

# Market Position Statement 2019 - 2022

'Meeting Our Shared Challenges'

Solihull MBC
Adult Care & Support

Produced: May 2019 Updated: November 2020

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# The Solihull Market Position Statement (MPS)

## Introduction

Our Market Position Statement (MPS) is designed to contain information and analysis of benefit to providers, and potential providers, of social care and support services for adults in the borough of Solihull.

It is intended to help identify what the future demand for care might look like, and to act as a starting point for discussions between the local authority and those who provide services.

This Market Position Statement is the basis for strategic commissioning decisions and will be reviewed and refreshed quarterly.

It is intended to help providers to plan for the future, informing business choices such as investment in capital or personnel.

It contains information concerning:

- Solihull's current and future demography.
- Solihull's current service provision.
- The Council's intentions as a facilitator of care and support for adults.
- The Council's vision for how services might respond to the changing needs for care and support in the future.
- How providers can work with us to achieve our vision.

# **Promoting Wellbeing**

The Care Act (2014) describes Councils' responsibility to promote wellbeing. This is a broad concept, defined in the Act by reference to the following areas in particular:

- Personal dignity (including treatment of the individual with respect).
- Physical and mental health and emotional wellbeing.
- Protection from abuse and neglect.
- Control by the individual over day-to-day life (including choice about how care and support is provided and the way it is provided).
- Participation in work, education, training or recreation.
- Social and economic wellbeing.
- Domestic, family and personal.
- Suitability of living accommodation.
- The individual's contribution to society.

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This responsibility can be met in a wide variety of ways, many of which extend far beyond traditional social care provision. The Council welcomes and encourages the development of services that promote all aspects of personal wellbeing, and aims to work closely with service providers to ensure effective use of public resources, including its own services.

#### **Hearing from You**

Throughout this document we will be asking to hear from you where you have ideas on different aspects of service delivery.

For further discussion on any feedback you have on the areas raised in this Market Position Statement, you are invited to book a personal appointment to discuss with us, or can send us feedback via the contact details below.

To arrange an appointment please contact the Commissioning Team via:

**Phone:** 0121 704 6505

Email: <a href="mailto:commissioningteam@solihull.gov.uk">commissioningteam@solihull.gov.uk</a>

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# **Covid-19** and Future Care Models

Covid-19 has and continues to have a major impact on all areas of the adult social care market, and is likely to have longer term consequences for the future delivery of care.

## **Short Term Impacts on the Care Sector:**

- Workforce shortages increased due to a combination of sickness, self-isolation, and shielding requirements as a result of Covid-19, however, there is increasing recognition that strong approaches to social care recruitment at this time of wider economic weakness, may really benefit the sector.
- The demand for qualified nurses in the health sector has further increased the shortage of appropriately skilled staff for social care.
- Personal Protective Equipment (PPE) requirements have increased significantly, increasing the costs of care delivery. The government has committed to supplying the additional PPE required by care providers to them for free until March 2021.
- The ability to see family, friends and attend activities outside the home was severely limited. For people with care and support needs, this compounded feelings of marginalisation, with more isolation and loneliness than usual. This impacted on many people, and continues to affect wellbeing, including that of family carers who take up the strain when services are disrupted. Different ways of providing day activities have been trialled, in order to keep people with care needs stimulated and connected when their usual day activities have been unable to open.
- There has been increased national scrutiny and oversight of what is happening in the sector, particularly in care homes.
- There has been a decline in admissions to residential and nursing care, as families have made different choices.
- The Adult Social Care Covid Winter Plan has drawn on the learning from the first wave of Covid-19 and creates an expectation of more support for carers and the social care workforce, with effective use of the Infection Control Fund. The local authority, working in partnership with the NHS, providers and the voluntary sector, is required to produce a local winter plan for the Department of Health and Social Care, demonstrating how it will enhance system capacity to cope with usual winter pressures and continuing risk of Covid-19.

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# **Longer Term Impacts:**

- There is uncertainty about the longer term change that will result from the pandemic. It is unclear how long it will take care home populations to return to their pre-Covid level, and whether there will be a longer term impact on the choices individuals and their families make.
- PPE is likely to be required at a higher level for the long term.
- There is a renewed focus on integrated hospital discharge services that entwine community health care and social care to deliver holistic discharge support and ensure that 95% of discharges from hospital go straight home. This means an increased need for community providers who can deliver responsive short term support.
- The use of digital options for clinical consultations, social care assessments and reviews, contact with wider friends and family for care homes residents and to deliver day activities are likely to continue to be the needed on a long term basis.
- At present, we are aware that the government has stated that it will re-look at the funding model for care, but there are no further details available on this at present.

#### We would like to understand from you:

- ➤ How demand for your services was impacted by Covid's first wave, and how that is changing as over time.
- How plans for your business changed in order to be prepared for further waves of the virus or lockdowns.
- Where you think there is an opportunity to deliver services differently long term, in order to offer more resilience to the delivery of care and support.
- > How you can support responsive short term community services which enable people to have same day hospital discharges.

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# The Solihull Approach

# Solihull Council is pleased to share its core principles:

#### **Our Purpose**

'Great Lives and Great Services': To be an organisation that improves lives by delivering great services, either directly or in partnership with others.

#### **Our Vision**

Where everyone has an equal chance to be healthier, happier, safer and prosperous through growth that creates opportunities for all.

#### **Our Values**

Ambitious, open, honest, and keeping our promises.

#### Our Market

Solihull Council believes that we need a varied and diverse local market for care and support that offers genuine choices and options to local people. We welcome the participation of both existing and new providers of services, including those who do not currently work in the borough.

This Market Position Statement (MPS) plays an important role in helping to achieve this aim. We aim to share through this document important information about the borough, the people who live here, and their social care needs. It indicates both the current provision and availability of services, and points towards the services people are likely to need in the future. It describes trends in the market for social care and shows the Council's intentions for future commissioning arrangements.

In common with other parts of the country we are facing considerable challenges as a consequence of

- increasing demand for care arising from the combination of an ageing population, and a growing number of people with complex care needs.
- reductions in local government funding from central government,
- increases in care costs due to a range of factors, including increases in the National Living Wage.
- workforce shortages (made more challenging by Covid-19).
- Covid-19 and the continuing uncertainty caused by living with the virus.

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We recognise that our best prospect for success in improving the quality of life for local people is to work alongside our providers to address these together.

To respond to these challenges, we aim to work creatively with all our partners to develop cost effective solutions that can both prevent and reduce the need for formal care, and enable people to get the right services at the right time when they do need care and support. We pose the following and welcome the response of providers in delivering answers and solutions:

- Are we getting the best outcomes for people, and achieving the greatest impact with the money that we are spending?
- ➤ Where is our spending not achieving best value? What are the consequences of this on the health and care system, and how could we do better?
- What measures would improve quality consistently across social care provision?
- What must we do together to build a sustainable workforce by attracting people to work and build their career in the care sector?
- What restricts creative solutions to the challenges we face, and what could the Council offer to assist providers?
- What more could be done in the adult social care sector to address health inequalities and what is the particular contribution of providers?

## **Strengths-based Approach**

A strength-based approach to working with people who have care and support needs is as much about understanding what they can do as what they cannot. The core values and themes of strengths based practice are:

- Empowering the person to regain control of their own life.
- > To support them to achieve or regain independence.
- ➤ To support the person to understand and exercise choice.
- ➤ To draw on the assets available through family, community and neighbourhood connections.

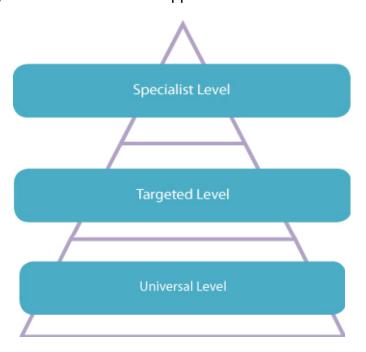
Strengths-based approaches look at the whole person and the outcomes they want to achieve to improve their lives. Working with people who have care and support needs in a strengths-based way means looking to the resources that a person has to support them. In order to overcome the difficulties they may be experiencing and to help them to achieve the outcomes they hope for, we should first consider their personal strengths, their networks and communities.

