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Adult Social Care Market Position Statement 2022

Welcome

Welcome to Lancashire's Adult Social Care Market Position Statement

We are pleased to present Lancashire's second Market Position Statement (MPS) for Adult Social Care 2022.

In this Statement we set out our understanding of demand for care and how that demand may change over time.

We also outline current supply issues and some of the major challenges – including financial pressures – facing the county. We do however acknowledge that there are some gaps and areas where we need to work with partners and providers to develop a better understanding of future demand and need.

The past two years since we launched our last Market position Statement has been a time of extraordinary and unprecedented upheaval and challenge due to the COVID 19 global pandemic. During this period Lancashire County Council (LCC), the NHS, care and support providers and other partners have worked ever more closely to respond quickly and effectively to presenting risks in order to keep people as safe and well as possible. Together we have shared information, rapidly re-designed processes, re-modelled services and delivered changes and solutions to mitigate risks that in normal times would have taken months or years. Some elements of these solutions will be beneficial to the sector in the longer term too. Lancashire County Council would like to thank providers in the Adult Social Care sector along with colleagues in health, housing and all related services, for their outstanding support and response to the ⊿ pandemic.

The ongoing commitment and hard work of everyone is greatly appreciated. It is still early days as we emerge from this pandemic and there may be more challenges ahead both in terms of the pandemic's effects and the current worldwide economic situation.

There will be much more for us to reflect on together over the next months and years and therefore we will need to update this MPS further in the future. However in advance of a more detailed picture, we feel it is important to take stock and to share with you some of the key issues and opportunities that we think will emerge over the next few years.

We want to continue to work differently with partners and providers to deliver flexible and responsive services that people want. We want Lancashire to be somewhere people can live their lives as successfully, independently and safely as possible and where, regardless of age or ability, people can determine the help they need. Looking to the future, we will continue to work closely with our health partners and providers, focusing on models of prevention and early intervention utilising the latest digital technology and aids and adaptations. We will also strengthen our work with the Voluntary, Community, Faith and Social Enterprise sector (VCFSE) to ensure there are a range of good quality services to better promote independence and wellbeing across Lancashire, reducing dependence on care services and developing alternative models of care within the community.

Increasing housing options for people remains an important element and whilst progress has been made there is more to do. Critical to this area is how well we can work together – as twelve district councils, the county council, NHS and, with housing providers.

We expect to continue to support people through more individually-tailored community packages of care and support fewer residential home placements as people choose to remain in their own homes for longer or move into extra care or other accommodation which promotes their independence. We are keen to address the fact that adults living in Lancashire are more likely to be drawn into long-term care when needs in other parts of the country are met with smaller community-based packages of care.

As a large provider of care itself, the county council is actively reviewing its own provision and role in the market. Our residential, supported living and day care facilities will be subjected to the same level of scrutiny and challenge as other care providers. And we will expect such services to deliver the same level of high quality care at the most affordable price.

We will continue to build on the strong relationships we have built together with our care providers during the pandemic through a robust programme of engagement that allow us to shape the care market together, sharing experience and learning from each other.



Louise Taylor

Executive Director for Adult Services and Health and Wellbeing, Lancashire County Council

Our Vision & Strategic priorities

Our vision

To support people to live as independently and healthily as possible, with the right level of care for the right amount of time for themselves and their carers

Our Priorities

- 1. To make a clear offer promoting independence & choice
- 2. To be a provider of high quality In-House services
- 3. Housing Options
- To adopt strengths-based approaches across all Adult Social Care
- 5. To understand, manage & shape the care market
- 6. Social Care Reforms
- 7. To make the right impact
- 8. Financial Sustainability
- 9. Building a sustainable workforce

Key Messages to the Market

We want to work differently with partners and providers to support a diverse and sustainable market which will meet the care and support needs of the people of Lancashire. We want to work with the market to:

- take a strength-based approach Living Better Lives in Lancashire is a practice led transformation programme for Adult Social Care which aims to promote independence and choice for individuals, enabling people to live independently through transforming our practice model and introducing new ways of working. We would be keen to explore this approach further with our providers as to how a strength-based approach is applied in care and support provision;
- support providers by ensuring the way we commission services through dialogue and shared understanding allows us to maximise resources available and give our providers stability to recruit and retain the right workforce;
- work together on the government's proposals for establishing a 'Fair Cost of Care' with an aim to ensure our fee rates provide a sustainable care provider market in Lancashire;
- prevent inappropriate admissions to acute hospitals, encourage the timely discharge of people home from hospital including evenings and weekends, adhering to the 'home first principles';

- make better use of the capacity available in homecare services, working in partnership with providers to develop new models of care and support;
- encourage and support fewer residential care placements and enable people to live at home for longer through individually-tailored community packages of care;
- support more adults with complex needs through appropriate residential and community based services.
 For example, meeting increased needs for mental health, dementia services, challenging behaviours and bariatric care;
- develop and expand appropriate use of 'technology enabled care' in care and support services;
- collaborate and work with district councils and other housing providers around Housing, particularly Extra Care. Explore how we can incentivise more providers to build homes with the right facilities for the changing needs of people;
- invest in developing and making better use of the Voluntary, Community, Faith and Social Enterprise sector (VCFSE) to meet people's needs through a strength-based approach, utilising our community assets;
- support the development of the Adult Social Care sector workforce in order to meet increasingly complex needs.

