



**Open Report on behalf of Glen Garrod,
Executive Director - Adult Care and Community Wellbeing**

Report to:	Adults and Community Wellbeing Scrutiny Committee
Date:	24 February 2021
Subject:	Adult Care and Community Wellbeing Market Position Statement 2020-2023

Summary:

This report invites the Adults and Community Wellbeing Scrutiny Committee to consider the attached Market Position Statement 2020 - 2023.

Actions Required:

To review and comment on the attached draft Adult Care and Community Wellbeing Market Position Statement 2020-2023, prior to its final publication.

1. Background

Lincolnshire County Council's current Adult Care Market Position Statement (MPS) was in place between 2015 and 2018 and requires a refresh. The MPS should be used as the basis for strategic commissioning and should be published, reviewed and updated regularly.

Market development is a statutory requirement for all local authorities following the implementation of the Care Act 2014. Key to this is the development of an MPS, which the guidance states should include information on the local authority's direction of travel, policy intent, key information and statistics on needs, demand and trends.

The purpose of an MPS is to outline a council's strategic direction surrounding the care and support market; what services are currently being delivered within the sector; and to inform current and potential providers of upcoming business opportunities. It is intended to be used by providers to plan for the future, informing business choices such as investment in capital or personnel.

The Developing Care Markets for Quality and Choice (DCMQC) programme produced a briefing paper for local authorities 'Developing a Market Position Statement' that recommended what should be in an MPS and how to develop one.

'Developing a Market Position Statement' recommended the following broad content:

- Analysis of the current population, unmet demand and anticipated projections of future demand for services
- Specific population groups (e.g. older people, people with learning disabilities) and geographical spread of these populations
- Information from local providers about recent and potential future changes in demand (e.g. older people seeking care who are more frail than previously)
- The number of people being supported by the local authority and current spend by the local authority (or with partner commissioning agencies)

The Adult Care and Community Wellbeing Market Position Statement 2020- 2023 (attached at Appendix A to this report) has been produced by:

- using desk top research such as scrutiny reports;
- holding virtual 1-2-1 meetings with key stakeholders including Heads of Service or key commissioning service leads to identify any areas that are missing such as data, commissioning intentions, market opportunities and strategic direction and agree sign off for their areas of expertise;
- joint working with colleagues from the People's Commercial Team, who have reviewed the entire document; and
- engagement with LinCA (Lincolnshire Care Association).

The document sets out what Lincolnshire aims to achieve, the financial challenge, the current service delivery, commissioning intentions, market opportunities and also references Covid-19 in terms of innovation and challenges.

It is the intention to make the Adult Care and Community Wellbeing Market Position Statement 2020 – 2023 accessible online, via the Lincolnshire County Council website. It is intended to be a live document, with links to local plans and strategies.

2. Conclusion

A MPS is seen as good practice within the sector and the updated version will aid in developing a care and support market in Lincolnshire that delivers a wide-range of sustainable high-quality services.

3. Consultation

a) Risks and Impact Analysis

No impact

4. Appendices

These are listed below and attached at the back of the report	
Appendix A	Final Draft Adult Care and Community Wellbeing Market Position Statement 2020 - 2023

5. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

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**Lincolnshire County Council
Adult Care and Community
Wellbeing
Market Position Statement
2020-2023**

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Foreword

We are pleased to present Lincolnshire's second Adult Care Market Position Statement (MPS) 2020 – 2023. Its purpose is to outline what services are currently being delivered in Lincolnshire and to signal to the care market further development opportunities for care and support services. The development of this document represents the start of a dialogue between the Council and providers of care and support for adults, to ensure we are offering the best services for local residents.

Lincolnshire have adopted a proactive approach to helping people remain independent, safe, and connected to family and friends. Our focus is therefore on reducing dependency and developing services based on outcomes rather than tasks. Looking to the future, we will continue integration with our health partners, focusing on models of enhanced prevention and early intervention. We will also continue to work in partnership with the Voluntary, Community and Social Enterprise (VCSE) and independent sectors to ensure there are a range of good quality services or better promoting independence and wellbeing across Lincolnshire, reducing dependence on care services and developing alternative models of care within the community. As with the previous MPS housing and increasing housing options for people remains an important element and whilst progress has been made there is more to do. Critical to this area is how well we can work together – as seven district councils, the county council, NHS and, with housing providers.

2020-21 has been an extraordinary year due to the Covid 19 global pandemic. During this period in Lincolnshire there has been a high level of close working between partners that has enabled the health and care system to respond quickly and effectively to presenting risks. Collaborative and responsive working has led to rapidly re-designed processes and re-modelled services, delivering innovation and change in days/weeks that in normal times would take months or years. Organisations, teams, and individuals have come together to solve problems and identify solutions; elements of which will be beneficial for the sector in the longer term. Lincolnshire County Council would like to thank the Adult Social Care sector along with colleagues in health, housing and all related services, for their outstanding response to the pandemic. The commitment and hard work of everyone is to be applauded.

This MPS is presented in a way which outlines different themes of support and potential services rather than a more traditional 'client groupings'. This is to support providers to highlight the broad range of opportunities there are in the market across various sectors. Opportunities for providers are far-reaching; such as developing new technologies and changing culture, even more established service provision provides scope for 'doing things differently'

This MPS reflects market intelligence, which was available during 2019-20 and all figures were correct at the time of writing. The document reflects information we hold on current need, our thoughts on how demand for services will change and how these changes could be met in the future. More detailed information will be available on the council website, which will be updated, both in response to your feedback and comments and as our thinking and information continues to change. We also acknowledge that there are some gaps and areas where we need to work with partners and providers to develop a better understanding of future demand and need.

There will be much for us to reflect on together when we move collectively towards the 'new normal' of a post Covid 19 world and this MPS will need to be updated further to include some of the key findings as to date, the full impact of the Covid 19 pandemic is yet to be felt on services. However in advance of this we felt it was still important to take stock and to share with you points of interest in relation to some of the key issues and opportunities that will emerge during the next three years.

The council remains committed to working in partnership to provide good quality, sustainable care and support to people in the county. To collaborate with people, their families and carers along with wider health and social care providers and stakeholders to ensure this commitment is fulfilled.



Councillor Mrs Patricia Anne Bradwell OBE

Deputy Leader of Lincolnshire County Council, Executive Councillor for Adult Care and Health Services, Children’s Services



Glen Garrod

Executive Director of Adult Care and Community Wellbeing Services



Melanie Weatherley MBE

Chair of Lincolnshire Care Association.

Introduction

As we move into the next stage of our journey to achieving the vision for Lincolnshire it is essential that providers in adult community care and health services understand how they can contribute in the development and delivery of outcome focused services. Our Market Position Statement provides information and links to help achieve our ambitions.

Why do we need a Market Position Statement?

- The [Care Act 2014](#)
- The [NHS Long Term Plan](#)
- To encourage commissioners, people who use services, carers and provider organisations to work together to explain what services and support is needed in the area and why.

What do providers need to know?

- Our Lincolnshire County Council [Corporate Plan](#)
- [Lincolnshire Joint Strategic Needs Assessment](#)
- The [Better Care Fund](#)
- [Joint Health and Wellbeing Strategy for Lincolnshire](#)
- [Lincolnshire Safeguarding Adults Board](#)

Our performance against the Adult Social Care Outcomes Framework can be reviewed [here](#).

Who is the Market Position Statement For?

The MPS promotes opportunities to:

- Existing providers of adult community care services and health related services in Lincolnshire;
- Community care providers and organisations not currently active in Lincolnshire;
- Voluntary and community organisations as well as people interested in local business development and social enterprises;
- Private providers;
- Lincolnshire residents who are interested in co-producing services.

Key partnerships

- [NHS Integrated Care Systems](#)
- [Lincolnshire Learning Disabilities Partnership Board](#)
- [Lincolnshire Autism Steering Board](#)
- [LINCA](#)
- Voluntary Engagement Team (VET)
- [Care Quality Commission \(CQC\)](#)

Local businesses and start-ups can access support, grants, training and much more. Contact our Economic Development team via: economicdevelopmentteam@lincolnshire.gov.uk

Key messages to the Market

LCC wants to work alongside partners and providers to support an innovative, diverse and sustainable market which will meet the care and support needs of residents in Lincolnshire. We want to work with the market to:

1. prevent inappropriate admissions to acute hospitals, encourage the timely discharge of people, home from hospital including evenings and weekends, adhering to the 'home first principles'.
2. maximise joint commissioning with the Lincolnshire Clinical Commissioning Group, particularly around homecare & home-based reablement services.
3. collaborate and work with district councils and other housing providers around Housing, particularly Extra Care.
4. ensure providers have staff that are suitably competent to deal with more complex needs of service users, ensuring remuneration recognises the additional skills required. The workforce skills base needs to be suitable and consistent across the region and be supported by the right levels of leadership. After attracting staff ensure retention of those with the right skills, capability and values. Consider flexible working hours where feasible to attract and improve retention of staff. Providers to ensure they maintain an adequate workforce in all regions.
5. help to create micro commissioning opportunities for some remote areas of the county, maximising and strengthening community capability when providing care solutions.
6. encourage the development and making better use of community groups & charitable organisations.
7. raise awareness that mental health difficulties can hit anyone at any time. Providers need to clearly understand the prevention techniques, identification and support requirements that people need. However, if somebody develops mental health difficulties their primary need remains the same.
8. support the expansion of digital technology in better meeting need for care and support.

Key priorities

Workforce: Any organisation is only as strong as the people that work within in it. Our highest priority is therefore the Adult Social Care workforce. Skills for Care statistics suggest that the Adult Social Care workforce may need to increase by 35% by 2035 to help meet estimated need. There is also the need to ensure people have the right training and skills to continuously improve outcomes. Work is close to being finalised with LinCA on a workforce strategy and associated action plan and will be available in 2021-22.

Residential Rates – With the joint agreement of the sector and LinCA we have agreed an interim solution in relation to residential rates for 2021-22. During Covid -19 the number of residents in receipt of a commissioned service reduced by 10% based on recent figures. We will commence the work to agree future rates beyond that through the approach that is now well tried and tested.

