

# **Community Support Services Market Position Statement and Commissioning Intentions 2021 - 2024**

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# Community Support Services Market Position Statement and Commissioning Intentions 2021 - 2024

## 1. Introduction

This document sets out Denbighshire County Council Community Support Services market position statement (MPS) and commissioning intentions for 2021 – 2024.

Our MPS sets out our offer to the market, and summarizes the current needs and priorities - helping current/potential providers (including independent sector, third sector, not for profit and social enterprise) to develop and shape their support for adults in Denbighshire.

Please contact us at [C&CteamCSS@denbighshire.gov.uk](mailto:C&CteamCSS@denbighshire.gov.uk) / 01824 712306 if you wish to discuss this document or any aspect of our market position and commissioning intentions.

N.B. Commissioning intentions for homelessness prevention support are captured in a separate annual commissioning plan – please contact us if you would like a copy of this.

## 2. Responding to COVID-19

The COVID-19 virus has brought about unprecedented challenges for the social care sector and the people it supports. We are grateful to the social care providers in Denbighshire, who have risen to such huge challenges and gone above and beyond to make sure that individuals and their carers and families get the care and support they need.

We must continue to respond to changing needs, and ensure that care and support can continue to be delivered where it is needed most. We must also continue to learn important lessons from the challenges presented, and find opportunities for positive changes to the ways we work. During this crisis we have seen many different services, sectors and parts of the community crucially pull together and collaborate in new ways. Physical distancing has also brought to the forefront the need for better ways to keep people connected and prevent isolation, including through the use of different technologies. We have also seen how vital advocacy services have been in ensuring that citizens' voices do not get lost during a period of such widespread crisis management.

Our relationship with providers has changed too. Since the crisis hit, we have developed a much more open and supportive approach with many providers.

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There are also increased opportunities for peer support. We intend to build on this, and ensure that open communication and mutual support remain essential tenets of how we work in Denbighshire.

## 3. Our approach and what shapes it

Co-production and engaging with citizens and providers is a key way in which we shape our approach, both operationally and strategically. We continue to work to embed co-production in our planning, commissioning, delivery and evaluation of care and support.

Nationally, the strategic direction of Local Authorities is set by the Social Services and Well-being (Wales) Act 2014, with its principles of voice and control, prevention and early intervention, well-being and co-production. Some of the main provisions of the Act are:

- A stronger voice and real control for people over the social care services they use
- Prevention and early intervention, supported by partnership working and integration
- Outcomes-focused assessments
- National eligibility criteria – with a rights-based approach, people will be assessed on what they need, rather than just on what services are available locally.
- Strengthening powers for safeguarding of children and adults
- Extending the range of services available by direct payments
- Portable assessments
- Equivalent rights for carers

There are also a number of local plans and strategies that inform our approach, including:

- Denbighshire County Council's Corporate Plan 2017 - 2022, including key priorities around supporting carers and developing seamless social care services.
- Conwy and Denbighshire Public Services Board Well-being Plan (2018-23) which focuses on improving cultural, economic, environmental, and social well-being.
- Supporting Independence in Denbighshire – using the 'What Matters' approach and our asset-based resource wheel to support strengths-based conversations.

We continue to face a number of challenges because of increasing demands and reducing financial resources.

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At the same time, new legislation and contemporary support approaches provide opportunities to help citizens better achieve their outcomes. We need to continue to modernise and develop, including through co-production and collaborative working, and supporting people to make use of new support networks and technologies.

Ultimately, our focus must be on earlier intervention, increasing preventative services within the community, and helping people to maintain their independence. Our mission is to place people at the heart of decisions about the type of support they may receive. For many people, this will mean that they may be given a support budget/direct payment to manage their own care and support to achieve agreed outcomes. We will however also continue to commission managed care and support for those who need it.

We will therefore be seeking to work with and commission from providers who embrace:

- Having meaningful conversations with people
- Connecting people with what matters to them
- Enabling people to maximise their independence and take control of their lives
- Building on the strengths and abilities of people to identify individual solutions

In these turbulent times, we would also like to work with providers who will help to mitigate risks by supporting and influencing our approach, and who will offer best value through achieving priority outcomes, and creative, collaborative working. All services that we commission must avoid duplication, and reduce demand upon statutory services.

## 4. Contracting and procurement routes

Most of the care and support for adults is provided by the independent and third sector. In line with our Third Sector Strategy, some organisations providing services that meet our priorities are grant-funded, or 'pump-primed' with a view to becoming self-sustaining.

We also use various procurement routes (in line with our Contract Procedure Rules), including:

- **Domiciliary Care providers** are required to be accepted on to the North Wales Domiciliary Care Agreement Framework, which opens to new applications from time to time. There is a care brokerage system in place, ensuring that individual care packages are awarded to the best match provider.

