

Shaping Tomorrow



Wirral Adult Social Care Services

**Overarching Commissioning
Strategy**

2012 - 2015

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1. FOREWORD

This overarching commissioning strategy has been developed to make sure that the principles of personalisation and the transformation of adult social care which will result from it are fully embedded in commissioning processes and practices within Wirral.

Our aim in developing this approach is to ensure that all people living in Wirral;

- (i) Receive a universal offer of information and advice to resolve their problems from the Council and its partners
- (ii) See a shift from crisis management to a focus on prevention and early intervention services that promote health, wellbeing and a good quality of life;
- (iii) For people who require support, commissioning drives co-produced changes to develop the kinds of services local people tell us they want to support them in the future;
- (iv) Commissioning continues to drive efficiency and ensures that services for local people deliver value for money and that quality is everyone's business.
- (v) Can be assured that safeguarding is at the core of our approach to commissioning
- (vi) Commissioning focuses on celebrating and building on individuals' and community assets

The intention is that this document will lay out the vision, outcomes, priorities and strategy for commissioning. This will inform more detailed service-based commissioning plans within a clear framework and which will turn the vision set out in this document into a reality.

Phil Davies
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2. Introduction

The purpose of this document is to provide a single overarching commissioning strategy for adult social care which relates to all citizens of Wirral. It seeks to define how commissioning will support the continued transformation of services to achieve the vision initially set out by Government in 'Putting People First' and subsequently developed in the Coalition Government's 'Vision for Adult Social Care.'

From this generic document each service area will develop a detailed commissioning plan which will show how the vision and principles laid out in this strategy will be delivered in Wirral.

There are five target audiences for this strategy:

- For citizens of Wirral it signals the way in which DASS intends to work to achieve the right results and outcomes for people.
- For wider staff in social care and health settings it describes the role of commissioning in delivering better person centered care and improved outcomes.
- For the wider Council it demonstrates how a local authority commissioning approach can help achieve better health and wellbeing outcomes for all citizens
- For providers from all sectors it shows how commissioning can inform and influence them to deliver more personalised and cost effective services
- For NHS partners in fostering a joint understanding of the Council's role in securing an effective and more personalised Social care market through effective commissioning under the umbrella of the Health and Well-Being Board

This document describes the vision and principles that underpin the Council's approach to commissioning and sets out the strategy to move away from a traditional procurement approach towards a market development and market management function, based on local intelligence and co-production.

The strategy examines the national policy drivers shaping the local priorities which, supported by an analysis of current demand, future need and available resources set the commissioning intentions for the Council. The needs analysis reflects overall trends and needs as identified by the Joint Strategic Needs Assessment. More detailed analysis will inform the service commissioning plans.

3. National and Local Context

There is a plethora of national guidance and legislation influencing the commissioning of social care services. The most significant however, are:

- Putting People First (DH 2007) which called for significant transformational change including extending choice and control, improving information and advice, promoting independence and the importance of universal services in the lives of all citizens.
- A vision for adult social care (DH 2010) which sets out Government policy for making services more personalized, more preventive and more focused on delivering outcomes.
- Transparency in Outcomes: A Framework for Transparency in Adult Social Care- The 2011/12 Adult Social Care Outcomes Framework (DH2011) which details a set of outcome measures for demonstrating the achievements of adult social care.
- Healthy Living, Healthy People: Transparency in outcomes public health which sets out the Government's vision for a reformed public health system (DH 2012).
- Think Local, Act Personal which is a nationwide partnership committed to the personalization of services.
- The NHS Operating Framework.
- Fair Society, Healthy Lives (Marmot 2010) which describes how people who are socially isolated are more likely to die prematurely than those who have strong social ties

Local commissioning processes in Wirral are influenced by:

- The Corporate Plan 2011-13 which sets out the Council's priorities
- DASS Departmental Plan 2012-13 which sets out the Council's priorities
- Wirral Joint Strategic Needs Assessment which identifies the needs of people in the Borough
- Health and Wellbeing Strategy (July 2012) which will describe the strategy for addressing health inequalities
- The Learning Disability Partnership Board which has responsibility for ensuring that government strategy, Valuing People Now, is implemented
- The Safeguarding Adult Partnership Board, which works to ensure vulnerable adults are free from abuse and harassment.