Strengths based practice – Adult Care and Wellbeing (AC&CW) is working hard to embed strength based practice into assessment and care management activities. This approach considers people's strengths and aspirations rather than starting with a deficit view of needs. We are conscious that if people are to Maximise Independence it is also important that service providers also adopt strength based models of working. We are therefore keen to explore this approach further with the sector.

Homes for independence: AC&CW have been working closely with district councils and have developed a partnership approach called Homes for Independence. This is one of the foundation stones for helping people to continue to live independently. This includes specialist housing, homes for independence and extra care. Additionally the AC&CW occupational therapy services work with individuals to maximise their safety and independence in the home. There are a range of interventions offered which will usually include equipment on loan from the Lincolnshire integrated community equipment service and home adaptations using the Disabled Facilities Grants or District Council Housing Revenue Account (depending on tenure).

Joint commissioning arrangements: are well established in Lincolnshire with Adult Care and Public Health particularly in Specialist Adult Services who act as the Lead Commissioner for Adult Care and Continuing Health Care for Adults with Learning Disability and or Autism. Adult Care and the Lincolnshire CCG are currently exploring opportunities to build upon this commissioning approach linked to the development of four levels of Independence. Linked to this work is the development of a Joint Accommodation Strategy for Specialist Adult Services which will be available in 2021-22.

Accommodation and care for people with complex needs: Whilst we generally have a strong market for Residential and Community Supported Living in Lincolnshire we do have some on-going challenges commissioning consistently good quality accommodation and care for people with complex needs. We are therefore keen to explore new approaches to commissioning outcomes for people with complex needs and are open to ideas of how capital investment and partnership working may be better utilised to enhance outcomes for people with complex needs.

Lincolnshire County Councils digital roadmap: AC&CW have developed a digital roadmap which aims to set out how our vision can be realised by harnessing new ways of working and use of digital technologies. Digital innovations will be considered in conjunction with budget planning and workforce planning. The roadmap has been produced with input from AC&CW senior management, council members, and Information Management & Technology (IMT). It takes into consideration a number of central and local government and independent health and social care publications, and their key themes or recommendations. The roadmap focuses on three key themes:

- **Digital citizen:** Empowering the person and, where appropriate, their families and carers to maintain their own independence, manage their own care and support needs, and interact with the council and care services in a way that is convenient and effective for them.
- **Digital workforce:** Supporting the care workforce in delivering high quality care at all times, as part of a network of professionals who can communicate easily with each other, with access to people's records and care plans at the right time, supported by the best decision support and monitoring tools.

- **Digital community:** Integrating services and technologies across social care and the NHS so that people receive support and care in the place that is most convenient to them, whilst using health and care resources in the most effective way.

The council encourages the use of digital technologies to assist in the provision of care and support and improve people's lives.

Local context

The population of Lincolnshire is currently estimated to total 755, 833 people. Lincolnshire is made up of seven districts, as demonstrated in *figure 1*. The rate of Lincolnshire's population growth has increased in recent years but latest figures show that it is below the national rate of growth. *Figure 2* demonstrates the future population projections for people aged 18-64 and figure 3 demonstrates the future population projections for people aged 65 and over. The trend towards an ageing population profile is set to continue. For further information regarding Lincolnshire demography please visit the [Lincolnshire Research Observatory](#).

Figure 1 Map of Lincolnshire demonstrating district level population figures

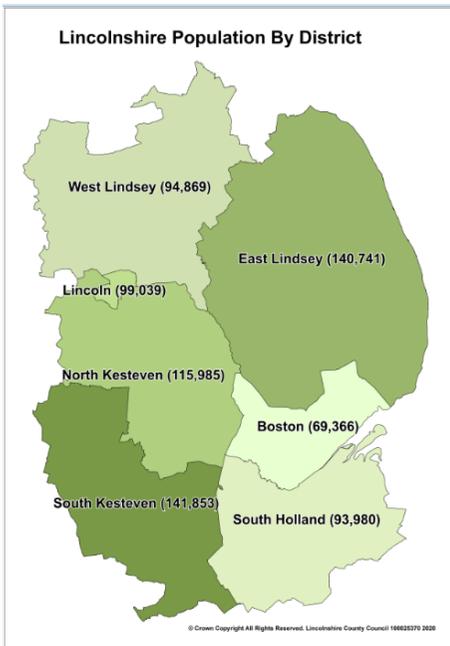


Figure 2: Demonstrates people aged 18-64 future population projections

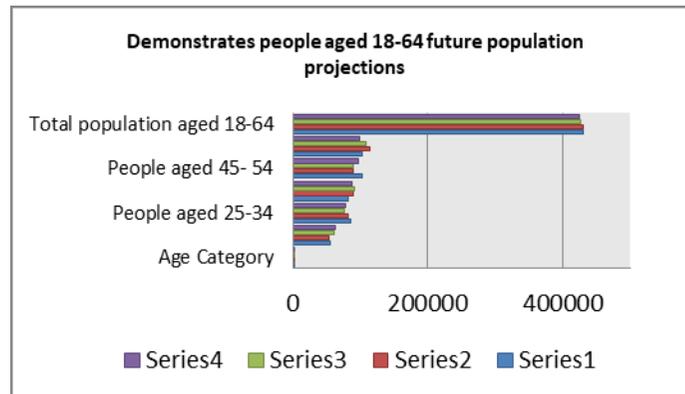
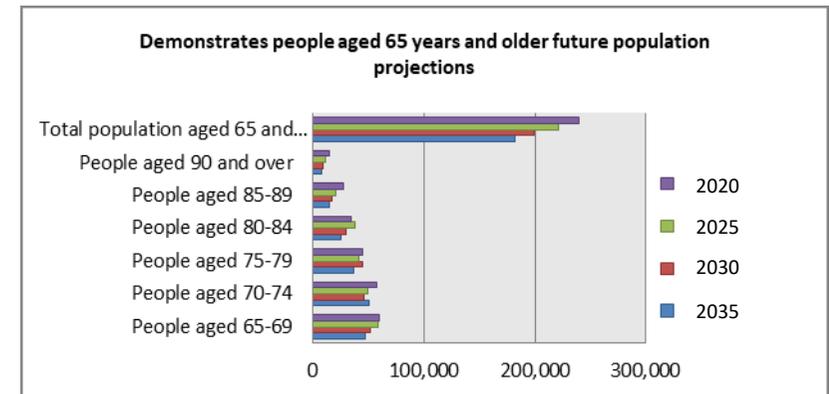


Figure 3: Demonstrates people aged 65 years and older future population



Financial Context

Figure 4: Demonstrates Adult Social Care Expenditure 2019 - 2020

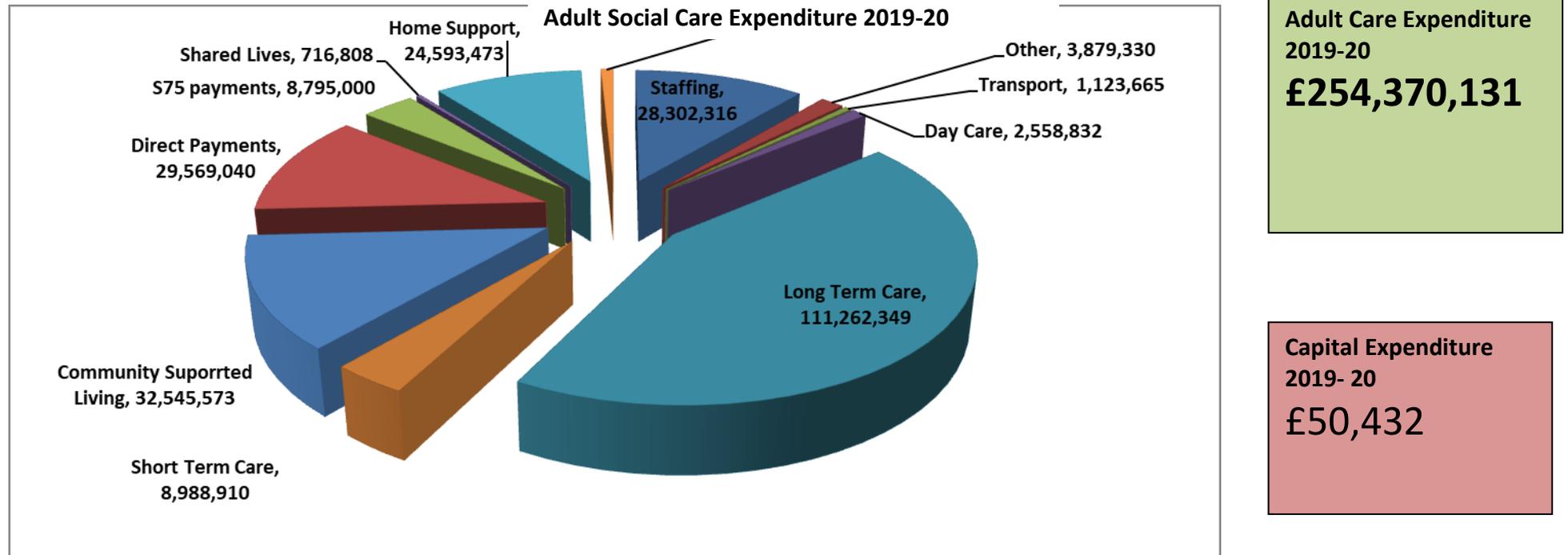


Table 1: Demonstrates Adult Social Care Income received 2019-20

Area of income	Amount received
Long Term Care	26,125,495
Short Term Care	1,235,837
Direct Payments	1,941,964
Community Services	8,185,423
Better Care Fund	46,374,000

Adult Care Income 2019 -20
£37,488,719

Workforce development

Lincolnshire's care workforce

The adult social care workforce is the key enabler to deliver the right services, at the right time, to the right standard to meet the needs of the service users in Lincolnshire. Skills for Care estimates for 2019/20 that there were 21,000 jobs in adult social care, across Lincolnshire split between local authorities (3%), independent sector providers (92%) and jobs working for direct payment recipients (5%).