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- **Care Homes** are required to sign a pre-placement contract with Denbighshire County Council (and Betsi Cadwaladr University Health Board where appropriate).
- **Community Living Scheme** support packages are usually tendered out, providers wishing to be considered for opportunities will already be on a Regional Framework, and opportunities, as they arise, are advertised on Sell2Wales.
- **Day Services for older people and adults with physical or sensory impairment** are commissioned on an individual basis
- **Day Services and Work Opportunities for individuals with a learning disability** procurement routes are currently under review. More information will be available soon.

## Direct payments/support budgets

Support budgets are part of our strategic approach to personalisation. There are a number of ways for citizens to access their support budget, including a direct payment, third party or Local Authority managed support budget, or a combination of the three. Demand for Direct Payments is increasing and in 2021 – 2024 we hope to see a significant increase in their uptake.

We will continue to encourage and facilitate further development and uptake of direct payments and have recently introduced pre-paid cards to help individuals, families, carers, and providers to overcome some of the barriers. We encourage existing and potential providers to consider how best to support and respond to the needs of people who are procuring their own services.

## Measuring Quality

The Contracts and Commissioning Team draws on various sources of information, which complements the contract review process. This includes a number of approaches and tools to make sure that citizens' voices are heard in this respect, including a 'Have your say' questionnaire, and detailed analysis of person-centred plans on an annual basis within Complex Disabilities services.

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## **5. Service area key messages & commissioning intentions**

### **5.1 Older people & people 18+ with physical or sensory impairment**

Community Support Services has a clear strategic vision around supporting independence choice and control. Our focus on early intervention, prevention, and reablement approaches will support people to maintain their independence; at the same time, we must ensure that people are protected, and minimise the risk of abuse or exploitation.

There are a number of different service areas in which we commission and deliver care and support for older people and people 18+ with physical or sensory impairment:

#### **5.1.1 Domiciliary care, including support work & specialist domiciliary care**

##### **The current picture;**

- Most domiciliary care in Denbighshire is provided via independent and third sector.
- Prior to any care package being commissioned, we explore the potential of a period of reablement (usually provided in-house) to determine what support is required to maintain the person's independence and help them to reach their goals. Longer term care will be put in place only when assessed as necessary, often where cases are more complex. Such longer term provision will be outcomes-focussed, and reviewed on a regular basis.
- Domiciliary care provision has reduced since 2016. This is viewed as a positive development and in line with our strategic intention to support more people to live independently without the need for ongoing managed support, e.g. through the provision of reablement and telecare/other assistive technologies.
- However, we also know that demand is outstripping capacity. The number of hours of domiciliary care provided for individuals aged 65+ has increased. Denbighshire's rural geography also provides its own challenges, and we are also very aware of the difficulties being experienced in recruiting and retaining domiciliary care workers.
- Care Brokers mainly struggle to find suitable agencies to meet care needs identified in the south of the county, particularly in more rural areas (generally from Ruthin and further south). There have however also been some issues securing domiciliary care packages in other areas such as Bodelwyddan, Bodfari, Denbigh and St. Asaph.

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- There are a significant number of older people in Denbighshire who have memory problems, not all of whom will have a diagnosis of dementia. From 2017 to 2025 a rise of 25.6% in people aged 65+ with dementia (source: Daffodil Cymru). Is predicted. There is also a small number of adults aged 30–64 with early onset dementia.
- For most individuals with mild to moderate dementia and a range of other mental health support needs, there is also a service provided by Health and Social Care Support Workers (based in the multi-agency Community Resource teams) that focuses on enabling individuals and their carers to engage with their communities and find opportunities to improve wellbeing.

## **What we need to develop and commission in domiciliary care;**

- We as a Local Authority must continue to work towards individual outcomes-focussed (rather than “time and task”) commissioning of domiciliary care provision.
- We need all domiciliary care providers to work creatively and collaboratively with us to meet increases in demand, especially for our more complex cases. We are particularly keen to work with providers who have a strong focus on person-centred approaches, and who embrace the reablement ethos.
- We want more individuals to benefit from the opportunities for more choice and control that support budgets can offer.
- We need to work together with domiciliary care providers to create better opportunities for recruitment and retention of care workers.  
We will be working with other Local Authorities and Betsi Cadwaladr University Health Board (BCUHB) on a regional whole systems approach to domiciliary care, concentrating on outcomes focus, workforce well-being and development, organisational sustainability, and exploration of different commissioning models.
- We will also be working in partnership with BCUHB to develop a greater range of care and support in some more rural areas of the county.
- We are looking to pilot a service for up to three people at a time, with moderate to advanced levels of dementia, to be supported in a care worker’s own home - providing those living with dementia with the opportunities to maintain their skills for as long as possible, whilst providing their carers with respite that is tailored and purposeful.
- We want to see more communities working towards being ‘Dementia Friendly’, and we will continue to work toward being a dementia friendly employer.