4. Wirral Needs analysis

- 4.1 Wirral's Joint Strategic Needs Assessment (JSNA) highlights a number of key issues for the Department of Adult Social Services.

DEMAND PRESSURE – POPULATION

- Wirral has a relatively high older population and a relatively low proportion of people in their twenties and thirties compared to England and Wales as a whole.
- The older population (aged 65 years and above) are expected to increase at the fastest rate (than any other age group) over the next two decades; between 2008 and 2033 it is estimated that this population group will have increased by 43%.
- The population over 85 is projected to increase from 7,900 in 2008 to 17,600 in 2033, which equates to a 123% increase.
- The Index of Multiple Deprivation (IMD) places 30 of Wirral's LSOAs in the lowest 5% in England and 23 LSOAs in the 3% most deprived nationally.
- The Employment domain of the IMD 2010 indicates that Wirral performs poorly on this indicator. This is an indication of the scale of the challenge faced in Wirral and the need for a focused and coordinated approach to tackling worklessness and economic inactivity.
- Wirral has a number of communities which are at the extremes of the income spectrum, indicating that the differential between people on very low and very high incomes is pronounced.

DEMAND PRESSURE – HEALTH AND WELLBEING

- In 2010/11, admissions to hospital resulted in over 42,904 excess bed days at a cost of almost £1.5 million. Circulatory, Injuries and Poisonings and Digestive disease accounted for 40% of excess bed days. This warrants further investigation.
- Although performing better than many of its neighbours, Wirral is currently not on track to meet the local target set for the National Indicator 130.
- Wirral is also slightly under performing in the National Indicator 141 which means that too few clients in short term accommodation are moving on in a planned way to greater independence. A range of measures have been introduced to address this with year on year targets set to demonstrate improvement.

DEMAND PRESSURE – OLDER PEOPLE

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- The number of older people is set to increase considerably over the next two decades; by 2033 it is estimated that 43% of the Wirral population will be aged 65 or above. This will have a considerable impact on health and social care services, as the number of older people presenting with health related problems increases. This could also have a considerable impact on the number of family carers in Wirral.
- There are more older people considered to be living in deprived circumstances in areas of Birkenhead & Tranmere, Bidston & St James, Seacombe and Rock Ferry. It is however important to be aware of pockets of deprivation in other areas of the borough.
- It is estimated that there are 11,269 older people living in fuel poverty in Wirral, which has a serious impact on health and wellbeing. In 2007/08 there were 184 excess winter deaths, which is likely to be linked to inadequate heating and poor housing.
- Falls amongst older people is a key concern, and incidence increases with age. It is estimated that the annual incidence of falls amongst older people in Wirral totals more than 18,000. With the projected rise in the older population and the greater risk of falling associated with increasing age, the number of falls in Wirral would be expected to rise concurrently if new interventions and prevention strategies are not adopted.
- Emergency hospital admissions for dementia in Wirral are approximately 54% higher than the national average, which could indicate that there are caring issues regarding older people with dementia.

DEMAND PRESSURE – LEARNING DISABILITY

- There is a lower life expectancy within the learning disability population than with the general population and people with a learning disability are more likely to have undiagnosed long term conditions.
- Nationally, and in Wirral, people with learning disabilities experience amongst the lowest levels of employment of any working age group.
- Sir Jonathan Michael's Independent Inquiry (Healthcare for All, Independent Inquiry into Access to Healthcare for People with Learning Disabilities, 2008) highlighted "basic shortcomings in the way that services are provided for people with learning disabilities, contributing to poorer health outcomes, avoidable suffering and at worst, premature deaths."
- Work needs to continue to identify any 'reasonable adjustments' made to health and social care services to reflect the specific needs of people with a learning disability.
- A national survey identified that people with learning disabilities may be at increased risk of hate crime; there is little understanding of this in the general population and within community safety initiatives.
- In order to improve housing outcomes for people with learning disabilities, it is a key priority to develop a comprehensive understanding of the current supply of housing and accommodation options that are available locally.

