DRAFT
Health and Social Care Prevention Services

Strategic Commissioning Intentions 2018 - 2022

V0.4
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1. Introduction

The Strategic Commissioning Intentions for Health and Social Care Prevention Services describes the local approach to commissioning that will promote wellbeing and support independence over the next four years. The commissioning intentions consider how we will work with local communities to improve the quality of life and opportunities available for people with low level support needs in Cornwall.

The key aims of the Health and Social Care Prevention Services are to:

- prevent, reduce and delay the need for adult social care services
- reduce avoidable admissions to hospital
- support timely discharge from hospital
- reduce homelessness

The commissioning intentions have been developed with a range of health and social care commissioners, service providers and other professionals in Cornwall. The intentions draw on evidence including needs data, a review of the current preventative contracts and engagement with service providers and people who use services. Further information can be found in the Evidence Base for Health and Social Care Prevention Services.

The redesign of services will be aligned to the Shaping Our Future overall strategy for prevention (Cornwall’s Sustainability and Transformation Plan) and co-designed as much as possible. Interventions will follow an asset based approach to self-support and make best use of existing community resources.

In scope: Cornwall Council and NHS Kernow will commission targeted interventions aimed at people with the following needs:

- learning disabilities and/or autism
- physical health (including mobility issues, long term conditions and HIV)
- mental health and emotional wellbeing
- sensory impairments (including visual and hearing)
- memory and cognition (including dementia and acquired brain injury)
- substance misuse
- social isolation
- homeless with complex needs

Out of scope: It is essential that all preventative, care and support and housing services are seen as a component of a whole system approach to the provision of care and support, from low level early intervention services to residential care homes. However, this document does not cover strategic commissioning intentions related to:
- Residential care and nursing homes
- Home care (domiciliary care) and supportive lifestyles
- Intermediate care and reablement
- Housing based care and support solutions, including extra care, supported living and shared lives
- Community solutions, including day services and short breaks
- Services for children and families, including homeless families and homeless young people
- Services meeting statutory advocacy duties

Commissioning intentions related to these services are set out in separate documents that can be accessed on the Cornwall Council website.

2. Demand and Strategic Direction

The Evidence Base for Health and Social Care Prevention Services provides detailed information regarding population needs data and key legislative, research and guidance documents; as well as the key themes from engagement and consultation. A summary of the key points relevant to these commissioning intentions can be found below.

**Population Needs Data**

The key facts from the population needs data are as follows:

- The total population of people aged 65 and over is predicted to increase by about 33% by 2030. This is predicted to result in an increase in people aged over 65 years with additional needs.

- The Council are developing a three stage conversation model for Adult Social Care: ‘3 Conversations Cornwall’. During the trial of the 3 Conversations approach, 75% (just over 1,000) of conversations started were ‘Conversation 1 – Listen and Connect’ where people were provided with information and advice and/ or connected to available community resources. Approximately 20% (200 people) of these required support that could potentially be picked up by the local community in relation to the following:
  - general info and advice
  - benefits/ money
  - housing
  - social isolation
  - hospital discharge/ frequent users of emergency services

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1 Projecting Older People Population Information (POPPI) accessed July 2016

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- work/volunteering/activities in communities

- According to Public Health England\(^2\), priorities in Cornwall are reducing smoking, physical inactivity, unhealthy diets, excess alcohol, and lack of social connections.

- 68 individuals were reported as rough sleeping in 2017 compared to 99 reported the previous year.

- A public survey, community and provider events took place between late 2016 and early 2017 to inform Shaping Our Future. Empowering people and asking them to take on more responsibility for their health and wellbeing was stated as a priority by the residents of Cornwall.

**Legislation, Research and Guidance**

The key themes from the review of relevant legislation, research and guidance documents are as follows:

- According to the Care Act 2014 services, facilities or resources need to be provided or arranged that help an individual avoid developing needs for care and support by maintaining independence and good health and promoting wellbeing.

- The Homeless Reduction Act is new legislation being enacted in April 2018 that will increase the statutory duty for the prevention of homelessness to local authorities. Based on the introduction of a similar duty in Wales in 2015, local authorities have been advised to prepare for an increase in applications of approximately one-third.

- The Forward View\(^3\) describes intentions to develop evidenced-based action plans to prevent health conditions from developing and investing in the voluntary and community sector.

