

Nottinghamshire County Council, **Adult Social Care Market Position Statement**

October 2012

Purpose of this market position statement

This document is aimed at existing and potential providers of a broad range of social care and support services for adults. It aims to provide key market intelligence that will be useful to providers in making proactive business and investment decisions and to act as a starting point for further discussion between providers and Nottinghamshire County Council.

It includes information on current and potential future demand, supply, quality and models of care the Council wishes to purchase in the future, which includes opportunities arising from self-directed support and the increasing up-take of Direct Payments.

This document consolidates and builds on a range of previous work that the Council has undertaken with current and potential new providers coming into Nottinghamshire. It covers services funded by the Nottinghamshire County Council, including those commissioned jointly with Health and other partners.

'Caring for our Future' July 2012, strengthens the need to share market intelligence with providers as part of the Government's intention to introduce a duty upon local authorities to promote diversity and quality in the provision of services¹. This includes services which the Council contracts directly with providers, as well as those for people who will arrange their own care and support either through a Direct Payment provided by the Council, or by funding their own support (self-funders). This document therefore encompasses all of these.

About Nottinghamshire – key facts

Nottinghamshire covers an area of 805 sq miles, with seven District/Borough councils, six Clinical Commissioning Groups (CCGs) and two NHS Commissioning Clusters. The largest concentration of people found in the Greater Nottingham conurbation (including Nottingham City), the suburbs of which lie mostly outside the city boundary. Nottinghamshire County Council is the 11th largest County Council in the UK and it employs over 27,000 people.

The towns of the county are Mansfield (population 87,500), Kirkby-in-Ashfield (27,000), Sutton-in-Ashfield (45,400), Newark-on-Trent (26,700), Worksop (43,500) and Retford (21,700).

¹ Department of Health (2012) *'Caring for Our Future – reforming care and support'*

Nottinghamshire has an ethnically and culturally diverse population with areas of affluence and deprivation; some of the northern parts of the county are ex-mining communities. There are three very distinct areas:

- the relatively affluent suburbs surrounding the City of Nottingham
- the towns and villages in the north west which grew out of the textile and coal industries
- rural areas to the east and south characterised by prosperous market towns and villages in the Trent Valley.

Less than 3% of the County's population are from ethnic minority groups, with the larger percentage in the areas close to Nottingham. The largest ethnic minority group in Nottinghamshire is Indian. There has also been a substantial increase in the number of migrant workers in the County since 2004, although the number of entrants has decreased more recently.

About a fifth of the population live in rural areas, mostly in small towns and villages (less than 10,000 population size). This can give rise to challenges due to length and costs of travel for individuals and staff, as well as the viability of providing local services due their size. Currently, there are three areas where this is impacting on ability to provide sufficient capacity to meet demand for community based services; Bassetlaw, Newark and Rushcliffe.

Further detailed information can be found in Nottinghamshire's Joint Strategic Needs Assessment:

www.nottinghamshire.gov.uk/thecouncil/plans/strategydevelopment/joint-strategic-needs-assessment

Current and estimated future demand for social care

The population of the county (779,000 in 2010) is projected to grow by almost 24% by 2031, compared to an England growth of just over 19% in the same period, with this growth being faster in some areas than others. The population of Newark and Sherwood is predicted to grow by 30% by 2031, whilst Gedling shows growth is expected to be less than 17%².

The highest levels of social care need in Nottinghamshire are currently concentrated in; Mansfield, Ashfield, Newark and Sherwood (particularly in Newark town), and Worksop in Bassetlaw. Each district in the County has at least one area experiencing significant

² Our Strategy for Health & Wellbeing in Nottinghamshire: Early Priorities for 2012-13

social need, often with this being alongside areas with comparatively low levels of need, such as Broxtowe, Gedling and Rushcliffe

The number of people in Nottinghamshire provided with publicly funded adult social services rose by 4% between 2007-2010. Although birth rates have risen recently, the longer term projected decline in the number of children and young people and rising numbers of older people mean greater demand for services for older people in the future.

18.1% of the population are aged over 65 years, with a predicted increase of 31% by 2020. Newark & Sherwood and Gedling Boroughs currently have the highest numbers of older people.

The numbers of people funding their own care is forming an increasingly large part of Nottinghamshire's social care market. Ensuring that there is sufficient service capacity and information for people who fund their own care is becoming increasingly important. In the future the Council aims to have better information to share with providers on this sector.

For 2011/12 the Council has set its Fair Access to Care eligibility threshold to include the categories 'substantial' and 'critical' for Council social care funding.