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## 5.1.2 Day services / activities

### The current picture;

- In Denbighshire there are several third sector organisations that provide day services/activities, and two that are Local Authority run. Some specialise in specific activities or types of support for people with particular support needs.
- In the main, they are not able to provide a service to those who require any personal care, limiting accessibility for some individuals who are eligible for social care services. There is also limited specialist provision of day activities for adults with a physical/sensory impairment, and for younger people with early onset dementia.
- We know that, in general, people want to retain their independence and community links rather than have specialised centres.
- We anticipate that there will always be a need for day services, but that these services need to be remodelled and modernised. The provision of day services must be part of our wider approach of wellbeing support, prevention, and early intervention.

### What we need to develop and commission in day services;

- We must continue to remodel and modernise traditional day services, refocusing on community-based support that offers a broad range of activities for individuals with various needs – closer to home, and in environments that are conducive to better wellbeing, with good quality facilities.
- We are looking for a delivery model that will be outcomes-focused, with a reablement ethos; that offers meaningful activities, and ultimately a focus on the wellbeing, individuality, choice, dignity and strengths of each citizen. This should include promotion of positive risk taking, and the use assistive technologies where possible.
- We will consider commissioning specific day services for individuals with moderate to high levels of dementia who may have personal care needs, and we would welcome discussion with providers with experience of providing this type of support.
- The Local Authority run day service in Denbigh will be reviewed, giving reference the wider health and social care provision in Denbigh and surrounding areas.
- We will encourage individuals to have greater choice and control by purchasing their own day service support using a support budget.

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- We will look to further develop the support worker approach for people with dementia who live at home without a carer, as well as consider this type of approach for people with physical/sensory impairment, which could possibly be funded via direct payment.
- We will continue to work with communities and services to ensure that people can access more community-based support, reducing the need for more formal services.

## 5.1.3 Short term breaks

### The current picture;

- Short term breaks happen when a person temporarily moves into a care home/extra care environment after hospital stay/short-term illness, and they require extra support whilst their health improves. Often this is funded via a direct payment/support budget.
- Each individual will have a support plan, and the ethos remains that independence must be maintained/increased.
- However, statistics indicate that once admitted to a care home for short term support (other than carer respite), a person's chance of returning to their own home is significantly reduced.

### What we need to develop and commission for short term breaks;

- We must continue to improve the outcomes-focus of short-term breaks support plans.
- We must investigate the reasons that a person's chances of returning home are reduced after short break care home admission, and develop new services/different ways of working in order to reverse this trend.

## 5.1.4 Residential and nursing care homes

### The current picture;

- There are over fourteen-hundred care home beds across the county (the majority in the north). Four are registered to provide both nursing and residential care, and seven registered to provide basic residential and EMH residential care.

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- All homes are required to register under the Regulation and Inspection of Social Care Wales Act (RISCA), and it will be mandatory for care home workers to register from 2022.
- Over 90% of adult care home placements commissioned by Denbighshire Community Support Services are provided externally.
- We have two in-house care homes, and are looking at options for both. This includes working with BCUHB to look at the future of Dolwen care home, following no market interest during a recent tender exercise. We will be extending the services offered from our care home in Corwen to support people in the surrounding community, and we are also considering extending the building to provide some supported living apartments.
- Many care homes provide traditional models of care with limited activities. There are also significant variations in the quality of care services within care homes.
- Data indicates that we are successfully supporting people to live in their own homes for longer. While current demand remains steady, the demand and need for standard residential care in Denbighshire continues to reduce each year.
- At the same time, we know that demand for specialist (nursing / EMH) care homes continues to rise. We have a high number of older people with memory problems and dementia in Denbighshire, which already puts a strain on availability in those care homes. Forecasts suggest that this demand will continue to rise, and numbers of EMH residential and nursing beds will likely need to increase.

## **What we need to develop and commission in care homes;**

- We will be putting forward, as a high priority, a request for specific training to assist care home providers to offer more specialist services such as EMH care.
- We must modernise care and support within homes, including embedding outcomes-focussed care and support plans (with credence on a person's life story to inform these, and involvement of family and friends where appropriate), use of assistive technologies, positive risk taking, and a focus on maintaining skills and abilities.
- We ultimately want to achieve models of care that will be focussed on the goals, wellbeing, individuality, choice, dignity and strengths of each citizen.

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- We want to see meaningful and varied activities being made available to residents, in environments that are conducive to better wellbeing, with good quality facilities. We also want some care homes to be able to provide quality day services for those that require support with their personal care needs.
- We must also concentrate on recruitment and training, ensuring staff teams who are skilled and positive, with an understanding of what's important to the individuals they support, and with inspiring managers.
- We also want to explore options for 'step up' and 'step down' facilities to help people to regain confidence and independence, enabling them to return to their own home.