- The Five Year Forward View for Mental Health\(^4\) includes the following priority action for the NHS by 2020/21: ‘Promoting good mental health and preventing poor mental health– helping people lead better lives as equal citizens’; including creating ‘mentally healthy communities.’ A Mental Health Local Delivery Plan is being developed to take this forward in Cornwall.

- Rights, independence, choice and control, health, work opportunities and inclusion in local communities need to be promoted for people with a learning disability, autism, physical disability, mental health needs and other disabilities. This includes targeting activities to help

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higher risk and vulnerable individuals to live healthier, more independent lives.

- There is growing evidence demonstrating the impact that loneliness and social isolation can have on people’s physical, mental and social health.

- There are two approaches to homelessness services: the traditional supported accommodation pathway and the Housing First pathway. The Housing First model bypasses transitional accommodation by placing the most vulnerable homeless people directly from the street into independent tenancies with tailored support, without insisting that they engage in treatment. There is evidence of a need for both pathways.

- Joint commissioning with health, public health and other public services should take place where appropriate.

- Work needs to take place with the voluntary, community and social enterprise (VCSE) sector in order to build community resilience and make use of community assets.

**Local Strategic Context**

**Cornwall Council Strategy**: A summary document Our Aims for 2017\(^5\) has been developed providing a clear and concise sense of what we are endeavouring to achieve over the course of the year to deliver the Council Strategy and improve the areas that are most important to residents. The prevention commissioning intentions will support delivery of the Council Strategy as follows:

- Engaging Our Communities – we will enable and empower residents, town and parish councils plus the voluntary, community and local business sectors to play an active role in identifying local needs and assets, gaps and barriers to residents supporting each other, priorities for the Council and how to better connect people to community resources

- Healthier and Safer – we will protect the most vulnerable and ensure everyone has the best possible opportunity to improve their physical and mental wellbeing and stay safe through offering low level support to people with additional needs and links to community assets

- Efficient, Effective and Innovative – we will identify, design and adopt innovative approaches to funding, technology and assets to enable us to meet future financial challenges and deliver services in the most efficient and effective ways; including using online platforms to help us to understand need and allocate funding at a local level to prevent social isolation

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\(^5\) Cornwall Council (2017) *[Our Aims for 2017: A summary of our business plan to help deliver a sustainable Cornwall]*. Cornwall Council.
**Shaping Our Future:** Taking Control, Shaping Our Future⁶ is a summary of the Sustainability and Transformation Plan (STP) for Cornwall and the Isles of Scilly. This programme of work known as ‘Shaping Our Future’ is the number one priority for everyone working in health and social care in Cornwall. Shaping Our Future has three aims:

- Improve the health and wellbeing of the local population
- Improve the quality of local health and care services
- Deliver financial stability in the local health and care system.

Commissioning preventative services will support the priority actions through delivering:

- Better low level support and opportunities for people with mental health problems and long term conditions
- Targeted lifestyle advice and information for people with additional needs to self-support and self-manage their own health and wellbeing

**3 Conversations:** The Council are developing a three stage conversation model; the intention is that this will become the way all Adult Social Care staff work with residents in the future. A key aim is to connect people to existing resources within the community and support people to be as independent as possible to prevent, reduce and delay the need for formal care services. The prevention services will help to shape the resources available within local communities to ensure that peoples’ needs are being met.

**Homelessness and Rough Sleeper Strategies:** Cornwall Homelessness Strategy 2015-2020⁷ and Rough Sleeping Reduction Strategy 2017-2020⁸ set out our plans to:

- Tackle the causes of homelessness and wherever possible prevent its occurrence
- Support homeless households and ensure that there is sufficient accommodation available for those who do become homeless
- Prevent rough sleeping and support rough sleepers, including those who have become entrenched to a life on the streets.

The prevention commissioning intentions will support these aims, by providing support to rough sleepers and to homeless people with complex

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⁷ Cornwall Council (2015) *Our Homelessness Strategy for Cornwall.* Cornwall Council

needs, including outreach support and supported accommodation; offering a pathway of support to independent living.