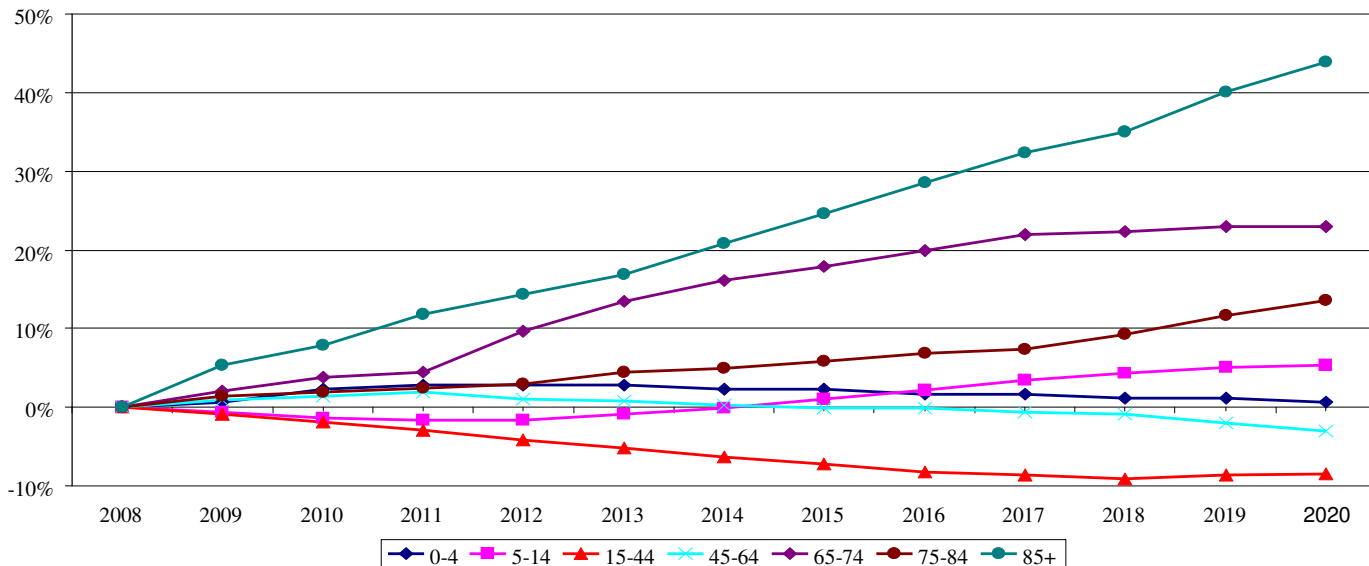
DEMAND PRESSURE – CARERS

- There is a higher than national average number of carers per head of population in Wirral. There are 37,929 carers living in Wirral currently, which accounts for 12% of the population, compared with 10% nationally. Nearly a quarter of those are carers providing over 50 hours' unpaid care per week (Buckner & Yeandle 2011) whereas only 2,188 receive a service from Social Services (March 2011).
- Data implies that carers are not claiming all of the welfare benefits to which they may be entitled. Accessible information about help and support services, and benefits and allowances has been identified as a key priority by Wirral carers.
- If the caring relationship breaks down because carers are unable to cope, the cost of replacing the care they provide by NHS secondary and primary care and social services is likely to have a detrimental, financial and unsustainable impact on the health and social care economy.
- The 2010 Carers Strategy suggests that health promotion, prevention strategies and service responses to the health care needs of carers are key priorities for health and social care. Care giving should be recognised as a public health issue and should be on the agenda for reducing health inequalities.
- From a demographic perspective older people are less likely to be able to cope with the pressures of being a Carer.
- Carers stated that Caring caused a number of potentially detrimental effects on their health.
- Short breaks and respite from Caring, together with the opportunity to meet with other Carers to reduce the isolation they feel as Carers are anecdotally a high priority.