Demographics

Skills for Care estimates that the majority (84%) of the workforce in Lincolnshire are female, with an average age of 44 years. Workers aged 24 and under make up 11% of the workforce and workers aged over 55 represent 27%. Given this age profile approximately 5,500 people will be reaching retirement age in the next 10 years. Nationality varied by region, in England 83% of the workforce identified as British, while in the East Midlands region this was 88%. An estimated 91% of the workforce in Lincolnshire identified as British, 5% identified as of an EU nationality and 3% a non-EU nationality, showing there was a slightly higher reliance on EU than non-EU workers.

(Source: Skills for Care) For further information follow <https://www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence/publications/local-information/My-local-authority-area.aspx>

Recruitment and retention

Skills for Care estimates that the staff turnover rate in Lincolnshire is 32.2%, similar to the regional average of 34.2% and similar to England, at 31.9%. Not all turnover results in workers leaving the sector, over two thirds (70%) of starters were recruited from within the adult social care sector, therefore although employers need to recruit to these posts, the sector retains their skills and experience. Adult social care has an experienced 'core' of workers. Workers in Lincolnshire had on average 7.9 years of experience in the sector and 66% of the workforce had been working in the sector for at least three years.

We know from the Secrets of Success report (Skills for Care, 2017) that the turnover rates are lower for providers who recruit for values. We also know that turnover rates tend to be lower in provider settings which achieve outstanding ratings in their Care Quality Commission (CQC) inspections. Outstanding providers have an average vacancy rate of 3.2%. Having a skilled and stable workforce is critical to the success of all our services, without enough competent and motivated care workers it will never be possible to achieve the outcomes we desire for the people who most need our services.

Workforce projections

The 'Projecting Older People Information System' (POPPI) uses figures taken from the Office for National Statistics to project forward the population aged 65 and over from 2018 to 2035. In the East Midlands region, the population aged 65 and over was projected to increase between 2018 and 2035 from 930,000 to 1.29 million people, an increase of around 39%. This poses potential challenges for the adult social care workforce. Skills for Care forecasts that, if the adult social care workforce grows proportionally to the projected number of people aged 65 or over in the population between 2018 and 2035, an increase of around 36%, equivalent to almost 8,000 jobs would be required by 2035. The increase in the ageing population is expected to lead to an increased demand for social care.

Qualifications

Skills for Care estimates show that 45% of the direct care providing workforces in Lincolnshire have a relevant adult social care qualification (47% in East Midlands and 50% in England). We know that turnover rates are lower for staff who have achieved qualifications, so it is important that providers are investing not only in mandatory training but also the development of their staff. There will be an increasing need for a workforce, which has higher levels of qualification and skills, whilst retaining the key values of social care.

Workforce development in Lincolnshire

Alongside health service provision, the Health and Care sector has the potential to create great career opportunities and to provide the right environment for local research, innovation and technology. The coronavirus epidemic of 2020 has raised the profile of care workers within the wider public and within government.

During the coronavirus pandemic the Department for Health and Social Care formally established a new 'care' brand to sit alongside the 'NHS' brand in England feeling of identity and parity. We expect that, over time, the use of this brand will help build recognition of social care as part of attracting people to the sector and remain within the sector. An ageing population will create an increasing need for a workforce, which has higher levels of skills, whilst retaining the key values of social care to address increased demand and complexity of care. Skills development and support will be provided to the sector to enable leaders and managers to understand the importance of retention, and how to measure and reduce staff turnover.

Greater use of the right technology

We are all affected by the impact of the COVID-19 pandemic in our daily lives. Despite the many challenges, we have seen the adult social care sector and more broadly the public sector adapt at scale and pace to support communities through this time. Technology has played a significant role in supporting the work of councils in collaboration with local partners and communities. Locally, we are starting to see people experience 'virtual' care in their community as well as continued collaboration between councils and care providers to support digital adoption, building on existing progress in this area. We are also realising the value of technology for connection, wellbeing and bringing communities closer together. Nationally, there is drive from government in supporting the adult social care sector to invest in and embed more technology and capturing recent learning will be part of the legacy that will shape future support.

Locally we will look to take stock of the recent digital activity used across adult social care which can be used to promote and stimulate continued work in this area with local communities aimed at embedding digital approaches to support people to live the lives they want to lead.

Building the workforce capacity

We will support and attract more recruits to the Adult Social Care workforce from new and traditional backgrounds. To support the Department of Health & Social Care recent recruitment drive 'Care for Others, Make a Difference', the campaign to encourage people with the right values to take up work in social care. Measures supporting recruitment and retention, training and many other workforce related factors are a key part in every one of our services.

Where do we want to be?

In order to have a workforce which is fit for purpose for the future we will actively support the development of:

- Career opportunities which attract the best of Lincolnshire at all stages of their working life
- The promotion of care work as a fulfilling and rewarding career
- The development and promotion of a caring in Lincolnshire brand
- The development and communication of 'care values' which are recognised by care providers throughout the region
- Attract more people to work in the sector and improving the diversity of the workforce
- Methods to reduce staff turnover and increase retention rates
- Methods for improved workforce selection and development
- A workforce that recognises the importance of co-production and applies the principles in their workforce that has the skills and confidence to respond to the changing needs of our service users, and to work across traditional boundaries
- Terms and conditions which recognise the importance of flexibility and support for health and wellbeing as well as financial benefits
- Leaders who can encourage and challenge the workforce, and also become evolutionary or disruptive innovators
- An open system of continuous improvement which promotes innovation from all parts of the sector
- Working with employers across the sector, and build on existing relationships to improve the perception of the adult care sector as a place to work

This requires collaborative working with employers across the sector and partners in local government, NHS and the wider economy.

To ensure that the level of investment needed to achieve these aims, increased levels of engagement with the Local Enterprise Partnership (LEP) and elected representatives (locally and nationally) and other partners is taking place.

Safeguarding

Lincolnshire County Council is committed to delivering our statutory responsibilities in relation to every aspect of safeguarding. The Lincolnshire Safeguarding Adults Board (LSAB) is a statutory body established by the Care Act 2014. It is a strong and effective, multiagency partnership, whose main objective is to protect all adults in its area who have needs for care and support and who are experiencing, or at risk of, abuse or neglect against which they are unable to protect themselves because of their needs. The focus for Lincolnshire is around the aims and objectives of the LSAB, shown in the Safeguarding diagram (Figure 5).

Figure 5: Demonstrates the aims and objectives of LSAB



In Lincolnshire, we have been successful in implementing the Care Act 2014, but we strongly believe that, as well as ensuring people are protected and supported, success is about preventing abuse happening in the first place. The LSAB are committed to this and will be publishing its first Prevention Strategy in the coming months. One of the corner stones of the Prevention Strategy will be stronger partnership working in order to improve wellbeing and to keep people safe from harm within Lincolnshire. Adult Care will take a lead role in supporting the delivery of this strategy.

The LSAB recognises that with the continued increase in the number of safeguarding referrals, there is a need for a collaborative and multiagency approach to support vulnerable adults who would have fallen through the gaps of systems and services. The Vulnerable Adults Panel (VAPs) and Team around the Adult (TAA) initiatives will provide a consistent approach by providing support to adults in complex situations who are at risk of significant harm but may not necessarily require Safeguarding intervention. The Team around the Adult initiative will be implemented countywide in 2020 and will use a creative, multi-agency approach to working with the adult in order to achieve their desired outcomes. The aim is to support sustainable change where more traditional intervention methods have not been successful. .

The 'TH19' Safeguarding Adults Review was published in July 2017 and was a driver for initiatives such as the Team around the Adult. It highlighted the need for different agencies to work together better to safeguard adults who experience financial exploitation as well as other forms of abuse alongside such as physical, sexual and psychological abuse. This is further supported by the introduction of the Modern Slavery Act 2015.

When carrying out safeguarding duties Adult Care must support and empower each adult to make choices and have control about how they want to live their own life, we call this 'Making Safeguarding Personal'. Our intervention in a person's circumstances must be proportionate, balancing rights and risks whilst giving consideration to the person's capacity to make informed decisions about their safety, and whether others, including children, are or are likely to be at risk of harm.

The Care Act 14 sets out six key principles of safeguarding that apply to all sectors and settings, including care and support services. These key principles underpin all of our day to day operations. It is crucial that providers also work within the statutory framework of the Care Act; working in partnership, cooperating with the local authority and others in respect of safeguarding adults. In addition, the introduction of the ['Provider Generated Quality Concern Form'](#) supports providers to prevent abuse and neglect by identifying when practice falls below expected standards and addressing issues before they become more serious concerns.

A specialist Adult Safeguarding Team, situated in AC&CW, is responsible for all Section 42 safeguarding enquiries in Lincolnshire. A Section 42 enquiry must take place if there is reason to believe that abuse or neglect is taking place or is at risk of taking place, and the local authority believes that an enquiry is needed to help it to decide what action to take to support and protect the person in question. This includes providing advice and support to all LCC staff, partners and providers. However, 'safeguarding is everyone's business' and all staff in adult care are trained to recognise and respond to concerns of abuse and/or neglect. This approach is also promoted by the LSAB who provides multi-agency safeguarding training to support a consistent approach across Lincolnshire.

In addition, in 2017, Lincolnshire CCG's secured funding for the Safeguarding Ambassadors role, a joint initiative with LinCA, LSAB and the wider County Council. The role of the Safeguarding Ambassador is to further enhance quality improvement and safeguarding practice in residential homes and to ensure that consistent, current and competent advice and support on safeguarding is locally available. This role continues to grow, with network meetings for Ambassadors proving popular and productive in sharing information and best practice and recognising how the role is influencing safeguarding outcomes.

Direct Payments

Current contracting arrangements and service provision

AC&CW believes that people should experience choice and control in the support they receive. One way in which adults can experience this is by taking a Direct Payment. Lincolnshire County Council's strategy is to offer a Direct Payment as a first choice to any eligible adult whose needs may be met through community based services. Over the last four years, the number of people receiving a Direct Payment in Lincolnshire during the year has remained at around 2,500, at any one time there are around 2,100 people with a Direct Payment. 53% of people with a direct payment employ a Personal Assistant .The remainder of Direct Payment recipients purchase care and support from CQC registered providers. Emerging trends include a slight increase in younger adults accessing Direct Payments and a slight decrease in older people.