**Engagement and Consultation**

Engagement and consultation was completed during 2016 and 2017 with service providers, service users, commissioners and other stakeholders. The key themes have been summarised below (further information can be found in the Evidence Base):

- **Provide information and advice** – ensure that information and advice is available, accessible and visible

- **Commission support services** - that are outcome focused and person centred. Give service providers flexibility in relation to meeting individual needs, support hours and length of stay. Consider how to allow and encourage collaborative working - contracts that allow for partnership arrangements between providers, shared risk/shared reward. Ensure that services are commissioned that provide the following:
  - support to help vulnerable people with independent living and leading an ‘ordinary life’; including help with form filling, self-management and links to community resources
  - support before/ during/ after discharge from hospital with practical tasks and links to community resources
  - assertive outreach support and direct access crisis accommodation with support needed for rough sleepers
  - supported accommodation for homeless people with complex needs; to prioritise people who are unable to access independent accommodation due to chaotic/ high risk behaviour

- **Monitor individual outcomes** - commission services that support vulnerable people to achieve the following individual outcomes:
  - Access appropriate housing
  - Manage money and access benefits
  - Access education, employment and training
  - Make links to local community activities and projects
  - Self-manage health and wellbeing; including physical health, mental health, wellbeing and wellness, self-harm and harm to others and social interaction
  - Access other services when needed and make informed decisions

- **Encourage community resilience** – support local communities to understand what is needed and wanted and to develop local projects to ensure social inclusion of local residents. Consider offering match
funding through an online platform to encourage communities to invest in local project.

3. Current Service Provision

Adult Social Care Prevention

Cornwall Council is the lead commissioner for the Adult Social Care (ASC) prevention contracts that are coming to an end 31 March 2019 at the latest:

- Wellbeing services (for all client groups) - the services result in a high number of unpaid support hours through the use of volunteers. (Two of these contracts are jointly funded by the Council and NHS Kernow)
- Long term supported accommodation for people with learning disabilities, autism and/ or mental health needs for people who may or may not have eligible needs
- Complex needs supported accommodation, community outreach and street outreach support for people who are homeless/ rough sleeping with complex needs
- HIV community support for people living with HIV

ASC also has a contract for self-advocacy for adults with learning disabilities and/ or autism that will come to an end 31 March 2019 with an option to extend for a further 12 months.

Other Provision and Projects

There are several projects that are undertaking work that is linked to this prevention project that need to be taken into consideration:

- Projects set up to look at how to map community assets, better link people to local communities and develop social prescribing; including projects that form part of the prevention theme under Shaping Our Future led by Public Health
- The Three Conversations Project aimed at changing the approach to support offered to people who approach Adult Social Care; particularly in relation to ‘Conversation 1 - Listen and Connect’. This includes connecting people to available resources and services in the community to support people to continue to live independently.
- Projects aimed at the development of social care accommodation, the review of community equipment, the modernisation of day services and short breaks and the development and procurement of new contractual arrangements for home care and supportive lifestyles by Adult Social Care and NHS Kernow under the Transforming Adult Social Care (TASC) programme.
- Work that is taking place to review services for people with mental health needs, including employment support and crisis
accommodation; by NHS Kernow and Adult Social Care under the Mental Health - Local Delivery Plan

- Projects and services that have been set up to reduce rough sleeping, prevent homelessness and address housing needs in Cornwall; by Strategic Housing and Cornwall Housing under the Rough Sleeper Reduction Strategy, the Homelessness Strategy and the Housing Framework
- Projects aimed at providing support with relocation and information and advice on accessible housing options and adaptations, including the development of Independent Living Centres; as well as addressing the housing needs of wheelchair users who are registered on Homechoice (social housing register); by Strategic Housing, Cornwall Home Solutions, Cornwall Housing and Adult Social Care

4. The Benefits of Prevention Services
The benefits of investing in prevention services are as follows:
- The need for formal health and social care services is prevented, reduced and delayed by maximising independence and supporting people to manage their needs within the community
- Support is available to help reduce avoidable admissions to hospital, to help facilitate timely and safe discharges and prevent unnecessary readmission
- People have improved quality of life, safety, wellbeing, independence and choice including living in their own home with access to local resources and facilities
- There is proactive facilitation of an asset based approach to self-support, to strengthen community resilience and maximise independence
- Homelessness is reduced by providing a pathway of support leading to independent living
- People are able to understand and be involved in decisions made about them
- Personalisation is improved through co-production of person centred, outcome focussed, flexible services that build social capital
- Services are provided within the available resources whilst also meeting statutory responsibilities
- Services are delivered in partnership with health and social care commissioners and practitioners, health and social care providers, Voluntary, Community and Social Enterprise Sector (VCSE), families, carers, communities, service users and the public.
5. Our Commissioning Intentions