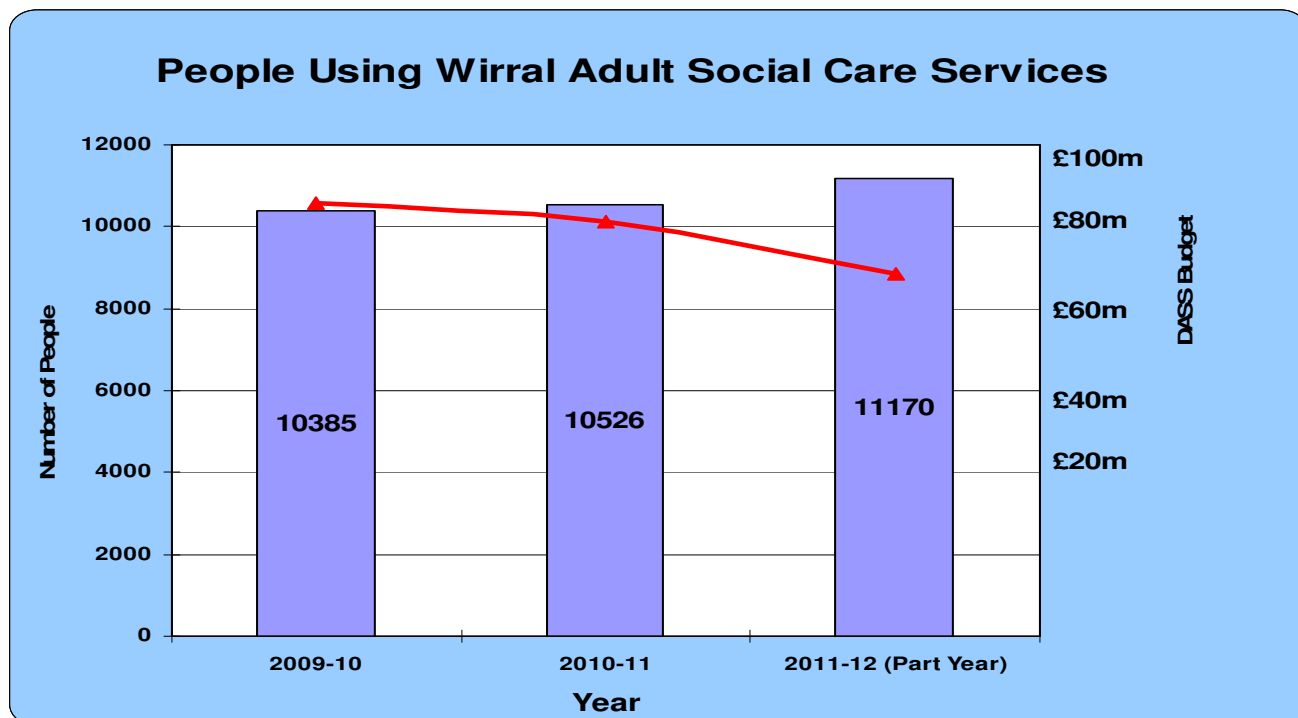
DEMAND PRESSURES – MENTAL HEALTH

- National data suggests that people with a mental health problem are more likely to be on a lower income, be on welfare benefits and live in debt. Mental health is also the most commonly reported reason for claiming incapacity benefits, both nationally and locally.
- In Wirral it is estimated that there is a higher prevalence of severe mental illness than the North West and England average.
- Hospital admissions data for mental health indicates a strong association between deprivation and increased admissions. Admissions for self harm and prevalence of a common mental illness show a similar pattern. This indicates a greater need for mental health interventions in areas with higher levels of deprivation.
- Wirral's rate for suicide and undetermined injury is higher than both regional and national averages. Alcohol abuse has been associated with many suicide and open verdict deaths and many people were single or lived alone at the time of their death.