The council wants to support people taking direct payment in the best way for them. The intention is to offer a range of methods to support people manage their Direct Payment. The intention is to offer a range of methods to support people in managing their Direct Payments, such methods include:

- Own bank account – the option remains for people who are confident in managing their own finances to open a bank account and to manage their own direct payment
- Pre- paid cards have already been implemented in Lincolnshire; these are available free from the council to people taking a Direct Payment. The offer is a virtual bank account with a debit card. This removes the need for a separate bank account for people and the submission of statements and receipts for audit.
- An online Virtual Wallet which people can use to purchase services of their choice through an e-marketplace. The person's Direct Payment is stored securely and payments are made to the provider – without the need for the person to handle the payments.
- A fully managed account service - all payments are managed on behalf of the person with a Direct Payment. The individual has no involvement with the set up or administration of the payments. This would be a choice for people who need a great deal of support with complex care arrangements.

AC&CW commissions a Direct Payment support service which provides advice and support for all Direct Payment users in Lincolnshire.

What does this mean for you as a provider?

- Providers need to consider how they can market services to people (the 'customer base') rather than solely to the council
- Providers can work with us to explore the use of an online platform to make it easier to market and purchase services using Direct Payments
- We would like providers to work with us to increase the availability of Personal Assistants that can be employed to provide support using Direct Payments
- Providers will be expected to have plans for how they will involve service users in making choices about the ways in which their support is delivered
- The council will support the use of self-employed 'micro providers' to provide care and support to people with a direct payment.

Market Opportunity

In December 2020 , LCC is recommissioning its Direct Payment Support Service. The aims of the service include:

- To provide an information, advice and guidance service for all Direct Payment users.
- To provide a front loaded 'hand holding' service to ensure that the start of the Direct Payment is smooth and efficient.
- To enable people to move to the most appropriate level of support for them
- Working with the council to facilitate the person's path to independence.

The council is working with NHS Lincolnshire to introduce an online marketplace and budget manager for care and support services, called Virtual Wallet. People with a social care Direct payment, NHS Personal Health Budget and people who fund their own care, will be able to use the Virtual Wallet to manage their money and safely purchase care and support services.

The council is encouraging providers to register now on this market place to ensure their services are listed and available to a wide number of Lincolnshire residents.

Provider sign up form <https://lincolnshire.connecttosupport.org/s4s/FormDetails/FillForm?formId=105>

Homecare

Good quality homecare is a vital component of Lincolnshire's aim of enabling people to live independently, at home. The focus of this service is to support working age adults and older people to live as independently as possible and for as long as possible in their own homes. These services range from basic support through to live in care for those people with the most complex needs. The Homecare service includes help to carry out day to day tasks such as washing, dressing and preparing meals. Homecare services can delay the need for residential care or hospital admission by providing the right support at the right time.

Lincolnshire's ambition is to increase the take up of such services and wider community resources which help people to live well at home thus supporting a decrease in the number of people going into residential care when home based options are still available.

Current contracting arrangements and service provision

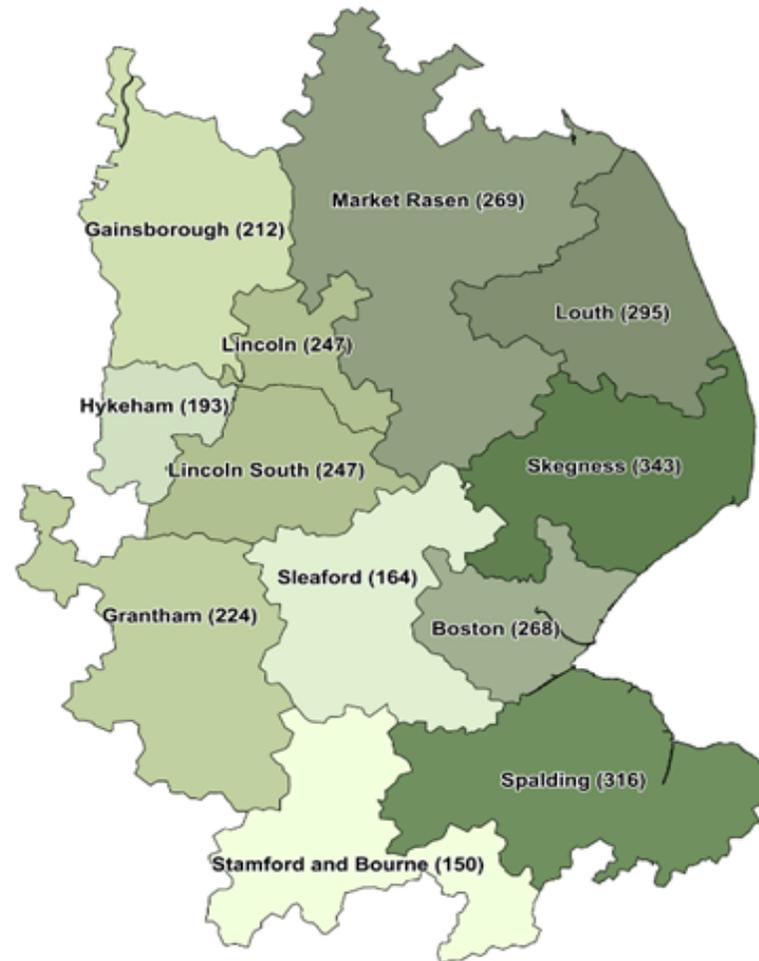
There are twelve 'Lead Provider' contracts in place each one taking responsibility for meeting all the demand for commissioned homecare in a specific area of the county either directly or via sub-contractors. There are approximately 2,600 service users in receipt of care and support at any one time and 25,000 hours of care delivered per week and over 60,000 visits a week. The table below (table 2) shows the current provider in each area of Lincolnshire and the average number of hours and clients. Figure 6 is a map demonstrating current number of clients in each area.

Table 2: Demonstrates the current Providers in Lincolnshire, the average number of clients and hours of care

Zone	Area	Current Provider	Average No. of clients in the zone	Average number of hours provided per week
1	Market Rasen	Hales Healthcare	269	2108
2	Louth	Libertas	295	2671
3	Boston	CRG Homecare	268	2506
4	Skegness	Walnut Care at Home	343	2963
5	Lincoln	Sage Care Ltd	247	2460
6	Gainsborough	Libertas	212	1905
7	Hykeham	Meridian	193	2263
8	Lincoln South	Sage Care Ltd	247	2263
9	Grantham	Fosse Healthcare	224	2214
10	Sleaford	CRG Homecare	164	1620
11	Spalding	Atlas Care Services Ltd	316	3185
12	Stamford and Bourne	Atlas Care Services Ltd	150	1658

Figure 6: Demonstrates the number of clients in each area

Lincolnshire Home Care Clients By Area



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Quality

Between 2017 and 2019 AC&CW have undertaken two comprehensive customer experience surveys across each zone. Results from both surveys have been consistent and demonstrate that a high percentage of people are satisfied with the overall care they receive. Areas identified from the survey for development and improvements in the homecare sector include:

- Communication with customers; people want to know who will visit, what time and be informed of any changes to their care
- The experience of the customers interacting with the homecare providers office, when they have a question, or something goes wrong
- Consistency: in the times staff arrive and leave and in the small team of familiar staff that visit.

What does this mean to you as a provider?

- Providers should continue to consider how they will move to outcomes based working, offering flexibility and responsiveness to how care is delivered.
- Providers should be responsible for developing a person centred approach in how best to delivering and meet a service users care outcomes.
- Providers need to focus how they can recruit and retain a workforce.

Market Opportunity

The council went out to tender for a new set of homecare contracts to run from October 2020 up to 2028 however due to COVID-19 we were forced to suspend the live tender exercise. It is anticipated that the tender will restart in early 2021 with a start date for new contracts of 1st October 2021.

Residential and nursing care

There are approximately 286 residential and nursing care homes registered within Lincolnshire of which LCC have contracts with approximately 83%.

The council currently contracts with 273 residential homes across all categories of care. They provide a range of care types categorised as:

- Residential care for older people (OP)
- Residential care for OP high dependency
- OP nursing care
- Mental health residential
- Nursing care
- Residential care for people with Learning and Physical Disabilities.

Table 3 demonstrates Lincolnshire's residential market and table 4 demonstrates the number of placements by district

Table 3: Demonstrates Lincolnshire's residential market as of January 2020

LCC funded residents	2,819	42%
LCC & health joint funded residents	699	11%
Fully funded health residents	477	7%
Self-funding residents	2,262	34%
Placed by other authorities	417	6%
Total	6,673	

Table 4: Demonstrates the number of placements by district

Long Term Care	Nursing Care	Residential Care	Total
18 - 64	129	546	675
Boston	8	18	26
East Lindsey	10	168	178
Lincoln	10	55	65
North Kesteven	21	57	78
South Holland	2	27	29
South Kesteven	4	29	33
West Lindsey	59	109	168
OOC	15	83	98
65 and Over	599	2039	2638
Boston	80	154	234
East Lindsey	95	551	646
Lincoln	88	244	332
North Kesteven	95	263	358
South Holland	56	261	317
South Kesteven	83	286	369
West Lindsey	81	200	281
OOC	21	80	101
Total	728	2585	3313

Residential and nursing care represents 42% of all Adult Care and Community Wellbeing expenditure at approximately £120m per annum. As such it is vital to manage the costs of residential and nursing care whilst also ensuring the market is being paid a fair and sustainable price for their services in support of our obligation to maintain a healthy market offering a choice of high quality services.

However, there has been a rapid decline in usage in both private and publicly funded residential care as set out below:

- Since January 2019 the total number of residents in LCC Commissioned homes has reduced by 4.7% and there has been a 0.9% reduction in state funded residents and an 11.6% reduction in the number of self-funded residents (figure 7)
- The number of self-funded residents has reduced by 13.3% since the beginning of the Covid-19 pandemic.

- The percentage of vacant beds (figure 8) has increased by 2.5% since January 2019, and 2.3% since the beginning of the Covid-19 pandemic.

