

# Adult Care, Housing and Public Health Market Position Statement 2020-21

**‘We will act together to support the residents of Rotherham to live full active lives; to live independently and to play an active part in their local communities’**

Version Control

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## Introduction

Rotherham Metropolitan Borough Council (“the Council”) is pleased to present a new Market Position Statement (MPS) for Adult Care and Housing covering the financial year 2020-21. This has been created with positive input from a variety of Rotherham service providers and with excellent support from Oxford Brookes University, Institute of Public Care (IPC). The aim of the new approach to producing an MPS is for future updates to be hosted on the Council’s website, with interactive content and this to be really refreshed and informed by fully co-produced activity with stakeholders. The version for 2020-21 has involved engagement and active participation from Rotherham providers and stakeholders through workshops and a feedback loop to inform the style and content. This version is a positive step in the right direction and sets down a marker for the future direction of travel. This hard copy version will be edited into a web-based format with a similar look and feel to the recently refreshed Rotherham Joint Strategic Needs Assessment (JSNA).

## Understanding Demand Introduction

The current financial climate is challenging and is not anticipated to significantly improve in the medium term. The Council cannot solely deliver the required solutions to people requiring care and support without an informed and thriving market across the borough. Effective, honest and open relationships between the Council and service providers, from all sectors and of all sizes is therefore essential. This not only leads to better outcomes for our population but offers people genuine choice and control as to their accommodation, care and support solutions. Working in partnership with service providers, considering them as key components of the wider Rotherham integrated health and care system is a fundamental principle of this MPS – this is not about a traditional commissioner provider relationship. The Council actively encourages regular and proactive dialogue and welcomes new ideas or proposals.

## What is a Market Position Statement?

An MPS is a document which summarises supply and demand in a local authority area or sub-region, identifies future strategic priorities and signals business opportunities within the care market in that area.

*“It is suggested that a local authority can best commence its duties under Sections 5 (market shaping and commissioning) and 48 to 52 (provider failure) of the Care Act by developing with providers and stakeholders a published market position statement.”* Care and Support Statutory Guidance, Section 4.56

An effective MPS should tell providers what the Councils plans are. The providers should be actively involved in shaping them. The MPS is intended to be used as the reference point for providers to inform their investment priorities and to develop their delivery models.

## A Whole System Approach

The Council recognises that the right accommodation option is at the heart of providing the best possible care and support solutions. The Council is well placed to facilitate this, having

an integrated Directorate that brings the functions of Adult Care and Housing together, alongside Public Health. The Council also has strong partnership links across the borough with key health and social care stakeholders, including the NHS Rotherham Clinical Commissioning Group (CCG), The Rotherham NHS Foundation Trust (TRFT), Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH), Voluntary Action Rotherham (VAR) and the social housing sector. This is governed by the Rotherham Integrated Health and Social Care Place Plan <http://www.rotherhamccg.nhs.uk/rotherhams-place-plan.htm>

The Council has several advantages when developing accommodation solutions. There are a range of affordable and available land/properties across the borough, supported by an excellent Council Planning function and a commitment to support new developments, refurbishments or remodelling of provision.

## **Scope**

This MPS serves to inform Housing, Care and Support Providers of the present and predicted service demand in Rotherham. It sets out the Council's vision for the future market and outlines strategic commissioning intentions.

This MPS pulls together relevant and pertinent data and information from internal sources such as case management recording systems, external statistical sources detailing Rotherham's demographic make-up and projection of population and analytical detail of the local market. The MPS provides data on all the cohorts of people under the remit of Adult Care and Public Health including, older people, people with learning disabilities, autism, mental ill-health, physical and sensory disabilities and unpaid carers, overlaying accommodation requirements for each of the cohorts.

## **Staying in Touch (Co-Production)**

The workshops held with a number of Rotherham providers, supporting people across the full spectrum of provision and all differently constituted was most helpful in terms of framing a new approach to engagement and embedding the Council's core commissioning principles of Co-production and a commitment to Social Value.

The feedback from providers on what works in an MPS, what doesn't and the importance of an emphasis on what is going to happen, by when, rather than a reliance on statistics and policy/strategy documents has been taken forward in this version of the MPS.

The Council has had a range of provider forums for a considerable period, but these have historically coalesced around service type such as home care or a particular cohort such as Learning Disabilities. This siloed approach has meant that there is not a consistent approach or vehicle for wider provider input on key issues or indeed most importantly to shape the whole Adult Care market and future offer.

The Council's providers, though predominately local within the South Yorkshire region, are not always able to commit time to regularly meet with officers in a traditional provider forum format and this is certainly the case for larger organisations serving a number of other Councils. However, technology will help address this. The Council migrated to Microsoft Office 365 in January 2020 and this includes the Skype for Business facility, much enhancing the previous conference call facilities and enabling future provider forums to be held in a virtual format, thus

enabling wider participation and increased engagement. The reduction in travel time also has significant environmental benefits.

It is intended for officers within the Strategic Commissioning function to hold quarterly all provider Skype sessions during financial year 2020-21 with a co-produced agenda to facilitate the dialogue and to inform future MPS content.

## **Staying Relevant**

Though the MPS spans the financial year period of 2020-2021, the Council recognises that the content can quickly go out of date. The content will therefore be regularly refreshed to reflect the current position. This will ensure that the MPS has a 'live feel' and proves to be a useful tool with hyperlinks to key documents and pertinent information that is readily available to make it relevant to the reader.

This Word document version will be developed into a web accessed format with a direct link from the Adult Care pages on the Council website during Quarter 1 of 2020/21.

The look and feel of the MPS will develop over time, with providers playing an active role in co-producing the content. The following will drive future iterations:

- clarity of relevant data that drives provider decision making
- future service design and configuration requirements will be clearly outlined
- the Council will commit to co-production activity to drive service improvement or to develop new models of care and support
- further development of commissioner/provider relationship channels

# 1. Understanding Demand

## Demography and Demand for Services

### Housing Needs

The Council has commissioned a Strategic Housing Market Assessment (SHMA) to identify the future requirements for the borough. The SHMA will inform the Council about:

- the supply and demand for different housing in the borough
- the estimated number of new homes that will be needed over the next 5 years
- the housing market to assist in the development of housing and planning policies to help guide future housing delivery

More details can be found at the following link:

[https://www.rotherham.gov.uk/info/200059/land\\_and\\_premises/1056/strategic\\_housing\\_market\\_assessment\\_shma](https://www.rotherham.gov.uk/info/200059/land_and_premises/1056/strategic_housing_market_assessment_shma)

Within Rotherham there is an imbalance in the number and type of accommodation for older people in the borough. The Housing Development Programme will aim to deliver new units to achieve versatility and flexibility of use to meet a wide variety of needs with no, or the minimum of further adaptation for individual residents. There is scope to deliver single story 1 and 2 bedroom type properties suitable for rightsizing and ageing in place.

Based on population predictions and current housing availability these developments should be prioritised in the following wards:

- Swinton
- Brinsworth and Catcliffe
- Holderness
- Sitwell
- Anston & Woodsetts
- Keppel
- Rother Vale

The flexibility of use can be achieved by providing new provision to achieve versatility and flexibility of use to meet a wide variety of mobility, support, care or health needs with no or the minimum of, further adaptation for individual residents.

The strategy can be found here:

<https://moderngov.rotherham.gov.uk/mgConvert2PDF.aspx?ID=119675>

### Older People

In Rotherham life expectancy at birth has increased by 1.6 years for males, to 77.8 (79.6 years England average) - and 1.1 years for women to 81.7 (83.1 England average) - over the last 10 years.

Older people aged over 85 make up a significant proportion of the Rotherham Adult Care population. The population is expected to grow from current levels of 6,100 people to 7,800 by 2024 – a 28% increase. The demand for support for older people is likely to continue in view of the increasing older population. This will mean an increase in the number of people living with complicated conditions and long-term conditions such as heart disease, diabetes, dementia and cancer. Therefore, opportunities to improve health and wellbeing, prevent illness and support people to manage existing conditions and stay independent, must be maximised.

- 11,255 people aged over 75 live alone, half of all people in this age group
- Around 4,000 older people experience significant loneliness on a daily basis; which can lead to vulnerability
- Two thirds of householders over 65 own their own homes although the proportion reduces with age to 52% of those aged over 85
- An estimated 20,400 people over 65 (40%) need some help with domestic tasks and 16,700 (33%) need help with self-care
- 9,100 people over 65 (18%) need assistance with some aspect of mobility such as walking or climbing stairs
- 60% of people over 65 have some form of hearing impairment including 3,800 (7.5%) who have a severe hearing impairment
- 4,400 people (9%) over 65 have a moderate or severe visual impairment
- Incontinence affects 16% of people over 65, rising to a quarter of those aged over 85 years

### **Service Provision for Older People**

- As of 1 April 2019, the highest volume of provision for older people was home care and support, with 1061 people in receipt of this service offer – equating to 40% of the cohort. These individuals will transfer to the new contractual arrangements from 1 April 2020.
- 846 older people were in residential or nursing provision, primarily within Rotherham or the South Yorkshire region – this equates to 32% of the cohort. The Council is reducing the number of placements into care home provision year on year, with the focus being on keeping people within their own homes. This type of provision is therefore mainly required to support people with dementia and nursing care needs.
- 535 older people were in receipt of either a direct payment or a managed direct payment – 20% of the cohort. These were predominately used to purchase home care and support. The development of alternative options such as personal assistants would be welcomed to enable even more flexible and personalised solutions.
- 33 older people were in receipt of alternative provision such as day support or supported living. This equates to 8% of the cohort. The future intention is for a growth in the use of digital solutions and greater take up of specialist equipment to enable people to continue to live independently within their own home.

### **Dementia**

Dementia prevalence rates in Rotherham are significantly increasing. The number of detected cases of dementia has increased year on year and this trend is predicted to continue. It is forecast that one in three people over 65 will develop dementia.

The number of people aged 65+ with dementia is predicted to increase from 3,750 in 2020 to 5,115 by 2030. This represents a growth of 62% from 2014.

## **Learning Disability and Autism**

### **Preparing for Adulthood**

The Special Educational Needs and Disability (SEND) cohort covers 8,475 Children and Young People. 6,307 receive School SEND Support and 2,168 have statements/Education, Health and Care Plans (EHCP). Young people identified to have a Learning Disability and or Autism and eligible for support under the Care Act 2014 will transition into Adult Care services through the Preparing for Adulthood Pathway over the next four years.

This includes the following cohorts:

- Age group: 16-17: There are 15 young people who are attending special schools in the Rotherham. 2 young people are attending an independent special school outside of Rotherham combined with a residential care provision.
- Age group: 14-15: There are 15 young people in this cohort. 13 are attending special schools in Rotherham. 2 young people are attending independent schools including residential care, outside of Rotherham.
- Profound and Multiple Disabilities – there is currently a cohort of 3 young people aged 14

There are 26 young adults within the Preparing for Adulthood cohort aged over 18 who remain within either special school provision, specialist post 16 provision (ROC) or non-maintained special schools following their transition from Children & Young People's Services. 4 of these young adults are attending schools outside of Rotherham. These young people will require alternative accommodation and support solutions in the future.

### **Autism**

Rotherham has high prevalence rates of Autism diagnosis for children and young people equating to 3.8% of the population. There is a cohort of 324 young people requiring support. Across the borough, 2,707 people have a diagnosis of Autism or Asperger's syndrome, though the majority do not currently access formal services (or have historically been allocated within the Learning Disability cohort).

From 2020 and over the next 5 years, the numbers of people aged 16-64 are expected to remain relatively stable, though the level of complexity is likely to increase. Autism is an exception and given the high prevalence rates amongst young people in the borough, it is likely that there will be an increase in demand for specialist care and support services in the future.

### **Service Provision for people with a Learning Disability and/or Autism**

- As of 1 April 2019, Adult Care supported 780 people within Rotherham with a Learning Disability.
- 197 people were in receipt of day care, though this number has subsequently dropped significantly following the closure of the Oaks Day Centre in late 2019 and the further planned closure of Addison Day Centre in 2020, both of which are directly provided by the Council. Alternative day opportunity solutions have been developed and the Council welcomes more alternative provision that provides choice and promotes pathways to meaningful work and development of skills for people with a Learning Disability.



- 187 people were in receipt of a direct payment. These are used for a variety of different support solutions. The Council particularly welcomes the use of direct payments to support access to day opportunities.
- 152 people were residing in residential and nursing care provision. The Council intends to explore the option for future move on into more independent living solutions where possible for this cohort.
- 168 people were residing in supported living. The Council intends to further develop this offer, with a focus on core and cluster provision.
- 136 people were in receipt of managed direct payment. The Council intends to explore the future potential for offering Individual Service Funds (ISFs) to enable greater choice
- 44 people were being supported through Shared Lives. It is intended to grow this service offer.
- 24 people were being supported in their own home through Home Care and Support services. These individuals transferred to the new contractual arrangements from 1 April 2020
- 247 people accessed respite services over a 12-month period. The respite offer is due to change during 2020/21 with a mixture of directly delivered and commissioned residential provision from the independent sector.