4.2 The number of older people is set to increase considerably over the next two decades. By 2031 it is estimated that 26% of the Wirral population will be aged 65 or above. This will have a considerable impact on health and social care services, as the number of older people presenting with health related problems increases. This could also have a considerable impact on the number of family carers in Wirral. Within this ageing population, there is expected to be a 123% increase in the population over 85 by 2033



4.3 The impact of this demographic change on the Council both in terms of numbers requiring social care support and resources is illustrated in the graph below.



5. Vision, Outcomes and Priorities

The Department of Adult Social Services has two main sets of strategic drivers, each of which form the basis of the Departmental Plan for 2012-13;

- The Council’s Corporate Plan (‘Your Family’ section); and
- The (statutory) Adult Social Care Outcomes Framework (ASCOF).

Corporate Plan	Adult Social Care Outcomes Framework
Ensure vulnerable people in Wirral are safe and protected.	Safeguard people whose circumstances make them vulnerable and protect them from avoidable harm.
Ensure that the widest possible options for care and support are made available close to where people live	Ensure that the people who use services have a positive experience of care and support.
Ensure that people can choose the care they need from a range of high-quality support services and options for care	Enhance the quality of life of the people who have care and support needs.
Ensure that vulnerable people and those in later life can get the care and support they need at an early stage to prevent problems getting worse	Delay and reduce the need for care and support.

The Departmental Plan is constructed to deliver the requirements contained within these reports in a way that will:

- Ensure that interventions are proportionate and timely;
- Ensure equal access to universal services that exist within the Borough;
- Improve wellbeing and quality of life;
- Encourage people to find their own solutions;
- Ensure closer working with individuals and organizational partners;
- Focus on supporting people to make use of strengths and abilities, and their own resources wherever possible; and
- Ensure that presented carers needs will be addressed.

The Council understands the very challenging financial circumstances in which services are being delivered, and the transformations necessary to focus upon the need to deliver greater efficiency as well as effectiveness and to continue to deliver change. For this reason, the Departmental Plan 2012-13 contains an additional goal which is ‘Improving processes to improve services’.

Commissioning has a key role to play in achieving these strategic outcomes as personalization continues to transform the way adult social care is delivered. This transformation, however, is taking place within an environment which is challenged by emerging Government policy, shrinking budgets, capacity issues and rising expectations. The Commissioning agenda is therefore a critical component of the Council’s intent to deliver services in the most effective and efficient way.

6. Strategy

*Commissioning is the means of securing the best value for local citizens. It is the process of translating aspirations and need, by specifying and procuring services for the local population.
(Commissioning Framework for Health and Wellbeing, DH 2007)*