**Enhance Information and Advice**
- Ensure that people are supported to understand information and make informed decisions
- Ensure that the information portal is accessible & up-to-date
- Ensure that the information portal is linked to other relevant information
- Promote information portal

**Stimulate Community Resilience**
- Develop initiatives to work with local communities to better understand needs and resources
- Offer match funding for community led projects
- Utilise voluntary sector in service delivery to link people together to offer support at a local level

**Empower Independence**
- Ensure that people are supported during a crisis period with financial sustainability
- Ensure people are supported to develop independent living, self-management and self-advocacy skills
- Offer non-statutory advocacy support to ensure access to universal services
- Support people before, during and after discharge from hospital/ other temporary placements with practical tasks and making links to community resources

**Strengthen Homelessness Pathway**
- Offer assertive outreach support for rough sleepers living on the streets and entrenched rough sleepers living in Housing First properties
- Ensure crisis accommodation with support is available offering direct access provision to rough sleepers
- Ensure tolerant supported accommodation is available for people who are homeless with complex needs
- Prioritise people unable to access accommodation in the community due to high levels of need/ risk
6. Our Delivery Plan
This sections sets out more detail in terms of the services to be commissioned to meet the commissioning intentions.

<table>
<thead>
<tr>
<th>Commission Wellbeing &amp; Social Inclusion Services</th>
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<tbody>
<tr>
<td><strong>Stimulating Communities Project</strong></td>
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<tr>
<td>• Help communities to help themselves to reduce loneliness and social isolation</td>
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<tr>
<td>• Develop initiatives to work with local communities to better understand what resources are available and needed in relation to loneliness and social isolation; how to support communities to identify gaps and develop required resources; and how to better connect people to available resources.</td>
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<tr>
<td>• Offer match funding for community led projects aimed at reducing loneliness and social isolation within local communities.</td>
</tr>
<tr>
<td>• Link to the Council’s Community Resilience service in terms of promotion of funding and local project opportunities.</td>
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<tr>
<td>• Link to other projects regarding community asset mapping through Shaping Our Future (STP for Cornwall and the Isles of Scilly).</td>
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| **Crisis Service**                               |
| • Support for people in crisis in relation to moving towards and achieving financial stability |
| • For people who are economically inactive as defined by Department of Work and Pensions with needs related to: |
|   o learning disability and/ or autism |
|   o physical health (including mobility issues, long term conditions and HIV) |
|   o mental health and emotional wellbeing |
|   o sensory impairments (including visual and hearing) |
|   o memory and cognition (including dementia and acquired brain injury) |
|   o substance misuse |
|   o multiple/ complex needs |
| • Understand why the person is presenting in crisis and offer support to the service user as appropriate: 1) to signpost for benefits and crisis payments; 2) to identify a system of support and interventions to address the wider needs of the individual where appropriate, with the aim of moving them to self-sustaining financial |
| Supporting Independence Service | - One to one and group support to develop independent living skills and self-manage health and wellbeing.  
- Specialist workers and/or partnership working required to ensure that people with different needs are supported appropriately:
  - learning disabilities and/or autism
  - physical health (including mobility issues, long term conditions and HIV)
  - mental health and emotional wellbeing
  - sensory impairments (including visual and hearing)
  - memory and cognition (including dementia and acquired brain injury)
  - substance misuse
  - multiple/complex needs  
- Initially offer information and advice and support to self-advocate; non-statutory advocacy to be offered as part of the service delivery model when required  
- To help people access services and support networks; including but not limited to support to: make links to other services/support networks, utilise ‘self-help tools’, fill in forms, access transport and attend appointments as required  
- Volunteers to be utilised within service delivery as appropriate. Expected to work closely with local communities to help towards building better community resilience and encouraging community participation. |
| Welcome Home Service | - Support before, during and after leaving hospital or a temporary care home/reablement placement for typically no more than 6 weeks to ensure a smooth transition home
  - practical support with basic needs before leaving & on initial arrival home e.g. housing issues, |
shopping, meal preparation, light domestic task
  
  o support to assess for hazards in the home, the potential need for equipment and housing adaptations and make links to relevant services for support e.g. Home Solutions
  
  o if homeless or unable to return home due to complex needs, provide support with considering options and making links to relevant services e.g. Housing Options
  
  o help individuals to arrange their transport home

- Provider to ensure that the service is linked to hospital discharge teams within Treliske and West Cornwall; Community Hospitals; Derriford.
- Volunteers to be utilised within service delivery as appropriate. Expected to work closely with local communities to help towards building better community resilience and encouraging community participation.