What is the purpose of the MPS?

The aim of the Market Position Statement (MPS) is to provide information about the adult social care market in Lancashire so that current and prospective providers understand the local context, what is likely to change and where opportunities might arise in the future.

It sets out the key pressures for Adult Social Care and our vision for the future. It also sets out the system pressures within the health and social care sector across the Integrated Care System (ICS) as it is our ambition that this statement will evolve over time to become a system-wide Market Position Statement.

The MPS is for both existing and potential providers with the purpose of helping them shape their business plans to support the council's vision for adult social care in the future. It will help providers to:

- develop their services to meet local need and demand;
- understand the direction of travel for Adult Social Care In Lancashire;
- invest in new service areas and potentially diversify into others;
- set out how we can work together.

We understand that the market is constantly changing as do the pressures and demands that it faces and no more so as we emerge from a global pandemic and enter a period of global economic uncertainty. We will be looking to update this statement further within the next 12 months to provide further detail following our planned engagement program and Fair Cost of Care and Market Sustainability work.

How we developed the MPS and how it will be updated

We have built upon the previous MPS which was developed with input from partners and providers across the Integrated Care System, utilising information and analysis from a range of sources. During the next twelve months, it is our intention to reconfigure and expand the market position statement to reflect the wider health and social care market across the ICS footprint. Future planned additions to the statement will include:

- greater understanding of area-specific market needs at district, Place Based Partnership and ICS level;
- further consideration of future needs following the pandemic effects giving estimated needs over the next 15 years or so;
- more detail on our plans around strength based assessment and care planning and how providers can support a more efficient use of resources;

- specific needs around our Intermediate Care Plans;
- Voluntary, Community, Faith and Social Enterprise Sector (VCFSE) and Residential Care Strategies;
- our plans around 'Market Sustainability' and 'Cost of Care' following the planned engagement and information collection exercises under the government's 'Market Sustainability and Fair Cost of Care' policy and guidance.
- making our market information accessible through interactive web based pages with links to background information and data.



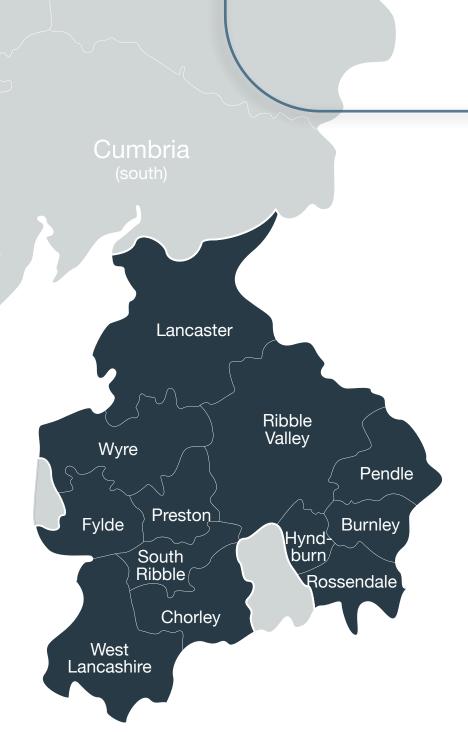
How We Will Engage With The Market

We worked closely with providers during 2021 to understand how we might improve our engagement particularly in relation to shaping the market together. We have used the feedback from the conversations and surveys to develop our engagement going forward as follows:

- We will hold quarterly meetings with providers that will be market sector specific, e.g. residential, home care etc.
- Meetings will be two-way to allow feedback from providers and allow sharing of information and ideas between us relevant to the market enabling providers to plan their future business more clearly.
- We will improve our provider portal to make it clearer for providers what new opportunities might become available and how to work with commissioners.
- We will aim to reduce the burden of information and data collection from providers and work with our partners to jointly engage.
- Where there are specific challenges in a geographical area or in a particular area of the market we will conduct separate but specific engagement on that topic to ensure 'place' and its particular nuances are recognised.

- We will hold partnership meetings with people with learning disabilities and those with autism to enable us to listen and consider their views to help influence service development.
- We will also consult with other groups and partnership boards where appropriate.
- We will also ask providers and people we support to take part in specific consultations to ensure that we consider their views.

About Lancashire



Lancashire is a county of diverse communities which are not only socially and economically diverse, but geographically diverse. The county ranges from urban areas such as Preston to rural areas of Wyre and Ribble Valley.

We also work alongside two unitary authorities of Blackburn with Darwen Council and Blackpool Council, as well as Cumbria County Council as part of the Integrated Care System (ICS), currently made up of five Integrated Care Partnerships. Our vision is to support people to live as independently and healthily as possible, with the right level of care for the right amount of time for themselves and their carers.

We are working to ensure people in Lancashire are:

- · Safe, secure and connected to their local community;
- maximising their potential, remaining healthy and feeling well;
- living as independently as possible in their own home, or close to home, with appropriate care and support if needed;
- assured that our response, plans and the money we spend, are reasonable and proportionate. Our county is a great place to do business with forward thinking businesses, excellent locations and transport links, a skilled workforce and high educational attainment. There are numerous opportunities for your business here in Lancashire.