Feedback gathered from care home providers in relation to the reasons why they think there is a reduction in vacancy occupancy levels include:

- Reduction in private placements due to individuals remaining in their own home;
- The assumption that families are caring for relatives where possible for fear of placing them into care homes due to the perceived increased risk of Covid-19, alongside concerns over reduced contact with family members;
- Challenges due to geographical location (e.g. rurality);
- Reduced confidence in the homes IPC measures following previous Covid-19 outbreak

Together the above facts pose a risk to the sector in securing a good quality service in the entire county. It is evident from data and feedback that Covid 19 has accelerated a decline in occupancy levels which was projected to take place over a number of years. This has placed additional pressure on providers to adapt their business and continuity plans.

Figure 7: Demonstrates the Residential Home Occupancy Rate

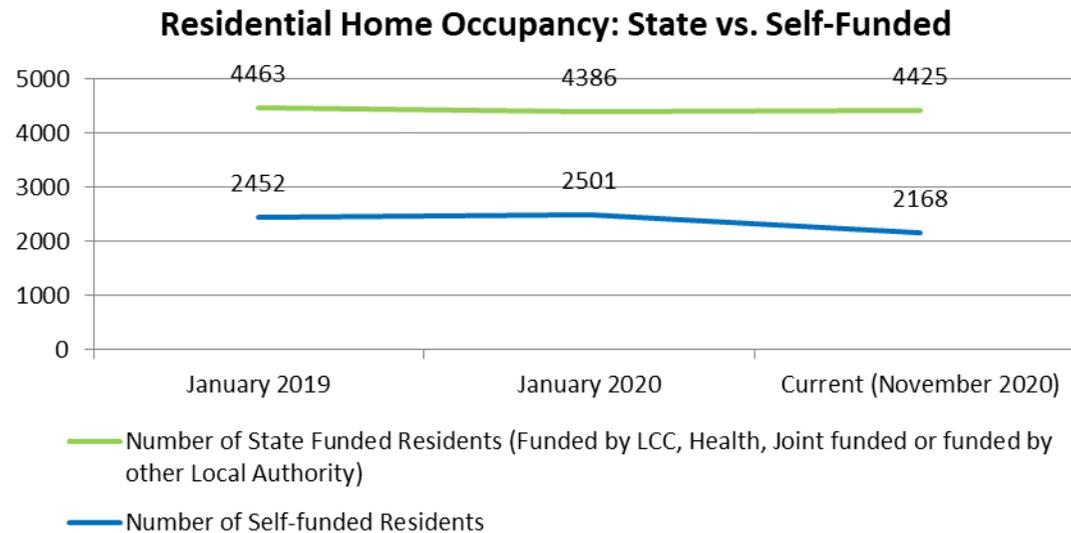
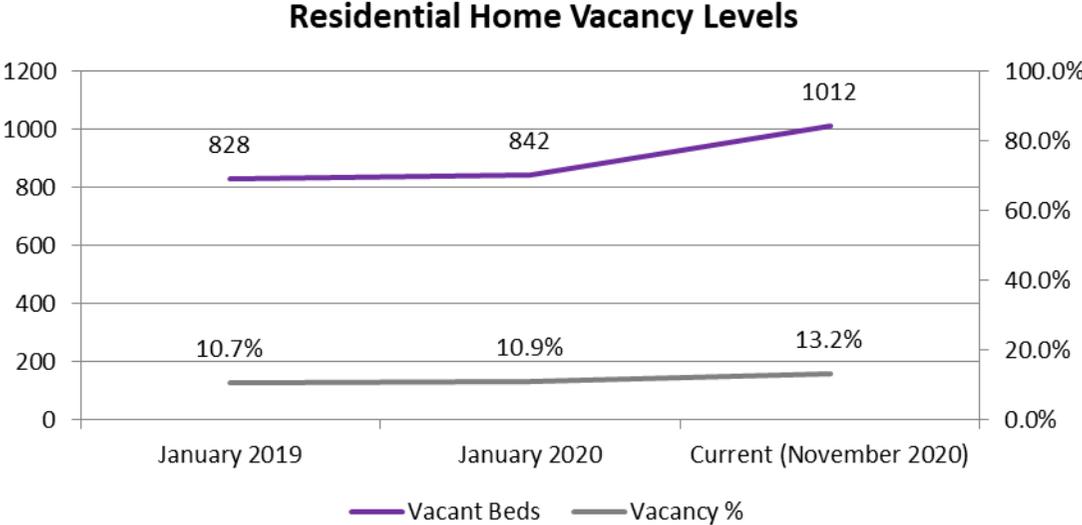


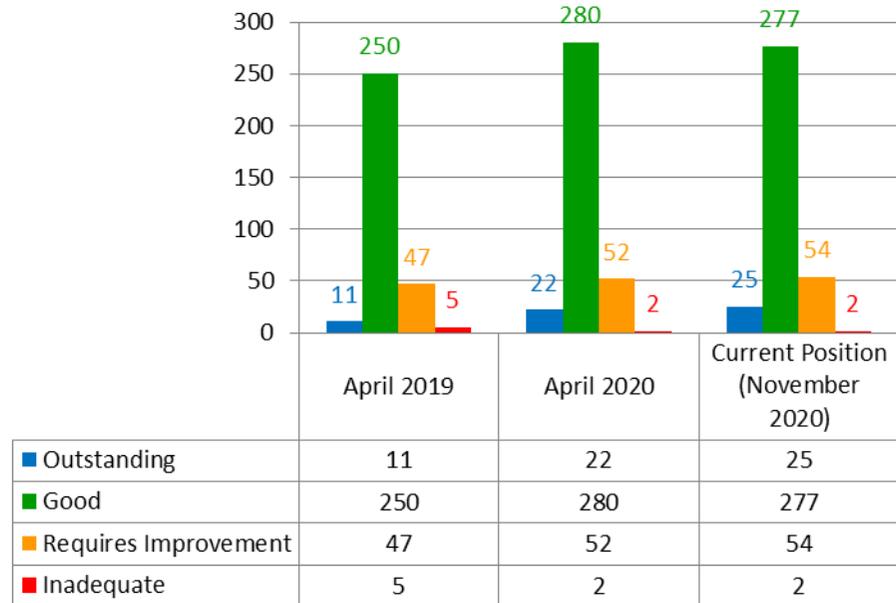
Figure 8: Demonstrates the Residential Home Vacancy Levels



The graph below (figure 9) demonstrates the CQC ratings for Residential Services, Homecare and Community Supported Living with the following findings:

Figure 9: Demonstrates CQC ratings for all Lincolnshire services

**All Lincolnshire services*
CQC Ratings: April 2019 - November 2020**



*Residential Services, Home Care and Community Supported Living Only

Market Opportunities:

The move towards better integration of social care and health services provides opportunity to look at ways in which they can meet both health and social care needs in a seamless way. LCC's key commissioning intentions will focus on developing high quality personalised services that are flexible, responsive and give people choice and control over how their care and support is provided.

The Council operates a framework for residential and nursing care. This was previously agreed in March 2018 and will be renewed in the next year.

The Council's ambition of reviewing the residential and nursing arrangements is to ensure:

- Market shaping and choice regulation compliance
- Meeting needs and complying with people's choice of accommodation
- Meeting responsibilities in relation to personal budgets
- Building a framework agreement with contract terms, conditions and fee levels are appropriate to provide the delivery of the agreed care packages with agreed quality of care.
- Helping improve the resilience and sustainability of the sector through increased funding and broader support measures.

The intention is that care homes placements will only be purchased by the council and Clinical Commissioning Group for people who cannot live safely at home, and primarily for those with nursing and/or specialist needs, for example advanced dementia. Over the next decade it is expected that the average age of people entering these services will increase, and it is likely that 50% of residents aged over 85 will be living with dementia. Therefore, we can expect an increase in demand for specialist care home beds. This specialist care will require providers to develop services which can meet the increased acuity and frailty.

The self-funder population is also expected to rise, but based on current patterns would indicate that they enter care when they are more able. It is estimated that 25% of self-funders require nursing care, compared to 46% of council funded residents. Additionally, an increasing number of children are moving into adulthood with complex health needs, which may add to the demand for specialised care home places.

The introduction of a new pricing model for Learning Disability (LD) residential services represented the biggest change to how the council contract for this type of care. This successful transition means that LCC are a position to further develop this model and to work on maximising the benefits of the new improved framework design, continuing to build a strong market for residential and nursing care and, most importantly, ensuring service users receive the best possible care.

The wider residential & nursing review process will involve a comprehensive programme of engagement cross all sectors of the residential care market in order to support an effective and sustainable market in future years.

Extra Care Housing

Extra Care Housing (ECH) provides an alternative housing option which encourages independence and promotes wellbeing. It has been designed with flexibility in mind, responding to individual's physical needs and changing care requirements that may develop over time. The aim of ECH is to provide high quality housing, support and care services which enable, support, and encourage people to live independently, connected to local communities for as long as they wish to do so.

ECH comes in many forms, and properties can be rented, owned or part owned/part rented. People living in this type of housing have their own self-contained homes and their own front doors. Depending on the offering, such housing can include communal facilities such as residents' lounge, a guest suite, laundry facilities, shop, restaurant/café, health and fitness facilities, hobby rooms etc. Domestic support and personal care can also be made available, usually provided by on-site staff.

Together with improving resident's independence and wellbeing whilst enabling people to remain within their local communities and social circles, ECH has many other benefits such as: additional employment opportunities, greater use of community facilities and volunteering opportunities in the community.

Current contracting arrangements

The council has developed the Adult Care ECH Capital Programme for Lincolnshire which is intended to help older people achieve greater independence and improve wellbeing, by offering further choice over housing and care options within local communities. Partnership with districts, local housing associations and providers allows LCC to reinvest resources in preventative services.

Lincolnshire currently has 9 ECH schemes as demonstrated in figure 10 and approximately 339 units as demonstrated in table 5. These were built before the current LCC ECH programme began. The De Wint Court scheme will be the first for which LCC will purchase nomination rights into a proportion of the scheme's total capacity, further developments are planned at Nettleham and Sleaford. LCC has, worked in partnership with existing schemes and supported these partners over the years. There are well established allocation panel arrangements in place and LCC is already benefitting from a number of existing schemes.