## Commission Homeless with Complex Needs Support Services

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<th>Service</th>
<th>Details</th>
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</table>
| **Assertive Outreach Service**       | • Assertive outreach support for people who are rough sleeping to help them to access accommodation and other services which meet their support needs; including but not limited to housing, benefits and health services
  
  • The service will respond within forty-eight hours to a notification that a person is rough sleeping in Cornwall by proactively and persistently attempting to engage with the person. There will be an assertive approach to provision and the provider will proactively make contact with people who are rough sleeping in Cornwall.
  
  • The service will include support for the Housing First model in Cornwall and will ensure that people moving into identified properties continue to receive support as appropriate |

| **Crisis Accommodation Service**     | • Direct access accommodation with support for typically no more than six weeks for people who are rough sleeping and/ or homeless with complex needs
  
  • Support to access accommodation and other services which meet their support needs; including but not |
### Supported Accommodation Services

- Supported accommodation for homeless people with complex needs related to substance misuse, mental health, offending behaviour and other needs for typically no more than two years
- Providers to prioritise people who are unable to access accommodation in the community due to high levels of risk/need
- Services required to be tolerant to substance misuse, mental health and offending behaviour within the legal framework and take a harm reduction approach to support individuals
- Providers required to ensure that able to meet the needs of different people within provision e.g. females, people with mental health needs only, transgender people
- Support hours to be used to support people living within supported accommodation, as well as people that are in transition either into the accommodation or from the accommodation into the community

### Other Strategic Intentions

#### Information and advice

- Ensure existing information portal for care and support is accessible, up-to-date and visible in relation to prevention services
- Commissioning team to link to review of current contract for information portal for care and support being undertaken by Business and Administration team
- Commissioning team to link with project on developing a model for Independent Living Centres (ILCs)
- Commissioning team to link to review of information and advice offered by Citizens Advice Cornwall
- Ensure input into projects aimed at developing information and advice in the future; through the Shaping Our Future prevention theme

#### Social prescribing and asset mapping

- Link into projects set up to look at how to map community assets, better link people to local communities and develop social prescribing; including
<table>
<thead>
<tr>
<th>Project Area</th>
<th>Intention Description</th>
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<tbody>
<tr>
<td>Assistive technology, equipment and adaptations</td>
<td>- Link into projects aimed at developing equipment and assistive technology to support people to live independently; through the TASC Community Equipment, Social Care Accommodation and Home Solutions projects</td>
</tr>
<tr>
<td>Accommodation based support for people with eligible needs</td>
<td>- Link into projects aimed at developing accommodation and care and support for people with eligible social care needs; through the TASC Social Care Accommodation and Home Care and Supportive Lifestyles projects</td>
</tr>
<tr>
<td>Mental health support</td>
<td>- Link into the development of the Mental Health Local Delivery Plan/ other commissioning plans in particular in relation to: the development of employment support; crisis accommodation and supported accommodation for people with mental health needs; and ensuring that people with needs related to substance misuse are able to access appropriate support for mental health</td>
</tr>
</tbody>
</table>
| Rough sleeping and homelessness                  | - Link into other services and projects under the Rough Sleeper Reduction Strategy and the Homelessness Strategy; including No First Night Out support service (Nos Da Kernow); housing options caseworker for rough sleepers; and the development of a multi-disciplinary team for case management of people with multiple complex needs  
- Work with Strategic Housing, Cornwall Housing and providers to understand the impacts of the changes to Housing Benefits and the implementation of the Homelessness Reduction Act |
Prepared by:

Adult Transformation and Commissioning Service
Children, Families and Adults Directorate
Cornwall Council

And

NHS Kernow Clinical Commissioning Group

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