## 5.1.5 Extra care housing

### The current picture;

- Denbighshire County Council is developing a strategy to provide extra care housing (ECH) to meet changing needs and increase the range of provision. The key drivers for change include changing expectations, a projected increase of older people with higher level support needs, and a focus on rehabilitation and independence.
- Currently Denbighshire County Council has three ECH facilities, delivered in partnership with Housing Associations - and we have waiting lists for each of them.
- There is a corporate commitment to develop three further ECH schemes. We have purchased a site in Denbigh and we are working in partnership with Grŵp Cynefin (following a tender exercise) to deliver a scheme on the site.

### What we need to develop and commission in extra care housing;

- We will continue to work to scope out suitable sites for the further two ECH developments, and we are actively pursuing partnership arrangements. Project management capacity, resources, partnership working and training/awareness raising will be key to delivering on this commitment.
- We will continue to work in partnership with Grŵp Cynefin to develop the seventy-four unit Denbigh scheme, and we are expecting that building work will be completed in 2021.

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- We will also be extending the current ECH facility at Llys Awelon in Ruthin, in partnership with Grŵp Cynefin. This will see a further thirty-six units added to the current provision, with one unit reserved for respite and reablement provisions.
- Denbighshire County Council is also drawing up plans for supported housing with access to health provisions in Corwen, and we are exploring partnership and funding options for such a development.

## 5.1.6 Sensory loss specialist support

### The current picture;

- We work closely with BCUHB and with a range of voluntary sector providers who provide specialist support to those who are affected by sensory loss.
- We currently have grant funding/commissioning arrangements in place with Centre of Sign, Sight and Sound, Sense, and Vision Support, to provide a broad range of support.
- Our Stores also provide some digital solutions to support individuals with sensory loss to communicate in different ways that work best for them.

### What we need to develop and commission for sensory loss specialist support;

- We are looking to improve our offer corporately to those who rely on different communication methods because of their sensory loss.
- We will continue to work to improve the range of services available to those who use communication systems such as braille, Makaton, BSL or communicator guides.

## 5.1.7 Advocacy

### The current picture;

- There has been an increased recognition of the role of advocacy in safeguarding people's rights and promoting choice and control over their lives.
- We currently fund Dewis CIL to provide advocacy for individuals 18-64 who may have a physical disability, acquired brain injury, sensory impairment, mental health issues or are a carer.

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- With Conwy County Borough Council, we also jointly commission one to one advocacy services from Dewis CIL for people 65+.

## **What we need to develop and commission for advocacy for older people & people 18+ with physical or sensory impairment;**

- These key services will continue to be delivered, and we will continue to monitor demand and changing needs.

## **5.2 Adults with complex disabilities**

We must continue to change the ways we work to support adults with complex disabilities, in response to changing needs, legislation, and the pressures of supporting growing numbers of people with less funding to do so. Denbighshire County Council is committed to taking an outcomes-focussed, enabling and progression based approach, which makes the best use of peoples' assets and abilities - providing or arranging formal/longer term services only where absolutely necessary. The focus must be on supporting people to build on their strengths and abilities to identify individual solutions, build new support networks, and connect people with the things that are important to them.

There are a number of different service areas in which we commission and deliver care and support for adults with complex disabilities:

### **5.2.1 Day and work opportunities**

#### **The current picture;**

- Day and work opportunities provide support during the working week that is focussed on meaningful activities, usually in a work environment. They are delivered in-house and also commissioned via independent providers (including social enterprises).
- Direct payments are also offered to individuals to purchase their own day/work opportunity support. The use of direct payments is a distinct part of our direction of travel for day services, and we are very keen to increase the opportunities available for self-directed support in this area.

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- Approximately 215 people are supported in provided or commissioned work or day opportunity settings. 48% of these are in-house, 34% are supported by external providers, and 16% are in non-work focussed settings. Almost a quarter (24%) of all attendees in the in-house business settings are aged 50 years or more
- The range of activities available can be limited, especially in the South of the County where the population is less dense.
- There is also sometimes a limited focus on skills development and progression, certainly including progression into 'real' paid employment, for which we are seeing increasing demand from younger people especially.
- Although there is specialist job finding/employability support for people with learning disabilities, as well as a population-wide Working Denbighshire service, the number of adults with learning disabilities (who are known to us) who have a paid job is extremely low. Sadly, this is a reflection of the national picture.
- Suitable and appropriate activities for people with high functioning autism can be difficult to find – this is a problem across the whole of the county.
- Some of the existing in-house work opportunity business settings are struggling to cope with the changing demands, and restricted levels of autonomy and opportunities for external grants and funding. Following a recent detailed review, work is underway to revisit these services, with a view to ensuring their modernisation and sustainability.
- The social enterprise (SE) model has worked well for adults with learning disabilities in the north of Denbighshire. The social enterprises with whom we commission a good range of activities at a competitive price.