#### Solihull's Offer

Our aim is to work with providers of social care services to enable people to remain independent and in their own homes and communities for as long as possible. We need partners across sectors who can help deliver Our Offer to the people of Solihull. The Solihull 'Offer' explains Solihull Metropolitan Borough Council's approach to its Care Act obligations and how we will serve our residents

(https://www.solihull.gov.uk/Portals/0/StrategiesPlansPolicies/SocialCare/ASCofferbooklet.pd f).

The triangle below represents our aim to provide clarity about our offer for support to people with varying complexities of need. This ranges from universal support available to all, rooted in our local communities, to targeted interventions for those who require more individual approaches to helping them maintain or regain independence, through to specialist support for those with the highest level of need for support.



#### We will

- support and encourage people to access mainstream facilities in the community, including digital opportunities to engage with services.
- > offer information, advice & support.
- support people to build on their strengths and the assets available in their local communities.
- provide targeted help to people at the right time, to prevent & reduce the need for complex services.
- improve digital access to services, embracing technology enabled care, innovation and on-line services.
- work with the market to ensure the continued availability of a variety of quality

- accommodation options which provide value for money and choice.
- develop services that help avoid unnecessary admissions to hospital or residential care, and enable people to return home smoothly and safely from hospital.
- support people with complex needs to live as independently as possible, with choice
   control over their lives and the services they access.
- > aim to prevent individuals and families from becoming homeless wherever possible.
- work with Public Health to support care and support providers in responding to the challenges of Covid-19.

#### We would therefore like to work with providers who

- ensure that the people that they are supporting, with their family/carers, are at the
  centre of everything that they do, involving them in the planning and delivery of their
  care and listening to their feedback to enable continued development.
- take a strengths-based approach with the people that they are supporting, drawing on their personal, family and community assets to help build resilience, maintain their skills for independence and thereby reduce their dependency and need for services.
- share our aim to intervene early where personal wellbeing is compromised to prevent deterioration, to support recovery and promote independence.
- want to help people live successfully in their own homes for as long as possible.
- have a keen interest in developing more innovative solutions to people's care and support needs.
- want to work with people who buy their own care using a direct payment or personal budget.
- can demonstrate the impact of their services on the outcomes they help people to achieve, and by use of clear quality standards.
- are open and transparent about the costs of providing services and are committed to providing value for money.
- have good terms and conditions for their staff, reflective of the ambition to improve recruitment and retention of staff who deliver good quality care and support.
- offer demonstrable social value from the way they work to benefit the borough (for example by demonstrating how they can reduce negative environmental impact, or support young adult care-leavers).

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# **Challenges for the Borough**

## Solihull's Key Statistics

- Over 210,000 people live in Solihull. This includes 150,000 adults in about 85,000 households.
- ➤ There are around 45,000 people over 65, including 6,500 over 85.
- ≥ 25,000 people live on their own, almost half of whom are over 65.
- Around 25,000 people are providing regular unpaid care and support to family members, friends or neighbours, and around one in three carers are providing over 20 hours of care a week.

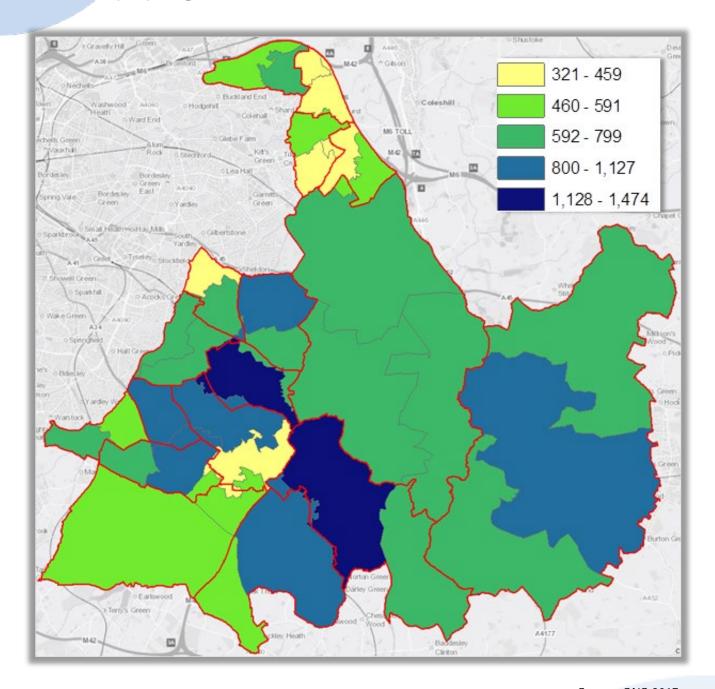
#### **Health Inequality**

- ➤ Life expectancy in Solihull is increasing. For men its 80.4 years, and for women its 84.2 years. It is above the average for England.
- ➤ However, for the most deprived 10% of the borough's population, inequality in life expectancy is increasing. For men, the life expectancy gap between the most deprived and the most affluent parts of the borough is currently 12.8 years and for women 11.1 years.

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# **Local Demographics: Headlines**

# Number of people aged 75+ in Solihull



Source: ONS 2017 Based on Middle Layer Super Output Areas (MSOA)

The number of **older people** in Solihull is growing rapidly, and at a much faster rate than in England as a whole. By 2036, one in four of our population will be aged over 65 and one in twenty will be aged over 85.

The above map details the distribution and density of population of people aged 75+ in the different wards of the borough. Over the past ten years, the improved health has meant that Solihull's 85+ population has grown by more than 50%, and will continue to increase

significantly over the next decade, particularly in the south of the Borough.

Demand for care and support services in Solihull is anticipated to increase significantly over the next decade and beyond. As people are living to advanced years, they are more likely to be living with health needs and conditions associated with an increased risk of disability and limited mobility, especially for those aged over 85.

We therefore expect over the medium term significantly greater numbers of

- people living alone with an increasing risk of social isolation, loneliness and depression.
- people with dementia, other long-term conditions, and with multiple and complex needs.
- unpaid carers, looking after family members, friends and neighbours, many of whom will be older people who may have their own health or care needs.

The number of adults with a **learning disability** accessing care & support services is expected to rise due to welcome improvements in life expectancy for people with learning disability. It is likely that there will be a greater proportion of young adults transitioning to adult services who also have complex needs.

#### The Commissioning Challenge

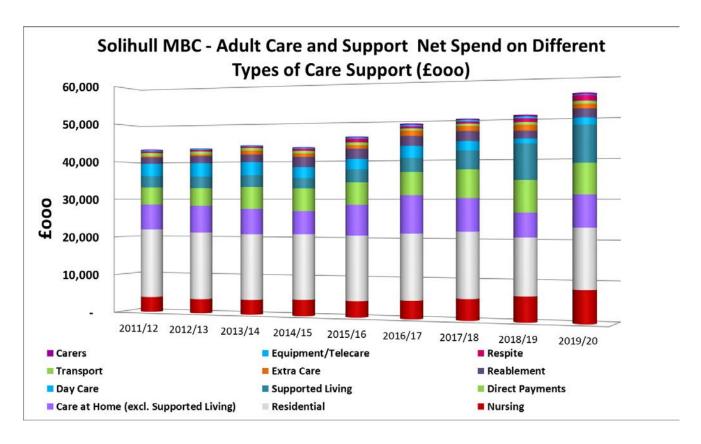
Commissioning the same forms of care, in the same places and in the same way, will not be possible in the future. We need to be open to a radical change in service provision and options. Covid-19 has highlighted some of the risks and challenges faced by providers, and as commissioners we must respond to these in a way that is supportive and recognises our role in maintaining a sustainable and resilient care market.

The trends in spending have been:

- ➤ Pre-Covid, a relatively consistent level in residential and nursing care overall but with a greater focus on quality, affordable nursing care and dementia specialist nursing when it is genuinely needed. There have been challenges in improving the quality of nursing provision in the borough, linked to the recruitment and retention of a skilled nursing workforce. This is an area where we want to see improvements over this MPS.
- The number of active nursing placements commissioned by the Council has been rising steadily over the previous 3 years at an average rate of two per month (total across younger and older adults). Covid has impacted on overall placement numbers, however the rate of admission has increased as a result of a combination of hospital discharge policies during the pandemic and the impact of Covid on need levels. It is too early to say whether the previous admission trend will resume as the situation stabilises.
- ➤ Community based care spend has been increasing, particularly supported living. The overall increase has been driven by younger adults, particularly those with learning disabilities, though there are some increases across all groups. This is partly a

consequence of the transfer of the former Independent Living Fund to Local Authorities, and also reflects the increased numbers of complex packages of care that are managed in the community. Solihull has been very successful at keeping people with complex needs supported in their own homes rather than in in-patient facilities, and wants to maintain this position.