N.B: Within this cohort, there will be individuals who are accessing multiple services and therefore the totals do not equate to the 780 people identified.

### **Provision for Younger Adults with Physical Disabilities (including Sensory)**

- As of 1 April 2019, the highest volume of provision for people with a physical disability was a direct payment with 149 people using this option to meet their care needs. These are used for a variety of different support solutions. The Council particularly welcomes the use of direct payments to support the growth of personal assistant options alongside offers to support people to access paid or voluntary work or to enhance their skills.
- 146 people were receiving support within their own home from the home care and support service. These individuals will be due to transfer to the new contractual arrangements from 1 April 2020
- 101 people were utilising support through a managed direct payment. The Council intends to explore the future potential for offering Individual Service Funds (ISFs) to enable greater choice
- 29 people were supported in residential and nursing care provision. The Council intends to minimise future use of this type of provision in the future and to keep in their own homes where possible

### **Mental Ill-health**

The Council has a paucity of data regarding the mental health cohort, with the majority of case management and recording sitting outside of the Council. This activity is led by the Rotherham, Doncaster and South Humber NHS Foundation Trust. The data visibility gap is currently being addressed with the further development of the Rotherham health and social care record. This will create a more holistic picture of individual requirements and enable practitioners to view data from outside of their discipline through a data warehouse.

### **Unpaid Carers**

There are an estimated 31,604 unpaid carers in Rotherham, of which approximately 8,009 are older people and of these, 3,760 (39%) are providing 50+ of care and support hours per week.

This resource supports people of all age and client group and demonstrates a significant contribution to cost avoidance and reduction of dependence on formal services.

There are 347 Unpaid Carers, aged 55-69, currently supporting a person with a Learning Disability in Rotherham borough.

## **Housing Related Support**

In addition to statutory services under the Care Act 2014, the Council also commissions a range of Housing Related Support services to deliver a preventative programme assisting individuals with multiple needs.

The aim of Housing Related Support is predominately to address and prevent homelessness – this includes provision for young people, adults and families. The approach assists the Council in discharging its duty under the Homelessness Reduction Act 2017.

During 2018/19 the following support needs were identified for homeless applicants:

- General needs (no requirement for Housing Related Support) – 59.6%
- Mental ill-health - 7.8%
- Drug dependency - 4.3%
- Alcohol dependency - 2.5%
- Offending - 4.6%
- Repeat homelessness - 1.9%
- History of rough sleeping = 1%
- Domestic abuse - 6.4%
- Sexual abuse - 0.8%
- Physical disability - 4.4%
- Complex needs - 6.7%

A total of 2075 people aged 16+ were in receipt of a Housing Related Support service for 2018-19

## **Provision for Housing Related Support**

Housing Related Support has a clear focus on early intervention. Most of the cohort require a support package to gain the skills needed to maximise their independence and maintain settled accommodation. In some instances, services are provided to residents with chaotic lifestyles who may not be supported by more traditional statutory services.

Services are split into four pathways:

**Complex Needs:** This covers people with a history of rough sleeping, lack of engagement with support services and often alcohol/substance misuse issues contributing to a significant offending history.

**Vulnerable Adults:** This covers provision for people who fall below the Care Act 2014 eligibility criteria, but without a level of support may potentially have escalating needs that would require more costly and complex interventions. Examples includes people with learning difficulties, people with mental-ill health and people with alcohol/substance misuse issues.

Though not a specific cohort, a significant proportion of people under this pathway may also have an offending history.

**Domestic Abuse:** This includes refuge accommodation provision and support services for people who have experienced domestic abuse.

**Young People and Young Parents 16-25:** This covers accommodation and support for young people aged 16-25 experiencing homelessness, but requiring on-going support including teen parents, former child in need and looked after children.

The Service Offer for 2019/20 is defined below. The services operate at almost full capacity throughout the year due to the volume of demand coming through the Housing Options service.

<b>Housing Related Support Service</b>	<b>Cohort</b>	<b>Capacity</b>
Single Homeless Accommodation	Adults 18+	15
Young People Supported Accommodation	Young People 16-25	35
Young People Tenancy Floating Support	Young People 16-25	50
Domestic Abuse Refuge	Adults & Families	10
Domestic Abuse BMER Tenancy Floating Support	Adults & Families	32
Domestic Abuse Tenancy Floating Support	Adults & Families	50
Vulnerable Adults Supported Accommodation	Adults 18+	10
Vulnerable Adults Supported Accommodation	Adults 18+	15
Vulnerable Adults Floating Support	Adults 18+	110
Vulnerable Adults Floating Support	Adults 18+	110
Mental Health Supported Accommodation	Adults 18+	10
Housing First Complex Need	Adults 18+	20
Young Parents Supported Accommodation	Young People 16-25	20
Young Parents Tenancy Floating Support	Young People 16-25	27
Sheltered Housing Community Alarms	Adults 55+	236
Home Improvement Service	Adults 55+	1300
<b>Total</b>		<b>2060</b>

## 2. Understanding the Market

The current Rotherham social care market is relatively traditional reflecting the demographics of the borough with a focus on Older People and Learning Disabilities as the largest cohorts. Historically there has been a high reliance on residential care solutions, but this has decreased year on year with a deliberate policy of encouraging people to remain independent in their own home wherever possible.

The Council is both a purchaser and provider of care and support services. Services are primarily commissioned from the independent and voluntary sectors, as well as some micro-enterprises.

The Council welcomes new entrants to the Rotherham marketplace and is keen to engage in discussions with providers about new offers.

### Market Overview

#### Older People's Offer

Rotherham has 2,172 units of housing for older people. This represents 61.5% of the total provision of housing for older people in the borough and 64.2% of the borough's social rent stock for older people. These are on 105 separate sites, giving a relatively small average cluster size of 20.7 units. Rotherham has a comparatively large stock of social rent units and shortfalls in the provision of units for owner occupation, shared ownership and private rent.

Most care and support provision for older people is delivered through the home care and support offer, residential/nursing care or direct payments. There is also support available for people with dementia through dementia cafés and for carers.

#### Key Points for Providers:

- The Council is looking to offer a wider range of provision under the new Adult Care pathway which commenced in October 2019. The new pathway has an increased focus on information and advice to encourage self-management and to increase take up of digital, equipment and assistive technology options.
- The Council will apply reablement principles as a default for people coming out of hospital or requiring first time support, with the emphasis on encouraging further independence and maximising people's strengths. This will be facilitated through a new integrated Intermediate Care and Reablement offer with the Rotherham Foundation Trust hospital due to start in June 2020.
- The Council also wants to facilitate more market choice for older people with a direct payment with increased options for people to:
  - access personal assistants
  - consider shared lives
  - take assisted holidays
  - make full use of universal services and community resources
  - socialise and keep active

## Home Care and Support

The Council's vision for our Home Care and Support Service is to support residents of Rotherham to live full, active lives; to live independently and to play an active part in their local community. The Council and NHS Rotherham Clinical Commissioning Group (CCG) recently concluded a scheduled tendering process which has resulted in the commissioning of a new delivery model for home care and support from 1 April 2020. This enables people in receipt of care and support and their care workers to plan care hours more flexibility to decide when and how they deliver the support. There is a stronger emphasis on the attainment of personal outcomes and reablement, helping people to regain some of the skills they might have lost following a spell in hospital or an illness. The arrangements will be in place for an initial period of five years.

The new model operates at two Tiers under a Dynamic Purchasing System (DPS). The first Tier of 9 providers work on a geographical footprint (North, South and Central) to cover the whole borough and have first refusal on all new care packages operating a 'taxi rank call-off'. The Tier 2 providers offer specialists support e.g. for people with a Learning Disability and they can also take any new care packages not covered by the Tier 1 providers. There is also a specialist service to support Unpaid Carers. The DPS enables the Council to purchase home care and support services with no commitment to purchasing pre agreed volumes.

During 2019/20, 16,196 planned home care hours per week were commissioned for 1061 people. Around 350 care packages required multiple carers to attend.

A total of 191 people used their personal budget as a direct payment to purchase care from a commissioned home care provider during 2019/20. 43 people living in extra care facilities were also in receipt of home care from commissioned providers.

The service activity of contracted home care monitored over recent years shows an increase in dependency on the service with an average increase of 10% per year over the last three years.

Effective home care and support will enable people to remain at home longer, live independently and enable them to access community assets to maintain health and wellbeing. The new model fits with the personalisation and prevention agenda contained within the Care Act 2014 in addition to reducing demand for formal care services and therefore costs.

### Key Points for Providers:

- The new delivery model combines the effective elements of the previous specification with new requirements. A key element is the continuation of the effective organisation of providers against a geographic footprint (zones).
- There will be 9 providers at Tier 1 and an unlimited number at Tier 2 – new providers can be added at scheduled intervals throughout the duration of the contract period. This supports an interface with assessment teams and health services i.e. community nurses.
- The new model will provide for personalised service delivery against agreed outcomes where providers arrange services to be delivered at dates and times preferred by the individual and their families and continue to meet their obligation where critical call times are required. This will be known as 'envelopes of time' and will be monitored through electronic call monitoring.

- Providers will be actively encouraged to apply reablement principles to maximise people's independence, beyond the initial six-week period directly delivered by the Council.
- Providers will also play a much more pivotal role in the organisation of care arrangements and will be involved in the review activity. In this model, provider reviews can result in adjustments to care packages to benefit the individual and increase opportunity for cost efficiency for the Council in situations where needs have positively changed.

## **Residential Care and Nursing Care**

In total, there are 32 independent sector care homes (owned by 23 Organisations) in Rotherham. The independent sector care home market in Rotherham supplies 1,590 beds and accommodates around 1,377 older people on long-term and short-term placements.

The Council is no longer the dominant purchaser with only 48% of care home placements placed by the Council. 52% of beds are now being filled by self-funding residents or people from out of borough. 50% of care homes in Rotherham charge top up fees (10% in 2015/16) and 22% of residents are self-funders.

There is currently a vacancy factor of 213 beds or 13.4% of the total capacity.

The care home demographic is changing, with the average age entering care increasing to 85 years (83 in 2015/16). The average length of stay is 2-3 years (3-4 years in 2015/16).

There is high occupancy in nursing care home provision (90% occupancy) which is an area of increasing demand as a direct result of people living longer with more complex needs.

A total of 25 nursing beds have been de-registered over the past three years - 6% of total capacity. Other providers considering deregistration cited their inability to retain nurses and high nursing agency fees as the deciding factor. Skills for Care cite that in Rotherham 26% of nurses working in this sector are aged 55-64 years.

The Council also directly provides residential care for older people:

Davies Court, Dinnington is a 60 bedded care home for older people with long term conditions such as mental health, disabilities and dementia, included in the 60 beds are beds for intermediate care.

Lord Hardy Court, Rawmarsh is a 60 bedded care home for older people with long term conditions such as mental health, disabilities and dementia.

During 2018/19 there were 289 admissions into long stay residential care for older people, with an average of 24 admissions per month. This trend appears to be reducing with 310 long stay residential placements made in 2017/18. This downward trend may account for the increase in the demand for home care and support services.

Care home services are increasingly being commissioned by the NHS rather than the Council, either through the Rotherham Clinical Commissioning Group (CCG) or directly from the

Rotherham Foundation Trust hospital. In 2019/20 the following was commissioned through tender processes:

- A 24 bed community unit from independent sector for step up/step down/Discharge to Assess provision
- 10 Winter Pressures Beds from the independent sector to reduce Delayed Transfers of Care from hospital

**Key Points for Providers:**

- To develop more effective community multi-disciplinary working to support people to be at home for longer (or following hospital discharge), based on the philosophy of 'Home First'
- Prevention and early intervention placed at the front door, with a recovery model of reablement and rehabilitation for all age groups
- Care and support will be for people to live the best life that they can, living independently, in their own home (when possible), utilising the assets and the people around them, including use of assistive technology
- Residential and Nursing Care market is essential in circumstances where it is not appropriate or safe for a person to remain in their own home.
- Shift in market to provide targeted change to facilitate hospital admission avoidance, discharge and flow to contribute to managing year-round pressures/demand through the provision of intermediate care, reablement and winter pressure beds from the independent sector.
- NHS Long Term Plan (2019) sets out key priorities which include enhancing the offer of health care support to all care home residents.
- The Enhanced Health Care in Care Homes (EHCH) model is currently being rolled out over next 2-3 years to ensure stronger links between Primary Care Networks, with all care homes supported by a consistent team of health professionals, including named general practice support.
- The aim is that residents are supported to have good oral health care, stay well hydrated and nourished and supported by therapists and other professionals when they have become unwell.
- Primary care networks will also work with emergency services to provide urgent support which is needed out of hours.