The Health and Social Care System in Lancashire

Significant changes are taking place to Integrated Care Systems under the Health and Care Act 2022. Although previously informal and alliance-based, the Health and Care Act enshrines ICSs as statutory bodies. Clinical Commissioning Groups will cease to exist under this new formalised structure and instead will merge into one Integrated Care Board (ICB) by July 2022 with responsibility for NHS services and funding. A single Integrated Care Partnerships (ICP) will sit alongside the ICB which will include wider partners such as the relevant local authorities. The ICP will cover broader issues such as public health and social care.

At the time of writing this document, the new structures are still to be agreed and established but we expect that there will continue to be a focus on 'place' (in the same way as the current five ICPs) through Place Based Partnerships (PBPs) which will continue to provide a focus on local concerns in recognition of the different needs, geographies and demographics of places within the ICS.

We will continue working together, developing joint working opportunities and exploring greater integration to improve the Health and Social Care System. We are also working together to manage the Better Care Fund (BCF) which is a pooled budget for both the NHS and the council which seeks to join up health and care services to support people to be cared for at home, avoid hospital admissions and reduce length of stay in an acute setting.

For providers, this will mean there will be more services commissioned jointly in the future to reduce duplication and support providers to work across the whole system. It is expected that services commissioned in this way will be more efficient, cost effective and achieve improved outcomes.

Understanding Lancashire

In addition to our internal monitoring information gathered from ongoing assessment information, provision of services, quality monitoring and engagement with providers and partners, we also use data and intelligence from the following sources to help us to understand the care and support needs of the people of Lancashire. These data and intelligence sources are freely available to providers by following the links below:

Joint Strategic Needs Assessment (JSNA)

The JSNA helps the council and other partners inform the planning and improvement of local services and guides us to make the best use of funding in commissioning services in Lancashire.

The JSNA is not just about health and social care, but reflects many factors that influence people's health and wellbeing. Information from the JSNA has informed the development of this MPS and a number of other key strategies and plans including the Housing with Care Strategy and Dementia Strategy: www.lancashire.gov.uk/lancashire-insight/jsna

Lancashire Insight

Lancashire Insight is a shared intelligence research and knowledge base for Lancashire, informing strategic planning across Lancashire County Council and its partners. Providers can visit Lancashire Insight to discover a wealth of business intelligence resources about Lancashire, including population profiles and projections and information and statistics about health and care in Lancashire. Lancashire Insight features a number of user-guided tools to delve deeper into how demographic trends will affect social care provision in Lancashire in the future. You can also subscribe to receive the Lancashire Insight newsletter:

https://www.lancashire.gov.uk/lancashire-insight/



Key Facts

Population change from 2016-2026

Area	18-64	65-74	75-84	85+
Lancashire-12	-2.6%	2.8%	38.4%	25.0%

People aged 65+ projected increase 2019 to 2025 with health conditions or lifestyle issues

Condition	%
Limiting long-term illness	13.20
Falls	11.00
Falls - hospital admissions	15.70
Dementia	15.10
Heart attack	11.10
Stroke	12.50
Bronchitis/emphysema	10.40
Obesity	8.40
Diabetes	9.60
Autistic spectrum disorders	10.80
Learning disability	9.70
Unpaid carers	9.10

Estimated ethnic breakdown of Lancashire's population (2019)

White	ite 91% (89% White British) England – 84% (79% White British)	
Ethnic minority communities	9% compared to 16% in England.	
Asian	(7%) is the largest ethnic minority group (compared to 8% in England)	
Pendle (23%) and Preston (22%) have the largest ethnic minority communities		
Burnley and Hyndburn have 14% ethnic minority communities.		
Ribble Valley, West Lancashire and Wyre have a 2% ethnic minority population.		

Population

1.227 and growing.

255,637 adults aged over 65.

Lancashire has a higher proportion of older people than the England average.

Support Needs

22,511 adults and older people received long-term support from the Council.

12,278 carers had support provided by the council to help them care for people in need.

15,382 were helped to stay independent at home with Home Care or other support.

There are an estimated **22,000** households at risk of social isolation and loneliness.

49,836 people provided care to another person for 20 hours or more a week.

16,000+ adults use telecare services (personal alarms and sensors) to help them feel safe and maintain independence.

There were nearly **8,000** referrals to the reablement service; **84%** of those who completed reablement left as self-caring.

The number of new admissions to care homes for younger adults is relatively high: **17.0** compared with **12.8** England average (per **100,000** population).

88.1% of older people (**65** and over) were still at home **91** days after discharge from hospital into reablement/rehabilitation services.

Life Expectancy

10.3 males and **7.8** females range in years of life expectancy across the most to least deprived areas of Lancashire

- Healthy life expectancy for females 62.2, lower than the England average.
- Healthy life expectancy for males 61.1, lower than England average.
- Life expectancy for females 82.2, lower than England average.
- Life expectancy for males 78.6, lower than England average.

Financial Pressures

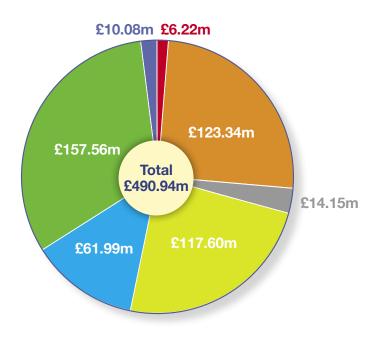
Local government is continuing to face a challenging financial position

- The council will have to make a further £56.6m of savings by March 2023. This is on top of the £63.9m of savings already made.
- In 2021/22 the council spent £522m on Adult Social Care.
- We understand that we cannot simply pass this financial pressure onto providers as we recognise that to ensure we have a secure, viable, quality care and support market appropriate investment is required.
- We understand that our providers too are in a challenging financial position. We will work with providers to understand 'the fair cost of care' and develop our plans to support providers financially through our fee rates.
- We will continue to work together with providers to achieve significant savings through changing the way we support people to ensure they receive the right levels of support.
- We will also explore service remodelling, negotiation with existing service providers (where necessary) and some decommissioning, and where appropriate, reinvestment in more efficient services to better fit future needs.
- We will continue to review our own practice including the employment of strengths based approaches in everything we do.