Table 1

Primary reason for care and support need	Numbers receiving social care (as at March 2012)
Older people (aged 65 plus)	13,891
Learning disabilities (aged 18 plus) (including Profound and multiple learning disabilities)	2,135
Mental health (aged below 65)	591
Physical disabilities (aged below 65)	1,798
Visual impairment (aged below 65)	175
Hearing and Dual Sensory impairment (aged below 65)	54
Informal/family carers (18 plus)	1,265
Total	19,909

Further detailed information can be found in Nottinghamshire's Joint Strategic Needs Assessment:

Strategic direction

Nottinghamshire's vision for health and wellbeing is set out in its 2012/13 strategy (<http://www.nottinghamshire.gov.uk/caring/yourhealth/health-and-wellbeing-board/strategy/>). The key desired outcome is 'to improve health, the length and quality of life for people in Nottinghamshire'.

The County Council's Strategic Plan 2012-2014 (<http://www.nottinghamshire.gov.uk/thecouncil/plans/councilplansandpolicies/strategicplan/>) aims for 'Nottinghamshire to be a place where people enjoy life, are healthy, safe and prosperous; and where business is able to thrive'.

The Council's adult social care and health commissioning plans (both individual and with partners) are developed within this context to deliver these ambitions. It is recognised that faced with long term demographic change leading to an increase in the number of service users with complex care needs, the current system and culture of community care provision will need to be radically transformed to meet these higher levels of demand at a time when funding for public services is considerably limited and has reduced in the past two years nationally by unprecedented levels of 25-30%.

Whilst working to deliver an adult social care efficiency programme of £63.395 million from 2011/12 to 2014/15, the Council has also allocated £42.8 million additional funding across all client groups over the period 2011/12 to 2014/15 to account for rising demand for services due to increased demographic pressures. The programme is looking at the ways to deliver value for money and more efficient services, for example, through reducing bureaucracy, at the same time as re-investing the additional money in services targeted at those with most need.

Although the Council will continue to identify and implement projects that enable departments to do what they already do more efficiently and faster, the scale of the challenge is such that there needs to be more focus on evidence based and innovative ways of reducing demand for services and seek to work with providers in partnership to achieve this.

People want to maintain their independence, health and wellbeing and a considerable amount of care needs can be avoided, delayed or significantly reduced through intervening earlier. The Council currently purchases a range of services whose primary focus is to prevent, postpone or reduce the need for care and support. These can be used both by people who are at risk of requiring social care support, as well as those already receiving it in order to maintain their health and prevent the need for more intensive levels of support. The Council seeks to work with providers to develop models that are evidence based and can demonstrate outcomes of reduced demand.

The Council is also keen to see principles of re-ablement and enablement underpin all services it provides and not just apply when a person is using a specific short term service. When people's health does deteriorate with associated care and support needs, the first priority should be to restore or develop an individual's independence, confidence, autonomy and community support, as far as possible, to its maximum state.

Adult social care is also aiming to improve the quality of services and make them more personalised, offering individuals greater choice and control over their support. 'Think Local, Act Personal' www.thinklocalactpersonal.org.uk is a sector led group of over thirty national partners committed to the goal of better lives for people through them having greater choice and control over the support they use and this being provided in ways that help people to stay healthy, active, contributing members of supportive communities; often also referred to as "personalisation".

One element of this is self directed support and the Council has made good progress in the last two years, redesigning processes and services to enable everyone who is eligible for social care to know how much money is available for their care and support needs (a personal budget) and have the option to take this money themselves (a Direct Payment) to creatively plan and arrange their own package of support, with help to do this if needed. The Council's position is that a Direct Payment is the preferred way of offering a personal budget to eligible service users, because it enables increased choice and control. For long term care and support, the aim is that all adults who are eligible will have an indicative personal budget by March 2013. This includes all new and existing people in residential settings.

At the start of April 2011, 1,709 adults using social care services in Nottinghamshire chose to take all or part of their personal budget as a Direct Payment. At the end of August 2012, 2,529 service users received a Direct Payment with a further 664 carers in receipt of a direct payment. The total number is 3,193. Currently this equates to 1 in 3 people on a personal budget taking this as a Direct Payment. Total spend on Direct Payments is approximately £509,000 per week, with the average value being £215 per week.

The Council's aim is that within 5 years, Direct Payments will be the main way in which people choose to arrange their social care. The Council is constantly searching ways to make this easier and welcomes innovative ideas from providers. Recently, pre-payment cards were introduced that mean people can pay providers directly for their support via pre-loaded cards, without the need for complicated transactions or a bank account.

The rate at which people will take up the option of Direct Payments impacts on both Council commissioning plans and provider business models, however, this is not easy to make accurate predictions on. The Council encourages providers to consider the future options for their services, including; opportunities to diversify and offer a range of flexible support options, marketing services directly to individuals and transparent reasonable, unit costs which should not cost people more to buy with their Direct Payment than through a directly managed contract with the Council.

Achieving the above will be evidenced overall by:

- more people who need care being supported to live in their own homes
- reduced numbers of people in residential care
- increased self care and condition management
- a reduction in the number of emergency admissions to hospital
- swift and safe discharges from hospital to home
- a shift in support planning emphasis and use of resources, to prevention and early intervention wherever possible
- people having more say over where, how and by whom their support is delivered (i.e. a person centred service, focused on outcomes)
- better access to information that helps people make their own choices
- more people taking up the option of Direct Payments
- people using services being more satisfied with their overall experience of care
- efficient, value for money services.