## **What we need to develop and commission in day and work opportunities;**

- We ultimately want to see day/work opportunities that work in a person-centred and flexible way; that focus on individual progression (which may include progression to paid work), skills building, active involvement in local communities - and which provide diverse and engaging activities, suited to people with a range of needs and aspirations.

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- We would like to see a focus on developing and supporting opportunities for paid work. This will include considering opportunities for development of internship style programmes, e.g. Project SEARCH.
- We also especially want to see a broader range of activities available for those people who live in the South of the county; those who struggle in a work-focused setting, and for people who are approaching retirement
- We will continue to offer and promote direct payments to enable people to procure their own support, and we will monitor the impact on providers. We encourage existing and potential providers to consider how best to anticipate, support and respond to the needs of people who are procuring their own services.
- We will encourage partnerships and/or social enterprise innovations, and will support bids for external funding where these fit with the needs and aspirations of individuals and the approach outlined above.
- We would like to see the social enterprise model further developed, particularly small enterprises in rural areas, and the development of new and innovative concepts. We are currently exploring the outsourcing of two of our in-house services which, we feel, lend themselves to such a model.

## 5.2.2 Supported accommodation

### The current picture;

- Although relatively high numbers of people with complex disabilities continue to live in the family home, an increasing number want (and need) to live independently.
- The ethos that underpins supported accommodation is one of promoting independence, rights, wellbeing and individual progression.
- The majority of supported accommodation in Denbighshire is delivered by the independent sector, with a small amount delivered in-house and by the third sector. The sector is a mix of small and large, local and national organisations, some of whom are 'not for profit'
- Within Denbighshire, most people living in supported accommodation are currently living either in a care Home or in a community living scheme.
- We have recently contracted out our Shared Lives service jointly with a neighbouring Authority. It is envisaged that this contract will not be re-tendered until 2030.



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- Whilst community living is viewed as the preferred housing model for most adults with learning disabilities, this is not a one size fits all. We must recognise that people's needs and preferences can, and do, change - and that tenants can, and should, progress where appropriate. This may include reviewing people's housing needs to ensure that the level of support, the type of housing and location is still right for them.
- We regularly review people's housing needs using a progression approach. This puts individuals at the heart of both operational and strategic planning, and has proved really successful - with monthly multi-disciplinary meetings and a team approach to mapping and responding to changing needs, and developing new housing options.
- Most new care home placements are temporary measures until a suitable tenancy is secured; however, there is still a number of older people living in care homes following historic placements, partly as a legacy of the closure of the North Wales Hospital (moving these individuals now would not be feasible or in their best interests).
- In community living people usually live as tenants in a shared house, with paid support provided by a registered domiciliary care agency (via contracts which are subject to tendering processes). All new supported accommodation schemes must be 'self-financing', in that the total cost of the support service must be equal to or less than the existing or anticipated cost of support for the individuals identified.
- Within Denbighshire the support service is not provided by (or linked to) the landlord. Support services for all new community living schemes are commissioned via an agreed tendering process. The distinction between the landlord and the support provider is an important element of our approach – any potential landlord or providers should contact us before making any investments or business decisions, so that we can explain this approach in detail.
- Over the next two years we will be re-tendering Community Living services, and we are currently considering options for a potential cluster based model of procurement and delivery.
- We have developed a housing model that enables people to combine direct payments to procure individual support in a shared house.

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- We have developed a supported housing staff guide, so as to improve the process for individuals, their families and the staff. This will avoid delays and voids in community living, make best use of staff and monetary resources, and ensure that tenant compatibility is always given due consideration.
- To enable us to respond to demand in a strategic manner, we maintain a detailed record of housing needs data. This data currently tells us:
  - Around half of the individuals would prefer to live in the north of the county
  - Over half have been identified as needing community living type housing (with varying degrees of support required)
  - There is demand for a model of supported accommodation which is less staff intensive than existing community living schemes. Around a quarter of individuals have been identified as needing 'KeyRing plus' (i.e. more than KeyRing, but less than existing Community Living). We call this model 'own front door, shared support'.
  - Some people need or want to live alone, but could share support.

## **What we need to develop and commission in supported accommodation;**

- We will continue to procure support services in community living via the North Wales Supported Living Agreement framework.
- There will continue to be an increased focus on outcomes (rather than outputs) – this is reflected in the service specifications for new community living schemes.
- We will promote independence and progression in supported accommodation (e.g. by establishing agreed incentives for providers, on a case by case basis).
- We will develop financial incentives for innovation.
- We will continue to look at how pooling direct payments can work with shared support.
- We will continue to work with Denbighshire Housing and Registered Social Landlords to develop suitable, tenancy-based housing, to meet identified needs (including 'hub and spoke', 'shared support, own front door', extra care and telecare/assistive technology supported models).