Most importantly, we want to work with providers to address these challenges together.

Budgeted Spend with External Market

- Day Care 1.3%
- Direct Payments and Supported Living 25.1%
- Equipment and Adaptations 2.9%
- Home Care 24.0%
- Nursing Care 12.6%
- Residential Care Other 32.1%
- Other Social Care 2.1%



Workforce Pressures

Workforce shortages have become further exacerbated during the pandemic with unprecedented challenges in recruitment and retention of staff. Workforce development is a key risk for the future of Lancashire's care market. What we know:

- We know there are significant difficulties in both recruitment and retention of nursing and care staff, including personal assistants, due to short supply;
- high competition for staff from other sectors such as retail and hospitality sector;
- staff pay and conditions in the care sector are often outmatched by other sectors which are bouncing back after the pandemic;
- care staff do not always feel valued with morale affected further by the effects of the pandemic which has left some staff exhausted;
- care sector is often not seen as a career option and care staff report there is a lack of opportunities for career progression;
- 20% of all workers are over 55 and early retirement uptake is high;
- difficulty attracting younger people into the sector.

These issues are not just true for Lancashire, they are national issues.

Next Steps

- We are seeking to undertake a workforce study of the care sector in Lancashire and South Cumbria region to understand the workforce numbers, composition and barriers to recruitment and retention. We will share the results with providers.
- We are developing an apprenticeship scheme taking advantage of the apprenticeship levy to attract more people into the workforce.
- We are developing with partners across the Integrated Care System a Workforce strategy for the sector including a sector-led workforce improvement plan and regulated care work programme, health and social care academy and toolkit.
- We are supporting Skills for Care to promote care as a career including promotion of training opportunities, values based recruitment, entry-level apprenticeship scheme and academy.
- We want schools, colleges and providers to work with us to find innovative ways for us to encourage people to choose care as a career.
- We will continue to work closely with care providers in developing the workforce and encouraging recruitment and retention.

Market Opportunities

Information and Advice

- Planning for care and support is something that many people don't think about until they are faced with an urgent need to find support for themselves, their family or friends.
- At this challenging time, people are often frustrated as they struggle to find information and advice to support them to find the right care and support to meet their needs.
- We know people are often surprised by the diverse range of care and support services available.
- We have a responsibility to provide information and advice to help people (including those who fund their own care) to find care and support.
- We provide information, advice and guidance online through our website, and over the phone through our customer contact centre.



Messages for the market

- We are looking at ways to improve the first point of contact by, for example, using online technology to help people find information and advice quicker and easier.
- We are working to improve our information, advice and guidance support including improving our "front door" offer.
- We want providers to work with us to improve the information, advice and guidance we can offer.
- Providers should consider how they provide information, advice and guidance to the people, carers and families they support.
- Providers should also consider how they market their services, especially to people who fund their own care (self-funders).
- We want to involve the public in how we improve our information and advice offer so that we know we are being clear and understandable.

Personal Budgets

While Personal Budgets are seen in the context of the wider movement to empower people to have more say and control in all aspects of their life, historically Lancashire County Council has only offered two ways in which a person can hold their budget, either a direct payment or a managed account (though services commissioned directly by the Council). People can choose to take either full control or very limited control of their personal budget.

Some people choose to source and purchase their own support using a Direct Payment and take on all the responsibility of doing this. LCC has commissioned Lancashire Independent Living Service to provide information and advice and payroll support for direct payment users. Alternatively Social Workers commission support on behalf of people from specific providers through traditional block or spot contracts and framework agreements.

Other budget options are now being considered, including the use of Individual Service Funds. ISFs fall between the two established money management options and enable service users, their families, carers and care providers to determine the level of choice and control they want to exercise, while sharing the responsibility and financial control of a personal budget. Personal budget holders will be given clear information about the range of support available to manage their personal budget, including any risks, safeguards and auditing requirements.

Messages for the market

- We are consulting on a new Individual Service Funds Policy which will represent a new offer of ISFs for the people of Lancashire to have choice and control over the care and support they receive.
- The new Individual Service Fund (ISF) policy sets out the arrangements for how organisations could work with the person to develop flexible adult care, support and activites that are meaningful to them and involve them fully in how this is arranged.
- We want to work with providers to explore how they can develop creative support options to help people meet their care and support needs.
- We encourage people we support to use direct payments to purchase care and support options which are beyond traditional provision.

Technology Enabled Care

Our current telecare service acts as a reactive alarm response service to 16,626 people (as at 31 May 2022) and includes a mobile response and falls pick up service.

The current cost of providing telecare is approximately £6m per year. Since the introduction of a free telecare service, expenditure has been increasing at a rate of c.£1m each year, and with the introduction of more costly digital solutions, this annual demand pressure continues to rise.

