
**Decision Session of the Executive Member
for Health and Adult Social Services**

21 December 2010

Report of the Director of Adults, Children and Education

**Older People's Commissioning Strategy – 2010 Refresh and
Commissioning Plan**

Summary

1. This paper seeks agreement to a refreshed commissioning strategy for older people, and to a new three year commissioning plan based on this refresh.

Background

2. Our Long Term Commissioning Strategy for older people was agreed by Members in January 2007. It took a long-term view of the services that older people will need in York. It looked at the next 10-15 years and identified priorities to deliver the services that older people will want.
3. Since 2007, and as a result of the Strategy, we have made some significant changes to services:
 - In response to consultation with older people we have added to the menu of early intervention and prevention services, including delivering the top three priorities identified from consultation with older people.
 - We have moved to outcome based domiciliary care contracts.
 - We have developed two additional housing with care schemes and have worked with housing and planning colleagues to begin to expand the choices for those who are homeowners.
 - We have increased the number of beds in our council homes offering specialist care, as the demand for 'standard' care has been reducing.
 - We have increased the number of people using telecare as a way to keep them safe and independent at home.
 - We have worked with our council colleagues to ensure they are thinking about the impact of an ageing population in the city on all council services.
4. Other developments since the original strategy include a Blueprint for Adult Social Care, which was agreed by the Executive in October 2009, as part of

the More for York programme. It contained four main elements that Adult Social Care Services should deliver:

- Services that are customer focused – simple to understand and accessible
 - Personalised approach and Choice – customers who are eligible for services will know how much money is available to fund their care and have the opportunity to control that directly if they want to.
 - Maximisation of independence and optimising people’s health and well-being – support that enables rather than disables, intervenes early to prevent problems becoming acute and uses assistive technology.
 - Universal support for everyone – all citizens to get the information, advice they need to live independently even if they are self-funders.
5. We have developed our joint commissioning arrangements with our health partners, and in July 2010 the Executive Member agreed a Joint Vision for the Health and Well Being of Older People in York, produced with our health commissioning partners.
 6. Local and national policies have moved on since 2007, and with the new coalition government new challenges are facing us, particularly from both the planned changes in Liberating the NHS, and from the Comprehensive Spending Review.
 7. It is in the light of all these changes and challenges that we have reviewed our strategy and updated our commissioning plan.

Consultation

8. Consultation undertaken in 2008 with older people is reflected in the refresh of the strategy. The outcome of the consultation was previously reported to the Executive Member in June 2008.
9. The refreshed strategy documents have been shared with the Older People’s Partnership Board, and with Health Overview and Scrutiny. Any feedback will be shared verbally with the Executive Member at the meeting on 21 December.
10. Consultation on specific commissioning projects, as outlined in the Draft Commissioning Plan will be undertaken in line with project plans, and through the Council’s efficiency programme, More for York.

Options

11. Option 1 is to approve the refreshed strategy and accompanying commissioning plan.
12. Option 2 is not to approve the documents but to ask for further work to be undertaken on any areas of concern

Analysis

13. The draft Refresh of the Commissioning Strategy is attached as Annex 1. It includes an appendix with the updated population predictions, and condition prevalence predictions.
14. Annex 2 contains a draft commissioning plan for the next three years.

Commissioning Strategy

15. The review of population projections, information on known need and of the aspirations of older people has shown that the messages within our original strategy remain sound, four years on. Policy developments locally and locally have reflected, underpinned and supported the messages from our original strategy.
16. Older people told us in 2008 that what they wanted most was more services that helped them stay independent in their own homes. Just over half were willing to consider moving to new accommodation if it helped them stay independent for longer, and over 80% agreed residential care should focus on those with specialist care needs, such as dementia and high physical dependencies. The Council was seen as key to ensuring quality services were available in the city.
17. The message remains therefore that services need to be flexible and responsive to individual choice. Older people will expect to take more control and will expect services to support them to remain independent and healthy and active in their community. This combined with the pressure that the growing population will put on the public purse, means that we must find the most efficient and effective ways to deliver the care and support that will be needed.
18. This review confirms we have made important progress in the last three years, with new services established, a move to outcome focussed contracts and a more joined up commissioning approach with health.
19. However public funding is reducing, and although there is recognition of the demographic pressure in the most recent spending review, we still need to continue the transformation of our services, to deliver the additional capacity for dementia and specialist care, to ensure we have the right community based services in place to support more people in their own homes and to offer the choice and control that people expect.
20. We know there are still some gaps in our services: in the ability to meet demand for some specialist support; in the way that some services are not yet joined up with health services; and in the way we are still heavily investing in residential care rather than community based care and early intervention services.

