

Provider Forums

Adult Social Care Commissioning and Operations Update

February/March 2024

Agenda

- 1 2024 Plan Commissioning
- 2 Sector by sector overview
- **3** 2024 Plan Operations
- 4 Discussion time

Looking ahead to 2024 – Adult Social Care Commissioning

The key Commissioning aims, projects and timetable of work

The 'shape' of the market will change

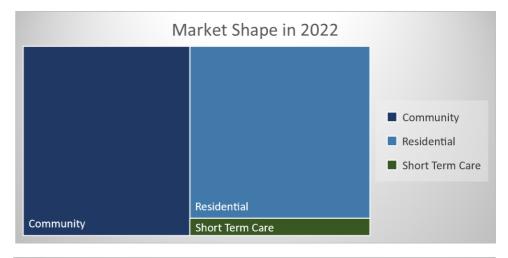
Essex County Council are looking to shape the market to provide more community-based services, and more short-term and early help. This will see residential care become a smaller, but still critical, part of the Essex care market by 2030.

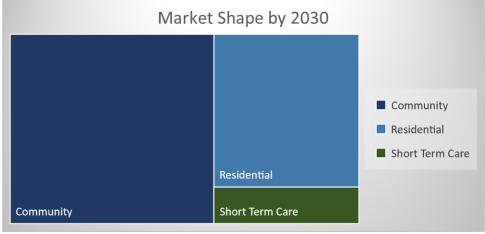
Essex County Council would like to:

- Reduce over-supply of residential beds and ensure adults are able to stay at home with their family and community network for as long as possible.
- Slightly increase nursing provision or placements for Adults with complex needs or behaviours.
- Increase and evolve our community-led services like Domiciliary Care and other services, as well as supporting carers, and utilising technology and equipment that support the adult to remain independent at home.
- Increase Supported Living services to keep adults in the community, providing support and keeping adults safe.
- Increase the use of Personal Assistants, Micro-enterprises, Individual service funds and direct payments to optimise the Adults' opportunity for choice and control.
- Improve our short term and early help service offer to prevent and avoid hospital admissions, and reduce Adults requiring long term provision whilst reducing their needs for longer term services.
- Promote local community networks and provision for Adults and Carers that incorporates our voluntary sector, community provision and local services for Adults requiring services.

Different markets will change over time

These charts provide an *indication* of the market size, and how we aim to see the relative market sectors change over time as we aim to see more people to be supported to live in their own homes.





Market Sectors – key activities for 2024 and beyond

Intermediate Care Aims

The Future of Intermediate Care programme is now well established and has touch points with each system via the IC Boards.

It will be progressing to a first key decision point at March 2024 cabinet where decisions will come forward on ECL, ARC and bridging provision. This will be an opportunity to respond to our analysis and evidence around volume and nature of need.

Key aims

- Support people in their own homes to regain and remain independent
- Consistent good quality providers, willing and able to work together in the interests of the person and wider system
- Integrated and collaborative approach with shared goals
- Streamlined and simplified system for professionals interacting with it



For a collaborative and efficient market with capacity and capability to ensure adults achieve independence following a hospital stay or to avoid one happening in the first place

Intermediate Care Roadmap

The Future of Intermediate Care programme brings together necessary procurement and contracting in Intermediate Care, alongside adjacent work to drive improvement and simplified access for those that need it. These streams will continue to deliver over the coming year with the intention of ensuring better outcomes and value from our investment in Intermediate Care

1-year delivery plan	3-year delivery plan	7-year delivery plan
New contracts in place by September 2024 (May for ECL)	Contracts running with continuous improvement approach	Stronger and more instinctive integration
 Key Milestones: New contracts live by Sep 2024 replacing current reablement, ARC and bridging Long-term SLA with ECL including delegated Care Act assessments Considering ARC/LAH join up Work to design improved model of care in place including new 'Home to Assess' approach to minimise spot placements New Intermediate Care bedded provision contracts in place by Nov 2023. Engagement with providers & NHS to drive collaborative relationships 	 Key Milestones: New approaches to 'continual learning and improvement' in place Shared system focussed KPIs in place Contractual binding in place, if considered necessary for providers working in Intermediate Care Strong lived experience voice to drive 'learn and improve' approaches Referral processes simplified, TOCH in place Rebalance toward admission avoidance, from discharge focus 	 Key Milestones: Coordinated support available for individuals requiring it from both NHS and social care Alliance or joint venture models in place including voluntary sector to support more holistic outcomes

Live at Home Aims

The current Live at Home framework is due to end in August 2025. A programme of work is underway to consider its replacement. This ambition is that this helps to drive a vibrant and sustainable domiciliary care market, including a workforce that is stable and valued, with good career options and joined up support in coordination with the NHS, other social care services and housing.