Community Based Care and Support Services

Assistive technology and telecare

The Council utilises telecare and other assistive technology to help support the independence of vulnerable older and disabled people. Equipment used includes twenty-four hour monitored environmental sensors (e.g. smoke, carbon monoxide and flood alarms) and personal sensors to automatically detect a range of risks to health, including falls, epilepsy, 'wandering' and enuresis. Lifestyle monitoring systems are also used by the authority to assist with assessments of how well people with dementia are managing in their own home.

Nottinghamshire County Council awarded its main contract for telecare equipment and monitoring services in August 2011, following a mini competition within the terms of the Government Procurement Service Framework agreement for Telecare, Telehealth and Telecoaching.

Evaluation in Nottinghamshire and across the East Midlands has shown that when targeted at the right people, it can be a cost effective way to maintain quality of life and independence. Plans are being developed to increase the use of telecare and enhance its potential to enable people to stay at home longer. This includes extending the current pilot night time response service, to establish the availability of a twenty-four hour emergency social care response service to telecare alerts. This will be tendered for as part of the overall Home Based Care contracts in 2013.

The Council seeks to work with providers who will use telecare proactively and effectively in their own services as well as being aware when supporting people in their own homes of when it might be appropriate to refer someone for an assessment for assistive technology. For further information about types of equipment, please go to:

[\(http://www.nottinghamshire.gov.uk/caring/adultsocialcare/supporttoliveathome/equipmentadaptations/sensorsalarms/\)](http://www.nottinghamshire.gov.uk/caring/adultsocialcare/supporttoliveathome/equipmentadaptations/sensorsalarms/)

Integrated Community Equipment Service (ICES)

Nottinghamshire County Council is the lead commissioner for an integrated community equipment service partnership for adults and children. The arrangements are made under a section 75 agreement of the 2006 National Health Service Act and include Nottingham City Council, NHS Nottingham City, NHS Nottinghamshire County and NHS Bassetlaw. The partnership awarded the current provider a three year contract which started in April 2011 at a value of £5,360.123 per annum, with the option of extension for a further two years.

Carers Services

Carers play a vital role and Nottinghamshire County Council is committed to enabling people to continue caring as long as they wish and are able to, whilst having a life of their own outside of their caring role. As part of the package of support for the 'cared for' person the Council has a number of directly contracted Approved Framework contracts in place with a range of providers, such as respite, day services and sitting services. All services are listed in:

<http://www.nottinghamshire.gov.uk/caring/adultsocialcare/supporttoliveathome/communitysupport/social-care-directory>

In 2011/12, 3,386 carers received an assessment of their needs in their own right. If they meet the eligibility criteria, carers can receive their own personal budget of up to £200, as a one-off payment, to help them look after their own health and wellbeing. In 2011/12, 603 carers received a personal budget up to the £200 limit. This 'one-off' payment goes to the carer (Direct Payment) and they can choose to spend the money on a range of different services to meet their needs, some of which are mainstream or trade services and some more tailored to carers which smaller or micro-enterprises may be interested in developing. Examples of the type of services and support carers chose include; home improvements, gardening, domestic help, short breaks, days out, spa days, equipment to help caring, e.g. washing machine, dishwasher and support to return to work.

Two specific 'carers' services were commissioned in 2011/12. A block contract valued at £100,000 to provide Universal Carer Services was awarded in October 2011 for one year with the possibility to extend up to two years. The second service commissioned is a block contract for one year from May 2012 for a Crisis Prevention Service providing cover for twenty-four hours a day, seven days per week on a temporary basis. When this current contract for the Crisis Prevention service ends it is likely to be re-tendered along side the home-based services for older adults in 2013.

Handyperson Adaptation Service

The Handyperson Adaptation Service (HPAS) is available to people living in Nottinghamshire who are aged 60-plus, or who have a disability. The service is commissioned through a partnership of Nottinghamshire County Council, NHS Nottinghamshire, Nottinghamshire Fire and Rescue Service, NHS Bassetlaw and all the district and borough councils in Nottinghamshire.

Individuals, their families, a volunteer or a professional can make a referral to the Customer Service Centre

(<http://www.nottinghamshire.gov.uk/thecouncil/contact/customerservices/>) on 0300 500 80 80. If eligible, the work is allocated to a trader who has been approved under the Council's 'Buy with Confidence' scheme (<http://www.nottinghamshire.gov.uk/living/business/tradingstandards/buy-with-confidence/>). Under this scheme, traders are trained to fit adaptations, conduct basic home safety checks and give winter warmth advice.

