assessment and Joint Specific Needs Assessment's, user views and analysis of our performance, help to define our needs and priorities. These are brought together into one document; the Adult Social Care (ASC) Commissioning Strategy 2015 – 19.
- 4.4 Adult Social Care aims to commission services that deliver quality and value for money and safeguard users from abuse; and to prevent, postpone and minimise the need for formal care and support by commissioning a system that promotes independence and well-being.
- 4.5 The commissioning intentions will support the delivery of the strategic objectives of the commissioning strategy: early intervention and prevention; supporting independence; carers; market development.

5. Financial, legal and other implications

5.1 Financial implications

The commissioning strategy will promote independence, enablement and other preventative interventions. Whilst this will benefit service users it will also support reducing our current levels of expenditure on long term package costs.

Martin Judson, Head of Finance

5.2 Legal implications

There are no legal implications arising directly from this report.
Emma Horton, Head of Law (Commercial, Property & Planning)
Ext 1426

5.3 Climate Change and Carbon Reduction implications

The commissioning intentions table indicates that there will be an increase in the provision of supported housing and extra care in the city. Consumption related emissions from supported housing are now included within the council's operational carbon footprint, and therefore increased provision will negatively impact the council's emissions. Comments will be provided for specific sites as these are brought as individual reports. Increasing telecare provision could potentially reduce ASC transport related emissions if this replaces some face-to-face provision.

Louise Buckley, Senior Environmental Consultant, 37 2293

5.4 Equalities Implications

The diversity of Leicester and the impact of deprivation on a substantial portion of the population pose unique challenges to the council when planning and commissioning services to meet defined Adult Social Care needs. Our Public Sector Equality Duty requires the council to ensure that it does not discriminate against any particular group because of their protected characteristic(s), that it promotes equality of opportunity in regard to the achievement of intended service outcomes, and that it fosters good relations between different groups of people. Therefore, commissioning requirements must ensure service user access to services that meet their particular individual needs, enable individuals to exercise their choice in provision (and outcome achieved), and also take into account how best to meet individual's needs arising from their protected characteristic(s), such as appropriate service provision that addresses particular cultural and religious needs.

Irene Kszyk, Corporate Equalities Lead, ext 374147.

5.5 Other Implications (You will need to have considered other implications in preparing this report. Please indicate which ones apply?)

None

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Introduction

This document sets out our commissioning intentions for Adult Social Care for 2016/17 that will deliver against our strategic commissioning aims to commission evidence based quality services that safeguard users; and prevent, postpone and minimise the need for formal care and support. The commissioning intentions support the delivery of the Adult Social Care Commissioning Strategy (2015-19) which supports the overall purpose of the Department to protect and empower the most vulnerable.

In addition to the commissioning intentions laid out here, the Corporate Procurement Plan, 2016/17 indicates planned procurement activity that will support delivery of a number of these intentions.

Strategic Perspective

ASC commissioning intentions are driven by the wider strategic picture in the City, taking into account a wider set of strategies such as Better Care Together (BCT), Closing the Gap, and The Manifesto. In addition the commissioning intentions support the delivery of the Departments recently agreed strategic priorities, namely:

- 1) Improve the experience for our customers of both our own interventions and the services we commission to support them
- 2) Implement a preventative and enablement model of support, to promote wellbeing, self-care and independence and recovery into an 'ordinary life'
- 3) Improve the opportunities for those of working age to live independently in a home of their own and reduce our reliance on the use of residential care, particularly for people with learning disabilities or mental health support needs
- 4) Improve our offer to older people supporting more of them to remain at home and to continue to reduce our reliance on the use of residential care
- 5) Improve the work with children's social care, education (SEN) and health partners to continue to improve our support for young people with care and support needs and their families in transition into adulthood
- 6) Continue to develop our understanding of the benefit to our customers of what we do, and to learn from this information so as to improve and innovate

These, alongside legislation and national policy, the JSNA and JSpNA's, user views and analysis of our performance, help to define our needs and priorities. These are brought together into one document; the Adult Social Care (ASC) Commissioning Strategy 2015 – 19.

The strategic commissioning strategy supports achievement of the vision and purpose for ASC which is to protect and empower the most vulnerable people in Leicester. The practice of ASC will help people to be as independent as they are able; promote dignity; ensure equality; and allocate resources carefully so that they are available to support those who need it most. This means

improving outcomes for vulnerable people and ensuring that publically funded care and support is provided where it is cost effective and only when it is really needed.