21. The five strategic outcomes developed through the joint vision with our health partners are reflected in the objectives of the refreshed strategy and commissioning plan. These are that more older people will:
- Be demonstrably treated with dignity and respect.
 - Have greater involvement in family and community life.
 - Be able to achieve greater independence.
 - Report that they are able to maintain good health.
 - Remain within a home of their own.

Commissioning Plan

22. The commissioning plan sets out the actions we plan to take over the next three years in the key service areas:
- Prevention and early intervention
 - Housing and housing relates support
 - Domiciliary and community care
 - Intermediate care
 - Residential care
23. It sets out the objectives, identified through the commissioning strategy, and reflecting the More For York Blueprint and the Joint Vision:
- To ensure best value for money, and best use of resources to support a growing number of older people.
 - To invest in services that reduce the need for and funding for residential and hospital based care and increase independence
 - To increase the capacity for EMI residential and nursing care and high dependency residential care within the city, and reduce the number of 'standard' care beds provided by the Council
 - To reinvest some of the savings achieved through these programmes in community based care and support
 - To increase the housing based choices for older people, and develop our care and support models to enable more people to be supported at home
 - To offer more support to carers to enable them to continue their caring role
24. This will be the next step on the transformation of our service options and delivery, as required by Putting People First and the New Vision for Adult Social Services. The plan outlines the actions to be taken, timescales and the funding implications together with the lead officer, service or team.
25. There are a number of actions, and investment decisions that are dependent on the outcome of the evaluations which will be presented to Members next June, as part of the More for York Programme. It is anticipated therefore that

the plan will be updated following these reports being received and considered.

Corporate Objectives

26. The Vision will help to deliver the Council's objectives in respect of:

A Healthy City – we want to be a city where residents enjoy long healthy and independent lives. For this to happen we will make sure people are supported to make healthy lifestyle choices and that health and social care services are quick to respond to those that need them.

Implications

Financial

27. There are no immediate financial implications to agreeing the refreshed Strategy and commissioning plan. The commissioning plan does envisage a need to change the current investment profile over the next three years. Annex 2 indicates where there will be investment decisions to be taken and what our current investment is.
28. The details of any changes and any financial implications within the commissioning plan will be addressed through the individual projects and will be brought to the Executive Member as required, and through budget proposals.

Human Resources (HR)

29. There are no immediate HR implications to agreeing the refreshed Strategy and commissioning plan. Where there are any potential HR implications within the commissioning plan, these will be addressed through the individual projects, with appropriate consultation with staff and will be brought to the Executive Member as required.

Equalities

30. A desktop equality impact assessment has been undertaken in respect of the strategy. All of the issues raised in the strategy have, by definition, an age impact, and a disability impact. The strategy is intended to address any equality issues for both of these strands. None of the actions planned are considered to disadvantage any of the communities protected by the council's equality scheme. Each commissioning project will undertake a more specific impact analysis.

Legal

31. There are no legal implications to agreeing the refreshed Strategy and commissioning plan.

Crime and Disorder

32. There are no crime and disorder implications to agreeing the refreshed Strategy and commissioning plan.

Information Technology (IT)

33. There are no IT implications to agreeing the refreshed Strategy and commissioning plan.

Property

34. There are no new property implications to agreeing the refreshed Strategy and commissioning plan. Where there may be any potential property implications within the commissioning plan these will be addressed through the individual projects.

Other

35. Delivery of the Joint Vision for Older People's Health and Wellbeing: The refreshed strategy and commissioning plan will support the delivery all five of the outcomes within the joint vision.

Risk Management

36. The risk associated with the demands for services from an ageing population is recorded on the Council's risk register. The recommendation of this report will potentially help to reduce this risk. There are no new risks associated with adoption of the refreshed strategy or commissioning, but any commissioning project will be required to assess and manage specific risks.

Recommendations

37. It is recommended that Option 1 be adopted:
To approve the refresh of the commissioning strategy and the updated commissioning plan.

Reason

To ensure we can better meet the needs of our population, and provide services more efficiently and effectively.

Contact Details

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Report Approved

Date 8 December 2010

Wards Affected:

All

For further information please contact the author of the report

Annexes

Annex 1 - Draft Refresh Older People's Long Term Commissioning Strategy 2006-21, and Appendix – Population projections update

Annex 2 - Draft Commissioning Plan 2010-2013