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- We will continue to move away from permanent care home placements, unless this is what the individual and their family want, and it is the best way of meeting their needs.
- We will promote Shared Lives (Adult Placements) as a housing option.
- Over the next 2 years we will re-tender expired community living support services, in line with our Contract Procedure Rules
- We will use the regional supported living framework for all future contracts.
- The language and culture of Denbighshire is important – for some citizens Welsh is their first &/or preferred language. We will commission services that can support people in the language of their choice, and we expect providers to have an awareness and an understanding of the local culture and language

## 5.2.3 Support at home (regulated and unregulated)

### The current picture

- The aging population means that more people with learning disabilities will need care and support into old age.
- The ethos that underpins this provision is one of promoting independence, wellbeing, individual progression, and reducing the demand for longer term statutory services wherever possible. Domiciliary care and project work support must also be outcomes- rather than outputs-focussed.
- All spot purchased domiciliary care for adults with complex disabilities is procured via third and private sector through a care brokerage system (except within community living). Hourly rates are determined at the time that a provider applies and has been accepted onto the framework agreement (whereas rates in community living are agreed as part of the tendering process).
- There are forty-one agencies on Denbighshire's framework that could provide support to adults with learning disabilities; however, not all would necessarily have the skills or choose to support adults with a learning disability.
- More than half of the people with complex disabilities that we support live in the north of the county.
- These gaps in provision are around the agencies availability, rather than the types of needs that they support.

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- There is demand for Welsh speaking domiciliary care staff, especially in the south of the county. Although numbers are low, we know that this is important to these individuals and their families. We know that agencies often struggle to recruit Welsh speaking staff.
- We facilitate meetings with complex disabilities domiciliary care providers, which are well attended by providers, Health, and the Denbighshire Complex Disabilities Team. They provide an opportunity for representatives to exchange information and updates.

## **What we need to develop and commission for support at home (regulated & unregulated);**

- We will continue to welcome innovation and new ideas. With limited funding available to pump prime initiatives to reduce long term demand on statutory services, we are particularly keen to hear from providers with creative proposals that would reduce long term demand on statutory services and achieve better outcomes for individuals.
- We will ensure that support is focussed on achieving outcomes, not outputs.
- We will promote the concept of skills exchange e.g. time banking.
- We want to see greater and more creative use of assistive technologies to promote independence and reduce reliance on statutory services.
- We will encourage greater use of informal networks and citizen resources.
- We will focus on progression and throughput, where feasible and appropriate – with tapering support agreed between the individuals and the people who support them.
- We intend to continue the quarterly provider meetings as a means of keeping providers informed and providing an opportunity to discuss concerns and developments.

### **5.2.4 Respite**

N.B. The term respite is used here to mean overnight or short term support which is provided away from the family home, with a view to giving the family/carer a break – further detail and other forms of respite for carers are referred to under chapter 5.3 Support for Carers.

#### **The current picture;**

- We currently have an arrangement with a small care home that provides overnight respite. This will be reviewed in future.

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- We provide respite placements in both of our Local Authority run care homes.
- We have respite provision within our Extra Care Housing.
- We are currently developing a respite/hospital avoidance pilot in partnership within our Sheltered Housing schemes. This will see a units of accommodation in Ruthin and Corwen becoming available for short term support interventions. Care and Support will be provided from external providers and/or our in-house Reablement team as determined through a full assessment and multi-disciplinary approach.
- Where appropriate, we also procure project worker support for evenings and weekends. It is key that support staff take a progression approach.
- Shared Lives placements are also sometimes used for respite. We anticipate greater use of Shared Lives for respite now we have a block contract with an external provider.
- Most respite however is now arranged by individuals and their families via a direct payment, offering a variety of person-centred and flexible options. The use of direct payments is a distinct part of our direction of travel for respite, and we are very keen to increase the opportunities available for self-directed support in this area.

## **What we need to develop and commission for respite;**

- We intend to look at alternative ways of providing respite (including promoting the use of more Shared Lives placements).
- We will continue to promote the use of direct payments as the preferred option for the procurement of respite. We encourage existing and potential providers to consider how best to anticipate, support and respond to the needs of people who are procuring their own services.
- We will work with partners to support the development of a regional approach for complex/specialist respite needs.

## **5.2.5 Advocacy, consultation and information**

### **The current picture;**

- Advocacy is one way of enabling individuals with complex disabilities to communicate their views, fears, needs and concerns, and ultimately to make sure that they are heard. Some individuals need 1:1 advocacy to help them with a particular problem or situation; others may need group advocacy to ensure their voice is heard.

