

Adult Frailty and Long Term Conditions: Commissioning Strategy 2016-2019

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Introduction

The purpose of this Commissioning strategy is to outline the local authority's intentions in Adult Care Commissioning for Adult Frailty and Long Term Conditions across Lincolnshire. The key commissioning intentions focus on supporting people to live in their own homes for as long as they wish by developing high quality, personalised services that are flexible, responsive and give people choice and control over how their care and support is provided.

The strategy and associated activities support people with eligible needs as outlined by the Care Act 2014. The customer groups supported by this strategy are Older People, People with Physical Disabilities and People with Sensory Impairments.

The Joint Health and Wellbeing Strategy (JHWS) provides the context and structure for how partners across Lincolnshire can add value by working together differently. This includes collaboration between commissioning authorities, partners, providers and people in our communities. The JHWS sets out five strategy themes for 2013-2018 and helps inform Adult Care's Commissioning Intentions¹.

The population of Lincolnshire is one of the most dispersed in the country and this represents challenges for providing a consistent range of quality services. It is predicted that the elderly population in Lincolnshire will increase by 3.4% in the next 10 years, and the rate of increase in people aged over 85 is particularly pronounced with an expected increase of 52.4%².

Nationally, pressure on social care is increasing, and providing necessary services for older people and people with long term conditions poses a significant challenge. The need for care and support is rising and there has been a long term reduction in funding for local councils from central government so services have increasingly had to be managed in this context. We recognise that meeting the

challenges ahead requires a collective response and we will continue to work closely with partners (such as the Police and NHS) to develop the solutions the market needs using key drivers such as the Better Care Fund (BCF).

The council will continue to prioritise quality and safeguarding and encourage providers to improve consistency and supply of service. We aim to continue to find more creative ways of improving services and building relationships with our strategic partners such as the NHS and care providers.



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Adult Frailty and Long Term Conditions

¹ www.lincolnshire.gov.uk/residents/public-health/behind-the-scenes/policies-and-publications/joint-health-and-wellbeing-strategy/115339.article

² www.lincolnshire.gov.uk/residents/adult-social-care/for-providers/key-documents/market-position-statement/127863.article

Key Facts

13,675 older people supported by adult care

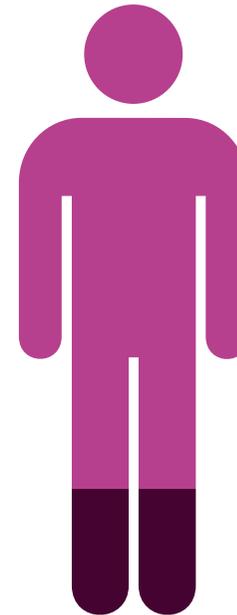


2,115 people with physical disabilities supported by adult care

55% of people seen by reablement went on to live independently with no ongoing services

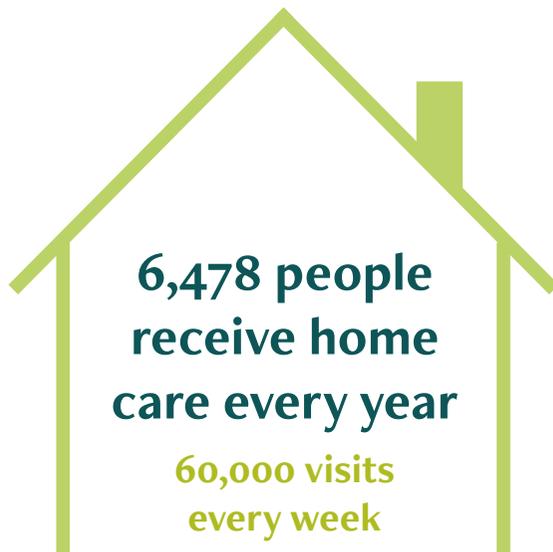


12% population live within 20% of the most deprived areas of Lincolnshire



20.7% of the population is aged over 65

80.3% of people who use our services say they have control over their daily life



6,478 people receive home care every year

60,000 visits every week

£96m spent on services for older people

£14m spent on services for people with a physical disability

Aim 1: 'To enhance the quality of life for people with care and support needs'

Priorities

- Helping people manage their own support as much as they wish, so that they are in control of what, how and when support is delivered to match their needs
- Carers are supported to balance their caring roles and maintain quality of life
- People with care and support needs are able to find employment, maintain a family life, contribute to community life and avoid loneliness or isolation

Key Measures

- The number of people using services with control over their daily life, taken from the Adult Social Care User Survey.
- The number of clients in receipt of long term support who receive a direct payment.