Key aims:

The focus for our work on Live at Home remains consistent:

- Support people to remain independent, creating more enablement focus
- Good quality care
- Sustainable pricing
- Consistent and sufficient supply in all areas
- Fewer, deeper, relationships between Ops, NHS and our providers



A vibrant and sustainable domiciliary care market with sufficient capacity to support more people in their own home for longer in life, with diverse and complex needs

Live at Home Roadmap

A programme of work is already underway to consider how we replace the current LAH framework. This will consider how best to drive supply as well as relationships with core suppliers and the NHS.

1-year delivery plan (underway)	3-year delivery plan	7-year delivery plan
Aim that refresh of the LAH framework is completed and project established to commence redesign of new contracts to replace current LAH framework	A replacement to the current LAH framework will be in place (from August 2025)	Integrated approaches supporting more complex people in the home
 Key Milestones: Framework refresh complete. Proposals for new contract developed in partnership with the market, including consideration of combination of ARC/LAH and separation of AWD / OP Cabinet decision to procure new contracts September 24 Continue focus on good and outstanding providers Consultation on care workers charter completed Retention fund discharged 	 Key Milestones: New contract live by August 2025. Use of EHM, DSCR and Care Technology across Market Good supply in all areas Workforce stable with both recruitment and retention metrics showing improvement Strong relationships between ECC and core suppliers. Align NHS footprints. 	 Key Milestones: Strong collaboration in place between LAH suppliers and NHS community health and neighbourhoods Links established between suppliers and available community support for social needs.

IRN (Care Home) Aims

The current IRN framework is due to end in May 2025. We have commenced work to shape its replacement and are engaging Ops and the NHS are part of this. Our aims are:

- Ensure there is the appropriate level of capacity to support adults that require complex support.
- Increased collaborative discharges for adults entering short term residential or nursing placements from hospital, ensuring we support people to return to their long-term homes as soon as they are able.
- Improved collaborative approach with Health for adults entering into a residential or nursing placement on the Continuing Health Care Pathway.
- To ensure our most valued care homes remains sustainable.
- To upskill our carer workforce to manage demand for complex care
- To improve market oversight through the utilisation of technology



We anticipate fewer people needing care home support but those that do may be more complex and later in life

IRN (Care Home) Roadmap

The IRN contract is in place until 2025. Work has commenced to shape our future contract in alignment with the Market Shaping Strategy and mindful of the shifting landscape driving few placements but those who do require care home support, likely to be more complex.

1-year delivery plan (underway)	3-year delivery plan	7-year delivery plan
For the next 12 months, ECC plan to ensure that our residential market is sustainable and continues to work in collaboration to shape our residential market across Essex.	By 2025, a new IRN Contract will be in place which will continue to align with our Market Shaping Strategy and the necessary changes as a result of the Social Care Reform.	By April 2030 a much more integrated model will be in place, bringing together community-based NHS services, care home provision and in-reach support. This will be coordinated with neighbourhood teams.
 Key Milestones: Coordinate and implement Year 4 Annual Refresh of IRN for April 2024. Initiate discussions on our market shaping strategy and the future contractual mechanisms for our future IRN Contract. Work with the market to continue to increase our workforce in the residential sector and ascertain a longer-term plan to increase supply and skills set of our workforce. Evaluation of recovery to home model 	 Work with our strategic providers to increase the use of digital social care records, Essex Care Search and improve existing pathways in sourcing or managing packages of care. Implement new ways of working via implementation of the Social Care Reform and ensure our residential market are prepared The new integrated residential and nursing contract will be in place for residential care homes including solutions for more complex cases Pre-defined 121 hourly rates included in new framework 	 Key Milestones: 2028-9 project to review the IRN contract will be in place 2025-28 engagement with providers across the care sector and NHS to develop relationships. Aim for all contracted care homes to have an EPC (Energy Performance Certificate) rating of C or above

AWD Supported Accommodation Aims

Supported Living services aim to give adults with disabilities secure homes for the long-term, and to be able to progress and achieve their goals. This aligns with the Disabilities Strategy & Meaningful Lives Matter programme.