The Buy with Confidence approved trader list includes builders, plumbers, gardeners and other businesses. All the companies have been vetted by trading standards officers to ensure they are solvent, adequately insured and don't have a history of financial fraud. The scheme is open for traders to apply for at any time. HPAS uses the Buy with Confidence scheme to find traders for an average of 3,000 jobs per annum on a rolling schedule. Traders are paid at £20 per hour, with most work taking between one to four hours.

Homecare Re-ablement:

The Council directly provides a short-term (maximum six weeks) homecare re-ablement service for older people, including those living with dementia, who are either living in the community or being discharged from hospital. This service aims to ensure people are as independent and well as they can be, so that they either no longer need social care support or their support needs are minimised. There are no current plans for this service to be provided by an external agency.

Homecare

Nottinghamshire County Council Adult Social Care, Health and Public Protection Department currently purchases homecare services for 3,700 people, totalling approximately 30,000 hours per week from the independent and voluntary sector. In 2011/12 the Council spent approximately £18 million a year on these services. There are currently 30 Approved Providers, contracted under a joint framework agreement with Health, from which homecare services mainly for older people are spot purchased. Services commissioned by the Council for people with a physical disability tend to be smaller packages as people with larger packages are increasingly taking up the option of a Direct Payments to purchase their services themselves. Many of these include 'live in' twenty-four hour support. The average actual cost of standard homecare per hour is £13.40, with rates ranging from £12 - £17 per hour. Some of the higher costs are associated with higher travel costs in rural areas.

A centralised Electronic Monitoring System (InfoCare) connected to individual's telephone land line is currently used to record and pay providers for actual time delivered, to the minute. This is now an old system and will be replaced with a more modern method in 2013.

Nottinghamshire's supply and demand across the seven districts varies, but generally in rural areas, especially Rushcliffe, there are difficulties meeting demand. Providers state the reasons for being unable to provide sufficient capacity as; not being able to recruit staff due to the carers not wanting to travel, rising fuel costs and generally difficulties in finding workers from those areas. Discussion with providers is underway to identify a cost effective way to address these issues as part of the re-tender of existing contracts required in 2013. Some urban area providers have available capacity and at times when there is reduced demand for services. Ashfield/Mansfield districts rarely have any capacity issues, however in Hucknall which is in the area of Ashfield there are times when capacity is an issue and demand for homecare can be high and supply is not often available to meet this demand.

The current domiciliary care contracts within the Approved Framework Agreement are due to expire and they will be re-tendered during 2013.

Initial consultation and analysis of possible quality and value for money models is underway to identify the way to best address:

- limited capacity in rural areas and associated high costs,
- changing culture and processes to deliver more personalised, flexible services that work to meet individual's outcomes, rather than focusing on time and task
- supporting timely hospital discharge
- streamlining the Council's internal administrative systems where possible
- ensuring a sustainable local provider market
- managing the shift to more people taking a Direct Payment to arrange and purchase services themselves
- issues raised by people using services, including; greater consistency of worker and workers arriving within a reasonable time of when they had arranged to

Extra Care Housing

One of the services that the Council is seeking to develop further is Extra Care Housing. Two new build schemes have recently been completed in Southwell and Edwalton and a number have been developed with partners in what was traditional sheltered housing accommodation. £12.65m capital funding has been secured to develop the strategy further by increasing the number of units of accommodation by 160. It is anticipated that contracts will be awarded for Phase 1 in October 2012. In total Nottinghamshire currently have seven Extra Care schemes:

- Moorfield Court in Southwell
- Abbeygrove in Worksop
- Westmorland House in Harworth
- Spring Meadows in Cotgrave
- Cricketers Court in Cotgrave
- Hilton Grange in Edwalton
- Vale View in Newark.

The Council has nomination rights to 152 places across these and operate 5 extra care block contracts for the specific care provision. The 5 blocks fund a total of 1,729 hours of care per week (1,288 daytime, 441 night time care)

The care and support elements are currently provided through block hourly contracts based on variations of the current Home Care service specifications, with some of variances in service models:

- Moorfield Court operates a system which endeavours to balance service user needs into a High, Medium or Low banding across 43 tenancies
- The hours for the Rushcliffe schemes can be used at any of the 3 schemes which helps to maintain flexibility in service delivery
- Vale View does not have night care services which can impact on the level of need of service users it is able to work with.

There is a formal procurement process planned for 2013 to identify a partner, or partners, to design and implement the build of a number of extra care housing schemes across the County. The schemes will provide purpose built accommodation for people aged 55 years and over. Each scheme will always have at least one member of staff on-site. There will be a range of services and facilities available on-site dependent on the size of the schemes, such as a café, fitness room, flexible space that can be used for wellbeing clinics, hairdressing etc. The award of the contracts for the buildings is likely to be in October/November 2012 with the first schemes being built at least 12-18 months beyond that dependent on planning

The care and support elements for the extra care housing schemes are being commissioned separately and will form part of the tender of home based care and support services for older people (described at *ref*)

The Council will have nomination rights to a number of units of accommodation at each scheme and these will be available to people with appropriate needs within the existing social care eligibility criteria.