**Extra Care**

There are three Extra Care Housing Schemes providing 113 units across Rotherham. These are at Potteries Court (Swinton), Bakersfield Court (Herringthorpe) and Oak Trees (Stag).

The schemes are managed by Together Housing Association with the care and support provided by the Council. The Council recognises that the model of care and support within the three establishments requires revision.

**Key Points for Providers:**

- The Council is keen to explore the recommendations from Housing Research in terms of developing new Extra Care provision in the right locations, predicated on industry best practice care and support models. [[Housing Research insert link](#)]
- The Council welcomes discussions with providers of existing Sheltered Housing schemes as to how these can best utilised and assistive technology be deployed
- In addition to Extra care, the Council also encourages developments of new properties to be designed flexibility to more easily accommodate adaptations to support independent living for people as they grow older. Wide doors, turning circles for powered wheelchairs and heavy load bearing ceilings/floors would allow for specialist equipment to be used in the future.

## **Support for people experiencing dementia**

Dementia Cafés take place at a range of locations across the borough. Group support is offered at the cafes and individual support is be offered to carers in their homes, via face to face or telephone contact and/or at various locations within Rotherham. The services are provided by Making Space <https://makingspace.co.uk/news/2018/our-new-rotherham-dementia-service>

The services aim to enhance the quality of life of people with dementia and their unpaid carers and reduced the requirement for more intense support. They empower people by giving them information, advice and guidance on the options available to help them.

The service works proactively with capacity available in the community, encourages innovation, growth and utilisation of a diverse range of non-statutory organisations or groups that work with unpaid carers or people with dementia or both.

The service holds specialist knowledge, ability and skills in dementia to achieve positive outcomes in a personalised and safe way.

### **Key Points for Providers:**

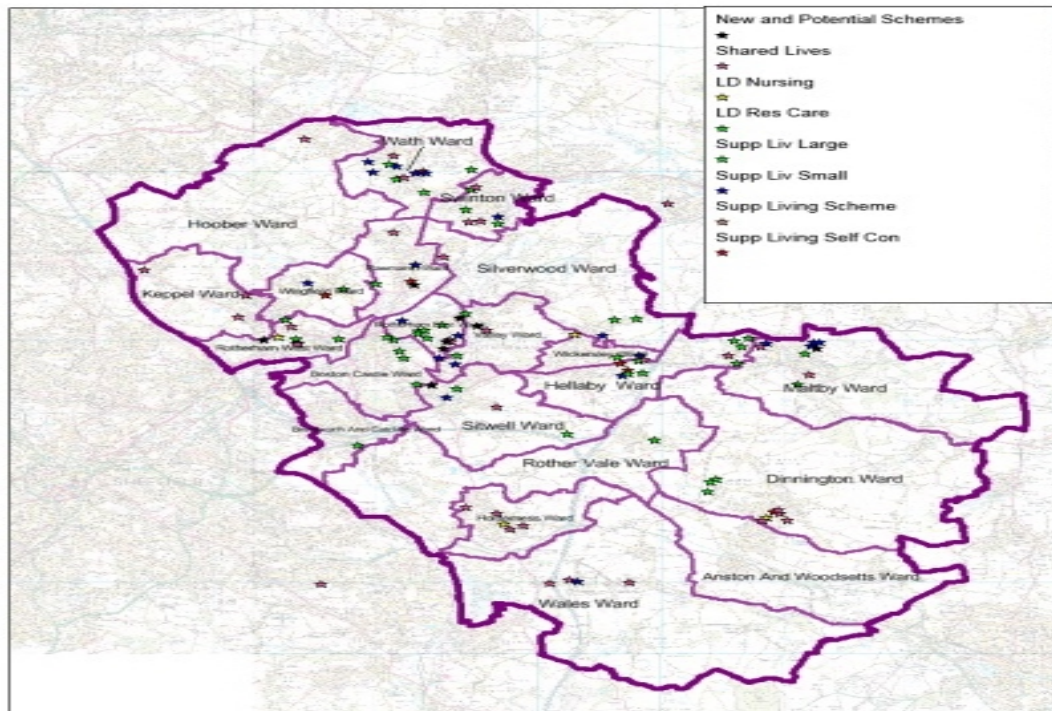
- The Rotherham Clinical Commissioning Group (CCG) is currently reviewing the dementia pathway for the borough. This will consider diagnosis and post diagnosis support, aligning the Council offer to the CCG and maximising investment opportunities.
- There is clinical support for dementia available to support care homes, but a gap in home care and community support for providers. It is hoped to address this through the new delivery model as not all people will be able to access dementia cafes.
- The use of assistive technology and the Internet of Things (IoT) needs to grow to enable people to remain in their own homes for longer and to provide help and reassurance for Unpaid Carers.



## Learning Disability Offer

The Learning Disability offer in Rotherham requires significant development in order to respond to the transformation of services outlined within the *My Front Door* strategy. [https://www.rotherham.gov.uk/downloads/file/3983/my\\_front\\_door](https://www.rotherham.gov.uk/downloads/file/3983/my_front_door)

The map below demonstrates the spread of provision, though this has historically grown around the Council day centre provision, creating an imbalance of provision clustered around the Wath and Maltby areas of the borough.



## Supported Living

There are currently 8 providers delivering Supported living provision to 168 Rotherham funded people with a Learning Disability across the borough and supporting the spectrum of need. Except for one scheme of core and cluster flats, the offer is based on a shared living model of 3-6 people.

### Key Points for Providers:

The Council wants to develop further provision within the borough, on the following basis:

- people to have their own front doors - this means housing in ordinary streets in the community
- chosen sites will be where there is an identified need to enable people to stay in their natural communities. This will be for exclusive use by the Council
- no large schemes, though core and cluster provision would be welcomed - maximum of 8-10 flats with options for additional specialist bungalows for people with more complex needs

- the development of new small shared living models using adapted properties is not supported and providers should consider new build provision for up to 6 people
- all provision will have built-in assistive technology.
- all provision will be accessible e.g. for powered wheelchairs and consider bariatric requirements (ceiling height/load bearing)
- all provision will have outdoor leisure space
- proposed landlords must be bona fide and conform to national guidance from NHS England and NHS Improvement, Local Government Association and ADASS
- the Council would wish to select the care provider
- the financial modelling for any proposed scheme must be readily available in an accessible and transparent format
- rents must be set at a reasonable level to meet housing benefit requirements

## **Residential and Nursing Care**

There are currently 19 providers delivering residential and nursing provision to 152 Rotherham funded people with a Learning Disability across the borough and supporting the spectrum of need. The Council intends to reduce reliance on residential care provision as alternative offers are developed, including more core and cluster Supported Living schemes, increased numbers of Shared Lives and Key Ring services.

Rotherham has historically been a borough with extensive residential care provision and a net importer of people from other local authority areas; there are residential care establishments in the borough that have no Rotherham residents. The Council wants to address this position through positive development of services that benefit our residents.

### **Key Points for Providers:**

- The Council does not believe that there is a requirement for new residential provision within the borough for people with a Learning Disability
- Existing residential and nursing care provision should focus on people with more complex needs
- There is a need to improve transparency of pricing for existing residential and nursing care for people with a Learning Disability - this is inconsistent across services and providers
- Providers need to consider building in day opportunity elements to supplement their accommodation and support offer
- Providers need to more consistently embrace the use of assistive technology
- Providers of suitable schemes may consider de-registering to become supported living where appropriate

## **Day Opportunities**

The Council is currently in the second phase of moving away from building based day support for people with a Learning Disability. The Council believes that people can be positively

supported through alternative day opportunities within the community. Oaks day centre in Wath closed in late 2019 and Addison, Maltby will close and be replaced by alternative provision by 2020. The aim is to maximise the potential of people with a Learning Disability by increasing life skills, offering cultural experiences and developing pathways in voluntary and paid work.

The Council will however continue to support the most complex people with a Learning Disability who will still require building based provision through the Reach service. This is currently based at Badsley Moor Lane in central Rotherham, though it is likely to move to alternative premises in 2020/21.

The Community Options Project is a partnership between Rotherham Council and social enterprise Community Catalysts and is aimed at establishing connections between people with a learning disability and their local community. The Project commenced in January 2017 and was commissioned to support the transformation of Learning Disability services. The project funds a Community Catalysts Worker who specifically focuses on the Rotherham area and responds to the specific needs of the Council. <https://www.communitycatalysts.co.uk/current-work/>

The project aims to support the development of community enterprises and groups-helping them to develop new activities and opportunities for people with a Learning Disability. These community enterprises offer an alternative option to people accessing day services.

There are currently 18 community enterprises across the borough. The Council actively welcomes additional enterprises to be developed or to more widely share their offer. The intention is to encourage the take up of more direct payments to enable people with a Learning Disability to directly purchase the day opportunity support that they want.

The Council has also commissioned specialist complex needs day opportunities provision via a framework agreement in April 2017 from the following providers:

- Sense <https://www.sense.org.uk/get-support/centres-education-and-day-services/>
- Mencap <https://www.mencap.org.uk/>
- Autism East Midlands (see Autism section)

#### **Key Points for Providers:**

- The Council would welcome discussions with providers to consider options to further expand this provision on the basis that the offer fits within the *My Front Door* strategy [https://www.rotherham.gov.uk/downloads/file/3983/my\\_front\\_door](https://www.rotherham.gov.uk/downloads/file/3983/my_front_door)
- The Council intends to support the existing micro-enterprises offering day opportunities and actively encourages further development of micro-enterprises, especially in the south of the borough as Addison day centre will close during 2020/21
- The Council welcomes providers who can support people with a Learning Disability to access employment and skills opportunities
- The Council will look to extend and further open out opportunities for providers to support the complex needs day opportunities offer

## Key Ring

There are 3 key ring networks in Rotherham - Kimberworth, Thurcroft and Thrybergh, supporting 10 people in each network. <https://www.keyring.org/>

Key Ring offers an alternative to supported living. Each person lives in their own house/flat. The individuals are not all in one block or property but are within walking distance of each other. They provide mutual support, companionship and there are paid support workers who can work on the individual's support plan developing independence skills and facilitating access to a weekly drop in known as a 'hub'. The current model has not been expanded for some time and the Council is keen to explore opportunities for further development.

### Key Points for Providers:

- The current Key Ring model has not been expanded for some time and the Council is keen to explore opportunities for further development to existing schemes and to support the creation of new schemes

## Shared Lives

The Shared Lives service in Rotherham is a Council led model. There is a strong commitment, backed up with investment to expand the service offer to recruit more carers and to establish more matches. In the existing model adults with a Learning Disability spend time with approved Shared Lives carers and their families. It is person centred and cost-effective way to provide support. It enables people to live life to the full in the community. In many cases the adult moves into the household of the carer, but the scheme can also offer respite care to family carers and day support. Approved carers are self-employed and receive fees and expenses for the support they provide.

The Shared Lives scheme carefully matches approved carers with people requiring support. Carers and the people in receipt of the service are supported by Shared Lives workers. The service is registered with the Care Quality Commission, and is a member of Shared Lives Plus, our national organisation. <https://sharedlivesplus.org.uk/>

Some individuals could live in a Shared Lives household, where they pay rent and contribute to bills.

Family carers of adults often need regular respite to 'recharge their batteries'. Many people do not wish to go into a care home, though they may be happy to stay in a Shared Lives household.

Currently there are 48 people supported by the Rotherham Shared Lives service. Several people have more than one service – for example, living in the household of the carer and having respite with another Shared Lives family. Within the overall Shared Lives cohort there are people:

- living in a Shared Lives household
- receiving Shared Lives respite
- receiving day-time support.

**Key Points for Providers:**

- The Council welcomes discussions with individuals to register as Shared Lives carers
- The Council is also happy to talk to Shared Lives providers from the independent sector regarding their offer and how this might supplement the Council managed provision

**Respite**

There are currently four respite services available for people with a Learning Disability in Rotherham.

Treefields and Quarry Hill services provide 6 respite beds each and are directly delivered by the Council. They are due to be commissioned during 2020/21. The Council has developed new provision at Conway Crescent, East Herringthorpe. This provision will be delivered from two adjoining properties. They will have a smaller number of beds – 8 in total, though this will form part of a range of respite options. One of the houses will focus on provision for Autism and the other for people with mobility issues in addition to a Learning Disability and/or Autism, though all of the units are flexible to meet a variety of needs. Both properties will be fully accessible and will therefore be able to better support people. The new offer will also focus more on improving life skills.