The market in Supported Living is large and varied, and work in the past few years has been targeted at improvement in the standards of accommodation people are living in, and development of new services in line with ECC need. The future approach within the category will focus on

- Development of services for adults with complex needs, and in areas of need such as PSI or ABI
- ➤ Reduction in void levels across the portfolio to achieve best value for ECC
- Achievement and measurement of outcomes for adults in services
- Rationalisation of services and reduction in property and services not meeting standards



Helping people access the best accommodation to meet their needs and help them meet their personal ambitions

AWD Supported Accommodation Roadmap

The Supported Living Framework is active until February 2025 and proposals are underway for the replacement of this contract. Demand for services remains high and support the strategic direction of the Council in moving adults to the most independent settings, and reducing the costs to the Council for accommodation.

1-year delivery plan (underway)	3-year delivery plan	7-year delivery plan
For the coming 12 months the focus will be on the design and procurement of the future framework. The proposals for the framework are an evolution of the existing model which has worked well and has been well-received by providers.	Much of the focus in this period will be on embedding the new framework contract, and continuing to grow the market in the areas that we need new services. Some internal developments are proposed, and there is growing need for complex services.	The intention is the supported living framework will continue to operate at this point, but will be nearing the point of re-procurement. A review will be carried out on effectiveness and what the future may look like for this category on a commercial basis.
 Key Milestones: Scope of the changes to the future framework and engagement with the market – February 2024 Preparation of internal governance for the reprocurement with a target of May 2024 Cabinet Meeting Release of tender to the market – June 2024 Completion of evaluation and award of the contract – November 2024 Mobilisation activity including internal engagement with key stakeholders and preparation with provider market around changes expected between award and contract start Start of new contract in March 2025 	 Key Milestones: Developed relationships with key providers and regular discussions around the needs in Essex. Completion of focussed review of true demand in PSI and ABI services to support discussion with providers and development of services that are needed. Delivery of in-house led complex needs services in Essex circa 2025/6. Process developed for the tracking of outcomes for individuals being delivered by providers. Rationalised accommodation market with unsuitable services (i.e. non-onboarded) exiting, and reduction in long-term voids in services. 	 Key Milestones: Completed category plan looking ahead to the future in the category and what the direction needs to be to support ECC aims. Review of effectiveness of the framework is completed to feed direction of travel. The market continues to develop services in areas of need, and the majority of services have been onboarded.

Day Opportunities -Aims

The most recent Day Opportunities framework has already expired, and work is underway to develop its replacement. The ambition is to have a sustainable market for day opportunities that supports people to remain living at home. For adults with disabilities this market will also support progression towards their life goals which may include paid employment. For older people this market will support them to manage or reduce the impact of any health conditions they may have as well as helping them to maintain independence and reduce social isolation. All services will support people to connect to their local communities and support families and carers.

Key Aims

- Establish a clear pathway approach for defining needs and setting outcomes, for both adults with disabilities and older people
- Develop focussed referral and placement pathways, that encourage placements for the right reasons and for the right amount of time
- Clearly specified, good quality support with clear quality criteria
- Sustainable, rational costs
- Consistent, sufficient supply in all areas and steps along the pathway



We want to ensure that we use the right service, at the right time, for the right duration and in the right place.

Day Opportunities - Roadmap

The previous framework has already expired, and we are currently reliant upon spot contracts. Work has commenced to develop a new approach based on more careful definition of provider capabilities and quality, thoughtful needs-based referrals and a sustainable, rational costing model.

1-year delivery plan (underway)	3-year delivery plan	7-year delivery plan
Work is already underway in the AWD space to test a pathway-based service directory in North Essex, and work is starting soon to test an outcomes-based move-on process. In the OP space diagnostic work is planned to more clearly define needs and potential demand.	By 2025 a new framework will be in place along with an onboarding process for all schemes, sites and groups. All placements will be made using an outcomes focussed service directory, and the market will be developing to ensure that we have the right provision in the right places	Our longer-term aims are for AWD to have greater access to community-based services to support once adults no longer require full day opportunity support, and for OP to have greater access to lighter touch services that can support them earlier in their pathway to reduce or delay the need for more intensive services later on
 Key Milestones: Initial market engagement completed by end 1st quarter 2024 Test and Learn approaches for AWD completed by June 24 Service directory and service price and quality onboarding processes designed Framework approach designed and tender live by end of 2024 	 Key Milestones: Scheme onboarding process in place Service quality processes in place with regular quality assessments underway Increased development of lighter-touch, more cost-effective community-based resources for both AWD and OP Clear evidence of outcomes-focussed practice from both ECC and Providers Continue progress towards more AWD in paid employment and less in buildings-based services 	 Key Milestones: Greater prevalence of lighter touch services, community groups and activities that reduce the need for more traditional services Employment normalised for AWD Service development with a community focus, reducing need for travel and increasing local connections Clear links between needs, service availability and development of schemes