Care Support and Enablement (CSE) for younger adults

The Council selected 23 providers in 2011 to provide countywide CSE support. This is a closed Approved List with contracts running until March 2014 and the potential for a one year extension. The council spot purchases from this list and being on the list does not guarantee a provider any ongoing volume of work. In 2011-2012 the total CSE spend was £21m. The tender resulted in the following number of providers delivering in specific service areas:

Services for people with:

- Learning Disabilities - 16 approved providers
- Aspergers Syndrome - 13 approved providers
- Physical Disabilities – 9 approved providers
- Hearing Impairment/Deaf Services – 5 approved providers
- Mental Health Services – 6 approved providers.

Nottinghamshire is also a partner in the East Midlands Centre of Excellence (EMCOE) Approved Provider list for services for people with Learning Disabilities and complex needs. This list has two providers of specialist support services, as well as two residential care providers. The terms of the contract enabled it to be extended for one year until December 2012, with the option of a further extension until December 2013.

Overall there is reasonable choice, capacity and good quality across the different service areas. There are very few geographic gaps in provision in the County, with occasional exceptions in the very north and in Rushcliffe. This is due to some parts of these areas being extremely rural, associated transport costs and difficulties attracting appropriate care staff to a minimum wage job.

Current trends show that the relatively small number of people with a hearing impairment are choosing to arrange their own care and support with a Direct Payment and are not using services from the approved providers.

Only one of the approved providers offering a service to people who have a hearing impairment is currently able to also provide appropriately trained staff to work with people with a learning disability.

There is often a lack of availability and insufficient capacity within mental health support services in rural locations, especially where the packages required are small. There is often a lack of provision and the right type of care for people with complex care needs. There is a shortage of male workers, which is an issue for all community based services. It is difficult to put services in place at short notice (for example, to aid hospital discharge). Increased provision will be needed in the future, as increasing numbers of people are supported to live at home.

Between April 1st 2011 and March 31st 2012, overall 74 packages of support were commissioned from the Approved Provider list. Of these, 54 were successfully provided within that period, 11 were withdrawn or were partially delivered and 9 were still in the commissioning process. The average hourly rate was £13.46, with a price range of between £12.21 and £13.98 and a minimum of £12.21.

Housing-related support services

Nottinghamshire funds a substantial number of housing related support services, aimed at supporting a wide range of people to either maintain or gain their own tenancies. A three year improvement and efficiencies programme (2011-14) means that these services are currently under-going change, with a commitment to:

- maintain a mix of accommodation based services throughout the county;
- target resources more effectively at where it is most likely to deliver positive prevention outcomes;
- achieve more for less by procuring for economies of scale, designing services more flexibly and contracting with providers who have been able to demonstrate ways to achieve efficiencies whilst maintain quality;
- jointly commission where it makes sense to do so.

In pursuit of these goals, domestic violence services, mental health support services and homelessness prevention floating support services (includes gypsy and travellers, offenders, substance misuse, generic, single homeless and young people's floating support) have all been redesigned and competitively tendered. New contracts are expected to commence in the second half of 2012. In 2014/15 Nottinghamshire will fund £12.6 million of housing related support services.

Redesigned housing related support services for older people will go out to tender in 2013. They will seek to address:

- increasing capacity for short term, preventative support
- ensure Countywide coverage
- tackling social isolation and its impact.

Providers will be sought who can demonstrate an understanding of and commitment to the goal of supporting vulnerable adults to develop the skills required to attain the greatest level independence achievable and addressing the issues that may put the sustainability of that independence at risk in the absence of formal support.

Housing provision

The Council is currently tendering for an approved housing provider list in order to be able to develop more appropriate properties for supported living for younger adults, with the aim of completing this by October 2012. Whilst finding appropriate housing for supported living is difficult across the whole county, it is extremely difficult in the south, for example Rushcliffe area, due to the high market value of housing.

Nottinghamshire County Council's Supported Living Co-ordinators work with private landlords, registered social landlords and the District and Borough Councils to source appropriate housing. As more people are moving into supported living, however, it is getting increasingly hard to find the right kinds of property and supply is unable to meet demand for all groups of people. Ideally properties should be near public transport and shops to enable people to easily engage with their community. It also is important that the authority considers the vulnerability of the people living in supported living when considering appropriate areas for them to live in.

In some cases there are no special requirements for people who are seeking individual properties, though consideration should be given for the need for a second room for sleep-in staff and sufficient space inside and out for people with challenging behaviours or physical disabilities.

One current model of supported housing is 'core and cluster', where people living in a group of individual flats or bedsits near to each other are overseen by a 'core' staffed unit or visiting support staff. Provision of this form of accommodation has increased greatly in the past ten years.

Increased numbers of buildings that are appropriate for shared supported living are also currently needed. The Council welcomes the opportunity to discuss cost efficient, innovative ideas for supported living models that enable people to be part of their local communities.