Table 5: Demonstrates existing capacity ranked against need

District	Existing units	Need 10-15 per 1,000	Additional units required
South Holland	0	67-100	100
West Lindsey	12	99-164	152
North Kesteven	56	136-204	148
South Kesteven	79	155-233	154
Boston Borough	40	68-103	63
East Lindsey	114	193-289	175
City of Lincoln (Inc De Wint)	38 (108)	71-107	0
		Total	792

Market Opportunity

LCC are open to conversations in how they could potentially support new housing developments.

Lincolnshire County Council is focussed on delivering new-build ECH housing in partnership with a Housing Association. Recently announced changes to the planning system and discussions with Homes England present opportunities that LCC could consider supporting with a capital investment or release of land or buildings.

Through the One Public Estate (OPE) programme, LCC and partners may have appropriate buildings in appropriate locations surplus to requirements for conversion to ECH. Homes England has outlined grant aid proposals for re-purposing buildings and conversion of redundant commercial buildings in to housing will have permitted development rights.

LCC has also improved its joint working with district council development management teams in recent years. This could offer opportunities to influence developers to bring forward ECH as part of their wider market housing proposals – with a Housing Association or district council on board to manage the units and LCC to commission the extra care. It may be appropriate to subsidise the build cost in return for a proportion of the market housing surrounding the ECH development being built to the highest accessibility standards where extra care could be delivered to both working-age and older adults with those needs in an individual rather than communal setting.

There is a need to consider those people who will wish to remain living in a rural setting where their support networks exist but who still need extra care. Small-scale rural schemes do exist and provide some of the wider support with; household chores, personal care, social activities and travel. Services can also be delivered through digital technology where feasible.

Government has indicated that Section 106 agreements and Community Infrastructure Levy will be replaced in a new planning system. If ECH housing is identified as essential infrastructure there is potential for this to be part funded through whatever replaces these two pieces of legislation.

People with Learning Disabilities

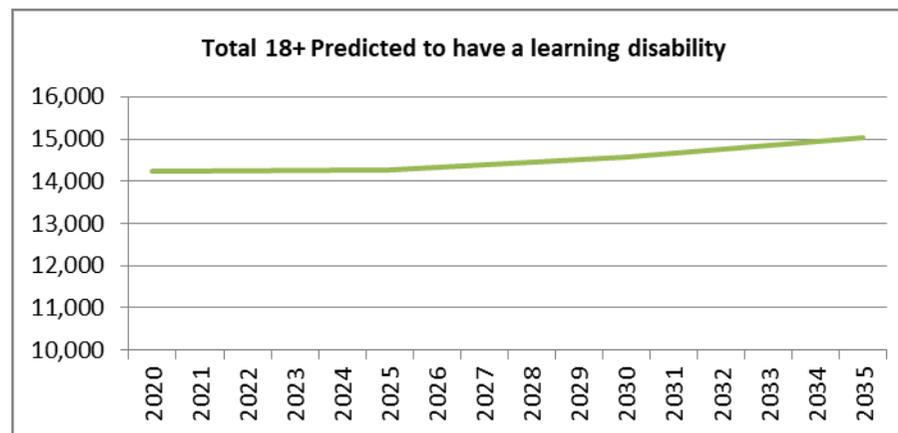
In 2019 there were 14,222 adults aged 18+ with a learning disability in Lincolnshire ([PANSI](#)). This number is projected to increase to 14,568 by 2028, a 2% increase (figure 11).

People with Learning Disabilities can experience a number of challenges in maintaining good health and leading fulfilling lives. It is common for people with Learning Disabilities to have co-existing conditions such as Mental Illness and Physical Disabilities and the average life expectancy for people with a Learning Disability is lower than the general population.

There is a highly integrated approach to the commissioning, management and delivery of services for people with a learning disability and strong working relationships have been developed between NHS partners and the Council. This arrangement includes a Section 75 agreement, with pooled funding for the commissioning of services that support adults with a learning disability with adult care and/or continuing health care. The council works closely with health colleagues to ensure that people have access to the services they need locally, including respite, accommodation and healthcare.

AC&CW is committed to promoting the independence of adults with learning disabilities. In addition, more people are being empowered to take control over how their needs are met and have the option of taking their personal budget as a direct payment. The introduction of the integrated health and social care budgets has enabled us to develop our vision to offer greater choice, control and quality of life for people with complex needs. AC&CW supports individuals and provides information about the transition process for young people, their families and carers to make this process as seamless as possible.

Figure 11: Demonstrates the number of people 18+ Predicted to have a learning disability:



Market Opportunity

- To plan for the future, the health and social care economy will be investing in additional community based solutions, to allow people to remain at home whilst receiving support.
- One of our priorities during 2020-2023, is to support people with learning disabilities to access meaningful and paid employment, through working with colleagues to pilot services which are designed to help people with disabilities access work.

Community Supported Living

LCC currently commissions care and support in the community for working age adults, through Community Supported Living (CSL) services. The commissioned CSL services provide care and support to individuals who live in a variety of settings including dedicated single or shared supported living schemes.

LCC currently has an Open Select List in operation for the commissioning of community supported living for adults with a range of different needs including Learning Disabilities, Physical Disabilities and Mental Health. The purpose of the service is to enable vulnerable adults to develop existing skills or acquire new skills to increase their independence in daily living through appropriate risk taking, identify and enable opportunities for education and employment and ultimately meet their desired outcomes. In addition services focus on keeping individuals healthy and safe.

Current Service Provision

Across Lincolnshire 903 people are currently supported (excluding those who access services via direct payment) 569 of whom are supported within a dedicated accommodation setting and 334 are supported at home. The demand for tenancies is demonstrated in table 6.

Table 6: Demonstrates the current demand for tenancies in Lincolnshire.

Geographical Zones	Settings	Tenancies	Geographical Zones	Settings	Tenancies
Market Rasen	9	30	Hykeham	12	89
Louth	4	24	Lincoln South	7	38
Boston	16	62	Grantham	2	30
Skegness	5	22	Sleaford	5	24
Lincoln	6	18	Spalding	20	63
Gainsborough	4	18	Stamford & Bourne	20	78

Not all supported living is used by LCC funded individuals and some people will be accessing services via a Direct Payment.

- There are approximately 590 existing supported living tenancies.
- The overall net number of people eligible for CSL is increasing year on year alongside the increasing complexity of needs. Table 7 demonstrates the future demand for tenancies in Lincolnshire.
- It is estimated that 200 people currently known to Adult Care may require CSL services at some point in the future.

Table 7: Demonstrates the future demand for tenancies in Lincolnshire.

Geographical Zones	Identified Future Demand 2 - 5 yrs	Geographical Zones	Identified Future Demand 2 - 5 yrs
Market Rasen	10	Hykeham	10
Louth	2	Lincoln South	10
Boston	12	Grantham	11
Skegness	21	Sleaford	15
Lincoln	5	Spalding	16
Gainsborough	12	Stamford & Bourne	22
		Location unspecified	17

Our overall approach is that people with Learning Disabilities should be supported to live in communities rather than in care homes, holding their own tenancies where possible. It is expected providers will deliver high quality services that recognise and promote the rights of the people they support and encourage their independence, choice and inclusion through a strengths based approach.

We will continue to operate the same contractual model in the future to access providers who offer good performance and quality particularly where need is highly complex. The framework supports a wide range of needs which allows for greater utilisation to support other primary support needs including Mental Health and Physical Disabilities. There are comparable links between the benefits of expanding the range of housing for older people and having similar models for housing with care for working age adults (WAA).

There are currently a number of preliminary discussions taking place regarding proposed housing developments across the county, where the inclusion of ECH is seen as a significant element of the plan. There is scope within these proposals to consider the development of additional units to meet the specialist housing needs of WAA in receipt of adult social care.

Options for the development of mixed communities are being received positively by developers, registered housing providers and district councils. There is consensus that designing schemes in this manner, rather than having isolated pockets of housing specifically for a particular group of people will be mutually beneficial to the prosperity of communities. It will also assist individuals to live as independently as possible and encourage increased wellbeing and a sense of being part of a community, which are key objectives in our role of providing adult social care support to people.

Market Opportunity

- The current OSL framework commenced on 1st July 2020 and runs until 30th June 2025. There may be further opportunities for new providers to join this Open Select List, and the Council reserve the right to open the select list to new entrants who can meet need for a specific specialism and/or within a specific geographical area should the need arise. Any such opportunities will be subject to a tender process, communicated to the market through advertisement.
- It is expected providers will deliver high quality services that will recognise and promote the rights of the people they support as citizens and encourage their independence, choice and inclusion through a strengths based approach.

Day Services

Day Services offer a wide variety of activities for people with a range of disabilities across Lincolnshire. The aim of the service is to help people to live independent and fulfilling lives and to support families to continue to care for each other, where appropriate the service will also seek to help people find volunteering or employment opportunities. The service ensures that people, can participate and make important contributions to their local communities.

Figure 12 and table 8 show the number of people using day services within the county for the last quarter of 2019-20, by districts and by age:

Figure 12: Demonstrates the number of service uses by district in Lincolnshire in 2019-20

Lincolnshire Day Service Users By District



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Table 8: Demonstrates the number of people using day services by age group

Age Band	Number
18 - 64	404
65 and Over	262

Day Services aim is to provide:

- Day support with meaningful activity for a wide range of people which is personalised support to meet individual need.
- Support and information for families and carers.
- Support for elderly people with complex needs living in the community, to enable them to keep their independence and remain living at home, have regular social contact and get more involved in community life and to reduce the physical or emotional stress to them and/or their carer.

We help an increasing number of people to experience community-based activities. This has helped them to move away from traditional day services and to maximise the use of their personal budgets by accessing both chargeable and free activities that are available in the community.