The Council commissions 9 residential respite beds across two sites from the independent sector and a further 4 nursing beds also. It is proposed that 3 residential beds will be decommissioned during 2020/21 to supplement the new provision at Conway Crescent.

Eligibility for access to the respite services is based on the needs of the Carer, through a carers assessment.

There are 7,581 nights of respite commissioned each year across the services. The assessed need during 2019/20 was for 4,968 nights of residential provision.

**Key Points for Providers:**

- A new respite offer is proposed under the Council's *My Front Door* Strategy [https://www.rotherham.gov.uk/downloads/file/3983/my\\_front\\_door](https://www.rotherham.gov.uk/downloads/file/3983/my_front_door) and this will actively encourage alternatives to bed based respite including supported holidays and use of Shared Lives options.
- The current deployment of the bed base will also be reappraised during 2020/21 with the Council offering a directly delivered service in addition to purchasing beds 6 residential and 4 nursing beds from the independent sector, the latter in conjunction with the NHS Rotherham Clinical Commissioning Group.

## Autism Offer

The Council is developing a co-produced all age Autism Strategy with a range of stakeholders including Unpaid Carers and people with Autism. This activity is due to be concluded by June 2020 and the Strategy will be subject to political discussion and Scrutiny prior to publication on the Council's website.

Aligned to the Autism Strategy will be an Action Plan. This will identify the activity required to deliver the ambitions of the plan. New provision and an expanded range of support solutions for people of all ages with Autism will be required.

The Council's offer to both Children and Young People and adults will undergo substantial change. The existing Autism specific offer is limited. Historically provision identified as Learning Disability support has also provided solutions for some people with Autism. The Council welcomes ideas and proposals for further developing Autism support.

The current dedicated offer is:

Adult Autism diagnosis (18+) from the Sheffield Adult Autism and Neurodevelopmental Service (SAANS) <https://shsc.nhs.uk/service/sheffield-adult-autism-and-neurodevelopmental-service/>

Day Opportunities are provided via the Rotherham Autism Hub provided by Autism East Midlands <https://www.autismeastmidlands.org.uk/adult-services/flexible-day-opportunities/rotherham-autism-hub/>

Employment Support is provided for adults with Autism through the Employment Solutions Service. This is available to Council tenants, Housing Association tenants and adults at risk of homelessness (regardless of who the landlord is).

The service will support adults referred to help them find full or part time work. This includes support to create a CV, provide advice about apprenticeships, identify training opportunities, work experience and look at solutions if an adult is facing barriers in terms of getting into employment. <https://www.autismlplus.org/news/2017/may/support-find-employment-rotherham>

### Key Points for Providers:

- The Council's offer to both Children and Young People and adults will undergo substantial change. The existing Autism specific offer is limited. Historically provision designed for Learning Disability support has also provided solutions for some people with Autism.
- The Council welcomes ideas and proposals for further developing Autism support.
- The Council welcomes providers who can support people with Autism to access employment and skills opportunities



- There is currently a shortage of supported accommodation specifically for people with Autism and options to provide additional units with support would be welcomed

## Physical Disabilities Offer

There is a limited bespoke commissioned offer for working aged adults under 65 with a physical disability in the borough. This has been identified as a gap. Historically the offer has centred on direct payments, adapted housing using the Disabled Facilities Grant (DFG) and home care and support to keep people within their own home. Some adults with life-long limiting conditions are also funded through NHS Continuing Healthcare. There is a small cohort of adults living in residential care. In some instances, this may not be the most appropriate option.

### Key Points for Providers:

- The Council welcomes discussions with potential providers about what they can offer, particularly with regards to specialist equipment and digital/assistive technology solutions to keep people as independent as possible.
- The Council also encourages developments of new properties to be designed flexibility to more easily accommodate adaptations to support independent living for people with physical disabilities. Wide doors, turning circles for powered wheelchairs and heavy load bearing ceilings/floors would allow for specialist equipment to be used in the future. Bariatric considerations would also be welcome.

## Mental Health Offer

There are currently 305 people supported by the Council with a primary support reason of mental ill-health, of these 165 are aged under 65 years old. The Council has identified that the existing commissioned offer for people experiencing mental ill-health requires transformation. There is a requirement for services to have a greater focus on step down, recovery and supporting people to move towards independence.

The social care aspects need to better link in with the statutory offer commissioned by the Rotherham Clinical Commissioning group for hospital (Core 24) and community (Core Fidelity) as well as the Public Health campaigns relating to *5 Ways to Wellbeing* [https://www.rotherham.gov.uk/homepage/486/five\\_ways\\_to\\_wellbeing](https://www.rotherham.gov.uk/homepage/486/five_ways_to_wellbeing) and the suicide prevention messages through *Be the One* <https://www.rotherham.gov.uk/preventsuicide>

The existing adult care offer for Mental Health centres on day opportunities, residential care and supported housing options. Some people with mental ill-health are also supported through the home care and support offer.

- Day opportunities for up to 40 people are directly delivered by the Council from Wellgate Court. The services over time have moved away from building based provision to offer a more community focused approach with support available outside of traditional office hours.

- Supported housing and floating support is provided through the Housing Related Support budget. There is currently one service that is specific for individuals whose primary support need is mental health and on a Care Pathway Approach (CPA). This service, Burns Court, run by South Yorkshire Housing provides 10 units of self-contained furnished accommodation units in a core housing project. There is a need to improve the move on options to facilitate people to become more independent within alternative accommodation.
- Residential care – as of April 2019, there were 72 mental health residential care placements for people aged 18-65; 12 of which are placements outside of the borough.

#### **Key Points for Providers:**

- The Council would welcome provider input to the co-design of the future pathway to be developed in 2020/21
- The Council welcomes providers who can support people experiencing mental ill-health to access employment and skills opportunities
- There is currently a shortage of supported accommodation for this cohort and options to provide additional units with support would be welcomed
- There is a current overreliance on residential care for people requiring higher levels of support. Step down accommodation with a focus on recovery and move on to independence would enhance the existing provision.

## **Sensory Needs Offer**

A review of services that support people with sensory impairment was undertaken in 2016. Findings were that Rotherham's model of support for people with sensory disabilities was focused on 'front loaded' statutory led support at the point of diagnosis. A significant gap in ongoing support for people who are deaf, hard of hearing, blind, partially sighted and deafblind was identified. It was decided that there was an urgent need to develop local services to assist people with sensory disabilities to remain as independent for as long as possible and prevent dependency on statutorily provided services.

In response to the review, the Council commissioned a sensory impairment service for people with both hearing and sight impairment. The service called Rotherham Sight and Sound, located at Ship Hill in Rotherham town centre commenced in October 2017. The service is delivered by Sheffield Royal Society for Blind and the offer extends beyond the Council's Adult Care statutory functions for a sensory offer. The original contract has been extended to also incorporate support for the Deaf Futures group through a sub-contract arrangement. The revised contract is due to run until April 2021 (with the option to extend to April 2022). <http://www.srsb.org.uk/Our-Services/Rotherham-Sight-and-Sound/>

#### **Key Points for Providers:**

- The Council would welcome additional provision to support the sensory needs community. However, funding for new services is limited and therefore support from the Council is likely to be non-monetary.



## Support for Unpaid Carers

The Council's Carers Centre is known as Carer's Corner and is based at the Rain Building in Rotherham Town Centre. The Carer's Corner is a central point of contact to signpost unpaid carers to available support services in the community, whilst referring those with complex needs to statutory services.

Carers Corner works in partnership with the voluntary and community sector to develop flexible enabling approaches and provides a service that works with individual unpaid carers and their families. It aims to find personalised solutions for their needs, encourages self-help and links with communities to mobilise local carer support. It increases identification and awareness of unpaid carers by 'targeting' specific GP surgeries, and carers groups. The Carers Forum and Carers4Carers groups holds regular meetings at the Carers Corner and support other unpaid carers and those who's loved ones suffer from serious enduring mental health problem. [https://www.rotherham.gov.uk/info/200015/carers/405/advice\\_for\\_carers/2](https://www.rotherham.gov.uk/info/200015/carers/405/advice_for_carers/2)

Rotherham Crossroads have recently opened the Carers Hub at All Saints Square in Rotherham town centre. This multi-faceted provision aims to provide a visible and accessible focal point for Unpaid Carers six days per week. It includes meeting spaces, a coffee shop and a charity shop.

Commissioned through the Better Care Fund, the Carer's Emergency Scheme provides vital replacement of care for informal unpaid carers in cases of emergency situations whatever that may be. The home care and support provider - Kinetic will replace care within one hour of notification and can provide up to a maximum of 48-72 hours of care service.

### Key Points for Providers:

- The Council wants to build stronger collaboration between carers and other partners in Rotherham and recognises the importance of the whole family relationship. One of the key priorities for supporting carers identified in the 'Caring Together 2016-2021: The Rotherham Carers Strategy' is the development of a jointly funded Carers' Support Service to include:
  - a dedicated carers lead officer
  - breaks for carers
  - information, advice and support,
  - a revised Carers Centre model
  - targeted action around unknown carers, carers of young people going through the Preparing for Adulthood pathway into adult services
- <https://moderngov.rotherham.gov.uk/documents/s108721/Appendix%201a%20-%20Carers%20Strategy%202016-18.pdf>
- The Council would like to work with providers who can offer innovative and carer led solutions to support unpaid carers in their role, particularly working and young carers.
- The Council will explore alternative future arrangements to the Carers Emergency Scheme

## Digital and Assistive Technology Offer

The Council is currently developing the Digital Strategy for Adult Care and a lead officer has been appointed to oversee the development of the digital and assistive technology offer. The aim of the strategy will be to:

- deliver financial savings from less reliance on formal services
- divert alerts away from the formal response service
- increase opportunities for reablement
- use data to support the accurate review of care packages
- support Unpaid Carers and families
- increase opportunities for early intervention to prevent escalation
- introduce new concept technologies to service users and their unpaid carers and families

Currently the Adult Care offer consists of:

- Rothercare community alarm – this is an installed alarm in the person’s home. Should the person have an emergency, then the alarm button can be depressed, and this will enable help to be called for help and advice 24 hours a day, 365 days a year. [https://www.rotherham.gov.uk/info/200593/social\\_care\\_and\\_support/412/apply\\_for\\_a\\_community\\_alarm](https://www.rotherham.gov.uk/info/200593/social_care_and_support/412/apply_for_a_community_alarm)
- Just Checking - is an activity monitoring service to support objective, evidence based care assessments with the discreet door and movement sensors around an individual’s home. The data displays an overview of daily activity to enable a better understanding of where support is needed. <https://justchecking.co.uk/>
- Alcove – an assistive technology pilot project. The core equipment centres on Amazon Alexa technology with six sensors and is installed by the provider for the person accessing the service. Data is collected from the sensors over a 6-week period to determine the person’s care needs and the effectiveness of the equipment for this person using. The individual can choose whether to purchase or return the equipment after the trial period. <https://www.youralcove.com/>
- I Age Well Rotherham – is an information and advice tool using The LifeCurve technology developed by ADL Research and Newcastle University’s Institute for Ageing. The questionnaire-based approach aims to promote bespoke options for enabling a person to stay as fit and able as possible. <https://www.iagewellrotherham.co.uk/>
- Rotherham AccessAble (formally known as Disabled-Go) - an on-line detailed disabled access guide to inform people as to the accessibility of services in the borough. This includes shopping and leisure facilities in addition to public buildings. The guide is produced by independent reviewers and can be updated by members of the public. <https://www.accessable.co.uk/organisations/rotherham-metropolitan-borough-council>

### **Key Points for Providers:**

- The Council recognises that it is at the start of the digital and assistive technology journey. The future offer needs to be determined and informed by the Digital Strategy. Ideas and suggestions from providers on an effective digital roadmap that promotes independence and a reduction in demand for statutory services would be welcomed.
- The Council's First Point of Contact service is updating information and advice on the Council's website with a view to creating improved digital access channels
- The Rothercare service requires modernisation and will be reviewed in 2020/21. The Council would be happy to talk to providers who can potentially offer a next generation solution.

## **Advocacy Support**

The Council competitively tendered for a new Advocacy service during late 2019/20. The new contract covering the statutory elements and community elements has been awarded to Cloverleaf through their Absolute Advocacy brand. The new contract is due to commence on 1 April 2020. <https://www.cloverleaf-advocacy.co.uk/offices/rotherham>

Independent advocacy services are necessary to meet the Council's statutory requirements under the Care Act 2014, the Mental Capacity Act 2005, the Mental Health Act 2007 and the Health and Social Care Act 2012. Statutory independent advocacy services provide support to people who:

- may require assistance throughout the care and support assessment and through the review process,
- lack mental capacity to make decision about themselves
- are detained under the Mental Health Act
- require support to complain about services provided by the NHS.