Day services

The Council is running a day service modernisation project until March 2013 as part of its improvement and efficiency programme. This includes the establishment in 2012 of an open Approved List for external providers, refurbishment of fourteen multi-purpose Council managed centres and ensuring equitable countywide service coverage. The project plan is on track, has achieved its milestones and £1,705,000 savings to-date, with a remaining target of £2,731,000 to realise by the end of March 2014.

As at end July 2012, 2,224 adults attended a day service; 1,419 of these people use day services provided by the Council. 805 people use day services run by external providers, with an approximate £3,884,000 year associated external purchasing budget.

The Council encourages new applicants at any time onto Nottinghamshire's approved list of day service providers, which currently has 45 providers. The Approved Day Service list is the way by which the Council is able to spot purchase services for people opting for a managed personal budget and it does not guarantee any ongoing, set level of funding or purchasing of services.

People who are eligible for social care are assessed by the Council as coming within one of the following bands. Services are spot purchased at this fixed price per session (a session is defined as half a day) for a maximum of fifty weeks per annum. Costs for additional one-to-one support are in addition to this; the benchmark price being £ 9.50 per hour.

Band	Price per Session
Complex Needs	£32.00
High Needs	£16.50
Medium Needs	£11.00
Low Needs	£7.50

Within this price range, the Council seeks a local market that offers different models of day service that support people to re/gain their skills and independence and also offer increased choice in the range of support that people can purchase to enable them to have daytime opportunities e.g. to take part in sport, meet people, have hobbies etc.

Specific development areas for the future are:

- local services appropriate for Black and Minority Ethnic Group elders. Current options are mainly provided in the City
- developing more services for older people in the south of the county where there is currently limited choice
- offering more options for people requiring dementia specific care and support
- the Council is working in partnership with service users and local community organisations to develop and run a supported volunteering service for people with

mental ill-health to offer an alternative to more traditional, building-based day services. Additionally more community based provision is needed in the north of the county, with most provision currently being in the south.

- increased range of cost effective alternatives and geographic bases for people who have very complex needs due to autism spectrum disorders
- increased range of cost effective alternatives and geographic bases for to support people with head injury related needs
- reducing the long distances that some people have to travel to go to day services, as well as exploring alternative forms of more cost effective transport.

Residential Care

In September 2012 the Care Quality Commission website indicated that there were 295 registered care homes (with and without nursing) providing services to both younger adults and older people.

The strategic intentions of the Council are to support people in the community for as long as is reasonably possible, and to reduce the number of overall admissions into residential care. There is a history of positive partnership work with care home providers to ensure both quality of service provision and a financially viable market place.

Increasing publicity, regarding standards of care (Castlebeck etc) and the market failure of Southern Cross, has lead to an increased public awareness of the residential care market and the Council remains committed to promoting, and supporting, the continued development of high quality care within Nottinghamshire.

The Council employs a team of staff (the Market Development and Care Standard Unit) who are specifically responsible for undertaking annual audits, following up on any reported concerns and working pro-actively with providers to improve service quality.

Residential Care for Older People

As of March 2012 the Council held contracts with 169 independent sector care homes in Nottinghamshire and directly managed a further 6:

	Count	%
Number of Care Homes within Nottinghamshire (including Council managed services)	175	
Number of Care Homes	106	60.6
Number of Care Homes with Nursing	69	39.4
Total number of beds	6765	
Number of Council funded beds (January 2012)	3098	45.8

Number of Band 1 homes	35	20
Number of Band 2 homes	26	14.9
Number of Band 3 homes	46	26.3
Number of Band 4 homes	35	20
Number of Band 5 homes	33	18.9
Number of Providers	120	
Number of homes providing dementia care	124	70.9
Number of homes not providing dementia care	51	29.1

Whilst ownership of care homes is split between large national organisations and smaller independent local companies/sole providers the number of providers within Nottinghamshire would indicate a large percentage of the latter. Overall the number of care homes in Nottinghamshire has remained fairly static over the past 5 years – a number of care homes have exited the market but have been replaced elsewhere by ‘new-build’ developments.

In 2012 the Council sold 6 of its previously owned/managed homes to an independent sector provider and currently retains 6. The Council is now investing resources, to improve the environment of the remaining homes, and is currently developing plans for more flexible use of the homes, e.g. provision of short term care/respite care etc., whilst continuing the provision of longer term care to existing residents.

Whilst the Council funds less than 50% of the beds available within Nottinghamshire current research indicates that occupancy levels are running on average at 83³%. It is known that approximately 70 care homes (40%) have contracts for the provision of continuing health care funded patients. It is known that Nottinghamshire homes close to the border of Nottingham City Council and close to other neighbouring authorities have residents funded directly by them. It is also known that there are a number of homes across Nottinghamshire that have high levels of self-funding residents. As of July 2012 the ‘bed monitoring system’ (<http://www.nottinghamshire.gov.uk/findacarehome/>) indicated that there were 887 people funding their own care living in Nottinghamshire care homes.