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- Good accessible information is also crucial for individuals and their families. Demand for information is changing, including more people accessing information on the internet. People with learning disabilities and their families/carers also access regular Complex Disabilities Team Talking Points at venues across the county.
- Within Denbighshire, formal advocacy and information services for people with complex disabilities are provided by two separate independent organisations;
  - Self-advocacy (including consultation) and the individual advocacy service is provided by North Wales Advice and Advocacy. Self-advocacy groups meet in venues across the county and provide representation at an all Wales level. Membership of these groups is being proactively encouraged.
  - Consultation and information is provided by Denbighshire Connect – monthly meetings are held, and members provide representation from key groups. They are actively promoting membership of their parents and carers forum.

## **What we need to develop and commission for advocacy, consultation & information;**

- We intend to continue funding advocacy, consultation support and information provision.
- We would like to see the development of Welsh speaking self-advocacy groups
- We would like to see more use made of social media and virtual platforms to enable people to have a voice and to access local and national information.
- Wherever it is feasible and appropriate, we would like to explore opportunities for a sub-regional approach, for example, with our neighbours in Conwy.

## **5.3 Support for carers**

The Social Services and Wellbeing (Wales) Act 2014, defines a carer as someone who provides unpaid care to an adult or child.

The Act strengthened carers' statutory rights, meaning that if carers have needs that are eligible for support, the local authority has a statutory duty to meet those needs. At the time of writing, Welsh Government is also consulting on a National Plan for Carers.

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We know however that carers can face barriers in their everyday lives that prevent them from getting the support they need, and we also know also know that caring is becoming more complex. Future support for carers therefore needs to be wider than health and social care, requiring a co-ordinated response across government, local authority, third sector and community.

In Denbighshire the number of unpaid carers of all ages is increasing, and that it is projected to continue to rise. Denbighshire already has the highest percentage of unpaid carers in North Wales - approximately 13% of the county's population.

Denbighshire partners and carers were actively involved in developing the North Wales Regional Carers Strategy 2018, and have agreed to the offer for carers in North Wales. Carers are also a corporate priority. We are committed to commissioning services for carers that maintain a focus on health & wellbeing, promote co-production and enable carers to access their communities.

There are a number of different service areas and ways in which we commission and deliver support for carers:

## 5.3.1 Grant and ICF funded provision

### The current picture;

- Many of the services available to carers are grant funded with third sector organisations, and are available to all carers on an open-referral basis, without the need for a formal assessment. These services include information and signposting, practical and emotional support (including one to one support, peer support and groups), and training.
- ICF has helped to drive integrated working between social services, health and housing, along with third sector partners. In recent years the scope of the fund was expanded to encompass carers, and some small projects have been funded with a focus on improving the wellbeing of both individuals with support needs and their carers (e.g. Age Connect's The Perennials gardening project). ICF has been extended to 2022 because of the impacts of COVID-19 on existing ICF funded projects.

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- Research shows that activities such as arts, physical and social activities can help to support carer's mental health and help to prevent loneliness and isolation.

## **What we need to develop for grant and ICF funded provision for carers;**

- We will need to work with grant funded providers to improve recording and prepare for the new metrics (proposed by Welsh Government) for meeting carers' needs. Services need to demonstrate social and economic value through a mix of positive stories, accurate carer data and evaluation measures. Grant funded third sector agencies will also continue to be required to demonstrate that best value services are being delivered.
- We will continue to review third sector grants/contracts to ensure that all provision supports the delivery of the Social Services and Wellbeing (Wales) Act 2014, and is responsive to changing carer needs.
- Over the coming year we will continue to welcome joint bids and small project proposals for ICF funding, including to complete existing projects that have been disrupted by COVID-19, and for smaller projects that can be completed 2021-2022. We anticipate that a further fund will be instated in 2022, though details have not yet been confirmed.

## **5.3.2 Information, advice and engagement**

### **The current picture;**

- The Denbighshire Single Point of Access (SPoA), Talking Points and integrated Community Resource Teams play significant roles in identifying carers and connecting them with the information and/or ongoing support they may need.
- There is an active Carers Strategy Group in Denbighshire that is co-chaired by the third sector, which provides opportunities to hear carers' voices and ensure that all types carers are involved in decision making.
- WCD Young Carers are commissioned on a sub-regional basis to advocate on behalf of young carers and their families. WCD also host carers groups for young carers and work with schools and colleges. Other support for young carers is provided via children and families services. It is estimated that there are in the region of 2000 young carers in Denbighshire - 350 young carers are known to services.



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- The Carers Needs Assessment is a 'What Matters' Conversation with a trained Carer Assessor, commissioned from North East Wales Carers Information Service (NEWCIS).

The assessment focuses on identifying and understanding the carer's needs, exploring whether the carer is willing and able to continue caring, and whether they are satisfied with the support provided.