Overall spending has increased significantly since the introduction of the National Living Wage, as this has been a major driver in the cost of affordable care.



## **Looking Ahead**

The Council has a rolling 3-year Medium Term Financial Strategy. Within this the key figures for adult social care are:

- From 20/21 £1.782m of recurrent savings over the next 3 years.
- £1.700m per year is given to adult care and support to manage inflation and demand pressures.
- Additional funding to meet the national living wage is only assumed up to the end of 2020/21 – and the impact of the National Living Wage is being closely monitored, particularly in the light of the impact of Covid-19 on the wider economy.
- The planned savings are primarily related to maximising the use of existing in-house provision and stimulating the affordable care parts of the market – particularly for residential and nursing care, and extra care.

- There is a continued focus on maintaining independence and supporting people to access community resources.
- The overall level of care being purchased by the council is expected to remain relatively stable, with the effect of preventative services meaning that the overall population increase is not expected to result in a large rise in the numbers who will receive support to meet their care needs.
- The current plans will be subject to change depending on national government policy towards adult social care, and do not assume that the one-off resources which have been provided for 2020/21 will be made available again in future years.
- Infection Control Fund allocations for Solihull for the period Oct 20 March 21 have now been confirmed, and split the funding between allocations to be passported directly to providers per bed for residential and nursing care, per user for community care providers with their offices in borough and some discretionary funding. There is currently no longer term funding settlement for any increased cost of care as a result of Covid-19 impacts.

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# What People Tell Us

#### What do people using our services think of them?

One of the ways that Councils can find out what people think about the services and support that they access is through the results of the Annual Adult Social Care Survey. In 2018-19 Solihull people who completed the survey reported that:

- Overall they are satisfied with their care and support however the level of satisfaction in Solihull is lower than that of the rest of England with Solihull reporting satisfaction rates of 88.3% against an England average of 89.4%.
- 90.4% of the 410 Solihull people who responded felt that the care and support services that they received helped them to have control over their daily lives, slightly higher than the England average of 89.1%. Solihull is in the top quartile for the proportion of clients using social care who receive a direct payment either through a personal budget or other means (joint 19<sup>th</sup> highest out of 152 Local Authorities in 2018/19). We want to ensure that people feel that they have more control over their support and want to work with the market to understand how best we can achieve this.

We work with people who use services, their families/carers and providers to develop our commissioning strategies to ensure that the services commissioned are fit for the future. We expect providers to engage with the people they are supporting and their families/carers to ensure that they are delivering the high quality of care and experience that people expect. Providers need to identify changing needs and expectations and adapt their services accordingly as this will help them to develop services that are more attractive to future customers. For example, services that people access for day opportunities.

The continued increased use of personal budgets and direct payments will lead to more people making their own arrangements for care and support. It is important that commissioners and services providers understand what people are looking for, offering choice and new ways of meeting clients' needs in line with the Solihull Offer.

#### **Carers' Views**

The Council very much values and is reliant on informal care in the support of its residents. Carers report often feeling excluded as a key partner in the delivery of care and support and this makes them feel that their contribution is not valued. We want to work with providers who value the role of carers and involve them in any decisions being made about the person that they are caring for. We are committed to demonstrating the same to improve carers' perceptions of our own work as a Council.

Solihull has 24,113 residents who identify themselves as providing unpaid care for a family member, a friend or a neighbour. We also recognise that many of our residents are supported by carers who live outside Solihull and therefore will not be counted within this

figure. Solihull has recently worked with Experts by Experience and other stakeholders to refresh the Carers' Strategy. The strategy was ready for final sign-off just before the Covid-19 pandemic and is now being refreshed and refocused to take into account that impact.

The majority of Carers for Solihull residents who responded to the national Carers Survey 2018-19 reported that they were satisfied with the services they have received in the previous 12 months (74%), above the England average (70%). Since receiving the survey results commissioners have been working with carers and the Carers Trust Solihull to identify what we need to do to support carers better and the feedback received has been used to inform the strategy action plan. The national Carers Survey which was due to take place this year has been moved to 2021 as a result of the impact of Covid-19. It is hoped that progress seen as a result of the action plan will be evident when that survey is conducted, generating a wider response and better reflecting the diversity of carers in borough.

#### **People Who Fund Their Own Care**

The Council is responsible for oversight of the social care market for all of its local population. In recent years, our focus has primarily been on provision for people funded by the Council, since this was a pressing deficit in Solihull. For those people in Solihull who are not eligible for public funding, it is more difficult to find details of the services they use (particularly for care at home), and to engage to find out their views. We have been working with the University of Birmingham to develop our understanding of the support needs of self-funders and the final report is due at the end of the year.

On a national basis, the work of the Competitions and Market Authority (Care Homes Market Study, 2017) identifies problems experienced by self-funders in accessing information and making well-informed choices about care. Our intention in Solihull is to improve our local understanding and to work with local people and providers to implement the CMA's recommendations. Therefore, we would like to work with providers in the market to improve our understanding of the market for people who fund their own care and hear more about their views and needs. This will enable us to ensure that we fully meet our Care Act responsibilities to shape the local market to meet needs.

Our commissioned information and advice services play a vital role in supporting people to better understand the choices available to them and likely financial impacts of the decisions that they make. The Council is committed to improving access for self-funders to information, advice and support that they require. We need also to shape the available provision to meet their needs, and increased efforts will be made during 2019 to find out their needs and preferences.

To gain a better understanding of the experiences of older people who are funding their own care, Solihull Council is actively engaged in a research project being led by the University of Birmingham. The research project is funded by the Wellcome Trust and is being undertaken jointly with Age UK Solihull, and aims to understand older people's experiences of funding their own care. We know that the number of older people funding their care has increased significantly in Solihull in recent years. However, there is little national research on the experience of arranging and paying for your own care, despite its growing relevance to policy

and practice. In particular, older people's own perspectives on self-funding are largely absent. We hope that this project will help inform our approach to supporting those who pay for their own care, and to help understand where their needs and preferences are not currently met by the local market.

Solihull Carers Partnership Board is fortunate to have as members a number of carer representatives who have experience of arranging and paying for the care of family members. They have helped commissioners to gain a better understanding of some of the difficulties that they face when trying to arrange care. Feedback received from carers who are funding care include:

"Just because we have savings does not mean we are better equipped to make decisions."

"Finding the right residential home for my husband is the hardest thing I have had to do in all my years caring for him."

"I am close to the limit of my savings: what happens next?"

To achieve our improved offer for people who fund their care and support the Council has established a project with a clear set of actions to achieve. These actions comprise:

- ➤ Develop an improved online information offer for people who are, or who on planning on, self-funding their care- this will be informed by the early feedback from the Birmingham University research. An initial update has been completed, and will be built on once the full findings are available.
- Further develop with Age UK and Solihull First partners the offer for those funding their own care through Community Advice Hubs, including information, advice and support and ensure that this advice is fit for purpose and consistent.
- ➤ Continue to offer drop-in advice sessions within care homes, for people who are currently self-funding their care these may be delivered virtually.
- Scope the potential for Brokerage to support self-funders, taking referrals directly from Community Advice Hubs or Connect.
- ➤ We have delivered further briefing sessions for practitioners to cover our responsibilities to self-funders, utilising an awareness of OT and how practitioners can use the online offer.

We expect the outcomes of this project to deliver tangible improvements for people who fund their care and support.

# **Our Offer to Providers**

In October 2019 we held a successful Provider Conference and planned to hold another event in 2020 after positive feedback. Instead, we need to find other ways to understand the perspective of providers, and develop the way we communicate together, sharing essential information and opportunities for new service developments. We will give you early notice of the development of new strategies that are again being adapted after Covid's first wave so that you can be involved as partners in shaping them.