We are considering the introduction of charges to support the continuation and development of the service at a sustainable level and allow us to afford and embrace the full benefits offered by the transition from analogue to digital. At present the county council is an outlier in terms of offering a completely free telecare and mobile response service. Telecare is evolving rapidly, and the digital switch-over is creating opportunities for innovation as well as a number of service challenges. Moving from analogue to digital will be much more than a simple replacement, it will be an opportunity for a fundamental redesign of our existing telecare offer.

We are embarking on an ambitious programme that will introduce new and innovative technologies and digital approaches, which enhance the experience and the outcomes for the people who use the service.

Messages for the market

While our current telecare service acts as a reactive alarm response service, with limited integration to other health and social care services, moving forward, we will significantly widen the scope of this service to include telecare, telehealth, remote health monitoring, falls response and medication management.

We intend to develop a digital TEC offer that is not just about the equipment. Our new approach will embed a complete service offer which includes supporting the assessment and care planning process and delivering a proactive and appropriate response.

We will be undertaking a procurement exercise in Autumn 2022.

We will target the principles of interoperability as we shift to digital, so that Social Workers and people we support can select the optimal combinations of technology devises and integrate the person's own 3rd party devises to deliver intelligent monitoring and a virtual presence.

Community Equipment

- LCC aim to support people to maintain their independence at home for as long as possible. Community equipment enables this by preventing, reducing or delaying conditions worsening, e.g., aiding mobility and balance, preventing pressure sores and preventing falls.
- Community equipment supports the prevention of admissions to hospital and swift discharge from hospital.
- All equipment is provided to support people with eligible health or social care needs following an assessment from a health or social care provider. We currently have some 1,500 prescribers in Lancashire.
- We work closely with our NHS colleagues and have joint contractual arrangements in place for loan store provision. This provided 65,000 items to Lancashire residents of all ages last year, such as specialist beds and chairs. LCC adults spend on this was just under £2 million.
- 168,000 simple aids to daily living, e.g. walking frames, bath steps and commodes were provided jointly for Lancashire residents last year, again at a cost of approximately £2 Million for LCC.
- LCC also deliver minor aids and adaptations provision. This includes internal banister rails, outdoor metal railings and concrete step adjustments to support independence in the home. Last year, LCC spend on this was £1,600,000.

Messages for the market

- There have been challenging supply chain issues that have caused price increases and shortages. These have been at a national level as a result of global shipping container issues, Covid, EU Exit and increases in raw materials.
 We will continue to work to seek solutions to these matters.
- We will meet our statutory responsibilities for people with eligible needs through our contractual arrangements for equipment and adaptations.
- We anticipate that demand for community equipment will increase because of the trends in the aging population and increasing frailty. Supporting Discharge 2 Assess and hospital discharge have borne this out.
- The community equipment loan store contract expires in June 2023. We will work with our NHS colleagues to procure future provision.



Day time Support

- Daytime supports provide a range of activities and support, including respite, to enable people to gain new skills, remain socially active and engaged in their community.
- We currently fund around 283 places per week excluding self-funders (for both older people and dementia services).
- We also fund 1,041 places per week for people with learning disabilities, mental health and physical disabilities.
- The county council spends approximately £4.5 million on daytime support across all client groups.
- Since the pandemic there has been a 75% reduction in people attending day services, primarily for older people and dementia. Disability Services have seen a small reduction. People who have previously used day services have been reluctant to return to day services, following the pandemic. Focus will be on recovering numbers to prepandemic levels, where 2,771 places were offered.
- We only commission new day time support services for older people and people with dementia from providers who have signed up to the Minimum Quality Standards for older people and people with dementia.
- We will be developing a framework for disability providers, with minimum quality standards to align them with older people services.

Messages for the market

- We want people to be able to attend services in their locality and we will encourage existing and new providers to expand provision to all areas of the county.
- We want daytime support to support and connect with the diverse communities in which they are based.
- We are looking for daytime support for "younger" older people to engage people with their communities to reduce social isolation.
- We are looking for daytime support which will appeal to more people and move away from traditional daytime support models.
- For working age adults, we will encourage services that offer social enterprises and employment support, that remunerate individuals for their time and help them gain experience and qualifications, preparing them for the workplace.
- Potential future development of the Minimum Standards for other types of daytime support, such as learning disabilities and mental health daytime support.
- We are engaged in a review of transport for day services and will also be developing a Transport Policy to ensure consistency and fairness in transport provision.
- Register your daytime support service through our website at:
 Tenders and procurement Lancashire County Council.

Residential & Nursing Care

- Our residential and nursing care supports people with a range of needs which includes Mental Health, people with a learning or physical disability, people with a sensory impairment and older people.
- We fund approximately 4,700 individuals in long-term residential care which is a reduction of 17% since the publication of the last Market Position Statement. This could be due to a range of factors, including people wanting to remain at home and receive care in their own home, the impacts of Covid and a potential lack of available beds of the required type to support people e.g., EMI (Elderly Mentally Infirm) beds.
- Our concern is that for people who self-fund their care, the cost of care is relatively high and can result in the level of available funds to reduce quickly and fall below the savings threshold resulting in the council having to meet the cost of that person's care. The council will likely not be able to meet the same level of funding, which could result in the need to move the person to an alternative service provider whose costs the council are able to meet.
- Since the publication of the last Market Position Statement there has been a steady increase in the number of referrals being received for more specialised care, such as nursing care and EMI. There has also been a reduction of approximately 8% in referrals for standard residential care.