Our strategy for Day Services

To provide:

- Opportunities for a fulfilling life: we will develop a new program of purposeful activity providing meaningful opportunities for people we support, including opportunities to work and contribute to local communities.
- Sharing space: our buildings will be open to and being used by a range of community groups. This will support safety and wellbeing of service users and mean council resources are available to local communities.
- Active Partnership working: our aim is to form a local partnership in each area to support service development, this will mean actively supporting and encouraging self-advocacy and fostering stronger links with the counties existing Learning Disability Partnership Board.
- Supportive relationships: developing a personal volunteer program and significantly increase the role of volunteers across the service.
- Valuing our staff: creating an entry level apprentice post and recruit to a number of positions across the service.
- Ensuring excellence: developing a quality assurance process based on service guarantees.
- Developing places and spaces: developing local implementation plans for each locality describing the work planned and underway to develop the use of our buildings.

Day Services overview in Lincolnshire

AC&CW has established an [Open Select List](#), the purpose of which is;

- to establish consistent contractual arrangements for all externally commissioned building based day services, incorporating a standardised specification and pricing mechanism, and
- to enable access to responsive services from a variety of providers, that meet the needs of customers and which promote choice for customers across Lincolnshire.

- services that meet the varied and diverse needs of people in Lincolnshire, reduce the impact of rural isolation and take account of community transport solutions.

We commission a number of Day Services across the county, there are currently 97 Day Care providers on the council data base. We would like to see these services maintained under the Open Select List and would encourage all existing providers to apply, as well as potential new providers.

We are keen to work further with day opportunity providers to ensure that day services that lead to more independence and more work-related activities. These services may largely occur in the voluntary and community sector, and support disabled and older people to learn new skills, play an active role in the community, and maintain independence and wellbeing.

What does this mean for providers?

We will continue to monitor usage of the new Open Select List as well as the take up of services through direct payments. If there are gaps in the market, then the Open Select List may be opened again. There is growth in this sector where more people are choosing to access community opportunities by using a direct payment or prepayment card, and there are opportunities for new and innovative providers. Service providers need to cater for Lincolnshire's diverse communities and tailor their offer to meet a range of needs.

Greater flexibility

It is important to ensure that people have access to timely, good quality information and advice to individuals so they can make good decisions about care and support and to have a range of provision of high quality, appropriate services to choose from. This means that we will engage with suppliers to develop a directory of available day opportunities and broadening the building based day services throughout the county. We will continue to review available services with the aim of identifying future demand for this type of service and what type of contractual arrangements are most appropriate.

Market Opportunities

We aim to work with:

- Providers who will develop the more specialist expertise required to meet the needs of Lincolnshire residents reducing the need for people to have to go out of county to access the support that they need.
- Providers who offer services that actively aid recovery and/or the development of independent living skills.
- Providers from the independent sector to work in partnership with community and voluntary groups to address gaps in customer need – for example supporting adults of working age to be work ready.
- Providers who will offer greater flexibility around choice and accessibility of services such as sessional access not just full days.

Advocacy Services

Advocacy is a process of supporting and enabling people to express their views and concerns, access information and services, defend and promote their rights and responsibilities and explore choices and options.

In Lincolnshire we currently commission two services which deliver advocacy. The Independent Lincolnshire Advocacy Services delivered by Voiceability and the NHS Complaints Advocacy Service delivered by POhWER. Both of these contracts come to an end as of 30th June 2021. The Lincolnshire Advocacy Services contract covers all types of statutory and non-statutory Adults and Children's provision including: Children and Young People Advocacy, Care Act Advocacy, Independent Mental Capacity Advocacy (IMCA), Independent Mental Health Advocacy (IMHA), Relevant Persons Representative, Rule 1.2, Litigation Friend and Professional Advocacy Requirements. The NHS complaints service supports people who, for a wide range of reasons, find it difficult to navigate the NHS complaints system themselves. The annual indicative future demand projections of the service have been forecast as set out in table 9.

Table 9: Demonstrates the number of referrals by advocacy type

Description of Advocacy Type	Cases/Referrals
Tier 1 Referrals/Enquiries/Low level advocacy support	11,500
Children Advocacy Cases	264
Adult Advocacy Cases	2,730
Total Volumes	14,494

Market Opportunity

It is anticipated that a procurement exercise will be undertaken with the intention of commissioning a fully integrated service incorporating both of the above services which will commence 1st July 2021. Whilst it is the intention that the council will be contracting with a single entity, providers will have the opportunity to propose consortium, partnership or sub contractual arrangements.

In terms of future volume predictions these could be affected by the implementation of the Liberty Protection Safeguards (LPS) which have been postponed from October 2020 to April 2022. LPS will effectively replace the current Deprivation of Liberty Safeguards (DoLS) scheme. Whilst providers await the revised MCA Code of Practice to be published in order to determine all implications and how this will work in practice it is likely to increase demand particularly in respect of the IMCA advocacy requirements and also as LPS will be eligible from 16 years of age.

People with Sensory Impairments

The Lincolnshire Sensory Services (LSS) is a preventative and reablement service for both adults and children with a sensory impairment, both cognitive and acquired and their associated disabilities. The service encompasses visual impairment (including blind and partially sighted), hearing impairment (including those who are profoundly deaf, deafened and hard of hearing) and dual sensory impairment (deaf-blindness). The service enables people who are sensory impaired to remain independent in their own homes and engage as active participants in the community, it empowers people to regain the ability to perform their usual activities, such as cooking a meal, paying a bill, using public transport, navigating road crossings or accessing social activities. The service focuses on maximising and sustaining choice and involvement through the use of outcome-focused support plans and person centred approaches that facilitate opportunities for people who are sensory impaired, to live fulfilled lives within a community setting.

It is evident from the table below (table 10) that demand will continue to increase year on year, in large measure driven by demographic predictions related to age. In 2019, 11.6% of people aged 65 and over were estimated to have a moderate or severe visual impairment.

Table 10: Demonstrates Sensory Impairment Condition Projections

Lincolnshire - Hearing Loss Projections	2020	2021	2022	2023	2030
18 – 64 - Some Hearing Loss	46,717	47,147	47,579	47,857	46,728
65 + - Some Hearing Loss	111,585	113,989	116,281	118,837	141,250
Total - Some Hearing Loss	158,302	161,135	163,859	166,695	187,977
18 - 64 - Severe Hearing Loss	2,755	2,789	2,823	2,850	2,806
65 + - Severe Learning Loss	14,312	14,689	15,009	15,446	20,078
Total - Severe Hearing Loss	17,066	17,477	17,832	18,296	22,883
Lincolnshire - Visual Impairment Projections	2020	2021	2022	2023	2030
18 - 64 - Serious Visual Impairment	280	281	281	280	277
65+ - Moderate or Severe Visual Impairment	15,954	16,313	16,832	17,300	20,004
75+ - Have Registrable Eye Conditions	5,402	5,587	5,907	6,163	7,174

Table 10 appears to indicate a year on year 2% - 3% increase in demand.

Market Opportunity

The service provision will be reviewed in terms of the potential for any future joint commissioning opportunities with NHS partners and/or Children's Services. This service will be reviewed within the next year.

People with Mental Health difficulties

Additional detail on Mental Health prevalence and associated conditions is available at [Lincolnshire Research Observatory, Joint Strategic Needs Assessment: Mental Health \(Adults\)](#). We are committed to increasing wellbeing, reducing the stigma of mental ill health and to promoting recovery through all of the services it commissions. Services and care packages will be reviewed to ensure that they meet the person's needs, are outcome focused and that they provide value for money.

The health, social and economic consequences of poor mental health are substantial. One in four adults experience at least one diagnosable mental health problem in any given year (Mental Health Taskforce, 2016).

Lincolnshire's approach to supporting people with serious mental illness will be bolstered over the next two years, as it has been selected as one of twelve areas across the country to benefit from significant additional national funding. The county is expected to receive around £6 million over the next two years and will be an 'early implementer' site for testing new models of care for young, working age and older adults who have moderate to severe, long term mental health problems.

Key priority objectives for the service are:

- Improved preventative services for adults who have mental health needs and their families through closer integration with local services.
- NHS health checks – targeting uptake of those with mental health conditions.
- Reducing in-patient numbers (both in and out of county).
- Development of an all-age crisis service.
- Development of better analytical data to identify needs and target service provision more effectively, including improved understanding of the Mental Health Investment Standard and where resources are being targeted.
- Ensure appropriate transport arrangements are available for people with mental health needs, including at times of crisis and/or mental health assessment.
- Development of a new patient-held digital information platform for mental health (including families caring for people with dementia).

Covid 19 has had a major impact on people's mental health. Therefore the local authority, in partnership with the NHS and other colleagues has been focussing on a generic mental health and psychological wellbeing support offer for Lincolnshire called 'The Universal Offer', along with specific support relating to;

- People who already had previous or ongoing mental health problems and who have been affected by the pandemic situation
- Health and care staff who have been through particularly challenging or traumatic times at work related to supporting patients
- Health and care staff who themselves have suffered from COVID and who may have developed mental health problems as a consequence
- People who have been bereaved through this process

- Other groups of people within Lincolnshire who it is evident require additional tailored mental health support
 - people who have suffered specific harm as a result of the 'lockdown' (eg domestic abuse victims)
 - people in Lincolnshire who have suffered as a result of the economic impact of the COVID pandemic eg job losses or job insecurity.

Market Opportunity

As well as radically redesigning how community mental health services operate and integrating dedicated mental health workers within local primary care networks, the money will also help develop new dedicated support for people with a personality disorder, as well as those transitioning from mental health rehabilitation services back into the community. Part of testing new models of care for young, working age and older adults, we will be working hard with our partners to develop new integrated models of primary and community mental health care.

Informal carers (eg. families and friends)

Lincolnshire was estimated to have 84,000 carers aged between 5 -100 prior to the Covid-19 pandemic.¹ Informal carers have been profoundly affected by the COVID-19 pandemic, with many thousands more relatives and friends becoming the critical 'life-support' link to community and providers of basic care that people shielding and with care and support needs have relied on. Carers play a vital role in our communities - and caring is increasingly becoming a core element of family life. Without the support of carers of all ages, health and social care agencies would struggle to provide the level of care and support that people need to continue living in their own homes and communities. Supporting carers well is vital to the functioning of Lincolnshire's health and care market. The Council acknowledges that effective support for carers needs to go beyond the health and social care system, and beyond public services, and recognises the role that the wider social, economic and cultural environment needs to play in supporting carers.