Looking ahead to 2024 – Adult Social Care Operations

Operational challenges, plans and suggestions

Our operating context

Our statutory commitments

Under the **Care Act 2014** the Council has a range of responsibilities that ensure the right type of care is available to help prevent, reduce and delay care and support needs, enable people to access information and advice about available services, and ensure that there is a range of high-quality care and support services to choose from.

The **Health and Care Act (2022)** saw the introduction of **Integrated Care Systems** with Essex a party to 3 systems. It also introduced a **Care Quality Commission inspection regime** to provide an independent assessment of care at a local authority and integrated care system level. From April 2023 CQC will begin to review data and published documentary evidence across all local authorities, and from September will implement a programme of formal assessments. ASC has allocated resources and instigated a programme of work to ensure that we are inspection-ready.

Increasing demand for support and services

Demand for social care support continues to grow and we are seeing particular growth in new demand on mental health and wellbeing services. About 60% of new contacts come via our Adult Social Care Connects telephony service and most of the remainder via our Discharge to Assess pathway from acute hospitals.

Adults are needing different types of care and support. We have increasing evidence of high complexity of needs and increasing longevity of those with high complexity. Backlogs in elective care and NHS waiting lists are also affecting social care. There has been a significant increase in demand on safeguarding referrals. We are supporting about 5,200 people with Technology Enabled Care which is improving outcomes and helping people to remain independent.

About 1 in 6 people in Essex has a long-term health problem or disability and those with learning disability who need social care support is likely to go up by 8% by 2030.



Current challenges

At recent provider events we heard concerns from providers about links with Operational and NHS teams and processes of escalation. In later slides we'll talk about how we might improve this.

The operating context has changed post-Covid, with increasing demands for support, along with increased complexity of needs and prevalence of mental health issues; financial pressures for the Council and vulnerable people it supports; Government reforms, including CQC inspection and care charging; and new ways of working through our willingness to use digital options for all our residents.

This leaves us facing some challenging headwinds

These include:

- Some people are waiting too long for their care needs to be assessed and regularly reviewed
- The scale of demand on adult social care continues to grow (including for safeguarding referrals).
- Recruitment and workforce capacity remain challenging
- Our systems and processes don't always support us to work in the most efficient way



At any one time we provide care and support to about 16,000 people and through the course of the year we have contact with over 40,000 people.

In numbers...



People waiting for assessment or review



Open safeguarding enquiries (priority work)



Vacancy rate in Adult Social Care.

Workplan highlights



People waiting

Targeted work is successfully reducing the length of time that people wait for Care Act assessments and reviews.



Practice model

Scoping a programme to design and implement a new practice model has commenced and is expected to take 2 years to full implementation.



Workforce development

Phase 1 has completed and achieved numerous 'quick win' tasks relating to ways of working and working custom and practice anomalies.
Phase 2 will look at workforce design and is expected to complete early 2024.



Data and tech

A comprehensive plan has seen improvements to performance assurance, reporting, insight, systems and technology, and governance. Most of the improvements are expected to be achieved by March 24 although some initiatives will be longer-term.

Working together

There is an inter-dependency between ECC social work operations and care providers. Where relationships are strong it benefits everyone. Over the coming year, we would like to further strengthen these links.

How can we do this?

We would welcome your thoughts on the following ideas:

- Today is about sharing what life is like for us. Would it be helpful to present further information on how we're planning to develop?
- Our commissioning plans and operational practice models need to be coordinated so that suppliers are clear who their key ECC operational contacts are.
- We have regular feedback that our processes and systems are difficult to engage with. Can suppliers help us to design improved systems for future?
- Some suppliers may be able to support with tackling backlog challenges through evolving work they are already doing

"Unity is strength... when there is teamwork and collaboration, wonderful things can be achieved."

Mattie Stepanek

Over to you for discussion...

Questions and comments



This information is issued by: Essex County Council

Contact us: matthew.barnett@essex.gov.uk

Commissioning Team Essex County Council County Hall, Chelmsford Essex, CM1 1QH

- Essex_CC
- f facebook.com/essexcountycouncil

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