- The Covid 19 pandemic has had a significant impact upon the residential care market, most significantly around staffing levels and retention of staff. The vaccination rules and the portrayal of residential care in the media have made employment in the care sector, and residential care in particular, much less attractive.
- The pandemic has also seen an overall increase in demand for mental health placements in residential care and the challenges faced around mental health provision are well documented.
- Financial viability of residential care is becoming an increasing problem and again the Covid pandemic has had a significant impact, resulting in a higher number of care home closures as a result. The largest proportion of closures has been amongst smaller residential homes which is a point of note given that we know (and CQC data confirms) that quality is often better in smaller settings.
- The Covid pandemic saw the introduction of Discharge to Assess (D2A) beds which allows a person to be discharged into a residential care setting for a period of assessment prior to receiving longer term care and support, either in the community or in an alternative residential setting. These beds have had varying degrees of success; however, they do attract a higher rate per bed than standard residential care which has resulted in difficult circumstances for family beyond a period of D2A and potentially unsafe second moves for the D2A resident.

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Gaps in service provision

- Across Lancashire the supply of specialist dementia provision is not keeping up pace with demand, with particular hotspots in North Lancashire and rural areas of Central Lancashire
- There is a lack of available placements for younger adults under the age of 65 with a variety of needs including, but not limited to, physical disabilities, mental health and learning disabilities.



Messages for the market

- We intend to develop a residential and nursing care strategy.
- A new specification for residential care placements with partners across the ICS has been developed with implementation in progress.
- We want providers to work with us to ensure we can support self-funders to understand the future implications prior to them falling below the income threshold.
- We want providers to increase links with local communities and to engage in the use of technology enabled care.
- We want providers to adopt a provider led assessment/ trusted assessor model and move towards accepting admissions over seven days.
- We want providers to work with us to offer flexible use of short-term and long-term bed provision to support winter pressures and respite.

Housing with Care and Support

Responding to changing demand - we published our 'Housing with Care and Support' Strategy 2018-25

- Housing with Care and Support is purpose built or adapted housing with the availability of up to 24/7 care and support services having the opportunity to live independently and safely with access to community-based care.
- Our strategy sets out an ambitious target to have at least one 'extra care' setting in each district of Lancashire by 2025.
- Total settings now operating: 5 purpose-built settings (350 flats) and 8 combined sheltered and extra care settings (331 flats including sheltered and extra care flats).
- A Needs Analysis Tool for extra care is now available to assist developers and providers in their assessments and considerations of potential locations for new settings.
- Expectations are changing we encourage the development of newer, more innovative and flexible Supported Living accommodation for people with a learning or physical disability, and/or a mental health condition.

- Needs assessment estimates are in place for accommodation for people with a learning or physical disability, and/or a mental health conditions to inform planning and test assumptions.
- Over the last 2 years, there has been an increase in the range of housing options available to people with learning disabilities, including apartment settings and accessible bungalows some of which are replacing traditional 'shared living' properties.
- 106 new homes delivered to date.
- 21 properties have been retired across Lancashire due to no longer meeting new exacting standards and expectations which has led to a reduction in available homes.



New approaches - Technology enabled support to manage risk and health conditions, this will support people to enjoy increased independence and privacy, whilst also offering safety and security in respect of monitoring health conditions, or remote support being available.

Good Neighbour - An additional element to some of these settings is the opportunity for people to live within these settings to offer daily support to residents for a reduced rent which could include developing skills in social care or just being a good neighbour, helping out with tasks such as changing light bulbs, picking up small items of shopping, pet care, or enjoying a night out.

We continue to work with our Health partners in developing high quality accommodation options for people leaving hospital under the NHS Transforming Care programme, in accordance with the National plan 'Building the Right Support' which is based on individual need and enables people to live healthy and positive lives in the community.



Messages for the market

We are currently seeking to strengthen our approach to working with providers, developers and partners including district councils to encourage and enable investment in new types of innovative and flexible housing.

We need to reduce our reliance on residential care by ensuring alternative options are available to help us manage the growing demand and financial pressures. We are looking to replace some traditional shared living arrangements with up to date, modern opportunities that offer increased independence, whilst also meeting support needs proportionately.

We want to improve supports for people with mental health needs who may require rehabilitation at home and explore different models of support when their needs are identified, including a new mental health rehabilitation procurement towards end of 2022.

 11 new settings are under discussion or development which would deliver around 700 new units. This includes one on the site of new/replacement LCC run care home in Wyre. A new and separate extra care facility will also be developed on the site. The facilities will offer care services for people with dementia. However, additional units are still required.

- We are aiming to have more smaller-scale Apartment Settings for younger adults with disabilities - 89 new homes in the development pipeline for completion in 2022 in Lancaster, Leyland, Chorley Preston & Burnley.
- There are clear opportunities for existing and new providers to develop Housing with Care and Support options across Lancashire.



Short Term interventions Intermediate Care

Intermediate care services are provided to people after leaving hospital or when they are at risk of being admitted to hospital or residential care. It supports in helping people regain skills and confidence such as cooking, bathing and dressing. The aim of Intermediate care is to:

- Help people to avoid going into hospital or residential care unnecessarily.
- Help people to be as independent as possible after an illness or where they have an exacerbation which means they struggle to manage independently.
- Can be provided in different places (e.g. residential home or in people's own homes).