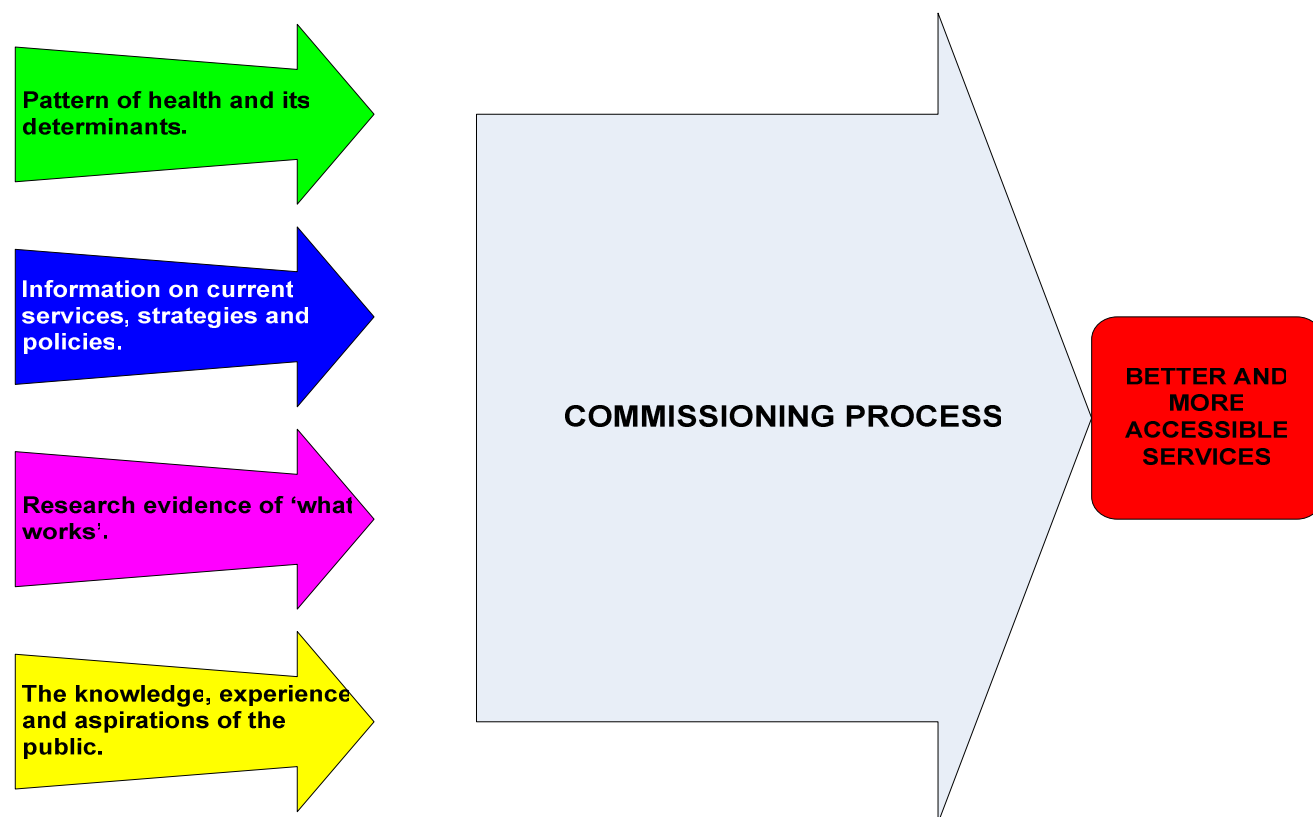
6.1 Commissioning Cycle



6.2 Evidence Based Commissioning Process

The JSNA describes the health and wellbeing of the people of Wirral. It also identifies the challenges facing organizations involved in delivering better outcomes for the population. It brings together a variety of information that can be used to inform decisions about the planning and commissioning of health and social care services. The Council will ensure the use of this information when commissioning services and promote its use by other organizations and partnerships to commission plan and improve services. The Council will also base its commissioning of services on evidence of what works and use both national and local research to inform its decisions. This process is described diagrammatically below.