In addition to the defined, block contract statutory elements above, the new model will include independent advocacy services which are non-statutory (or generic) are available to people living in Rotherham who have difficulty articulating and negotiating their health and social care needs. This support empowers people to effectively navigate the health and social care system. 50% of this contract provision, funded through spot contract must be awarded to providers from the Rotherham Voluntary and Community sector through sub-contract arrangements.

### **Key Points for Providers:**

- The Council is happy to facilitate and broker discussions between the primary provider Cloverleaf (Absolute Advocacy) and the Rotherham VCS to support future sub-contract arrangements.

## Local Healthwatch

The Health and Social Care Act 2012 amended the Local Government and Public Involvement in Health Act 2007 to make provision for a national Healthwatch England and for a local Healthwatch. This is a statutory service and each local authority is mandated to have a local Healthwatch. The local Healthwatch is expected to be the local consumer champion for patients, service users and the public, covering both health and social care for all ages, including children. <https://healthwatchrotherham.org.uk/>

A new contract for the Healthwatch Rotherham was awarded to Rotherham and District Citizens Advice Bureau in late 2019, following a competitive tender process. The new provision will commence on 1 April 2020.

### Key Points for Providers:

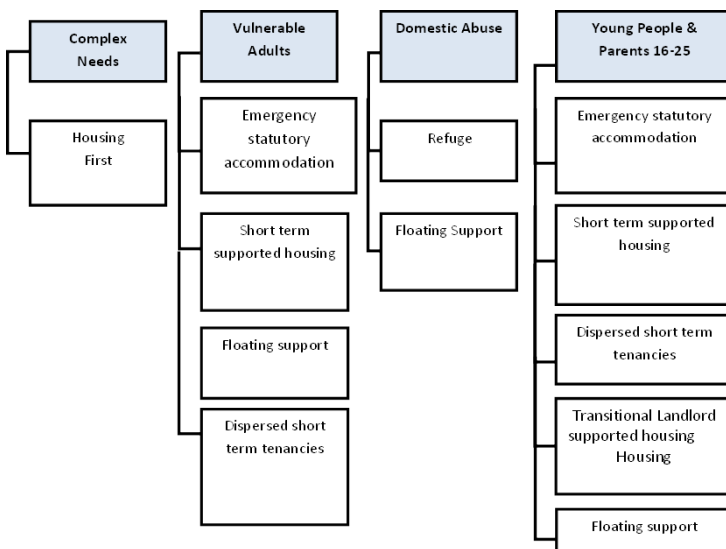
- The new service will require trustees, members and volunteers and the Council would welcome organisations providing support to Healthwatch Rotherham through their future Social Value commitments.

## Housing Related Support Offer

The current Housing Related Support offer model provides four pathways which are:

- Complex Needs
- Vulnerable Adults
- Domestic Abuse
- Young People and Young Parents 16-25

Each of the pathways focuses on those who are homeless or at risk of homelessness, with a person's specific needs determining which of the four pathways best meet their needs. This is articulated in the diagram below:



The contracts for the Rotherham Housing First, Young People & Parents pathway 16-25 and Domestic Abuse pathway have recently been put in place with services not due to be re-let until 2021/22. The Vulnerable Adults pathway is currently under review.

The Housing Related Support offer is explained in more detail below:

<b>Complex Needs</b>	<b>Current HRS Service Offer</b>
Housing First	<p>The service operates the Housing First Model for 25 units. Housing First is a recovery-oriented approach quickly moving people experiencing homelessness into independent and permanent housing and then providing additional supports and services as needed.</p> <p><a href="https://www.homeless.org.uk/our-work/national-projects/housing-first-england">https://www.homeless.org.uk/our-work/national-projects/housing-first-england</a></p>
<b>Vulnerable Adults Pathway Multiple Needs</b>	
Homeless Families accommodation	There is currently one supported accommodation service for homeless families. This service delivers a range of family sized furnished supported housing across the borough.
Single Homeless accommodation	This service delivers 15 single self-contained units of supported accommodation.
Accommodation based furnished supported accommodation	<p>There are two services; each providing accommodation based furnished supported housing for single people.</p> <p>One service delivers 10 single self-contained units.</p> <p>The other delivers 15 single self-contained units.</p> <p>One of the services is specific for individuals whose primary support need is mental ill-health and is for people on a Care Pathway Approach (CPA) This service provides 10 units of self-contained furnished accommodation units in a core housing project.</p>
Floating Support Services	There are currently two services, each providing floating support services. Each service delivers 110 units of floating support, a total of 220.
Home Improvement Service	The Home Improvement service offers advice and support and a home improvement repair service for older people or people with vulnerability. 1300 individuals receive support from this service.
<b>Young People Pathway Services aged 16-25</b>	

Young people aged 16-25 with Multiple Needs	<p>This service currently delivers a seamless pathway for young people who are aged 16-25. The service consists of five key elements:</p> <ul style="list-style-type: none"> <li>• 4 emergency units with 24-hour support.</li> <li>• 12 Core, single accommodation units with 24 hour support</li> <li>• 12 Semi-supported housing via a range of dispersed properties, both single and shared housing.</li> <li>• 7 units of Transitional Landlord accommodation</li> <li>• 50 units of Floating Support</li> </ul> <p>A total of 85 units of support within the one service</p>
Young Parents 16-25	There are currently two services to support young parents.
Accommodation Based	One service delivers 20 units of supported furnished accommodation
Floating Support	This service delivers 27 units of Floating Support
<b>Domestic Abuse Pathway Services</b>	
Refuge Accommodation	The Refuge has 10 units of supported furnished accommodation
Floating Support Services	<p>There are currently two services providing floating support</p> <p>One service is for Black, Minority, Ethnic and Refugee (BMER) people - 32 units. The other service delivers 50 units of floating support.</p>
<b>Other Housing Related Support</b>	
Sheltered Alarms	Contribution of funding for the Sheltered Alarm provision to 236 individuals.

### Key Points for Providers:

- The whole Domestic Abuse pathway will be co-produced during 2020/21. Providers will be asked to actively participate in this activity as key stakeholders and to facilitate willing participation from people in receipt of services. A procurement process will be run in Quarter 3 of 2020/21 for refuge and support provision.
- The Council is looking to access additional funding from central government to develop further units of Housing First provision to support people with Complex Needs
- Following the Vulnerable Adults review, to be completed in 2020/21, a procurement plan will be developed and shared with providers.
- The Home Improvement service provision will be reviewed in 2020/21 to determine future commissioning intentions

- The sheltered alarm provision from Registered Providers currently subsidised through Housing Related Support will be reviewed in 2020/21 to determine future commissioning intentions

## **Housing Offer from the Council**

The Council offer a Tenancy Support service to Council housing tenants. All prospective tenants must undertake a pre-tenancy interview which reviews their income and expenditure and offers support with financial advice and will refer to other support agencies as required.

For many Council tenants getting a tenancy is their first home and tenancy support is provided to make sure that the tenant is supported to make a success of their tenancy and feel settled in their new home. On-line workshops are offered for all prospective tenants to prepare for having their own tenancy as a pre-condition of being able to bid on a property.

Housing Officers make welcome visits to new tenants within the first six weeks of their tenancy. The tenancy verification visit to tenants has now been expanded into a tenancy health check broadening the range of the visit and offering a wider range of support if the tenant needs this to help them maintain their home and independence. Tenancy health checks have focussed on the over 75's who live alone to help pick up any growing loss of independence and quality of life.

The financial inclusion tenancy support offer provides day to day support for Council tenants who are in financial difficulty and or experiencing other crises. The financial inclusion service runs community events to promote the service and offer support and advice. Employment support for Council tenants is also provided. This supports tenants to write CV's and assists them in finding employment.

### **Key Points for Providers:**

- Awareness that the Tenancy Support Service can provide advice and support for marginalised people, particularly those experiencing difficulties with Universal Credit.

## **Self-funders**

The Council has limited information regarding self-funders. Given the demographics of Rotherham, the Council is the majority purchaser in most markets, though the self-funder market is growing, particularly in residential care where the Council's market share is now 48%. For home care and support the Council is the dominant purchaser, but information on self-funders in this sector is difficult to obtain. Similarly, the Council is a dominant purchaser of services for people with a Learning Disability or Physical Disability, excluding people who have exercised choice to receive a direct payment.

The Council is keen to see older people maximise their benefit entitlement and works closely with the voluntary sector to encourage greater take up of Attendance Allowance. This approach also forms part of the co-production with the voluntary and community sector for the development of an independent pre-front door for Adult Care known as Active Solutions. It is proposed that the voluntary sector will provide people with information, advice and signposting to low-cost/no-cost options that they can buy directly to keep them as independent as possible.

The Council actively encourages the take up of digital solutions across all cohorts where this can support people to be independent or improve their wellbeing. This does not necessarily require Council intervention, though the Council is keen to further develop the commissioned offer.

#### **Key Points for Providers:**

- The Council is keen to see older people maximise their benefit entitlement and works closely with the voluntary sector to encourage greater take up of Attendance Allowance.
- This approach also forms part of the co-production with the voluntary sector of the development of an independent pre-front door for Adult Care.
- It is proposed that the voluntary sector will provide people with information, advice and signposting to low-cost / no-cost options that they can buy directly to keep them as independent as possible.
- The Council actively encourages the take up of digital solutions across all cohorts where this can support people to be independent or improve their wellbeing. This does not necessarily require Council intervention, though the Council is keen to further develop the commissioned offer.

## **Quality**

The Yorkshire & Humber region has the lowest level of Good Care Quality Commission (CQC) ratings in England for registered care services. Rotherham's services are currently ranked third highest overall for the region (out of fifteen), [\[Yorkshire & Humber ADASS or CQC - attach link\]](#) but there is a need to drive further improvement. A quality strategy is needed to set the direction for the required changes, applying learning from other areas that have seen marked improvements.

During 2018/19, the Council ended contractual relationships with two providers of older people's residential & nursing care that had been persistently rated as Inadequate by the CQC, despite on-going support from the Council and CQC. This ultimately resulted in their closure. The Council's intention is always to provide support and assistance to providers when they encounter quality issues, but this must be balanced against the safety and wellbeing of people in receipt of support.

The current CQC ratings for Rotherham across all settings are:

- Outstanding – 3



- Good – 82
- Requires Improvement - 15
- Inadequate – 1

### Key Points for Providers:

- The Council will develop a Quality Strategy with aligned action plan during 2020/21 in order to improve the overall number of CQC ratings of Good/Outstanding in the borough for over 111 care settings. This will incorporate best practice from regional work by Yorkshire & Humber Association of Directors of Adult Social Services (ADASS) and also elements of the Local Government Association's Quality Matters <https://www.local.gov.uk/topics/social-care-health-and-integration/adult-social-care/quality-matters> approach. The principle areas of focus will be on:
  - **Acting on feedback, concerns and compliments** - ensuring that people who use services, their families and carers receive information that is clear and standardised, and that complaints are handled quickly and effectively.
  - **Measuring, collecting and using data more effectively** - reviewing data across the Yorkshire and Humber region and developing a common approach to measuring key quality metrics to ensure consistency.
  - **Commissioning for better outcomes** - incorporating information about people's experience of care to co-produce the service specification and inform the commissioning outcomes.
  - **Better support for improvement** - encouraging the take up of sector-level improvement initiatives
  - **Shared focus areas for improvement** - ensuring that Adult Social Care is considered across health and social care initiatives and that people work collaboratively across sectors.
  - **Improving the profile of adult social care** - championing everything that is great about Adult Social Care so more people understand, support and celebrate the fantastic difference care and support makes to people's lives. The effective use of case studies and social media will support this.

## Workforce

Skills for Care published: *A summary of the adult social care sector and workforce in Rotherham 2017/18*

<https://www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence/documents/Local-authority-area-summary-reports/Yorkshire-and-Humber/Rotherham-Summary.pdf>

This was based on information received from the National Minimum Dataset and compares Rotherham to the Yorkshire & Humber region and nationally.