We currently have a range of support options including:

- Take home and settle to support lower level needs delivering critical practical and emotional support.
- Crisis support To support rapid short-term care at home to support hospital discharge, hospital avoidance and unplanned escalation of need or carer breakdown.
- Reablement support for people in their own home and is provided by care providers, supported by our reablement in-house social care teams.
- Night time support home care support between 12pm and 6am, 7 days a week with night time needs.

- Community Beds currently within our in-house residential care homes which provide rehabilitation.
- Many of these services are free of charge for a short period of time (except roving nights) as it is anticipated that you will recover and not have ongoing care and support needs.

Messages for the Market

- We are currently reviewing our Intermediate care service offer in line with the corporate vision and objectives to develop a sustainable model over the course of the next 5-7 years.
- We have undertaken a review of many of our intermediate care services through 2021/22 which will support in informing a future model and design where the engagement with the market is crucial to help to develop and shape the services.
- We are committed to achieving positive outcomes and peoples experience.
- We aim to re-procure a number of our intermediate care contracts to commence delivery Summer 2023.

Support following Discharge from Hospital

People who may require support on discharge from hospital will do so through a discharge to assess model to minimise risk and impact of a delayed stay in hospital for the person. Undertaking an assessment of needs in hospital is often not the appropriate environment where the following pathways will support in enabling a timely discharge from hospital and necessary assessment and support afterwards.

Home first - Supports people to be assessed in their own home following discharge from hospital to determine the appropriate level of support to meet the needs, including appropriate equipment and assistive technology.

Hospital Aftercare - Take home and settle service which takes people home with a low level of need. The short term service offers practical support such as shopping, light domestic tasks and emotional support in ensuring the person is settled at home upon discharge.

Bed based care - In the minority of cases where the person is unable to return home, a short term bed based provision will be identified for a period of recovery, recuperation, rehabilitation to then identify the persons ongoing needs.

Messages for the Market

- We want to ensure we support as many people to return home as possible.
- We want to ensure we provide the person with choice and control through enabling the person to have their needs assessed in the appropriate setting outside of the hospital through a strengths based approach.
- We need to ensure we have the correct provision of shortterm intervention services available and used efficiently to ensure we maximise supporting people at home.



Homecare

- The current homecare contract commenced in 2017 as a provider framework. It is due for renewal in 2023.
- We commissioned around £65-£70 million on homecare in 2021/22.
- We have reduced the number of providers, who all now work on an area basis.
- The framework was designed to address supply issues in some parts of the county and deliver a more sustainable market characterised by more meaningful choice.
- We have had to commission services "off framework" to meet demand pressures.
- We have recently uplifted fees for our framework providers above inflation to assist with cost pressures.

Gaps in service provision

- Homecare demand increased by 10% during the pandemic with currently 85,000 hours per week commissioned across Lancashire County Council's areas.
- In reducing our reliance on residential care and increasing our ambition to help people to remain at home where possible, we will increasingly rely on homecare to meet needs.
- We will increasingly require specialist support from homecare providers for people living with dementia.

 There are a number of gaps in provision which include difficulties in sourcing home care in some rural areas of Lancashire (Lancaster, Fylde and Wyre) and also in some urban areas (periodically in Burnley, Chorley and South Ribble).

Messages for the market

- We are currently considering our approach to reprocurement of the Homecare framework which would consider longer term contracts (up to 10 years) and options for providers to join and leave the framework throughout the contract term.
- We have been engaging with providers about commissioning approaches to homecare and will continue to engage with providers in developing the final approach to re-procuring homecare.
- We are committed to working with providers to understand the fair cost of care for homecare and will prioritise fee levels for our framework providers.
- We will explore the application of an 'ethical charter' for homecare and we will seek to work with providers who prioritise staff pay levels and can demonstrate social value by their organisation.
- We wish to explore a 'trusted assessor' model of homecare to give some control and flexibility to providers within an agreed framework where it meets people's needs appropriately and safely.

Carers

A person provides unpaid care if they look after or give help or support to family members, friends, neighbours or others because of long-term physical or mental ill health or disability, or problems related to old age.

Unpaid carers make a huge contribution to promoting and maintaining the well-being of people in Lancashire. At a time when the health and social care system faces major challenges it is vital we give carers the support and recognition they deserve. The county council and its partners want to do more to seek out and improve the lives of carers.

Approximately 145,000 people in Lancashire are carers and this number will continue to increase as more people with complex social and health care needs are expected to require support and the population lives longer. This means there are a very large numbers of carers who are helping to sustain the overall health and care system in Lancashire by keeping people safe, well and as independent as possible in their own homes. Failure to help these carers could lead to pressures in the wider health and care system.

- We connect carers to a range of support and services to help them in their role, including financial support for eligible carers.
- Working with the NHS and others, we have developed pilot projects across Lancashire to identify carers who are helping someone being discharged from hospital.
 These projects ensure early support is provided to new carers and that hospital and social care professionals better understand what a carer does and how they can help them. Focusing on people who can be safely discharged and ensuring their carers are fully supported is already easing pressures on hospitals. We want to do more of this preventative work in the future and target more help on carers so they can perform the vital work of keeping people safe, supported and independent at home.