Types of information used in commissioning services



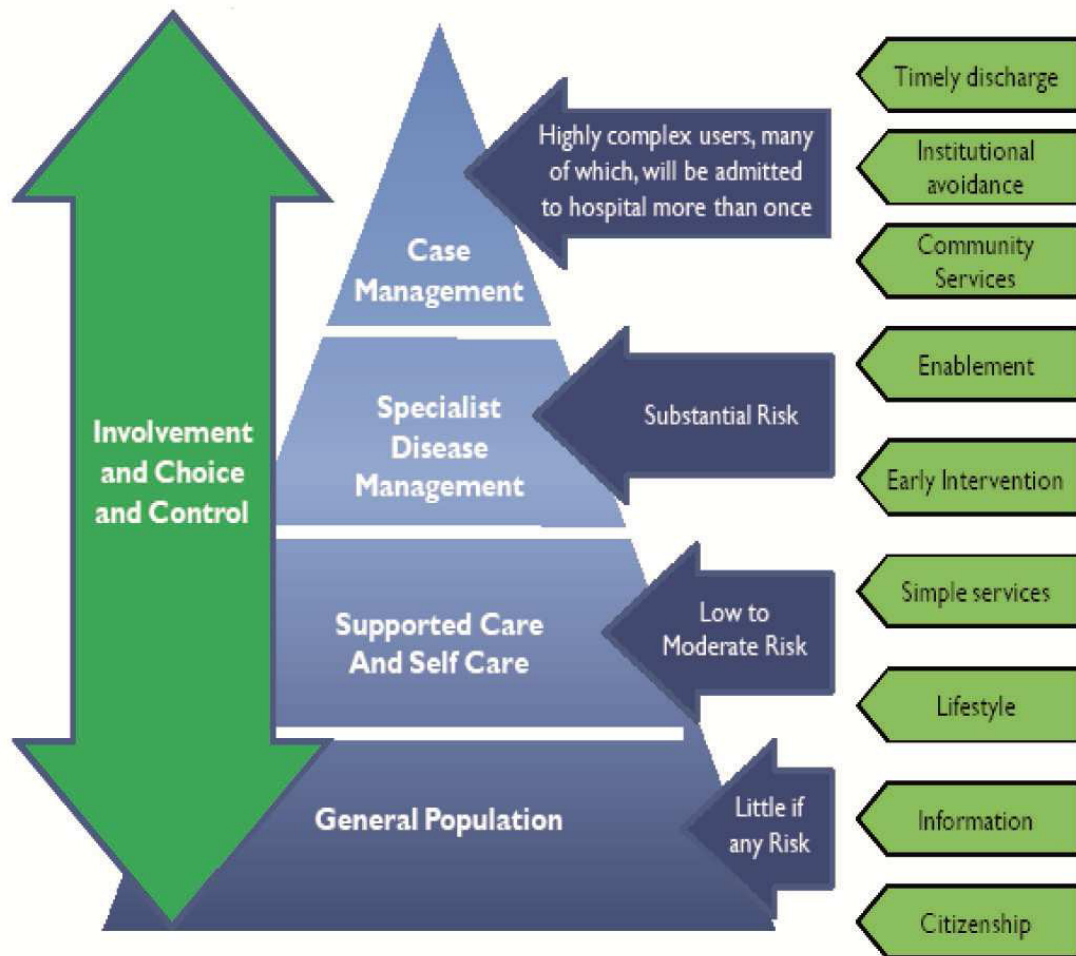
Commissioning for the health and well-being of individuals means helping local citizens to:

- Look after themselves, and stay healthy and independent;
 - Participate fully as active members of their communities;
 - Choose and easily access the type of help they need, when they need it.
- Commissioning for the health and well-being of a local population therefore includes:

- Understanding and anticipating future need;
- Promoting health and inclusion and supporting independence;
- Identifying the groups or areas that are getting a raw deal, and giving them a voice to influence improvements;
- Delivering the best and safest possible quality of care.

The diagram below demonstrates how commissioning varies according to differing levels of complexity and need

Promoting Independence (‘Promoting Independence’ CSIP 2007)



The diagram below, ‘the triangle of care’, supports this model and makes a link to the people living in Wirral



6.3. Refocusing Resources

National research is beginning to demonstrate that people live for longer in health and independence if they are able to access

- high quality universal services;

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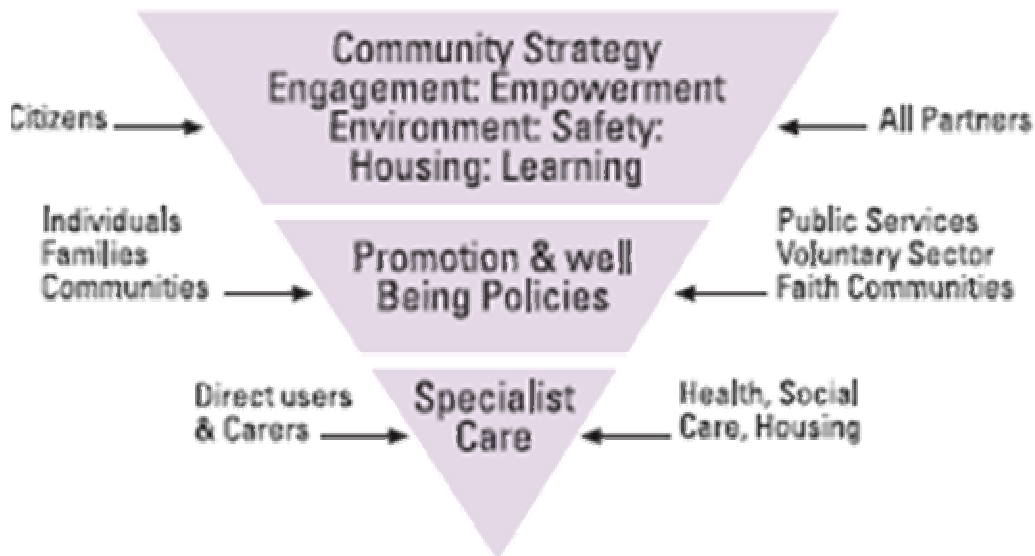
- appropriate advice and information, including provision by the Voluntary, Community and Faith Sector;
- a choice of personal support services including housing;
- being socially included in their community;
- and are able to remain cared for at home as long as possible once they have developed complex care needs.