- We support the Registered Managers Forum as a mutual aid group that has been a
  vital source of support during the pandemic. Further information is available from the
  Commissioning Team at commissioningteam@solihull.gov.uk
- A new regular newsletter for providers is produced by the Commissioning team to share information and publicise opportunities. This has also been a key communication method during Covid-19 to ensure that all providers are aware of the latest advice and guidance.
- We welcome comments from providers and will be pleased to have dialogue on any aspect of this MPS. We undertake to refresh this document quarterly and welcome suggestions about its content.

## Working Together to Address the Workforce Challenge

- Developing a sustainable workforce for the social care sector is a priority for the Council. We will continue to work with you to develop methods of promoting careers in care, to access funding and apprenticeship opportunities, training and development for the workforce. Suggestions of how to further deliver the workforce capacity needed for the care sector will be welcomed.
- We can offer advice and support about identifying and meeting training needs, including signposting to local/regional training providers with relevant skills and experience. We may also commission training directly to achieve a best value solution to a key area of training need for providers. Please contact the Commissioning Team for further information or suggestions.

#### **Access to Information**

- Solihull Observatory compiles a wide range of data and intelligence about the borough that can be accessed via their website, including detailed information about the borough from a number of national and local sources: www.solihull.gov.uk/solihulldata
- Our website displays the Joint Strategic Needs Assessment and other information that will be useful for providers looking to deliver services in Solihull.

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#### **Access to Wider Council Support**

Solihull Council is eager to support local businesses to establish and flourish in the borough. The Council is establishing a Community Asset Strategy that will support voluntary and community sector organisations to use council assets (our buildings and spaces) and will recognise the value to the community of Council buildings against the potential financial returns.

- The Council funds an Infrastructure Support Service aimed at supporting the
  development of local community and voluntary groups whether charities,
  community groups or social enterprises. This free support includes assistance with
  group development and funding advice. This service is provided by CAVA
  (Community and Voluntary Action).
- The Council is currently developing a The Voluntary, Charitable and Community
  Sector Partnership Strategy with Solihull's Voluntary and Community Sector (VCS).
  This will set out our future joint working plans and will set clear expectations in terms
  of what the Council will do in the future to support Solihull VCS organisations to take
  some opportunities to develop services in response to needs indicated in this
  document.
- Support for start-ups and developing businesses, including social enterprises is available through Solihull Councils Enterprise for Success programme <a href="http://www.enterpriseforsuccess.co.uk/the-programme">http://www.enterpriseforsuccess.co.uk/the-programme</a>
- The Council offers bursaries to providers for equipment, training and quality improvements. Details are available from the Commissioning Team at asccommissioning@solihull.gov.uk
- We will encourage our providers to actively consider how the delivery of their contracted services can bring wider social value, for example how they utilise local people as employees and volunteers, particularly those with disabilities or who are care leavers. We have built this commitment to social value into our procurement processes and ask providers to demonstrate social value as part of contract management.

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# **Commissioning Intentions**

In order to be as specific as possible about the detail of our commissioning intentions, there follows a summary of the current position and future intentions for the broad groups of people who are supported by the Council.

# **Prevention & Wellbeing**

The Council's vision is that everyone in the borough should have an equal chance to be healthier, happier, safer and more prosperous and our purpose is to be an organisation that improves lives by delivering great services.

The increasing demand, changing population demographics and the need to deliver services within reducing available resources require a new approach and re-design of the Council's social care and health services. To be most effective, services need to be integrated and efficient.

Evidence shows that prevention and early intervention is an effective approach to supporting communities and enabling people to live independently for longer without the need for formal care services.

#### **Current Services**

The Care Act 2014 encourages innovation in the services for those entitled to care and support, but also of the organisations that provide this support.

Our 2019 model for Community Wellbeing Services transforms the borough's prevention and early intervention services into a coherent set of services responding to local and national priorities.

There is good local evidence that social care investment in community based approaches works. We aim to support and enable people to build their personal and social resilience, maximising relationships, personal assets and wellbeing before supplying state services to meet needs. This avoids two key problems of care management:

- 1. Premature intervention, which takes over from people's natural support structures, increasing the risk of isolation, creating dependency and providing solutions that do not allow the individual to meet their personal outcomes.
- Over provision, by creating long-term dependency and narrowing opportunities for change by reducing independence and individual wellbeing.

The Council's Community Advice Hub model has shown that it is possible to ensure that if people get the right help at the point of initial contact they can be diverted away from social work services. The benefit of this is that those with more complex needs are then able to access the services they need in a more timely way, and those with simple enquiries or low levels of need are able also to get prompt and reliable guidance.

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During Covid these services have continued to be delivered through telephone, internet and where necessary socially distanced methods. There is likely to be increased demand on these services as a result of the impact of Covid and the associated restrictions, on health, wellbeing and employment.

#### **Intentions**

Our intention is to work with providers to:

- continue to develop an integrated model of working with stronger local partnership working.
- optimise the use of resources and simplify current system operations.
- reduce dependency on formal services.
- encourage more community-based services to develop in response to identified local needs.
- develop a more skilled and competent workforce to support prevention, early intervention and reablement.

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# **Older People**

#### **Population**

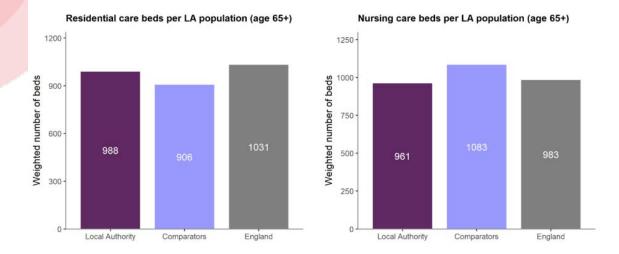
Our population in Solihull is older than that of the England average. We can therefore expect over the medium term significantly greater numbers of

- people living alone with an increasing risk of social isolation, loneliness and depression.
- people with dementia, other long-term conditions, and with multiple and complex needs.
- unpaid carers, many of whom people will be older people with their own care needs.

#### **Current Services**

- Many older people manage their care needs informally through support from family, friends and neighbours. This has been more challenging as shielding and visiting restrictions have meant that some people have been more isolated and that there has been increased dependence on family to be carers. Service limitations, for example on daycare, have made it challenging to tackle social isolation.
- More than 1,600 older people use assistive technology to help enable independent living. The opportunities technology offers to enhance independence could be developed much further, and to reduce the isolation people have felt, especially when shielding.
- Solihull Council has as many people going out of borough for nursing and residential care as remain in borough. We are examining whether this is through choice or lack of local availability and what difference the Covid-19 pandemic will make to long term care home demand. The CQC table (from the Solihull local profile) below shows that there appear to be sufficient bed numbers for residential care in borough, with a shortfall in nursing. However, not all of those beds are affordable.

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This slide shows the number of residential and nursing home beds for the population of Solihull. The comparator group and England bars represent the number of care home beds available across those areas if their older populations were scaled to the same size as Solihull's.

- There are 29 care homes for older people operating within Solihull, 3 rated by CQC as Outstanding, 16 rated Good, 9 rated as Requires Improvement. We recognise that these ratings may now be outdated because of the suspension of usual inspection activity during Covid.
- The Council has recently re-tendered care contracts for Extra Care Housing services with Phoenix House, Trinity and Hampton House. We have also worked with Solihull Community Housing in the development of the Extra Care Scheme Saxon Court in North, Upward Care in the development of the Sunhaven Extra Care scheme and the Extra Care Charitable Trust's Solihull Village which is due to open in 2021.
- Extra Care Schemes are delivered under a mixture of service models, with some having a greater emphasis on night time support as part of the standard care offer, and others using more assistive technology with night needs supported where identified in the care plan.
- Care at Home is primarily delivered by 2 lead providers who cover the most populous parts of the borough, supported by other care at home providers primarily in the more rural east of the borough.

#### Intentions

We intend, wherever possible, to support people to live independently in the community. Where people need more intensive support they should be able to access the right services at the right time. For example, we are looking to develop our community response in partnership with health colleagues, to provide wraparound support for help at an early stage, and when people are first discharged from hospital.