We will

- Continue to commission services that support people to remain living independently
- Ensure that everyone has a personal budget to plan and manage their own support.
- Promote the use of direct payments and support people who want to take their personal budget as a direct payment
- Continue to work with partners to develop dementia friendly communities
- Review respite provision across the county to ensure it is meeting the requirements of both people who use services and their carers
- Enhance the range of Day opportunities available and support people to identify opportunities in their own communities
- Continue to support people with sensory impairment, with access to a specialised service
- Endeavour to secure adequate budgets to support the homecare sector and work closely with providers of care to improve the image of the role of the care worker. Increase the level of qualifications and recruitment.
- Explore the best way of managing care that recognises people's assets and the support provided by carers



Aim 2: 'To delay and reduce the need for care and support'

Priorities

- Adults with care and support have the opportunity for the best health and wellbeing throughout their life, and have access to support and information to help them manage their care needs
- Health and care organisations working in partnership to achieve earlier diagnosis, intervention and re-ablement so that people and their carers are less dependent on intensive services
- When people develop care needs, they receive care and support in the most appropriate setting (most often at home) which enables them to regain their independence

- Provide accessible information and advice to enable people and their carers to make informed decisions and plan for the future
- Utilise short term care and respite to support people and their carers to maintain their caring role
- When we commission services, we will work with providers to ensure carers and their needs are identified at an early stage
- Ensure that opportunities already available in communities are utilised to support the wellbeing of individuals
- Work with partners to ensure a strategic approach to Housing for older people and people with long term conditions

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Key Measures

- A reduction in the number of permanent admissions to residential and nursing care homes of people aged 65 and over
- An increase in the number of requests for support for new people where the outcome was universal services or signposting

We will

- Continue to invest in re-ablement services to increase the number of people who can access the services and the proportion of people who are supported to regain their independence
- Maximise the benefits of telecare to support people to be less dependent on intensive services
- Work jointly with the NHS to develop intermediate care services that maintain peoples independence for as long as possible
- Ensure that after a hospital admission people, are supported in a timely way to return to independence, as soon as is appropriate



Aim 3: 'To ensure that people have a positive experience of care and support'

Priorities

- People who use health and social care and their carers are satisfied with their experience of care and support services
- Carers feel that they are respected as equal partners throughout the care process
- People and their families know what choices are available to them locally, what they are entitled to and who to contact when they need help
- People with care and support needs are treated with respect and dignity. Support is sensitive to the circumstances of each person.

Key Measures

- A reduction in the number of delayed transfers of care from hospital
- An increase in the number of people in receipt of long term support who have been reviewed

We will

- Develop our approach to co-production and identify opportunities for older people and younger adults with sensory and physical disabilities, and their carers to actively contribute to service development and redesign
- Continue to engage with the provider market in Lincolnshire and beyond, to stimulate a diverse range of appropriate high quality services
- Continue to improve the information we provide about the care and support services available to people
- Ensure, through quality assurance, that people's experience of care services is used to inform the care and support we commission
- Ensure that services we commission can demonstrate dignity in care
- Continue to develop robust contract monitoring and quality assurance across all commissioned services
- Work with NHS commissioners and care regulators to ensure that services are sustainable and safe, through the sharing of intelligence and joint working
- Work with NHS and other partners to ensure that quality and dignity of care is maintained when people are at the end of their life



Key Commissioned Activities

As we commission independent providers to supply nearly all of our services, we expect that these services meet certain standards to ensure we meet our legal duties. We set out clear requirements through our contracts and specifications. These are increasingly outcomes-based, which helps to ensure that we continue to commission high quality services to meet people's needs.

Once a service is commissioned we monitor our contracts and undertake service reviews which include understanding people's experience of the service. This helps us to take action when needed to rectify any problems and to further develop our services, understand our market and support our communities.

Information and Advice

Page 128 We have commissioned a Care and Wellbeing Hub providing information and advice on care and support services in Lincolnshire. Last year, over 20,000 people were supported with information and advice services via contact with the Hub. In addition, we provide information and advice services through our website MyChoiceMyCare³, which gets an average of 3,000 users each month.

Home Based Reablement (£4m)

Re-ablement provides services for people with poor physical health to help them accommodate their illness by learning or relearning the skills necessary for daily living. We have been actively redesigning models of care support for frail elderly people in the community in order to avoid and/or reduce the length of stay in hospital. Our county-wide re-ablement service, which was recommissioned in Autumn 2015, is a short-term intensive service that supports people in their own home to improve their ability to stay independent.

³ <http://mychoicemycare.org.uk/>



Home Care (£22m)

Through our contracted services we currently provide 5,100 hours per day of care to people in their own homes, this equates to 60,000 visits per week. It was recognised that we needed to change how we provided home care services to enable us to contract manage and monitor more effectively the quality of service we provided to people in Lincolnshire. In September 2015 we moved to a new model of contracting which allows us to work closely with the prime provider in each area of the county to ensure cost and quality of care is managed effectively. This has enabled more certainty for the providers, which will allow them to explore how they can move towards an outcomes based home care service, over the life of the contract.