In order to achieve these outcomes the Council needs to continue the transformation from paternalistic, reactive care to a system focused on;

- early intervention,
- reablement,
- prevention and
- high quality personally tailored services.

The Council also operates within a financial climate which is forcing a drive for efficiency within the public sector. It recognizes that commissioning plays a key role in delivering efficiencies by encouraging innovation and developing new markets and partnerships.

The Council will therefore only commission services which support the transformation described above and inverting “the triangle of care”, which is described diagrammatically below.



6.4 Improving Commissioning Processes

In order to maximize the effectiveness of commissioning the Council will work with others; people who use services, their families and carers, partners, providers and the rest of the Local Authority to develop the following:

- Market/Gap Analysis. This is currently fragmented and further analysis will be undertaken to enable commissioners and providers to better understand where there are gaps in provision.
- Budgetary. The Department will continue to develop its approach to benchmarking and value for money and will focus in particular on areas of service where spend is above that of comparator Authorities.
- Market Development. The Department will continue to move towards “Framework Agreements” which enable individuals to purchase services directly

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via their personal budgets. This will provide opportunities for partnerships and sub-contracting between providers to encourage the market to become more flexible and responsive. The Department will work closely with the Council's Corporate Procurement section to develop transparent and appropriate tendering processes that will ensure an appropriate level of provision.

- Market Management. The traditional market management functions of contract monitoring, making sure there is contract compliance, the delivery of quality services and safeguarding will continue to be developed.
- Partnership Approach. The approach to commissioning will also play an important part in supporting the development of 'Neighbourhood Plans' and sustainable communities. The Department is committed to working with communities, neighbourhoods, individuals and the voluntary sector to achieve this and the approach to commissioning services will complement the assets communities already have in place.

7. Performance Monitoring

The successful implementation of this strategy will impact upon the Council's overall performance in relation to Social Care. The performance of the Council is now managed within the Adult Social Care Outcomes Framework (ASCOF). The ASCOF consists of 4 key outcome domains. These were published in the document 'Transparency in Outcomes: a Framework for Adult Social Care' (DH, March 2011).

The purpose of the ASCOF is for local authorities to use the framework as a basis for their own local performance management arrangements, and to assist in any local conversation concerning strengths in delivering better outcomes for people. It also allows the government to understand national trends around social care.

The ASCOF has four specific domains:

- Enhancing quality of life for people with care and support needs;
- Delaying and reducing the need for care and support;
- Ensuring that people have a positive experience of care and support;
- Safeguarding adults whose circumstances make them vulnerable and protecting from avoidable harm.

The government no longer sets performance targets, however it has published a set of "outcome measures" in the ASCOF. These 17 measures are based on pre existing national collections and performance indicators and are collated nationally to specific standards.

All these measures currently appear in the 'Adult Social Services Departmental Plan for 2012/13', and outcome information will be reported to the Department of Health under their statutory reporting procedures.

8. Conclusion

Over the coming years there will be an increased need to prioritise high quality personalized services that meet the needs of the changing demographic and ensure there is equality across Wirral for residents to access services. The manner in which services are commissioned is fundamental to achieving this and the strategy set out in this document is key to enabling better outcomes for Wirral citizens.