Lincolnshire priorities

Carers are one of the six priorities of the Lincolnshire Joint Health and Wellbeing Strategy. It was developed with carers and sets out the County Council's continued commitment to work with partners to support the health and wellbeing of all carers in Lincolnshire. The strategy and its commissioned services aim to reduce the negative impact of caring and to enable carers to lead fulfilled, independent lives alongside their caring role.

The priority areas of the strategy are:

1. Early identification of carers from diagnosis and signpost to appropriate support.
2. Ensure that carers are listened to from the outset, and involved in the care of the person they support
3. Ensure young carers are identified and prevented from undertaking inappropriate caring responsibilities, and their educational outcomes supported
4. Carers are supported to look after their own physical and mental wellbeing including supporting resilience
5. Carers are supported to plan for the future, including contingency planning, and to make choices about their lives, including combining care and employment.

It is essential therefore, that all sectors and communities take ownership of this issue and work collaboratively with carers and their families to achieve the aims of the [Joint Health and Wellbeing Strategy for Lincolnshire](#)

¹ [Lincolnshire Carers JSNA](#)

Support to carers is provided principally through:

1. The [Lincolnshire Carers Service](#) which is delivered in partnership between Carers FIRST and Serco.

Carers FIRST delivers all face to face Statutory Adult Carers Assessments required within Lincolnshire, including determining eligibility for support, carrying out support planning including Personal Budgets where applicable and reviewing support plans.

Carers FIRST also provide a universal offer to all carers in Lincolnshire, consisting of one or more of the following:

- Information and advice
- Signposting to other services
- Delivery of formal and informal learning events
- Facilitation of wellbeing groups
- Advice on and help with applying for benefits

During 2019 -2020 Carers FIRST:

- Received 2091 referrals
- Supported 6,688 unique carers
- Provided information and advice to 8,834
- Encouraged 798 attendees at 184 events
- Advised 1,104 carers on what benefits they were entitled to receive

2. [Early Help Young Carers Service](#)

3. Carer Personal Budgets

4. [Everyone](#)

In addition to the core services, support can be accessed through the following services:

- [Lincolnshire Partnership Mental Health Foundation Trust](#)
- Support to the adult or child in need of healthcare, support and personal care from health and care providers
- Community and condition specific voluntary sector organisations
- A continually growing network of schools, colleges and university who take steps to offer pastoral care for young carers and student carers
- A growing network of employers who acknowledge and support staff in a caring role through employee information and wellbeing support
- A continually growing network of pharmacy, primary, community and acute healthcare providers, signed up to the Carer Quality Award Advice, who are pro-active in their identification, support and signposting for carers.

Market Opportunity

We offer businesses and providers the following in order to develop a skilled, carer friendly market:

1. Free access and support to achieve accreditation of the Lincolnshire [Carer Quality Award](#)

Join 322 Lincolnshire services and organisations who are working towards or who have achieved the nationally¹ respected CQA. Improve the awareness and practice of your company and staff in recognising and signposting carers to support, including your own staff. Add value to the quality of your homecare or residential provision offer. Highly valued by participating employers and recognised as a signifier of quality by CQC.

2. Free access to Carers UK [Digital Resource for Carers](#)

Add to your HR and employee wellbeing offer with this useful and discrete signposting and support tool for your staff who are working carers. Excellent, continually updated resources including the latest Covid 19 Guidance for carers; contingency planning; working and caring e-learning; nutrition and caring; health and wellbeing e-learning. Use digital access code DGTL 194.

3. Free membership of [Employers for Carers](#) for public sector employers and SME providers of up to 250 staff in Lincolnshire

Join 116 Lincolnshire employers who are part of a national network of good practice; access excellent, up to date resources for employers, managers and staff. Membership supports equality, diversity and supports being an employer of choice.

Home Based Reablement Service

The Home Based Reablement Service (HBRS) is designed to help people learn or relearn the skills necessary for daily living, which have been lost through illness, deterioration of health and/or increased support needs. The HBRS offers outcome focussed, person centred care and support in the service user's own home, designed to optimise their independence, for a period of up to six weeks per user episode, with the average support duration being around 3 weeks. It is a critical service which is at the front line of maintaining the independence of Lincolnshire's residents. Without this service the impact on service users and the wider health system would be far reaching and disruptive. Not only is an effective reablement service beneficial for individuals' health and wellbeing, it also creates the opportunity to reduce dependency on long term care and support services by providing more intense services upfront. As an illustration of this, the percentage of people who go on to require no further funded social care services following a period of reablement is approximately 59% (2019/20).

Current service provision

The HBRS operates with a single provider of services Countywide. Following a recent procurement process, the current contract runs for a five year period between 1st November 2020 and 31st October 2025. The HBRS is a critical component of the entire out of hospital strategic agenda. This service together with rapid response and bed based rehabilitation services manages the flow of people as part of admission avoidance and discharge facilitation with the primary aim of helping people regain their independence.

Taking into consideration the demographics of an increasingly ageing population and the consequent need for services which prevent or delay the deterioration of wellbeing resulting from ageing, illness or disability, and the levels of service achieved by the current provider; the Council has a minimum expectation of the annual requirement for reablement services to be delivered under this contract at 137,200 face to face reablement contact hours per annum. Table 11 demonstrates the SALT returns for 2019- 2020.

Table 11: Completed episodes of reablement (ST-MAX) for new clients. (SALT STS002a 1920)

Row Labels	1. Early Cessation of Service (not returning to long term support) - NHS funded care/ end of life / deceased	2. Early Cessation of service (not leading to LTS)	3. Early Cessation of service (leading to LTS)	4. Long Term Support (any setting)	6. Ongoing Low level Support	7. Short Term Support (other)	8. No services provided - needs identified but support declined	10. No services provided - no identified needs	Grand Total
Discharge from Hospital	66	208	32	172	53	37	34	1449	2051
Diversion from hospital				1			1	5	7
Community / Other Route	27	102	17	113	8	31	21	723	1042
Prison		2		1					3
Grand Total	93	312	49	287	61	68	56	2177	3103

Market Opportunity

There are further opportunities and efficiencies to be gained through an integrated approach to reablement, rehabilitation and recovery in partnership with community health providers offering improvements both in performance and quality outcomes. Therefore, providers will need to demonstrate to Lincolnshire County Council their commitment to working towards further integration of health and social care services.

People with Dementia

Dementia is a high priority for health and social care, with diagnosis rates increasing related to an aging population. Dementia can have a profound impact on the person with dementia's life their family and friends. It is one of the top five underlying causes of death and is the leading cause of death with people over the age of 80.

Dementia prevalence is predicted to increase across Lincolnshire in all districts over the next 5 years, based on the projections provided by POPPI, as shown below in table 12.

Table 12: Demonstrates the number of people in Lincolnshire predicted to have dementia between 2020-2025

People aged 65 and over predicted to have dementia across Lincolnshire	2020	2025
Boston	1019	1119
East Lindsey	2813	3180
Lincoln	1094	1216
North Kesteven	1953	2281
South Holland	1643	1861
South Kesteven	2352	2745
West Lindsey	1590	1859
Lincolnshire	12497	14268

Additional figures on dementia prevalence & commissioning intentions are available through [Public Health England](#), the [Joint Strategic Needs Analysis](#) and the [Lincolnshire Joint Strategy for Dementia 2018 – 2021](#).

[The Lincolnshire Joint Strategy for Dementia](#) underpins the delivery plan and emphasises the need for a whole system approach across the NHS, Adult Social Care, Public Health, the independent and voluntary sector, and beyond, in order to identify the needs of people with dementia and those at risk of dementia, and their families from diagnosis to the end of life.

People with Autism

Based on the indication that 1.1% of the UK population is autistic, it is estimated that there are over 8,100 autistic people in Lincolnshire (*applying this prevalence rate to the Office for National Statistics population estimates for Lincolnshire in 2016*). For more information about Autism, please visit the Lincolnshire Research Observatory Website: <http://www.research-lincs.org.uk/jsnaAutism.aspx>

The Council is a partner in [Lincolnshire's All Age Autism Strategy](#) 2019 – 2022 which informs the vision and priorities in the delivery of improved outcomes and opportunities for people with autism and their parents or carers.

[Lincolnshire's Autism Partnership Board](#) (LAPB) is responsible for overseeing the delivery of this strategy. It consists of a range of representatives from partner organisations and stakeholders, who are working in collaboration to try to push this agenda forward and develop ways of improving services and support for autistic people. The LAPB includes professionals from health and social care, education, mainstream public services, voluntary sector organisations and, importantly, autistic people and their family members and carers.

The main focus has been on achieving the [15 Priority Challenges for Action](#) that are set out in the government's national autism strategy. These have key themes and issues locally that are being prioritised and an action plan is being implemented to address the concerns that are of most importance to autistic people and their families in Lincolnshire.

The Council welcome as many public services, partner organisations and members of the community to help deliver this strategy and ensure that Lincolnshire is a place that respects and supports all autistic people who live here.

People with autism will have found the disruption caused by the Covid 19 pandemic particularly challenging. People for whom routine and regular patterns are important to help manage their anxieties are likely to have found the lock-down to be extremely stressful. This will have placed additional pressures on carers. It is expected that new demands may arise for respite and other support from this group.

Market Opportunity

AC&CW would like to work with providers to develop opportunities for people with autism with a focus on employment, education, volunteering and training. There are opportunities for organisations to provide support for people with personal budgets and for individuals funding their own care needs, both in autism and/or learning disability services and in other areas of adult social care. Any services implemented would need to;

- Be flexible, local and affordable
- Encourage peer support, independence and education/ employment
- Enable ease of access and to ensure that staff at all levels are trained suitably.

Procurement Timetable

LCC publish all contracts with a total value of more than £15,000 on the [East Midlands Tenders Portal](#). On this portal, you can:

- search for tender opportunities
- receive notification of new opportunities
- request and clarify tender information
- access historic contracts
- find dates for supplier events
- submit responses to opportunities

Existing contracts

To find out when a contract is due for renewal or will expire, [view the contracts register](#).

For further information on our Procurement strategy, procedures and policies visit [Lincolnshire County Council website](#).