Messages for the market

We have recently completed a re-procurement of the Lancashire Carers Service to at least 2024. We are developing a Carers Strategy and will explore the future of the service directly with carers so we can learn more about what they need. We also want to hear from service providers who can supplement our support for carers, for example through digital products and services or providing short breaks for carers.

We are committed to ensuring that carers in Lancashire:

- Are identified and recognised.
- Can get the right information to support them in their caring role.
- · Have access to quality services and support.
- Are supported to maintain and improve their health and emotional well-being.
- Can get a break when they need one.
- Are supported to claim income and benefits and into employment.



Advocacy

Advocacy helps vulnerable people who receive care or undergo treatment to have a voice, keep their independence and make choices that are right for them. Advocacy supports people to live with greater freedom and control over their lives.

Advocacy works primarily by assigning a trained professional to work with an individual to ascertain the person's wishes and choices and represents that person to engage with a range of public services, ensuring their feelings and beliefs are respected and followed and safeguarding the person's rights under the law.

Advocacy is a statutory responsibility for the county council under a range of laws governing mental health, mental capacity and other types of care and support. Unlike most councils, we also continue to provide choices for people to access advocacy that falls outside these legal responsibilities.

Each year, the Lancashire Advocacy Hub handles around 3,500 cases and delivers close to 30,000 hours of advocacy support.

The county council also invests in a range of peer and group advocacy services to support people with a learning disability or a mental health or autism spectrum condition to have a say in the way the services provided for them are designed and delivered.

We also commission a specific, independent advocacy service exclusively for unpaid carers, Carers Count.

In 2022, advocacy for people who may lack mental capacity will see a major change with the introduction of the new Liberty Protection Safeguards, which will introduce rules governing how people are deprived of their freedom as a required part of their care and support.

Messages for the market

To prepare for these changes – as well as anticipated changes to mental health advocacy - and to continue to provide high quality advocacy services overall the county council will commission a range of new services in 2023. We are currently engaging with providers and partners to design a service and pricing model that will meet our new and ongoing responsibilities.

We formally asked advocacy providers last year about the types of service model that would best work in Lancashire. We want to continue to work with the many excellent organisations working to deliver advocacy in the county so we can ensure there are enough skilled advocates who can help meet demand. We also want to look at dynamic pricing models that can best match up supply and demand so we can address the coming challenges in this sector of the social care economy while ensuring value for money for taxpayers. 35

Working with the Council

Working with the Council

Corporate procurement

- We have a corporate procurement team who are responsible for managing our procurement activity.
 Further information about our procurement team can be found at: Corporate Procurement
- Service providers can gain access to sourcing (for all quotes, tenders and commissioning) through the iSupplier Care Portal which also enables quick and easy communication with each other.

iSupplier Portal

- In addition, the iSupplier portal enables suppliers to have real-time access to information (such as purchase orders and delivery schedules) and respond to the relevant authority with order acknowledgements and change requests.
- It empowers suppliers by enabling faster invoice submission, payment processing and query resolution. iSupplier Portal.
- The current isupplier portal will be replaced with the cloudbased Oracle Fusion Supplier Portal this Autumn.

Consortium exchange

 To make it easier for providers to form consortia with a view to bidding on tender processes, we're planning to publish an open online directory for likeminded organisations to share their contact details.
 Consortium exchange

Social value

 Social Value is the additional economic, social and environmental benefits that can be created through purchase of services, above and beyond the value of the goods or services. Further information can be found in our Social Value Policy.

Policy, Information and Commissioning Team

The team works closely with the Care Settings Intervention Team and the Procurement Team to facilitate the development of a vibrant, diverse and sustainable market for high quality care and support.

This includes:

- Providing analysis of supply and demand to identify gaps or surplus in provision.
- Engagement with providers and other stakeholders to shape the care market.
- Working with all stakeholders to redesign services and policies and develop strategy.
- Leading the specification and tender process for the commissioning of services.
- Providing continuous oversight and review of commissioned services to ensure they continue to meet need appropriately.

Care Settings Intervention Team

The team delivers on 3 main functions:

- Undertaking and/or contributing to quality assurance and improvement work with care providers where quality concerns have been identified.
- Management of provider cessation or de-registration situations which may require the relocation of residents or people we support to alternative care provision.
- Supporting care settings to reduce the risk of continued or escalating outbreaks of infectious diseases, and supporting providers to reduce the risk of further spread by promoting proactive prevention and resilience.

Safeguarding

 Our safeguarding service acts to protect vulnerable people, either in their own home, or living in residential care settings. www.lancashire.gov.uk/health-and-social-care/ adult-social-care/safeguarding-adults/

Messages for the market

 Our aim is to work with, and support care providers, to ensure good quality care for all Lancashire residents and people we support.

Partnership Boards, Forums and Provider Engagement

- We appreciate your interest because your views and opinions really matter to us. We know the County Council doesn't have a monopoly on good ideas. That's why it's important that we listen to those who provide and receive care as well as taking account of emerging best practice. We have regular partnership boards and forums with service providers, details of which can be found at: Service provider engagement.
- We will also ask you to be involved in specific pieces of work and take part in consultations to ensure the work we are doing captures your ideas, builds on best practice, develops new innovations together and supports the market.

Get us involved

 If you are looking to develop your business or improve your services, we hope that this document will provide information which could support your business decision making. However, please involve the relevant council staff, partner organisations, service users, carers, and families to help provide feedback and inform your business plans.