Key findings were:

- The estimated number of Adult Social Care jobs in the Rotherham area was 7,600 including 500 managerial roles, 300 regulated professionals, 6,000 direct care (including 4,400 care workers), and 750 other-non-care providing roles.
- Skills for Care estimates that the turnover rate in Rotherham was 27.2%, which was lower than the region average of 31.2% and lower than England at 30.70%. Not all turnover results in workers leaving the sector, over two thirds (71%) of those recruited came from within the adult social care sector, therefore although employers need to recruit to these posts, the sector retains their skills and experience.
- Adult Social Care has an experienced 'core' of workers. Workers in Rotherham had on average 8.8 years of experience in the sector and 77% of the workforce had been working in the sector for at least three years.
- In Rotherham, 3.6% of roles in Adult Social Care were vacant, this equates to around 250 vacancies at any one time. This vacancy rate was similar to the region average, at 5.6% and lower than England at 8.0%.
- More than half (57%) of the workforce worked on a full-time basis, 37% were part time and the remaining 6% had no fixed hours. Around a quarter (27%) of the workforce in Rotherham were on zero-hours contracts.
- The majority (87%) of the workforce in Rotherham were female and the average age was 43.6 years old. Those aged 24 and under made up 10% of the workforce and those aged over 55 represented 25%. Given this age profile approximately 1,900 people will be reaching retirement age in the next 10 years.
- An estimated 97% of the workforce in Rotherham had a British nationality, 1% had an EU nationality and 2% had a non-EU nationality. Nationality varied by region, in England 83% of the workforce were British, while in Yorkshire and the Humber this was 93%.
- It is estimated that 56% of the Rotherham workforce hold a relevant Adult Social Care qualification (57% in Yorkshire and the Humber and 53% in England).

The Skills for Care statistics above paint a picture of the workforce challenges facing Adult Care within Rotherham. Though these issues mirror the national position, there is very much an urgent need for the Council to work in partnership with providers to address them.

Financing social care is a challenge for the Council and budget constraints limit the rates the Council can pay for services. However, the workforce issues are wider than just the hourly rates paid to service providers with the social care sector having a negative perception in terms of attractiveness for care staff.

#### **Key Points for Providers:**

In response to the situation described above, the Council proposes to:

- Put social care staff at the heart of new delivery models. For example, the new home care and support service aims to make home care a real career choice by allowing social care staff to manage the 'envelopes of time' for the people they support and seeing them as part of a wider multi-disciplinary team.
- Attract motivated social care staff with the right values through supporting providers with values-based recruitment. This reduces pressure and costs for providers to continuously recruit and train the workforce. The proposed model has been adopted in other local authorities providing a platform of experience and learning that the Council can build on.

- Engage the existing social care workforce in a targeted Learning and Development Programme run by the Council to support the new Adult Care pathway.
- Continue to work with the Rotherham and North Nottinghamshire College Group (RNN) to further develop the Health and Social Care syllabus for students aged 16+ to encourage entry to the profession.
- The Council is committed to supporting the principles of the Social Value policy <https://moderngov.rotherham.gov.uk/mgConvert2PDF.aspx?ID=123080> and encourages, where possible for providers to pay their staff the Real Living Wage Foundation's Real Living Wage of £9.30 per hour

## **A Workforce Fit for the Future**

Increasing demand and complexity will mean that the workforce will need to respond to and step up to meet the requirements across health and social care. There are however ongoing challenges relating to the recruitment and retention of staff across the system, especially at lower grades within the independent sector. Low wages and the impact of zero hours contracts against a backdrop of alternative sector options have resulted in a lack of stability in the workforce. Often vacant roles are not seen as an attractive proposition and the sector is finding it difficult to attract and retain new starters, further exacerbated by recent exit from the European Union.

The integration of health and social care will drive the need for different skill sets and the ability to discharge 'trusted assessor functions' outside of traditional disciplines. The merging of different cultures, one with a charging model and the other, free at point of access requires a mature outlook and the common focus on the customer. Effective and clear communication between professionals operating a key worker role, thereby minimising hand-offs and working in a multi-disciplinary environment will be the norm as community provision is blended at a locality level. To achieve this will require significant investment in organisational and workforce development at a system level.

The integration journey has started for the provision of home care and support and learning from this approach will be applied to a wider range of services over the next two years. For example, Housing officers have been trained to identify and support vulnerable tenants and to direct them to the relevant pathway.

As the Council further embeds the Care Act 2014 and drives forward the integration agenda, there will be significant implications for the Adult Social Care workforce including:

- increasing challenges relating to the retention and recruitment of staff
- an increased demand for carers assessments and services (including links to community assets)
- provider staff will need to become more actively involved in the reassessment process and form part of a wider system of professionals
- staff will need to be multi-skilled in order to support greater levels of integration

### **Key Points for Providers:**

- The Council plans to engage providers in developing staff towards new roles which support a new model of services and the integration agenda with primary focus on the new Home Care and Support service.
- Providers will be actively encouraged to shape the offer, through co-design with the Councils Training and Workforce development service. The initial focus will be on strengths-based approaches and development of community assets.

## **Values Based Recruitment**

The Council aims to make care and support a more attractive career option by improving conditions and career pathways; considering joint approaches to values based recruitment and other opportunities to grow and develop the workforce.

Recruiting people for their values and behaviours ensures that the right people work in the sector. People with the right values know what it means to provide high quality care and support and are more likely to stay.

This approach involves establishing strong workplace values and ensuring that the workforce matches them. Doing this will help to reduce time and wasted resources in recruiting the wrong people.

### **Key Points for Providers:**

- Service Providers should refer to workforce guidance issued by Skills for Care and must demonstrate effective approaches to values-based recruitment and retention when looking to work with the Council in the future.  
<https://www.skillsforcare.org.uk/Recruitment-retention/Values-based-recruitment-and-retention/Values-based-recruitment-and-retention.aspx>

## **Sustainability**

During 2018/19 two providers, covering the older people's residential care and home care and support sectors ended their contracts with the Council as a result of their financial position. Both were national organisations, with one making a strategic decision to withdraw from this area of the business in a planned way and the other subject to a swift financial collapse. In these instances, the Council had a contingency plan in place and was able to mitigate the risks including finding suitable alternative provision when required. Though 2019/20 has seen more stability within the local provider market, the Council is far from complacent and actively encourages open dialogue with providers regarding their financial health.

A range of voluntary sector providers with a long history of working with the Council also faced significant financial difficulties during 2019/20, though these were ultimately overcome.

However, the fragility of the market is well understood. The challenging financial position of the Council and ten years of reducing budgets and requisite cuts means that there is limited slack within the adult care system to make direct contract savings. There is also limited scope for further decommissioning of non-statutory services, such as Housing Related Support as these are preventative services and to do so would prove ultimately more costly to the public purse in the longer term.

The workforce challenges have been highlighted above and these can impact on the quality of services and ultimately their sustainability. The Council is committed to working in genuine partnership with providers to ensure that the best possible people, with the right values provide care and support in the borough.

Notwithstanding the financial challenges, the Council remains a significant commissioner of services, increasingly investing jointly with NHS Rotherham Clinical Commissioning Group.

#### **Key Points for Providers:**

- The intention is to continue the transformation of the Rotherham service offer, primarily through maximising funding opportunities under the Better Care Fund, Improved Better Care Fund and Winter Pressures funding.
- The Council is keen to promote open book accounting and to start the conversation early as to fee setting for 2021/22 through an on-going fee consultation exercise during 2020/21. It is envisaged that the Council's funding position from central government will be better understood and a new Medium-Term Financial Strategy produced.

## **Resources**

The Net Revenue budget for Adult Care, Housing and Public health in 2020/21 is £79,363m from a total Revenue budget of £233,333m for the whole Council. The Budget and Council Tax report 2019/20 identified savings proposals to meet the budget gap of £30m over the two financial years 2019-20 and 2020/21.

The directorate faces a number of significant demand challenges as a result of changes in population demographics. There is sustained budget pressure as a result of an aging population; a rising population of working age adults with long term health and care support needs; and increasing acuity and complexity of need for those residents who need support; and increased cost pressures including rising inflation and the implementation of policy decisions such as the National Living Wage.

These demand and budget pressures are resulting in a forecast over-spend in 2019/20 and the focus for 2020/21 is to both continue the complex set of changes needed to reduce demand, working with health and social care partners in the borough, alongside making significant changes to the way care services are delivered to make care more personalised, responsive and cost effective.

Total savings to come from Adult Social Care have been identified for 2020/21 has £6.329m.

The Council has agreed the implementation of the Adult Social Care Precept for 2020/21. However, there has been no increase in the Better Care Funding for 2020/21. Further investment in Adult Care has been provided within the 2020/21 budget to support the increase in demand for services. and to support the increase in the Adult Care Provider contracts due to the impact of the increase in the National Living Wage.

## The Better Care Fund

The Better Care Fund budget for 2019-20 is £40.370m. This has increased by £4.8m due to additional funding from improved and additional Better Care Funding (£2.6m), Disabled Facilities Grant (£0.2m), the inclusion of Winter Pressures Funding (£1.345m) and additional investment from RCCG (£0.6m).

The following table summarises the Better Care funding over the key themes:

Budget 2019-20	2019/20 INVESTMENT		2019/20 SPLIT BY POOL		
	RCCG SHARE	RMBC SHARE	Pool 1 RMBC Hosted	Pool 2 RCCG Hosted	Total
	£000	£000	£000	£000	£000
THEME 1 - Mental Health Services	1,169			1,169	1,169
THEME 2 - Rehabilitation & Reablement	10,813	4,433	15,245		15,245
THEME 3 - Supporting Social Care	3,617			3,617	3,617
THEME 4 - Care Mgt & Integrated Care Planning	4,893			4,893	4,893
THEME 5 - Supporting Carers	600	50		650	650
THEME 6 - Infrastructure	241			241	241
Risk Pool	500			500	500
Improved Better Care Fund		12,710	12,710		12,710
Winter Pressures		1,345	1,345		1,345
<b>TOTAL</b>	<b>21,833</b>	<b>18,538</b>	<b>29,300</b>	<b>11,070</b>	<b>40,370</b>

The Better Care Fund has two separate pooled funds. RMBC host pool 1 (£29.3m) which is made up of Theme 2 – Rehabilitation and Reablement and the Improved Better Care Fund and Winter Pressures grant funding. The RCCG host pool 2 (£11m) which are the remaining themes plus including a risk pool.

The improved and additional Better Care Fund has been allocated towards meeting Adult Social Care pressures and service transformation, reducing delayed transfers of care from hospital including meeting pressures during the winter period and maintaining market sustainability within social care.

Additional funding to support the social care and local health system to manage demand pressures over the winter period has been allocated to Local Authorities and is to be included in the Better Care Fund for 2019/20. The funding is to be used to on interventions which support people to be discharged from hospital, who would otherwise be delayed, with the appropriate social care in place, and which will help promote people's independence.

### 3. The Vision

The Council has embedded the **Adult Social Care Vision 2017-20**

**'We will act together to support the residents of Rotherham to live full active lives; to live independently and to play an active part in their local communities'**

<https://moderngov.rotherham.gov.uk/documents/s116917/Adult%20Social%20Care%20Vision%202017-20.pdf>

All residents are encouraged to recognise their strengths, build their active independence and identify the support that their family, friends and local community can give them, based on three key themes:

<b>Theme 1</b>	<b><i>Act to help yourself</i></b>  We want to promote personal responsibility and for people to have opportunities to become a greater part of their community through increased opportunities for socialising, gaining personal recognition and building relationships, whilst remaining in their own homes and communities as long as possible.
<b>Theme 2</b>	<b><i>Act when you need it</i></b>  The delay of the development of long term care needs by targeting our support at those who have experienced a recent crisis or acquired an illness or disability.
<b>Theme 3</b>	<b><i>Act to live your life</i></b>  The meeting of needs to help individuals to live their lives will be based on looking at the support and help available to them through their existing family networks or community. This will mean looking at what an individual can do for themselves and what they might need help with.

The core principles are to:

- **Focus on the Person** – to encourage people to recognise their strengths in a way that supports choice and control and ensures a personalised approach to safeguarding.
- **Best Value** – to make the best use of collective resources to get maximum value for the residents of Rotherham at a sustainable cost.
- **Quality** – to make sure that people receive good quality support that meets their needs in a way that it is timely and safe.
- **Working Together** - to work creatively with partners and communities, empowering them to deliver the best possible outcomes so that people can live well.

As part of the Council's Big Hearts Big Changes Programme, which is looking to shape the future of the Council whilst achieving financial sustainability, a new pathway for Adult Social Care has been developed.



Through extensive engagement with staff, data analysis and comparator research, it is evident that although the Council want people to be receiving the right care, in the right place, by the right professional for the right amount of time to achieve their personal outcomes we know there is far more the Council can do. Direct engagement with staff has further confirmed this, with many voicing their issues/thoughts with the current operating model, its impact on their ways of working, and ultimately how it is impacting on the people we support.

The ultimate aim of Adult Social Care is to help people meet their needs to achieve the outcomes that matter to them in their lives and which in turn promotes their wellbeing. In Rotherham, due to historic practices and models of delivery, these aims have not always been achieved, resulting in people being overly reliant on their care packages, weakening their drive for independence and ability to do things for themselves. This has created a cycle of decreasing independence and therefore an increasing level of care provided, moving away from any possibility of reablement.

