

Kernow Clinical
Commissioning Group



Thinking Differently

**Delivering the right
care for Cornwall**

Welcome and House Keeping



The Right Care for Cornwall

- Recognising the here and now problems
- Take the opportunity to look forward and be brave!

Let's think Differently

- What would work for Care Businesses in Cornwall?
- Can we think differently? Dare we think big?
- What are the ideal approaches for Care at Home and Supported Living Services in Cornwall
- How could they work?
- What are the tools needed for the job?

Some solutions to what we've heard

- Joint Commissioning : NHS Kernow and Cornwall Council
- Reablement, Enablement, Ongoing Flexible Care, Supported Living
- Less generic approach to Cornwall and Service types
- Explain the 'must haves'; eg. SSIP, Insurances, Data Security, ECM, QA
- Publish clear supply and demand information – Market Position Statement
- Improved responsiveness – investment into care assessments resource
- Improved messaging - Choice vs Reality
- Involve Care Providers/Workers in reassessments
- Enable Flexible Service Delivery – Trusted Providers



Current Position for Domiciliary Care

- Council commissions c.34,000 hours of care per week
- NHS Kernow commissioning xxxx of care per week
- Spend Council - c£30m pa, NHS Kernow – c£XXm pa
- Council commissioning for 2500 people, NHSK 280 people per day
- Direct Payments used by c1600 people;
- Personal Health Budgets used by cXXX people; Drive to increase
- Growth needed based on current demand for Care at Home services
 - 2017/18 8%
 - 2018/19 – 21 3.9% YoY
- Direction of Travel – reducing demand on traditional domiciliary care; offering alternatives; integrating care options; building community support; enabling flexible service delivery; managing budgets

Commissioning Intentions

- Info, Advice and Guidance
- Partnership Solutions
- Whole System Solutions
- Business Systems
- Funding Optimised



Target Timeline for Commissioning Domiciliary Care Services – Not Set in Stone!!

Aims	Dates
Engagement/Co-production	May – June 2017
<ul style="list-style-type: none">• Initial Market Event	2 May 2017
<ul style="list-style-type: none">• Focus Groups	May – June 2017
<ul style="list-style-type: none">• Market Update (incl. stakeholder feedback)	July 2017
New Service Delivery Approach Governance	August – September 2017
Procurement	October / November 2017
Contracts Award Notified	Early 2018
Go Live	By June 2018

Support Living Services: Current position

- Care and support services for people with eligible social care needs up to 24/7, either on an individual basis or in shared accommodation
- Approx. 185 people receiving Supported Living Services through the Framework Agreement, Individual Commissioned Contracts or a block contract arrangement.
- C.£16 million on commissioned supported living services
 - C.£14m through Framework Agreement
 - C.£2m through Individual Commissioned Contracts and a block contract arrangement (Hendra Parc)

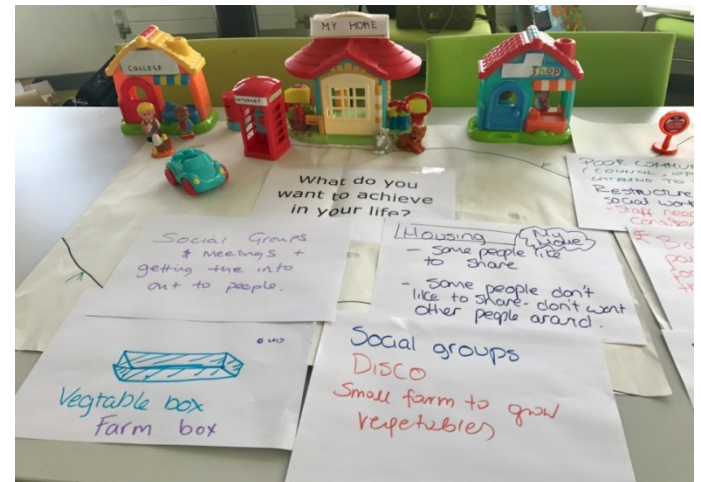
Engagement so far...

- 2 events with providers on the Framework Agreement
- Two social work team meetings



Engagement so far...

- Learning Disabilities Partnership Board
- 3 Focus Groups – mid, east, west
 - 9 people who use the supported living services
 - 3 social workers
 - 7 parents of people who use the service
 - 6 supported living staff members



What we have found out so far...

- Information and advice – we need easy to understand information on support, community activities and housing



- Support – we need support that is person centred, outcome focused and helps people to be independent in their community



What we have found out so far...

- **Housing** - we need a range of housing options such as Supported Living Schemes (e.g. Hendra Parc) and Shared Ownership



- **Funding** – support needs to be as efficient as possible, achieving value for money and making best use of personal budgets



- **Co-production** – we need to work together to plan what services we need in Cornwall



doing things differently

WORKSHOP



Time for some work!!



Commissioning Intentions

- Info, Advice and Guidance
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AIM: Improve outcomes for vulnerable people through enabling control, personalisation and independence

COMMISSIONING INTENTIONS

•BENEFITS

INFO, ADVICE AND GUIDANCE:
Easy to understand and accessible information, advice and guidance is available

- Will support people to navigate the health and social care systems
- Will enable people to make informed decisions about their care
- Will empower people to develop community assets and alternative solutions to care in their locality

PARTNERSHIP SOLUTIONS:
Commission services that work in partnership to develop the market to deliver solutions that maximise independence and enable individuals.

- Will recognise what people can do rather than what they can't and enable people to use their own assets, eg. family, friends, community support
- Will encourage diversity of services, use of technology and innovation in the marketplace
- Will ensure multi-agency joint working delivers support services that meet the evolving outcomes and goals of individuals receiving services
- Will recognise good practice and positive outcomes for people

WHOLE SYSTEM SOLUTIONS:
Commission services that prevent admission to hospital and support safe and timely discharges that ensure care is available in the right setting at the right time.

- Will improve communication across the health and social care system
- Will improve timely access to health and social care services in the community
- Will enable easier application of flexible support levels to meet fluctuating needs of individuals
- Will improve transfer of knowledge and skills to care staff in the community

BUSINESS SERVICES: Health and social care contracts and business systems will be robust, enable collaborative working and support delivery of the Commissioning Intentions and System Delivery Models

- Will use technology and resource effectively, to support business functions
- Will improve market development and sustainability
- Will improve local knowledge and community resilience
- Will improve cross-sector consistency, alignment and performance

FUNDING: Funding is maximised across the whole system enabling domiciliary care provision to offer best value for money

- Will support people to take control their own personal budgets and care solutions
- Will support people to have more choice about care solutions
- Will ensure expectations of service provision are realistic, well managed and achievable.
- Will support financially sustainable diverse service provision
- Will support workforce recruitment and retention
- Will ensure support in the community offers the best value solution.

Thinking Differently – the challenges

- **Time and Task to Outcomes based support services**
 - How? What's needed?
- **Payment Approach for Outcomes**
 - If not an hourly rate - How?
- **Areas/Localities**
 - How do we reach everyone and meet expectations?
- **Workforce Challenges**
 - Recruitment and Retention



Next Steps.....

Domiciliary
Care

Focus Groups – to detail;

- *Co-production in Support Planning;*
- *Payment approaches;*
- *Geographical delivery;*
- *Responding to Demand.*

Developing the Operating Model

Developing the Service Specification

Market Update.

Supported
Living
Services-
working age
adults

Engagement & Co-Production with all key stakeholders to develop & influence:

- Needs analysis , gaps & opportunities
- Develop service delivery approaches- mixed market providing choice & flexibility to meet range of needs
- Develop service specification
- Communication plan