Service Quality and Funding arrangements:

Nottinghamshire County Council has worked closely with the local Nottinghamshire Care Homes Association to develop a ‘local fair price for care’ funding model for the use with older persons care homes. An initial model was introduced in October 2008 and comprises of 5 quality bands with associated fee rates for Care Homes, Care Homes (dementia), Care Homes with Nursing, and Care Homes with Nursing (dementia). Details of current rates, which can be found in the Nottinghamshire Care Services Directory,

³ Fair Price for Care Survey 2012

(<http://www.nottinghamshire.gov.uk/caring/adultsocialcare/somewheretolive/care-homes/find-a-care-home/>) are as follows:

Nottinghamshire County Council – Banded Fee Rates 2012/13

Band	OP Residential	OP Residential Dementia	OP Nursing	Op Nursing Dementia
1	303/348.00	359.00	376.00	386.00
2	391.00	438.00	439.00	480.00
3	417.00	464.00	465.00	506.00
4	443.00	489.00	491.00	532.00
5	469.00	515.00	516.00	558.00

* Please note – the nursing rates above do not include the £108.70 free nursing care contribution

The estimated annual Council spend on independent sector long term residential care for older people for 2010/11 was £54.9 million, of which approximately £4.4 million was spent on out of county placements.

The last 4 years has seen an overall general increase in the quality of provision within Independent Sector Care Homes for Older People with an overall decrease in the number of Band 1 homes (lowest quality) and quite a considerable increase in the number of Band 4 and 5 homes (higher quality).

	08/09		09/10		10/11		11/12		12/13	
Band 1	39	23.5%	29	17.8%	31	18.9%	26	15.9%	35	20%
Band 2	46	27.7%	39	23.9%	43	26.2%	38	23.3%	26	14.9%
Band 3	57	34.3%	43	26.4%	36	21.9%	43	26.4%	46	26.3%
Band 4	22	13.3%	38	23.3%	37	22.6%	29	17.8%	35	20%
Band 5	2	1.2%	14	8.6%	17	10.4%	27	16.6%	33	18.9%
	166		163		164		163		175	

* Please note the figures for 2012/13 include 6 Council care homes sold during 2012 and the 6 Council retained care homes.

The current local 'Fair Price for Care' model was phased in over a period of 5 years and is currently being reviewed. One of the drivers for introducing this model was to improve service quality and, whilst the number of homes in the lower bands has been reduced the Council would like to see a more significant reduction. The Council would also like to see further improvements in the delivery of dementia care.

People living with Dementia

Due to increases in the aging population more people are now being diagnosed with dementia and, due to changes in the Care Quality Registration system more care homes are now registered for the provision of dementia care. Whilst some improvement in the delivery of dementia care has been noted, analysis of data indicates that a significant amount of dementia care is still being provided by the lower banded homes.

Dementia care placements:

	Residential Dementia				Nursing Dementia			
	2009/10		2010/11		2009/10		2010/11	
Band 1 & 2	-	46%	331	45%	-	57%	90	41%
Band 3,4 & 5	-	54%	405	55%	-	43%	127	59%
			736				217	

As part of the review of the current 'local fair price for care' funding model the Council will be considering options for the development of improved models for the delivery of dementia care provision.

Older Persons Residential respite care

Due to current vacancy levels there is generally sufficient capacity in the market. The current local 'Fair Price for Care' initiative will conclude at the end of March 2013. The Council is currently consulting with care home providers to support the development of proposals for a replacement process.

The projected increase in elderly service users (85+) and those living with dementia will change the market profile, e.g. increased levels of needs, service users supported under continuing healthcare arrangements etc. It is, however, the intention of the Council to

reduce the overall number of people going into residential care so it is anticipated that there will be a reduction in the need for basic residential care but an increased for high quality dementia care and nursing care.

Residential Care for people with learning disabilities

In 2011/12 the Council spent over £30 million on residential care for people with learning disabilities for approximately 498 people. This is a higher proportion of total spend in relation to community based services than desired and the Council aims to reduce this and instead purchase more services to support people in their own homes and local communities.

As of July 2012, there were approximately 100 care homes in Nottinghamshire registered by the Care Quality Commission for the provision of care to adults with a learning disability. In 2010 the Council initiated an accreditation process for homes wishing to provide care to Nottinghamshire funded residents. This process was undertaken to try and stabilise the market in respect of both quality and the cost of placements. Care homes are able to apply at any point and, to date, 80 providers have been through this process.

Current supply of beds exceeds current demand. This is especially so in the North of the County (Ashfield area predominantly) with the predominant reasons possibly being the availability of cheaper land and accessibility to other Counties or travel links e.g. the M1.

Thirty-seven new residents moved into residential care in 2011/12 but by the end of the year there was a net reduction of 10 people – this was down from 508 in 2010/11 to 498 in 2011/12. Of these, 15 people moved into supported living services.