- We want to encourage the development of community-based resources which can help to build mutual support in communities and reduce the impact of loneliness and isolation.
- We will continue to develop an integrated approach with health services, particularly around avoiding unnecessary hospital admissions and supporting people to leave hospital in a timely and safe manner whether this is to return back home, or where this is no longer possible to residential and nursing care.
- ➤ We are looking to deliver improved provision for step up / step down from hospital, both for people who can go straight home (national pathway 1) and for those who need some short term intermediate care in a residential or nursing home (national pathway 2), with a focus on timely discharge and support to regain as much independence as possible.
- ➤ We want to work with providers to develop more innovative solutions to the way that care and support are delivered locally.
- ➤ We need more services in the community that people can buy directly with a direct payment, personal budget or from their own means to provide flexible support for everyday living and independence.
- ➤ We would like more providers offering short breaks either in the community or in care homes so that carers can take a break. Such services are required for Council and self-funded clients.
- > Through our occupational therapy service we want to support people to make adaptations to their homes, and to make use of equipment available in the market to help them live more independently.
- ➤ We intend to develop a more detailed understanding of the local market for people who are funding their own care services so that we can better inform and influence the market to meet needs and expectations. The University of Birmingham and Age UK research project we are working on to gather evidence of the experience of older people funding their own care services will deliver a final report in 2020.
- ➤ All care at home providers report difficulties in recruiting staff to meet the demand for care at home services. We are keen to work with providers to develop a sustainable workforce for social care, using our combined resources to improve recruitment, career pathways, training and retention.

## Market Opportunities

We are looking to develop responsive hospital discharge pathways in to community settings that can accept same day discharge and can integrate with community health provision in order to support people to regain their independence. We would welcome discussions about how resilient services can be developed which would deliver this.

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- We would like to encourage Solihull care home providers to offer short term step up / step down capacity, and similar support for care at home to regain independence and maintain recovery after hospital care or illness.
- ➤ Both of the above services need to be able to work with people who have Covid-19 and other highly contagious illnesses.
- We would welcome discussions with local care home providers about opportunities to secure contracted capacity at the Council's usual fee.
- We would like more homes to have dual residential and nursing registration to avoid people having to move if their needs increase.
- We would like to see providers develop more respite and short breaks provision for older people, whether funded from their own or public funds.
- We want to work with care at home providers to scope the potential need for / impact of an emergency home care service for carers.
- ➤ We would like to work with organisations able to develop the availability of personal assistants.
- We would like providers to look at the opportunities to work with our employment support services to offer employment opportunities to people who have lived experience.
- We would like to capture and learn from providers experiences of delivering during the pandemic, and what can be done to better support resilience in the during future outbreaks.

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# **People with Learning Disability**

#### **Population**

- There are around 3,880 people with a learning disability in Solihull, of whom approximately 650 are directly receiving adult care & support services at any one time.
- Nationally, the number of people with a learning disability aged between 65 and 74 years is set to increase by 33.5% between 2011 and 2030.
- By 2030 there will be an increase of 53% in the number of people with a Learning Disability aged 75 to 84 years and a 103% increase in the number aged 85 and older.
- Mencap predict that the number of people with profound and multiple learning disabilities in England is expected to grow from 16,000 adults in 2011 to 22,000 by 2026.
- This increase in the learning disability population is mainly associated with increasing life expectancy for people with learning disability rather than a higher incidence of learning disability in the population. This improvement in healthy life expectancy should be matched by efforts to ensure that a good quality of life is available, with housing, care and support, employment and daytime services to meet needs. The expectations and aspirations of people with learning disability and their families have grown. This includes increased expectation for living independently in the community and living 'ordinary lives' including meaningful activities including higher education, work, volunteering, socialising and leisure.

#### **Current Services**

- The Council commissions residential care for around 115 people with learning disability. This number has declined over the last 10 years.
- The Council commissions supported living for around 170 people with learning disability. This number has increased significantly over the last 10 years.
- Overall, there has been a decrease in the number of people using day opportunity services during the last 5 years. A mixed market for day opportunities has developed, but is immature. It offers limited choice and lacks resilience. Covid has made provision of day opportunities particularly challenging.
- Employment support services are commissioned to help people to find and retain employment.
- Over recent years, Solihull has been successful in supporting people to move from institutional settings (such as hospitals or care homes) to live more independently in the community. Last year, only eleven adults (18-64) were placed in residential

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- care, and the majority of residential provision is now in small homes, typically 3-4 bedded.
- The Council has recently awarded a new Flexible Contracting Arrangement (FCA) for supported living services, which ensures that providers are delivering care to a consistent specification which focuses on skills development and building independence.

#### **Intentions**

- ➤ Re-open the FCA for supported living for more providers to be able to join. This will be in spring 2021.
- Develop additional supported living capacity in the north of the borough.
- > Support people to live in Solihull unless there is a good reason to live elsewhere.

  This includes consideration of those people who are currently living out of Borough.
- Continuing to assess our requirements for residential care in light of increased use of supported living.
- ➤ Continue to engage with local people with a learning disability and their families to shape future services.
- ➤ To develop more focus on supporting people to become employment ready and access paid or voluntary employment as an alternative to traditional day care.
- ➤ We will be looking in more detail at the needs of young people who have been receiving support through children's services, as they become adults, and work with the market to ensure there is a sufficient supply of the services that younger people need and prefer in the future.
- Solihull continues to engage with people with learning disability, their families and carers and local voluntary organisations. This includes the Learning Disability Council (which has been meeting virtually during the pandemic), Peer Visitor schemes and developing Shared Lives.

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### **Market Opportunities**

- ➤ We will invite providers of supported living to join a flexible contracting arrangement for supported living in Solihull, when it reopens for tenders in Spring 2021.
- ➤ There is a shortage of supported living accommodation/support in the north of the borough. We would be interested in talking to FCA providers about opportunities for new schemes there.
- We want to work with organisations able to develop the market for personal assistants.
- We would like providers to look at the opportunities to work with our employment support services to offer employment to people who have lived experience.

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# **Transitions**

Transitions between Childrens' and Adults' services are a key priority in national plans and in local Solihull strategies.

The NHS Long Term Plan states "By 2028 we aim to move towards service models for young people that offer person-centred and age appropriate care for mental and physical health needs, rather than an arbitrary transition to adult services based on age not need reaches across mental health services for children, young people and adults." The 'All Age Autism' Strategy 2016-19 and Joint SEND 0-25 strategy 2017-20 are directly relevant, as are the emerging 'Childrens Placements' strategy and 'Sufficiency Duty'.

Childrens' and Adults' services share the ambition that young adults have choice about where they live and how they are supported, and that services take a strengths-based approach to support enabling young people to be confident, resilient and independent and to live 'ordinary' lives in their local community.

#### **Current Position**

Childrens' services are working with 346 young people and young adults aged 16+, 105 of those are aged 16-18 (Aug 2019). Placements are provided by foster carers, residential children's homes and for some young people by Supported Lodgings Carers and external Supported Accommodation Agencies. 34 young people were in Supported Accommodation (March 2019) and 24 young people were in internal supported lodgings / staying put arrangements (August 2019).

In 2018/19 24 young people (18-25) transitioned from Childrens' services to Adult Social Care services in Solihull. These young people were assessed as having eligible needs as a result of disability or mental health.

There has been a recent peer review of the Transforming Care Programme, including the arrangements for transitions for young people with very high needs, and an action plan is now in development to take forward the recommendations.

#### **Current Services**

Working closely with Childrens' services, Adult Care & Support commission support for young people (18+) in a person-centred way, to ensure choice, and development of independent living skills. Our approach includes

- working with partners to further develop the local offer for 16-25 year old care experienced young people to ensure the right support at the right time as they become independent young adults.
- supported accommodation provision for 16-18 year olds is procured via a regional framework agreement.
- commissioning some services to support young people/adults up to age 25 e.g.

- SEND Information, Advice and Support service.
- working with BSol CCG and providers to develop a 0-25 model of mental health support.