Respite Care (£7m)

We are currently reviewing the provision of respite and short breaks, we will be examining the quantity and quality of existing services to ensure that they can meet current and future demands and that they are good value for money.

Day Opportunities (£.7m)

We are reviewing the day opportunities available to people across the county. We will seek to ensure that people can access a range of opportunities which offers choice and allows the support people need to be personalised to their needs. We will also look at how people can find out and access activities that are going on in their own community.

Dementia Services

Local information about dementia can be found in the Lincolnshire Joint Strategy for Dementia 2014-17⁴. A review of the Action Plan for the Joint Strategy for Dementia will be undertaken in the autumn and a report will be

produced to provide feedback on progress in Lincolnshire.

Adult Care has recently commissioned a Dementia Family Support Service, which is provided by the Alzheimer's society. This new service model will provide information, advice and on-going support to families after diagnosis through to end of life. We will review the service after 6 months of implementation to ensure the service is 'fit for purpose' and provide assurances that this new service is effective in its delivery.

Residential and Nursing Care (£67m)

There are 279 care homes in Lincolnshire, 186 for older people and 93 for people aged 18-64 with disabilities. There are approximately 6,096 people aged over 65 in care homes and 1,127 aged 18-64. 3,500 of clients are funded by Adult Care. Whilst CQC has a key role for ensuring providers meet the fundamental standards of quality and safety, we also have a responsibility to assure ourselves of the safety and effectiveness of commissioned services. Under the current contract every Care Home receives a minimum of an annual contract monitoring visit to review contract compliance and the quality of care.

A new Framework agreement for Residential and Nursing Care homes was implemented in 2015. We recognise that not all providers are the same and with over 270 Care Homes in Lincolnshire we need to target our resources effectively. A risk matrix tool is used to identify those at high risk of delivering poor quality care and these will have more frequent visits and action plans in place. This and other sources of information help us to monitor the quality of the services. We will be working closely with the local care sector association, LINCA to identify future market development.

Direct Payment Service (£11m)

Demand for personalised social care is growing in Lincolnshire. Many people who use personal assistants take a Direct Payment to pay for the service they

⁴ www.lincolnshire.gov.uk/residents/adult-social-care/strategies-policies-and-plans/joint-dementia-strategy-2014-%E2%80%932017/121668.article

receive. Currently 5,725 people and carers are in receipt of a Direct Payment and this is expected to grow which will in turn increase the demand for personal assistants.

In October 2015 we commissioned a Direct Payment support service in order to respond to requirements of the Care Act 2014 and increasing demand for the service. A review of the service in 2016 will examine activity levels across the service to ensure that the uptake of direct payments is being actively promoted, particularly with people with physical and sensory impairments.

Sensory Impairment (£0.6m)

The service commissioned by Lincolnshire County Council is a preventative and re-ablement service for both adults and children with a sensory impairment, both cognitive and acquired and their associated disabilities.

The service was recently recommissioned and from 1 April 2016, 'Action on Hearing Loss' will be the prime provider working in partnership with Lincoln and Lindsey Blind Society (LLBS) and South Lincolnshire Blind Society (SLBS), known locally as Lincolnshire Sensory Services. The new service will increase the number of people who are sensory impaired to retain their independence, it will assist in reducing social isolation, encourage better use of technology and have an integrated approach to working with health organisations and other partners.

The sensory impairment service contributes towards Lincolnshire County Council achieving positive outcomes for people in alignment with the Adult Social Care, Public Health and Children's Outcomes Framework.

It is estimated that there are 90,000 people in Lincolnshire with a moderate, severe, or profound, hearing impairment and this number will rise to 126,000 by 2030.

It is estimated that there are 270 people aged 18-64 in Lincolnshire with a serious visual impairment and 14,000 people aged 65 and over with a moderate or severe visual impairment.

Extra Care Housing

There are currently eight extra care schemes with a total of 288 units in Lincolnshire. The needs assessment conducted in 2014 clearly identified that this was insufficient to meet the demand in the county. We are currently in the process of procuring extra care developments across the county through a new type of contract where we will provide identified gap funding to the development of schemes. In addition to this, Adult Care will be working with Public Health and District colleagues to develop a Preventative Housing Strategy, which will further the aim of meeting peoples need in their own homes. For a further analysis of the need for extra care housing, see our market position statement⁵.

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⁵ www.lincolnshire.gov.uk/residents/adult-social-care/for-providers/key-documents/market-position-statement/127863.article