The strategy emphasises the need to join together as a whole system with other commissioners and with users, carers and communities. We want to provide a holistic approach to supporting and improving health, wellbeing and independence, keeping safe and reducing the need for support.

Links to Better Care Together

There are many common strategic themes between BCT and the ASC Commissioning Strategy. These include:

- Reducing levels of need at the higher tiers and promoting independence
- Working to ensure an integrated system that includes individuals and communities as well as organisations
- Addressing rising demand with reducing budgets

ASC commissioning intentions include a range of activity that will support people to remain at home wherever possible and support timely discharge from hospital where a stay has been required. This forms the core ASC commitment to BCT.

ASC commissioning strategy aims:

1. To commission services that deliver quality and value for money and safeguard service users from abuse
2. To prevent, postpone and minimise the need for formal care and support by commissioning a system that promotes independence and well being

In order to achieve the aims, the following strategic objectives are set out:

1. Support market development of services that provide access to early intervention and prevention
2. Commission services which enhance or increase service users' independence and focus on the most vulnerable
3. Commission services that support Carers to fulfil their role
4. Support the development of a vibrant market, providing a diverse range of high quality services that meet local needs.

The following table outlines the Departments commissioning intentions against the strategic commissioning objectives.

Strategic Objectives: Commissioning Intentions

Early Intervention and Prevention	Enhancing and Increasing Independence	Commission services that support Carers to fulfil their role	Support the development of a vibrant market, providing a diverse range of quality services that meet local needs
<p>Review commissioned preventative services within the voluntary and community service for their effectiveness.</p>	<p>Increase the number of supported accommodation sites across the city</p>	<p>Commission services based in the voluntary and community sector which:</p> <ul style="list-style-type: none"> -Identify Carers at an early stage -Provide timely information and advice -Offer drop-ins, peer support, activities and networking opportunities -Provide advocacy -Offer training to support the caring role 	<p>Facilitate the market to encourage a sufficiency of preventative, enablement and support services, including support for carers to make caring more sustainable</p>
<p>Commission an increase in Assistive Technology options. Both workforce and process developments will be made in order to ensure appropriate technologies are made available to the right customers at the right time and reviewed at regular periods.</p>	<p>Integrate services for those in transition between adult and children’s social care</p>	<p>Monitor new Carers Assessment to ensure eligible need is identified in line with the Care Act</p>	<p>Ensure sufficiency and diversity of service provision across all types of service that are required to provide care and support including, for example:</p> <p>support services and universal and community services that promote prevention; domiciliary (home) care; homes and other types of accommodation care; nursing care; live-in care services; specialist care; support for carers; re-ablement services; sheltered accommodation and supported living; shared lives services; other housing options; community support; counselling; social work; information, brokerage, advocacy and advice services; direct payment support organisations.</p>
<p>Support community capacity building and Asset based community</p>	<p>Develop further ‘extra care’ sites across the city</p>	<p>Where gaps are identified in the market we will seek ways to</p>	<p>Commission brokerage services that enable more people to take direct</p>

developments.		stimulate appropriate service provision	payments that gives greater choice in how and when is provided to them.
Work with health colleagues to review the mental health pathway to support a joined up system that supports service users.	Increase the number of independent living, building based opportunities to meet the identified need.	Commission universal support for Carers to enable them to access information and support at the earliest stage in their journey without the need for ASC intervention.	Jointly commission services for Dementia to implement the Better Care Strategy which includes Dementia as a priority work-stream.
Through the use of capital monies, we will commission a programme of scheduled works across mainstream universal provision across the city will increase access for disabled groups and promote community integration.	Consider more innovative approaches to the commissioning of domiciliary support, which deliver outcomes and enable individuals to achieve independence.		Support the development and delivery of a workforce strategy
Commission a range of services to support the implementation of the Joint Commissioning strategy for Learning Difficulties	Commission increased usage of AT / tele care provision to support people to remain at home safely.		Use of contracting & procurement to incentivise value for money, sustainability, innovation and continuous improvement in quality; and assure that service provision adds social value.
	Continue to commission day opportunities through our open framework agreement.		Consider the use of incentives for providers
	Continue to commission respite care		Increase integration and joint commissioning with health