#### Intentions

Transitions is an agreed priority for integrated working between SMBC and BSol CCG reporting to the Solihull Together Board. Our intentions include

- early planning for transitions so that there is time to work with providers to manage the transition and develop appropriate services that meet individuals' needs.
- developing plans to increase recruitment of foster carers that offer 'staying put' and to develop 'Shared Lives' for young people 18+.
- continue to find appropriate person-centred support for each individual young person. We will continue to work the CCG colleagues as part of the Transforming Care programme which includes pilot work to develop new providers via the 'Small Supports' programme.
- the development of short breaks for adults based on supported living rather than residential care.
- work with providers to encourage working across the transition age-range, to enable continuity of provider during transition.
- ➤ improve access to Direct Payments and work with the NHS to improve access to Personal Health Budgets. To work with providers to develop flexible service offer to support using DP/PHB.
- develop and promote alternatives to college, e.g. work-readiness programmes to prepare for employment as a post-school option.

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# **Sensory Disability**

#### **Population**

Up to 30,000 people in Solihull live with hearing or sight loss, and this is likely to increase by a further 10,000 over the next ten years due to our ageing population.

#### **Current Services**

Through the Community Wellbeing Service, the Council commissions a range of specialist information, advice, guidance, equipment and rehabilitation services for people with sight and hearing loss. These services are provided by a specialist charity with expertise in working with sensory impairments. Through the Community Wellbeing Service, which incorporates a range of public health initiatives, the Council envisages also that links will be made to support the prevention of sensory loss. Joint working with the Community Wellbeing partners will enable awareness raising within our frontline services of the impact of wider health determinants such as smoking, diet, exercise and environment upon sensory loss.

#### **Intentions**

#### We would like to

- raise awareness about sensory impairments to the social care sector workforce, including personal assistants, so that there is a better understanding of sensory loss and how it may impact upon people's needs, and the support available.
- work closely with our provider market to enable provision to better meet needs related to sensory impairment.
- develop our understanding of what else we need to do to help prevent sensory loss, what the evidence base is for best practice and how we can work with partners in the provider market and NHS to achieve a better quality of life for those affected by sensory loss.

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#### **Mental Health & Autism**

#### **Population**

- One in four people experience mental ill-health at some point in their lives.
- Over 20,000 people in the borough are likely to be experiencing mental ill-health conditions at any one time.
- Over 4,000 people access statutory Mental Health services in Solihull every year.
- Around 2,000 people in Solihull are thought to be living with autism.

#### **Current Services**

Solihull Council works in partnership with Birmingham & Solihull Mental Health Foundation Trust (BSMHFT) and voluntary sector providers. We commission a number of services which support people with mental ill-health:

- Through our new Community Wellbeing Services, we are commissioning services which provide easy access to information, advice and support, and which promote health and wellbeing.
- Early Help and Community Support such as drop-in support, advocacy, peer support, employment support, and mental health social work.
- Urgent professional support when people need it.
- Support to recover and maintain recovery in the community, avoiding the need for higher levels of care, for example residential care.
- There is a flexible contracting arrangement in place for supported living.

#### Intentions

#### We would like to

- work with partners across Solihull to promote awareness of mental illness and break down the stigma associated with it, so that people feel able to ask for the help they need early giving a better prospect of recovery.
- to improve the experience of individuals transitioning from children's to adults mental health support by better aligning services.
- commission services that help people to become more resilient, to become experts in the managing their illness, and to focus on recovery through their own personal plan.
- review services & pathways for people with autism, to ensure people get the support they need after diagnosis. We would welcome provider views on innovative responses to the needs of people with autism.

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commission more supported living provision and have less reliance on residential care home services for adults of working age.

#### **Market Opportunities**

- ➤ We will invite providers to join a flexible contracting arrangement for supported living in Solihull, when it opens for more providers to apply to join in Spring 2021.
- ➤ There is a shortage of supported living accommodation/support in the north of the borough. We will work with the market to identify more capacity for supported living in the north of the borough. We want to work with organisations able to develop the market for personal assistants.
- We would like providers to look at the opportunities to work with our employment support services to offer employment to people who have lived experience.

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# **Day Opportunities**

#### **Current Services**

Day opportunities can provide social and recreational activities, personal and practical care, the development of skills to aid independence, and activities designed to stimulate and engage people with profound and multiple disabilities. The majority of day opportunities in Solihull for people who receive public funding are provided directly by the Council, alongside some services delivered by voluntary & community groups and independent providers for particular groups of people. A small proportion of specialist provision is provided out of the Borough.

Over recent years the number of older people choosing day services as a way of meeting their support needs has reduced, yet the number of people aged 18-64 accessing day opportunities has remained fairly static. Mental health day opportunity services are delivered through a drop in service model and via peer support groups.

Covid-19 has had a significant impact on the delivery of day opportunities, with temporary closures of, and then reductions in capacity of building based day care. Providers developed on-line and outreach offers which offered a different model of support which was welcomed by families.

#### Intentions

The challenge for the Council is how to offer flexible, relevant and cost effective day opportunities that meet people's needs and support them to live 'ordinary lives' in their communities. This is especially challenging whilst maintaining social distancing and a Covid-secure environment.

There will be a greater focus on

- what people can do and could learn to do for themselves strengths based.
- using existing support networks and services to maximize the most effective use of available resources across Solihull.
- flexibility enabling people to dip in and out of services in ways that make sense to them.
- activities linked directly to recovery and/or development of independent living skills.
- work based training and support to enable people to move into supported or open employment.
- delivery close to where people live.
- delivery through digital support options.
- stimulating activities for those with multiple and profound disabilities.

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- using direct payments to enable flexible arrangements of day opportunities incentivising a person-centred approach within service offerings.
- **a** more coordinated approach to the commissioning of day opportunities across Council departments, so that employment, leisure, learning and preparation for work all feature.
- investigating how our contracts can reward providers for supporting people to become more independent.

#### **Market Opportunities**

We aim to work with:

- Providers who are keen to share their experiences and reflections on delivering outreach during Covid, and what this could mean for the future model of day opportunities.
- Providers who will develop the more specialist expertise required to meet the needs of Solihull residents within the borough, reducing the need for people to have to go out of Solihull to access the support that they need.
- Providers who offer services that actively aid recovery and/or the development of independent living skills.
- Providers from the independent sector to work in partnership with community and voluntary groups to address gaps in customer need – for example supporting adults of working age to be work ready.
- Providers who will offer greater flexibility around choice and accessibility of services such as sessional access not just full days.
- > We would like to work with providers who can offer short breaks and respite that utilizes local day opportunities.

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## Carers

## **Population**

- Solihull has an estimated 25,000 unpaid carers.
- Almost 5.900 carers in Solihull are themselves over 65.
- 1,400 local carers say that their own health is either bad or very bad.
- 13,100 carers combine caring with paid employment.
- More than 3,000 carers are registered with Carers Trust Solihull.
- We expect the number of unpaid carers in Solihull to grow, and we expect that more
  of these carers will have their own health needs.
- Carers of people with dementia can experience particular challenges and will need the right support at the right time.
- Solihull's Carers Needs Assessment 2017 provides more detailed information around the profile of Solihull's carers.

### **Current Services**

- Carers Support Services in Solihull are commissioned as part of the Council's package of Community Wellbeing Services. This includes information, advice, support groups, digital resources, and dedicated support for young carers.
- All carers are entitled to a carers assessment carried out by either the social work teams or Carers Trust Solihull, which can help them plan for their own needs and access appropriate services, and an annual review of their needs.
- Encouraging joint assessments with the person they care for, to support holistic and strengths based planning where possible.
- Conducting Covid carer assessments to understand and support needs arising from caring under the conditions created by Covid-19 and the challenges that that has created.

### Intentions

- We have worked already with carers to refresh our Carers Strategy and review priorities in the light of carer experiences during Covid, agree a new action plan, and develop Our Offer for Carers so that their entitlement to support is clear.
- > We will work with our partner agencies, including health services and community-based groups, to identify and reach out to hidden carers.
- We are exploring opportunities to develop responsive services through which families can access emergency respite when they need it.

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- We would like to develop opportunities for volunteers to support carers, including befriending and sitting services.
- We are scoping wider opportunities to support carers of people with dementia.
- We would like all providers from whom we commission services to adopt the WM ADASS Carer Friendly Employer Pledge.