- Assessment completion rates tell us that there are significant numbers of carers in the county that we do not know about.
- NEWCIS also provide carers with information, advice and lower level support, taking a holistic view of their situation.

## **What we need to develop and commission for information and advice;**

- We must continue to work to make sure that carers have access to timely information from a variety of platforms/formats, including online support, to assist them in their caring role and support them to have a life of their own.
- We will continue to promote SPoA, Talking Points, and uptake of carers assessments.
- We need to ensure the involvement of carers in the co-production and planning of all future services.
- We want to establish and embed a joined up prevention offer, including practical and emotional support and training - supporting carers to identify themselves at an early stage, build resilience, skills and confidence, and avoid reaching crisis situations.
- We will also develop approaches that support carers to plan for the long-term and a future beyond caring, alongside practical support such as breaks and social activities.
- We will establish clear and appropriate referral pathways where there is a need to step up to more intensive services.

### **5.3.3 One to one support**

#### **The current picture;**

- In partnership with BCUHB, we commission a Carer Support Worker service to support carers of adults receiving services from the Adult Mental Health Home

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Treatment Team. It provides a time limited service to carers during the acute intervention for the cared for person. Longer term support for the carer is passed back to the Community Mental Health Teams and the third sector.

- The Healthy Carers Worker is based within the SPoA team. It provides a county-wide service to carers in their homes, with one to one support and a greater focus on maintaining the carer's own health and well-being.

The Healthy Carers Worker can also provide carers who have been unable to attend training sessions with one to one training support, particularly around safer moving and handling, and good back care.

## **What we need to develop and commission for one to one support;**

- These key support services will continue to be delivered, and we will continue to monitor demand and changing needs.

### **5.3.4 Breaks from Caring**

#### **The current picture;**

- Sitting Services are provided for carers who require a regular short term break to enable them to continue caring, where the need cannot be met in any other way. Regular reviews ensure that the service is appropriate to meet the needs of both the carer and cared for. All sitting services are commissioned under spot purchase arrangements with both the third and independent sector. The brokerage process for domiciliary care is applied in the same way to the procurement of sitting services.
- Short term residential respite is a chargeable service to the cared for person, and is subject to a care and support plan to meet the cared for person's needs. It is commissioned on an individual basis in line with our procurement process for short term residential respite.
- We currently commission the Bridging the Gap Scheme from NEWCIS, offering carers a flexible scheme for short term breaks. Carers are allocated a voucher after a carer assessment, which can be exchanged for services.
- Respite stays are also available for carers in Denbighshire's Extra Care schemes. Carers can have a break in the guest accommodation, and the cared for person can stay for

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respite and receive the care and support provided on site. Carers have the choice of whether they wish to have meals and participate in activities provided on site.

## **What we need to develop and commission for breaks from caring;**

- We will continue to offer individual direct payments to fund respite, and we will encourage the further uptake of this resource.
- We will review current provision and options for respite/short breaks.
- We want carers to have a range of options to access a break from their caring role, including innovative models of support, and flexible options for out of hours/weekends, during times of stress/crisis, and overnight accommodation options to respond to the increasingly complex health needs of the cared for person. We would also like to achieve additional carer breaks capacity, including support to attend appointments.
- We would like to work with providers, in co-production with carers, to develop and broaden the range options available for respite, as part of a joined up offer of preventative support.
- We would welcome discussions with providers about other potential models for respite/short term breaks, for example, befriending support, additional volunteer capacity, increasing the use of Shared Lives, specialist care support breaks for individuals with specific disabilities/health conditions, and replacement care (providing respite for the carer by supporting the cared for person in their own home).
- We will continue to procure short term residential respite via spot purchase arrangements – we are not looking to block contract this type of service as it is important to maintain flexibility of provision and respond to individual needs.

## **5.3.5 Other supports – financial, emergency and training**

### **The current picture;**

- One off grants are provided by Denbighshire County Council to purchase an item or service to meet carers' assessed needs. Grants are typically provided to purchase things like white goods, holistic therapies, short breaks, gardening services and driving lessons.

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- The Carers Emergency Cards scheme is managed jointly by Denbighshire County Council and a third sector organisation. It offers carers some peace of mind when out and about, providing a 24-hour call response service via the Single Point of Access and out of hours Emergency Response service.
- Every effort is made by Denbighshire County Council to ensure that training is available and accessible to carers.

A small amount of funding is made available from our Workforce Development Grant specifically to fund training for carers, which is generally distributed in small grants to third sector organisations who have identified training gaps for carers. In recent years we have also worked alongside the third sector and opened up our own staff training programmes to carers, provided the course content is appropriate.

## **What we need to develop and commission for other supports for carers;**

- These key services will continue to be delivered, and we will continue to monitor demand and changing needs.