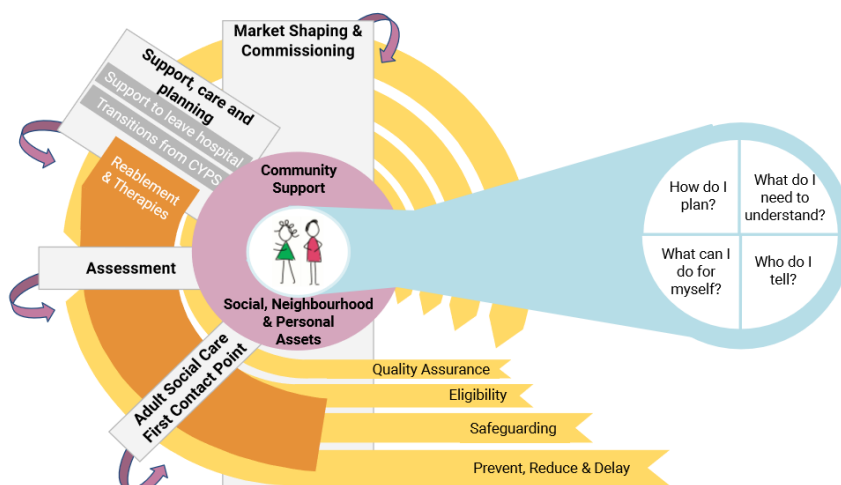
The Council requires a new way of providing care and support that utilises the assets within communities and supports its population to become more independent.

The intention is that in future people will be better informed through information and advice as to what is available for them across universal services (e.g. free public services such as libraries) and from more structured approaches – universal plus, where public buildings are used to host voluntary sector organisations to engage with people making enquiries about care and support and signposting them to suitable alternative solutions. Early intervention will be applied to people who are on the edge of receiving care and support from the Council and may include equipment, digital solutions or time limited voluntary sector support.

Under the previous operating model, the Council was not as effective as it could be regarding proactive early intervention and prevention. Consequently, more people went on to receive a formal assessment than in other Councils with similar demographic profiles. The new Adult Care pathway introduced in October 2019 aims to address these issues.

The new Adult Care pathway is the framework to deliver vision. This is articulated in the diagram below:

## How we will work in the new model



The Adult Care pathway puts the person at the centre to ensure that solutions are personalised and bring out their strengths. The aim is to prevent, reduce and delay the need for formal care and support through effective information and advice from the Adult Care First Contact Point. However, if a person is eligible and assessed as needing care and support, then this will be delivered at the person's home within a community setting, where possible, regardless of age or cohort requirements. Any market solutions will be of good quality and will safeguard people.

If a person has had a period within a hospital setting prior to receiving adult care, then they will be first supported through reablement and occupational therapy to maximise their independence before receiving ongoing care and support.

Young people transitioning to Adult Care through the Preparing for Adulthood pathway will be supported in the community with the aim that they have their own front door whenever possible.

## **Housing Strategy**

The Rotherham Housing Strategy (2019-22 v11) sets out the vision and ambition for Housing in Rotherham:

- people living in high quality homes
- the Council being the best housing provider in the country
- reducing the gap between the most and least deprived neighbourhoods so that everyone can live in safe, healthy and vibrant communities
- households living in energy efficient homes
- a revitalised town centre with a new urban community

The Strategy can be found at:

<https://moderngov.rotherham.gov.uk/mgConvert2PDF.aspx?ID=119675>

The Housing Strategy sets out the commitment of the Housing Service to support:

- people who are facing financial difficulties by providing advice and support, and affordable, decent homes
- people to remain in their homes or find suitable housing that better meets their needs
- improve the housing offer for people with disabilities
- reduce the numbers of people presenting as, or at risk of, being homeless
- tenants to get involved and make their voice heard

## **Housing Growth**

Rotherham will have a high quality housing and leisure offer to assist with attracting world class business and a world class workforce. 14,000 new houses will be delivered by 2030. Housing will dovetail with major sites such as the new community at Waverley strategically placed near to the Advanced Manufacturing Park (AMP) and future Advanced Manufacturing Innovation District (AMID) on the Rotherham/Sheffield border.

The Council will also create additional housing in and around Rotherham town centre to increase its economic vitality. More details can be found in the Rotherham Economic Growth Plan 2015-25:

[file:///C:/Users/nathan.atkinson/AppData/Local/Packages/Microsoft.MicrosoftEdge\\_8wekyb3d8bbwe/TempState/Downloads/Rotherham Economic Growth Plan 2015 25%20\(1\).pdf](file:///C:/Users/nathan.atkinson/AppData/Local/Packages/Microsoft.MicrosoftEdge_8wekyb3d8bbwe/TempState/Downloads/Rotherham_Economic_Growth_Plan_2015_25%20(1).pdf)

Over the next three years the Council will:

- increase the number of care and support ready homes
- future proof new homes
- improve the housing offer for people with support needs by working closer with Social Care and Health professionals
- roll out joint initiatives that promote healthy homes, independence and healthier lifestyles
- provide housing that supports and encourages independence
- review existing care and support services, including piloting the use of assistive technology solutions in reducing adult care costs
- develop housing services which help reduce the number of people presenting as, or at risk of, being homeless
- build on successes and lessons learned from the *Housing First* pilot
- be clear about how local providers can support us to provide the right type of accommodation for our vulnerable residents
- strengthen the tenant voice and empower people so that they are better equipped to deal with life changes

## **Homelessness**

The Council and partners are committed to ending homelessness and rough sleeping. The Homelessness and Rough Sleeper Strategy sets out the Council's commitment to end homelessness in Rotherham, making sure everyone has somewhere to call home, providing the right support in place in times of crisis to prevent homelessness. The strategy can be found here:

<https://moderngov.rotherham.gov.uk/documents/s121164/Rotherhams%20Homelessness%20and%20Rough%20Sleeper%20Strategy%202019%2022.pdf>

## **Models of Housing, Care and Support**

Quality of care will be developed and improved through further integration between health and care partners in the borough. Firstly, it will ensure that residents are better supported at the front door through an integrated point of contact that connects residents with the most appropriate type and level of support. An integrated rapid response service will be tasked with delivering short, tailored interventions to support unplanned episodes of care and an improved discharge model will support timely transition from hospital to home and reduce delayed transfers of care.

Supporting people to live well at home, for as long as possible, will be a key focus and will improve quality of life for residents, while reducing cost. This will be achieved through investment in preventative care, to reduce acute and long-term interventions; access to appropriate, coordinated support including more effective support to carers; and personalised care delivered by skilled care workers, family and through new technology.

Residential care for adults with complex support needs will be transformed to enable residents to access both high quality primary care and a broader range of care pathways, and stronger connections to family and community support. Similarly, the Council will work together with health partners to continue the remodelling of Mental Health services, with a greater focus on early intervention, improved accessibility and more responsive, personalised service.

These priorities are designed to deliver a long term, sustainable reduction in demand pressures facing the Council, as well as addressing over-spending from previous years.

It is not the intention of the Council to be prescriptive about the service models that we require or to mandate to the minute detail what is required in a service specification. The approach will be to determine the key outcomes we wish to achieve and the principles and approaches as to how we believe a provider should deliver the accommodation or care and support solution. The Council will be looking for values when selecting providers and is keen to work with organisations that thrive on a relationship driven model.

The Council is committed to a neighbourhood working model and the knowledge of our Wards, the make-up of the people and properties in them, helps us to determine where we require new accommodation solutions.

See area profiles: [https://www.rotherham.gov.uk/jsna/info/50/places/14/area\\_profiles](https://www.rotherham.gov.uk/jsna/info/50/places/14/area_profiles)

The Council wants people with care and support needs to thrive in communities rather than become their own community. The agglomeration of services in certain Wards can destabilise them and there are parts of the borough that are already saturated. The summary information from Housing Research [\[insert Housing Research links\]](#) and the Local Plan [https://www.rotherham.gov.uk/info/200074/planning\\_and\\_regeneration/617/a\\_guide\\_to\\_the\\_local\\_plan](https://www.rotherham.gov.uk/info/200074/planning_and_regeneration/617/a_guide_to_the_local_plan) will assist in demonstrating where we require new provision.

### **Key Points for Providers:**

The Council wishes to work with providers who buy into the principles and approaches of the new Adult Care pathway and can offer effective, affordable care and support solutions. The Council is particularly seeking the following:

- services that provide a strong and co-ordinated preventative offer, to be delivered in partnership with the voluntary and community sector
- a reablement and recovery ethos woven throughout services
- a wide range of options for day opportunities, particularly community based
- options to support people to enhance their skills and access opportunities for paid and voluntary work
- a reduced emphasis on institutional care and greater use of community solutions supporting *Home First* principles

- innovative approaches including the use of digital, assistive technology and specialist equipment to keep people independent within their own homes
- an effective Housing Related Support offer that contributes to a reduction in homelessness and reduces demand on the Housing Options service
- support for Unpaid Carers recognising the vital role they play
- a commitment to deliver Social Value

## Social Value

The Public Services (Social Value) Act 2012 came into force on 31st January 2013. Local authorities and other public bodies have a legal obligation to consider the social good in contracts that are subject to the Public Contracts Regulation 2015. The aim of the Act is not to alter the commissioning and procurement processes, but to ensure that, as part of these processes, councils consider the wider impact of the services delivered. The Act also promotes the use of co-design in commissioning processes as a valuable tool to strengthen local delivery.

Social value is defined by the Social Value Hub as:

*'The benefit to the community from a commissioning or procurement process over and above the direct purchasing of goods, services and outcomes'.*

This definition has been adopted by the Council and a Social Value Policy has been developed and agreed for the borough. A copy of the policy can be found at this link: <https://modern.gov.rotherham.gov.uk/mgConvert2PDF.aspx?ID=123080>.

The Social Value policy document sets the Councils approach to social value, as well as the practical steps it will take to maximise the local impact of Council spend. The approach applies to all procurement processes run by the Council. The framework set within the policy specifies how providers can potentially deliver against the six key outcomes:

- Raising Living Standards for residents
- A strong local economy, with employment and skills opportunities and a growing business base
- Young People have the opportunity to develop skills and find worthwhile employment
- Equality of opportunity for disadvantaged people and communities including disabled people
- Strengthened and sustainable community and voluntary sector
- Greater environmental sustainability including accessible green public spaces

Providers with contracts over £100,000 per annum in value are mandated to complete regular returns via the Social Value Portal <http://socialvalueportal.com/>.

## 4. Commissioning Intentions 2020/21

### Theme 1: Act to help yourself:

The Council will **further test digital solutions/assistive technology options**, including Alexa technology and will also explore options for the next generation of community alarm provision. Workforce and process developments will be made through the Adult Care Pathway in order to learn from the testing. This will ensure that appropriate technologies are made available to the right people at the right time and that effectiveness is reviewed at regular periods.

The Council will support **community capacity building and asset based community developments** working closely with Voluntary Action Rotherham <https://www.varotherham.org.uk/> and the wider sector, particularly to support people experiencing Mental ill-health, people with a Learning Disability or Autism. The development of a pre-front door, 'Active Solutions' to provide information/advice in various community settings and support for an independent Unpaid Carers Hub in the town centre will be two key components. The Council will also continue to support activity to reduce social isolation across the borough.

The Council will continue to commission services and opportunities that support social inclusion and promote social value through the **development of micro and social enterprises**, especially for people with a Learning Disability and/or Autism with a focus on day opportunities. Enterprises are particularly encouraged for the central and south parts of the borough.

The Council will embed the principles of the integrated lifestyle service aimed at improving the health of people in the borough through a preventative approach and continue to champion and promote the principles of **5 Ways to Wellbeing** [https://www.rotherham.gov.uk/homepage/486/five\\_ways\\_to\\_wellbeing](https://www.rotherham.gov.uk/homepage/486/five_ways_to_wellbeing)

### Theme 2: Act when you need it:

The Council will support the mobilisation and development of the new delivery model **for home care and support** throughout 2020/21. The new model will enable individuals to use their support in a more flexible way in order to achieve independence, promoting reablement and recovery principles. The training of the provider workforce and embedding new ways of working including health tasks will take time. The Council recognises this and will work closely with providers to deliver the ambition. The Tier 2 framework will also be opened for new applications from September 2020.

The Council will commission a range of services through a **Dynamic Purchasing System for Learning Disabilities and Autism**. This will focus on a range of areas, particularly supported living support, short breaks, respite for Unpaid Carers, day opportunities and services that support training, work and skills.