## **Market Opportunities**

- ➤ We would like to support carers in managing their caring role whilst managing the challenges arising from the Covid pandemic.
- ➤ We would like providers to develop more respite and short breaks provision that can be offered to both Council funded people and those who self-fund their care and support.
- > We want to work with providers to scope the potential need for / impact of an emergency home care service for carers.
- We want to work with organisations able to develop the market for personal assistants.
- We would like providers to look at the opportunities to work with our employment support services to offer employment to people who have lived experience.
- ➤ We would like providers to look at how they can offer up space and support for carer peer support cafes as part of their Corporate Social responsibility.

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## **Housing Options for Older People**

### **Current Services**

The Care Act explicitly references housing as part of our statutory duty to promote the integration of health and social care. Getting housing right is seen as a key aspect of early intervention and prevention, as well as accommodation with support options being a core part of range of services which are available to meet care and support needs. Our aim is to enable people who have care and support needs to remain living in their own homes. Many of our residents receive the help and support that they need without having to move out of their homes. Older people want housing that is well designed, well located and fully accessible. For others this is not possible and even with adaptations to the property some environments may prove unsuitable and alternative support options need to be secured. Housing with support options for older people include

- support for people in their family home support delivered via care at home services either Council or privately funded.
- downsizing from a family home to private or rental accommodation which is
  accessible and age appropriate. Such schemes include housing options referred to
  as retirement housing or sheltered accommodation. This sector has grown
  significantly over the years. Any support required will be delivered via external care
  at home provision or via support that is delivered as part of the scheme where the
  person lives.
- Extra Care Housing such schemes offer a way for people to continue to live as
  independently as possible when their care and support needs increase, without the
  need for them to move into residential or nursing care. The accommodation can be
  owned, rented or part owned/part rented. The model of Extra Care that the Council
  commissions has been implemented in each of the Council's currently
  commissioned schemes.

### Intentions

- ➤ To engage with people in Solihull to gain a better understanding of the types of housing with support that they want now and in the future as they become older.
- ➤ To work with housing providers to help shape the market.
- To build our market intelligence regarding the preference for Extra Care Housing and Supported Housing including facilities focused on self-funders.
- To further develop Solihull extra care housing, in response to the emerging evidence on needs and demand.

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## **Market Opportunities**

- Our Housing needs analysis indicates that Solihull has sufficient current supply of Extra Care Housing and supply in the pipeline to meet identified local need up until 2025.
- For existing providers, we are interested in the potential to offer the resources and facilities available on site for residents and the wider community. Such activities could include befriending, the provision of day opportunities and special interest clubs which can be marketed to both residents and people living in the local area.
- Opportunities for people to use a direct payment or personal budget to access activities available in schemes as an alternative to other day opportunities, assuming that this is welcomed by people living within the scheme. This should bring in an additional income stream thereby reducing required increases in the service charges for residents.

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## **Homelessness**

## **Population**

At any one time the three main providers of homelessness services and accommodation in Solihull – Solihull Community Housing (SCH), St Basils and Solihull Integrated Addiction Services (SIAS) – are providing support to over 1000 households who are either i) at risk of homelessness or ii) homeless and either in temporary accommodation, one of the Borough's specialist supported accommodation schemes or, in a small number of cases, rough sleeping.

The Autumn 2019 Rough Sleeping statistics recorded 6 individuals on the one-night snapshot. This figure derives from a combination of a spotlight count supplemented by an evidence-based estimate and is agreed by local agencies prior to submission. The count for Autumn 2020 will be taking place in November. The total reported in 2019 compares to 4 in 2018, 2 in 2017 and 6 in 2016. Regular monitoring by Solihull's outreach service shows that there are between 2 and 6 rough sleepers at any one time, with the majority of those identified supported into accommodation after a short time on the streets and a flow of returning and new rough sleepers.

Data shows that there has been a significant increase in demand for the homelessness service since the introduction of new legislation, the Homelessness Reduction Act in April 2018. During 2018/19, the first full year of operation under the new arrangements, the number of 'approaches' because of actual or potential homelessness totalled 2357 and in 2019/20 there were a further 2314 approaches. The closest available comparison for the year prior to the new legislation shows that Solihull Community Housing had carried out 1110 homelessness interviews and taken 653 homelessness applications.

From March 2020 there has also been the additional impact of the Corona Virus pandemic on the demand for homelessness and housing advice services. This has been accompanied by the need to focus resources on supporting those most vulnerable to the virus, in particular rough sleepers, those at risk of rough sleeping and those in insecure or unsafe accommodation.

The updating of Solihull's Homelessness Review during 2019 and consultation on Solihull's first Homelessness & Rough Sleeping Strategy (2020-2023) has highlighted several particular areas of concern to be addressed by partners working together to deliver the new strategy. These are:

- The increase in the number of individuals at risk of rough sleeping.
- The need to improve on prevention and relief outcomes.
- The continuing use of budget hotels as first-stage temporary accommodation.
- The shortage of suitable accommodation in Solihull, including emergency and temporary accommodation options and move-on accommodation.

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 The lack of supported accommodation, particularly to meet the needs of individuals with multiple and complex needs.

The most urgent priority for service improvement is to help a greater proportion of people at the prevention and relief stages, with a consequent lower proportion going on to the full housing duty.

## Homeless people & those at risk of homelessness

The Council's Homelessness & Rough Sleeping Strategy (2020 -2023) strategy sets out the following objectives:

- Minimise rough sleeping.
- > **Prevent** homelessness whenever we can.
- ➤ **Relieve** homelessness when it cannot be prevented.
- > **Support** people to recover from homelessness.
- **Connect** services at the strategic, policy and operational levels.

### **Current Services**

SMBC has commissioned a number of services to deliver a homelessness service encompassing prevention, relief and support:

- The Homelessness and Housing Options Service delivered by SCH.
- Solihull Youth Hub (16-25 without dependents) including management of supported accommodation for young people – delivered by St. Basil's.
- Housing Support for Vulnerable Adults Service which includes homelessness outreach to engage – delivered by SIAS with those who are, or are at risk of, rough sleeping.
- Accord Housing provides support to those accommodated through the Housing
  First programme which supports rough sleepers and those at risk of rough sleeping
  who have multiple and complex needs and a history of entrenched rough sleeping /
  homelessness; Accord are also commissioned to provide specialist accommodation
  for ex-offenders and those at risk of offending and to deliver support in SCH's
  temporary accommodation provision for homeless singles.

Other partners contribute significantly to the delivery of services to homeless households in Solihull through provision of timely information and advice on housing options, the direct provision of temporary, supported and longer term accommodation options (social and private landlords and third sector organisations), support to help individuals source suitable accommodation options in the private sector and specialist provision for customers with specific support needs e.g. young people including care leavers, ex-offenders, entrenched rough sleepers, people with drug and / or alcohol dependency, people with mental health needs and victims of domestic abuse.

### **Intentions**

Homelessness prevention services are commissioned by the Economy and Infrastructure Directorate within the Council.

We aim to prevent individuals and families from becoming homeless wherever possible – this requires the offer of timely and appropriate information and advice to people with housing problems which could lead to homelessness and where there is the imminent threat of homelessness targeted case work to provide personalised advice and assistance to avoid the loss of a home.

Where homelessness cannot be presented, services will work with households to relieve their homelessness by ensuring that appropriate accommodation is available to the household for at least 6 months. This requires access to a range of suitable accommodation options to meet local need, in terms of type, size and location.

The priority is to meet demand in a way which minimises the number of people referred to budget hotels and provides a range and variety of local options. This has become a more significant challenge in the context of the implementation of the Homelessness Reduction Act from April 2018 and the impact of the Corona Virus on the levels of homelessness and demand for temporary accommodation.

Solihull has limited accommodation for those who require immediate access and support, although further emergency / crisis provision is required for certain groups e.g. young people, but specifically lacks accommodation options for those who have stabilised and are on their way to independence but still require some support. To address these issues there is a need to provide the following:

- Step-down provision for people who have been in supported accommodation but who are now semi-independent and do not need all of the support services anymore.
- Somewhere which offers affordable independent living space with minimal outreach support for those who are ready to commit to training and / or employment in order to become fully independent over time. (Existing supported provision is too expensive for those who are working or apprentices).
- Suitable, targeted floating support options to ensure smooth transition of individuals into their own tenancies and a phased withdrawal to increase the likelihood of tenancy sustainment.
- Facilities to support people who are or have been rough sleepers and others at risk.
- A flexible pathway of prevention support, relief options and temporary and permanent accommodation options to meet the needs of victims of domestic abuse.