Residential respite care for adults with a learning disability

The Council currently run four short break units for people with learning disabilities which provide 41 beds and give sufficient provision for residential based respite care:

- Wynhill Lodge, Bingham
- Holles Street, Bassetlaw
- Kingsbridge Way, Beeston
- Helmsley Road, Mansfield.

Some places are set aside for emergency placements.

In 2012/13 the Council will be undertaking a process to standardise the terms and conditions of all its residential care contracts for younger adults.

In the future the Council aims to:

- move at least 15 people a year from residential care into supported living
- offer supported living as the first option to new service users, especially those coming through into adults services from children's services
- move Nottinghamshire people currently living in residential care out of the County back into the County and avoid further placements that take people away from their families/local networks
- develop the current Local Authority learning disability adult placement scheme of trained and approved carers who offer accommodation as well as care and support within their own households, into a more flexible Shared Lives scheme for all adults offering a wider range of different types of support. This will include developing support options for younger adults in the Broxtowe/Rushcliffe area

(<http://www3.nottinghamshire.gov.uk/caring/adultsocialcare/somewheretolive/adultplacementscheme>)
- An increase is predicted in people with Learning Disabilities reaching the age 65+ needing residential care. Increasing numbers of these service users are also being diagnosed with dementia.

Residential care for people with physical and sensory disabilities

There are currently 82 care homes in Nottinghamshire registered with the Care Quality Commission for the provision of care to adults with a physical disability but this covers both older people and younger adults. There are, however, few 'specialist' homes for younger adults with these being predominantly situated in the North of the County. Younger adults with a physical disability are being placed into Older Person nursing homes due to this limited availability.

Residential respite Care

People with a physical disability are increasingly choosing to have 'live-in' carers for both longer term packages but also for respite. People now have more choice and control over services and are now choosing from a wider range of respite care options.

Residential care for people with mental health conditions

As at September 2012 there are 36 care homes in Nottinghamshire registered with the Care Quality Commission for the provision of care to adults with a mental health condition but this includes both younger and older people.

The Council currently funds approximately 170 long term mental health care placements at an overall cost of approximately £100,000 per week.

Supporting providers

The Council is committed to offering a range of support to external providers:

Public Web Based Directory

In 2013 the Council plans to develop a public web based directory for the wide range of services people may choose from, whether they are eligible for Council funding or fund their own care and support. Providers will be able to advertise their services on this and show any accreditation standards they have achieved. The public will be able to give simple feedback on services and also let both the Council and interested providers know if there are services they would like to purchase, but are not able to find.

Developing micro providers

In partnership with Community Catalysts C.I.C the Council offers specific support to micro-providers (who have five or less paid or unpaid workers) to enable local people to provide local support that:

- Provides personal, flexible and responsive support and care.
- Gives local people more choice and control over the support they get.
- Offers an alternative to more traditional services.

Micro-providers are independent of any larger organisation and can be very different to each other. They include; sole traders, partnerships, small businesses, social enterprises and not-for-profit, charity or voluntary organisations.

The micro-provider project co-ordinator ([web link to be inserted](#)) has worked with over forty providers, to-date, offering:

- advice and practical information on regulation, training and insurances
- sign posting to other organisations who can help
- support to understand legal requirements and any care regulations that might apply to what you plan to do
- professional feedback on ideas.

Quality development

The Council has a dedicated Market Development and Care Standards team based within the Joint Commissioning Unit. This team work in partnership with current and new providers to develop new services where needed and to support in increasing the quality of service where needed.

Training

The Nottinghamshire Partnership for Social Care Workforce Development ([web link to be inserted](#)) designs and delivers workforce development initiatives to continually develop the knowledge, skills, attitudes and behaviours of the social care workforce in all settings across Nottingham City and Nottinghamshire County Councils. The intelligence on which the initiatives are based come nationally from the Department of Health as well as lead specialist organisations such as the Alzheimer's Society and Age UK. At a local county-wide level the adult social care training needs are identified in the Joint Adult Social Care Workforce Strategy and are informed by the local Joint Strategic Needs Assessments and quality initiatives led by the local authorities.

Provider Forums

The Council facilitates a range of provider forums to share information and discuss future ideas.

'Tender ready' sessions

The Corporate Procurement team offer open sessions to help providers better understand the Council's procurement procedures and process.

Your views?

This Market Position Statement (MPS) is published electronically to allow us to update different sections in a timely way and can be found on:

www.nottinghamshire.gov.uk/

The authority recognises that providers would like more detailed information about volumes and values of purchasing described at a more local level. This is a high priority for improving the Market Position Statement but is a complex task.

The authority hopes to provide this information in later versions of the Market Position Statement in a statistically relevant and reliable way.

We are also keen to work with the Provider Engagement Network to allow us to include market intelligence and important learning from providers.

Contact us

To discuss any of the areas within this Market Position Statement further, or give feedback on how it can be improved, please contact:

Market development and Care Standard Team [generic e-mail address](#)