The Council will **increase the number of flexible supported living units** available across the borough through the development of core and cluster schemes that will enable people to step up/down depending on their bespoke requirements. All schemes must adhere to the ethos of *My Front Door* Vision



[https://www.rotherham.gov.uk/downloads/file/3983/my\\_front\\_door](https://www.rotherham.gov.uk/downloads/file/3983/my_front_door) for Learning Disability services. Services will be situated in parts of the borough that have limited existing provision and will enable people to be integrated into the wider community rather than being the community.

The Council will procure a **Recognised Provider List (RPL) for developing housing options**. This will run alongside any procurement process for Care and Support services. This will ensure that where needs are identified a joined-up approach to accommodation with care and support can be applied and the quality of the providers and the services they offer has already been established.

The Council will work together with health colleagues from Rotherham Doncaster and South Humber Mental Health Trust (RDaSH) and the Rotherham Clinical Commissioning Group to **review the Mental Health social care pathway**. The aim will be to support a joined-up system that supports people through prevention and early intervention or when they hit crisis, resolves immediate concerns and engenders a recovery ethos. This will link to the statutory Core 24 and Core Fidelity elements. **New service delivery models to support a recovery ethos for people with Mental Ill-health will be welcomed.**

The Council will review the offer for people with a **physical disability** as the evidence from the demand data identifies potential gaps in the service offer, particularly with regard to **suitable accommodation and use of assistive technology**.

The Council will facilitate **growth in the Shared Lives** offer including support for day opportunities, closer links to **Key Ring support** services, as well as live in arrangements and respite.

The Council will review a host of services funded through the **Better Care Fund to create new pathways and delivery models that promote reablement and Home First principles** <https://www.england.nhs.uk/wp-content/uploads/2018/12/3-grab-guide-getting-people-home-first-v2.pdf>

The Council has recently tendered the Children & Young Person's 16-25 service and the contract position for other Housing Related Support services for children and young people and the Domestic Abuse pathway have been clarified until 2021.

The **Vulnerable Adults Housing Related Support pathway will be reviewed in 2020/21**. The outcome of this review will inform future commissioning intentions for 2021/22 onwards.

The *Housing First* model will continue for a further two years in order to continue to grow and develop the offer for people with complex and often chaotic lives, forming part of the Council's offer under the Homelessness Prevention and Rough Sleeper Strategy <https://moderngov.rotherham.gov.uk/documents/s121164/Rotherhams%20Homelessness%20and%20Rough%20Sleeper%20Strategy%202019%2022.pdf>

### **Theme 3: Act to live your life:**

The Council will further develop a suite of support service provision for people in receipt of Direct Payments with a **focus on recruiting more Personal Assistants**.

The Council recently tendered for a Care Act Advocacy service to deliver support for people requiring a specialist advocate. The service specification requires that 50% of non-statutory community advocacy is sub-contracted to the Rotherham Voluntary and Community sector. The Council will **promote opportunities for the voluntary and community sector and work closely with the primary Advocacy provider to facilitate suitable arrangements.**

The Council will work with the new Rotherham Healthwatch service to champion the voice of the community and people using health and social care services and support.

The Council will develop alongside the Rotherham Clinical Commissioning Group a **new Dementia pathway**, identifying opportunities for investments to support people with dementia to remain independent.

The Council will continue to work with Rotherham Clinical Commissioning Group to align support **services to Unpaid Carers that prevent carer breakdown** or swiftly resolve first time instances of Carer breakdown.

**The Council will develop a Quality Strategy** to ensure continuous improvement in CQC ratings and improved outcomes for people in receipt of support based on *Quality Matters* <https://www.gov.uk/government/collections/adult-social-care-quality-matters>

## Key Dates and Timelines

Financial Year 2020/21				Financial Year 2021/22			
Quarter 1 (Apr - Jul)	Quarter 2 (July – Sept)	Quarter 3 (Sept – Dec)	Quarter 4 (Dec – Mar)	Quarter 1 (Apr – Jul)	Quarter 2 (Jul – Sept)	Quarter 3 (Sept – Dec)	Quarter 4 (Dec – Mar)
Soft Market testing for community alarm solutions							
	Launch of Active Solutions pre-front door model						
Mental Health Pathway Review	Mental Health Pathway Review	Mental Health Pathway Review					
	Better Care Fund 2019/20 sign off from NHS England						
	All Age Autism Strategy sign off and implementation of Action Plan						



Home Care & Support new contracts start		Tier 2 Home Care and Support DPS opens	Appraisal of Tier 2 Home Care and Support Applications	New Tier 2 Home Care and Support provision commences			
Statutory Advocacy new contracts start	Voluntary and Community Sector partners identified to deliver 50% of community advocacy provision						
Healthwatch Rotherham new contracts start							
Learning Disability Flexible Purchasing System co-production and specification development	Learning Disability Flexible Purchasing System – soft market testing	Learning Disability Flexible Purchasing System tender on tender portal	Learning Disability Flexible Purchasing System award / mobilisation	Learning Disability Flexible Purchasing System new contracts start			
Recognised Provider List (RPL) Housing Options - – soft market testing	Recognised Provider List (RPL) Housing Options specification development	Recognised Provider List (RPL) Housing Options tender on tender portal	Recognised Provider List (RPL) Housing Options contract award / mobilisation	Recognised Provider List (RPL) Housing Options new contracts start			
Opening of new Council building based residential respite offer	Decommission 3 units of independent sector residential respite provision						
Soft market testing and development of a service specification for specific Supported Living Schemes for adults	Supported Living tender on tender portal	Supported Living contract award / mobilisation	Supported Living new contracts start				

with a Learning Disability							
Co-production of new delivery model for Housing Related Support domestic abuse offer	Co-production of new delivery model for Housing Related Support domestic abuse offer	Domestic Abuse commissioned services tender on tender portal					
Review of Housing Related Support Vulnerable Adults pathway	Review of Housing Related Support Vulnerable Adults pathway	Soft market testing for various Housing Related Support Vulnerable Adults pathway	Tender for services providing services for Housing Related Support Vulnerable Adults pathway				
Dementia Pathway Review							
Co-production of Rotherham Quality Strategy							

## **5. Commissioners Approach to the Market**

### **Managing the Relationship**

An underlying principle of effective commissioning in Rotherham is a commitment to embed genuine co-production into all commissioning activity. This is part of a conscious move towards a relationship-based approach. The energy, skills, interests, knowledge and experiences of providers must be harnessed to influence accommodation, care and support services in the borough. Active participation alongside commissioners in the shaping of and design of new service delivery models will be the default position. Co-production gives a collective sense of ownership and connects providers to the Council and partner organisations with a common purpose. It also leads to more effective service delivery and attainment of outcomes for people in receipt of care and support.

In addition to co-production, the Council commits to using formal and informal soft-market testing approaches to inform service design and procurement models. This will take a number of forms; from one to one discussion, to more structured events and participatory workshops.

Long standing engagement models will continue with cohort and service led themes such as:

- Home care provider forum
- Care home provider forum
- Learning Disability provider forum
- Housing Related Support provider forum
- Strategic Housing forum
- Side by Side Homelessness Forum

The Council will also commit to a quarterly focus group for general provider feedback on key issues and new strategies, harnessing the positive commitment of providers to co-produce the Market Position Statement. In order to support this there will be a commitment to:

- future MPS provider workshops (noting that attendance needs in future to be strengthened)
- the creation of a provider MPS editorial panel
- developing the role of provider forums in service design

### **Future Support**

The Council has maintained, despite austerity, a long-standing commitment to support the independent and voluntary sectors with a free to access training offer. This is set to continue for 2020/21, but the emerging new delivery models for example home care and support and for intermediate care/reablement place a strong emphasis on:

- strength based approaches
- maximisation of use of community assets
- a values driven workforce

Therefore, the Council will focus on these areas as a priority for supporting workforce development across the independent and voluntary sector.

The Council recognises that opportunities for external funding are hard for many organisations to attain and that the available global pots are shrinking. However, the Council remains committed to support organisations to access external funding through grant applications/bidding processes and social investment, in a fair and transparent manner. Proactive discussions from providers to explore taking external funding opportunities forward are therefore actively encouraged.

Support for micro-enterprises is also available and the Council has contracted with Community Catalysts to develop the offer in Rotherham, particularly where there are gaps such as day opportunities for people with a Learning Disability or Autism and employment/skills opportunities.

The Council continues to work in partnership with Voluntary Action Rotherham (VAR) to support the Rotherham voluntary and community sector. For example, the Council has used some of the Improved Better Care Fund monies for 2019/20 to work with the VAR sub-group, the Adult Care consortium. This is to support the new Adult Care pathway by co-designing a pre-front door model known as Active Solutions. This will provide information and advice within the community for people on the margins of requiring Adult Care support to maintain their independence from both fixed and mobile locations.

## 5. Useful Links and Contacts

Our current contracts register can be viewed at:

You can contact us by email at:

[commissioningenquiries@rotherham.gov.uk](mailto:commissioningenquiries@rotherham.gov.uk)

Or alternatively please direct any queries you may have in relation to the context of this report to any member of the Commissioning Team:

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Jacqueline Clark – <b>Head of Prevention and Early Intervention</b>	<a href="mailto:jacqueline.clark@rotherham.gov.uk">jacqueline.clark@rotherham.gov.uk</a> Tel: 01709 822 358
Gary Parvin – <b>Head of Learning Disabilities, Autism and Transition</b> (Joint role with Rotherham CCG)	<a href="mailto:garry.parvin@rotherham.gov.uk">garry.parvin@rotherham.gov.uk</a> Tel: 01709 255 952
Kate Tufnell – <b>Head of Mental Health and Housing Related Support</b> (Joint role with Rotherham CCG)	<a href="mailto:Katherine.Tufnell@rotherhamccg.nhs.uk">Katherine.Tufnell@rotherhamccg.nhs.uk</a> Tel: 01709 302 743
Claire Smith – <b>Head of Adults</b> (Joint role with Rotherham CCG)	<a href="mailto:claire.smith@rotherhamccg.nhs.uk">claire.smith@rotherhamccg.nhs.uk</a> Tel: 01709 428 721
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Jane Davies – <b>Head of Strategic Housing and Development</b>	<a href="mailto:jane.davies@rotherham.gov.uk">jane.davies@rotherham.gov.uk</a> Tel: 01709 334 970
Sarah Watts – <b>Strategic Housing Manager</b>	<a href="mailto:sarah.watts@rotherham.gov.uk">sarah.watts@rotherham.gov.uk</a> Tel: 07899 677 115
Sue Shelley – <b>Business Development Manager</b>	<a href="mailto:Sue.shelley@rotherham.gov.uk">Sue.shelley@rotherham.gov.uk</a> Tel: 01709 822 540

# Appendix 1

## Rotherham Key Facts

### Geography

- Rotherham Borough covers 286 square kilometres (110 square miles)
- 70% of the borough area is open countryside

### Population

- The total population is 264,700 (2018), larger than the cities of Derby, Hull and Wolverhampton, with an increase of 2.7% since 2011
- Births in the year 2017/18 were 3,009 and deaths numbered 2,689, a natural increase of 320
- There are 62,900 children and young people aged 0-19 (23.8% of the population)
- 51,700 people are aged 65+ (19.5% of the population)
- 6,100 people are aged 85+ - an increase from 4,200 in 2001 (+45%)
- Rotherham has more people aged over 60 (67,400) than under 21 (65,400)

### Ethnic backgrounds

- There were 20,842 residents (8.1%) from over 75 different BME communities in 2011 – almost double the figure of 4.1% in 2001.
- The BME population is estimated to have risen to 10.5% by 2016 and continues to grow.
- The largest BME community is Pakistani/Kashmiri - 7,912 people in 2011
- 92% of the population was classified as White British in 2011 and 95% were born in UK
- English was the main language of 96.6% of residents in 2011 and there are 121 community languages spoken in Rotherham (2018)

### Housing

- There are 111,000 households and 116,000 dwellings (2.6% empty)
- 410 new homes were built in 2018/19
- There are 20,297 council rented homes (41,850 residents) plus 4,680 other social rented in the borough. Social housing constitutes 22% of households
- The median house price of £140,000 (2018) is 58% of the English average (£240,000)
- The types of Council rented properties are 76 bedsits, 4,763 bungalow, 5,019 flats, 10,222 houses and 217 maisonettes
- There are 7,225 households on the Council's Housing Register. These applicants are placed into the following bands: Band One - 258, Band Two -1673, Band Three -1948 Band Four - 2035, and Transfer band - 1311
- During 2018/2019, 1768 households made a homeless application. Of these 6.7% have complex needs. Thus far the number of homeless applications has increased - based on the fact that 540 households made a homeless application during the first quarter of 2019/20 and of these 7.3% have complex needs.
- The age profile of homeless applicants during 2018/2019 was 23.1% aged 24 or below, 48.1% aged 25-40, 22.1% aged 41-64, 2.3% aged 65+ and 4.4 unknown