We would like to work with social and private landlords, letting agents and third sector organisations to further develop suitable options in the private rented and social rented sector to enable us to discharge prevention, relief and main duties to homeless households or those threatened with homelessness and to provide suitable interim accommodation options to support a reduction in the use of hotels.

## **Market Opportunities**

- We would like to talk to private and social landlords, including providers of specialist and supported accommodation, about opportunities to meet the interim and move-on accommodation needs identified in the Council's Homelessness Review & Homelessness and Rough Sleeping Strategy.
- We would be interested in talking to providers about opportunities to expand local options for individuals who are moving toward independent living but require low level support and affordable accommodation in order to commit to training / employment development options.
- ➤ We would like existing providers to review accommodation pathways and identify any opportunities to increase the provision of emergency accommodation and / or provide suitable accommodation to prevent individuals from sleeping rough and to provide 1-bed tenancies for those being supported through the Housing First programme.
- ➤ There is a significant gap in local, affordable options for homeless single people and we would prioritise working with partners to help to develop longer term move-on options for this client group, particularly in terms of supporting the partnership Covid-19 recovery plan for those accommodated through Solihull's emergency response.
- ➤ We want to talk to partners about meeting the specific health and mental health needs that the homeless population, in particular rough sleepers, present with through the delivery of flexible and innovative services that can be provided on an outreach basis where necessary.
- We are also working to develop specialist responses to those customer groups with specific needs e.g. supporting an effective response for those who are homeless and victims of exploitation, having in place a range of suitable options to support victims of domestic abuse to remain safe in their existing homes or to access alternative safe and secure accommodation to meet their needs and utilising strengths-based and psychologically informed approaches to support those with multiple and complex needs.
- We would like providers to look at the opportunities to work with our employment support services and homeless customers to offer employment to people who have lived experience.

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# **Direct Payments and Personal Budgets**

Around 430 people receive Direct Payments in Solihull. This is 17.8% of people receiving a long-term service from ACS, and 26.1% of those who are receiving a long-term service in the community.

This is made up of

- 97 older people.
- 26 people using mental health services.
- 183 with a learning disability.
- 124 with a physical disability.

The number of people using Direct Payments to manage their social care needs continues to increase. However, those reporting increased choice and control is lower than the national average. As part of the Community Wellbeing Service offer, we have recently awarded a contract to provide a direct payment management service.

We will continue to work with people using services, carers and support organisations to find new ways to improve access to Direct Payments, and to have a broad and flexible range of available services to purchase with their Direct Payments. We are particularly keen to support more people to use Direct Payments flexibly, and to employ their own Personal Assistants (care workers employed directly by their employer – the disabled person or their representative) in order to maximize their outcomes.

As with other aspects of workforce, we face an increasing challenge in finding sufficient supply at the required quality to enable successful employment of Personal Assistants. However, we are aware that the factors influencing workforce availability in this market may be slightly different to those facing owners of residential care homes, for example.

### Intentions

- We continue to work to understand this element of our workforce and the key factors influencing people to become a Personal Assistant, or to remain in the role.
- We are keen to work with agencies supporting people to develop employability to work together to facilitate new entrants to the social care workforce.

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## Workforce

- Skills for Care have estimated there are 6,100 adult social care jobs in Solihull. Of these 550 are managerial roles, 300 are regulated professionals and 4,550 direct care workers.
- Around a fifth (21%) of the workforce in Solihull were on zero-hours contracts. This is slightly lower than both the regional (23%) and national (25%) position.
- The majority (85%) of the workforce in Solihull are female and the average age is 44 years old. Only 9% are aged 24 and under, but those aged over 55 represented 23%.
- Their work suggest that 4.5% of roles in adult social care were vacant, which equates to around 225 vacancies at any one time. However, this rate is considerably higher for registered nurses.
- 23% of the workforce are BAME, compared to 13.9% of the overall population of the borough.
- The impact of Covid on the shape of the workforce is yet to be understood.

This issue is particularly acute in Solihull due to the relative age of our population (meaning the percentage of our population that is of working age and available for work is reducing), relatively high housing costs, and high average earnings (mitigating against work in social care which is relatively low paid).

The social care workforce has changed over time, with some roles reducing and others expanding. For example, a smaller proportion of the workforce is within residential or nursing care, and a larger proportion works in the community, including the role of Personal Assistant which has only emerged since the 1990s. Skills for Care estimate that over 65,000 people employ Personal Assistants in social care in the UK, and this number is growing.

### **Intentions**

We intend to continue working with partners in social care and health to raise the profile of careers in social care and to address barriers to new entrants, and to retention. The Council has a People Board which oversees the overall employment strategy and a Sustainable Workforce Board, which is delivering against three key workstreams:

#### • Short Term Recruitment

- Identification of how to reach individuals at risk of redundancy.
- Linking individuals facing unemployment as a result of Covid's economic impact, with the roles and opportunities available in care.
- Ensuring there is sufficient training available to upskill new recruits in to the care system.

Connection with specific providers, ensuring their recruitment processes are accessible to the potential applicants.

### Training

- A comprehensive local care training offer, with courses ranging from entry level care competencies to registered manager training.
- Promotion of care career pathways through web tools, to support an understanding of what career options are available and what care will help them to get there.
- ➤ Ensuring the training available meets the required quality level, and supports the development of in-house trainers within providers, to continue to drive up quality of provision.

### Long Term Workforce Strategy

- Understanding the age profile, turnover and make-up of the current workforce.
- Factoring in demographic changes, the trends in care decisions to understand future needs.
- Using these to understand total workforce need.
- ➤ Identifying key actions to ensure that workforce supply that the model indicates is needed, including training, recruitment and retention.

## **Market Opportunities**

- ➤ Using the training needs analysis to identify gaps and develop appropriate training courses to address. Such training could be sold to providers operating within Solihull and beyond.
- Opportunity to link with local employment support programmes for recruitment of local care workers.
- Understanding from care providers what they need to support recruitment and retention.
- We would like to hear from providers who are willing to share methods which have been successful.

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# **Technology**

The appropriate and intelligent use of technology can enhance social care. This can be by supporting our workforce to be more efficient, and by helping people to live more independently without the need for input from care workers.

The Council has been working closely with Solihull Community Housing to offer customers a range of technology enabled care to support independence. These services bring together the safety net of electronic alarms and other devices with regular contact with an officer to check wellbeing. In addition, the Council has been using a wider range of equipment to help understand people's requirements and meet their needs in creative ways – for example GPS trackers for people experiencing memory problems or confusion.

Other electronic initiatives have included electronic home care monitoring, and the use of portable digital technology to improve efficiency and help our social care teams to provide timely, high quality information and advice.

### **Intentions**

We would like providers to think about how technology can best be used to support people to remain as independent as possible for as long as possible; re-abling people rather than increasing support which ultimately increases their dependency.

## **Market Opportunities**

We would like to work with providers:

- Who have staff skilled and equipped to identify opportunities for the use of digital technologies and to digitally enable people to be confident in the use of such technologies in meeting their needs.
- To scope opportunities for incentive schemes that will help drive greater efficiency in the care and support market.

## **Our Commitment to You**

- We will regularly update our market position statement, respond to queries and be open to consider new ideas to better stimulate the market.
- ➤ We are keen to look at opportunities for more innovative approaches to meet needs in a more timely and effective way that helps deliver improved value for every £1 spent.
- ➤ We will engage with providers while Covid remains at large, using digital channels to share information, exchange knowledge and develop solutions to the challenges of operating during the pandemic.

## Solihull Needs You

For further discussion, you are invited to book a personal appointment to discuss how we can work with you as an existing, or new care provider.

To arrange an appointment please contact the Commissioning Team via:

**Phone:** 0121 704 6505

Email: commissioningteam@solihull.gov.uk

The Market Position Statement will be updated regularly. We welcome your suggestions, questions and comments to help inform this.

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Next Reviewed: June 2021

