Norfolk County Council

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Adult Social Services

Commissioning & Market Shaping Framework **2017-20**

Our vision

Supporting people to be independent resilient and well

Our commissioning and market shaping strategic priorities

- Improve and sustain the quality of care
- Maximise value for money from our investment in the market and deliver savings
- Secure stable and sustainable supply in the market matching demand to best address eligible care needs
- Support a shift from residential care to housing based solutions for working age adults and older people where this delivers better outcomes and value
- Foster the care workforce to secure and sustain the numbers and quality of people needed to provide the care that best meets demand
- Embed the shift to more enablement, reablement, resilience and independence in our investment in the market
- Support carers and communities to maintain people's wellbeing
- Support early intervention and help to prevent the need for formal funded care including much greater use of technologies
- Ensure that all care consumers have access to effective information, advice and support to enable informed choices in the care market
- Effectively integrate market and place based services with health and housing services to create resilient places to support wellbeing

This framework outlines our vision for how strategic commissioning and market shaping will help shape the care market, care system and communities to support people to be independent, resilient and well.



The Care Act requires councils to put the promotion of individual wellbeing at the heart of everything they do. The Act emphases the need to prevent, reduce or delay the need for care and to work with key partners including health, housing and communities in doing so. The operation of the care market is critical and complimentary to these endeavours. Our approach to strategic commissioning and market shaping will be driven by these imperatives.

This means shaping markets and community based care and support to provide the most effective and efficient ways of doing so. Our approach to market shaping is about marshalling the best support available from all providers across the whole system, including community health and primary care, thereby helping our acute hospitals to work better through minimising avoidable admissions and delayed transfers of care.

Commissioning

- We will support the development and implementation of effective workforce strategies for each key market sector with clear plans for tackling recruitment and retention challenges.
- We will support the development and implementation of effective housing and care accommodation strategies forsupported key market sectors with clear plans for doing so.
- We will develop and publish through our Market Position Statement clear commissioning strategies for each of our key markets setting out our commissioning intentions, planned investment and opportunities for the market.
- We will simplify and standardise our sourcing and procurement processes through flexible framework arrangements which will replace the legacy contracts programme and minimise market disruption.
- We will strengthen our quality assurance and performance management to secure continuous improvement, value for money and sustainability.
- We will develop new flexible outcomes based contracts that reward and incentivise the promotion of wellbeing and maximising independence.
- We will support the development and implementation of information and advice strategies that empower care consumers enabling good choices in the care market.
- We will work with the market and care consumers to develop and implement robust and effective management of market failure, setting out our approach in business continuity and contingency planning.



Market Shaping

- We will support the development and implementation of integrated commissioning in each of our localities setting out clear plans of how to do so.
- We will support the development and implementation of about 20 place based care and support systems clearly linked to GP surgeries bringing together communities, health, the independent market and community groups to support people to be resilient and well.
- Work with health and other partners to develop and implement new effective hospital discharge systems that gets people home from hospital as quickly and safely as possible including discharge to assess and trusted assessor schemes with clear plans for doing so.
- Work with health and other partners to develop and implement initiatives that tackle avoidable admissions to our acute hospitals including enhanced health care in care homes with clear plans for doing so.

Be strong partners with priorities

Norfolk County Council invests almost £300m a year in the care market relying almost entirely on over 700 independent business and organisations to provide the care and support that people need to be independent, resilient and well. Developing and continuously improving our relationships with providers and building trust are key for effective working.

- We will continue our market engagement and set out clear proposals for more effective structures to support dialogue at strategic, sector, operational and local level including support for a Norfolk care association.
- We will continue to work with the market to develop credible and effective cost models to ensure we pay the right price to ensure quality, value for money and sustainability in the long term.
- We will make our Market Position Statement available as an online resource linked to our Market Intelligence Tool that will provide the information that everyone with an interest in the care market needs to make business decisions and care choices.
- We will continue to support and develop our annual Care Convention to help guide our market shaping priorities decisions and care choices.
- We will develop and publish clear commissioning intensions in a suite of sector based market shaping plans to enable providers to develop services going forward.

Quality

- Norfolk faces a significant quality challenge with CQC ratings being significantly lower than other local authority areas in the East of England.
- We will implement our quality improvement strategy set out in our annual quality report.
- We will make available to all providers free of charge a new quality improvement tool to help secure and maintain CQC ratings of at least good.
- We will work with the market to develop a new leadership & skills resource to tackle the root causes of poor quality ratings.
- We will work will quality assurance colleagues across the whole healthcare and social care system to reduce duplication and increase the effectiveness of our interventions.

Celebrating great care and promoting best practice

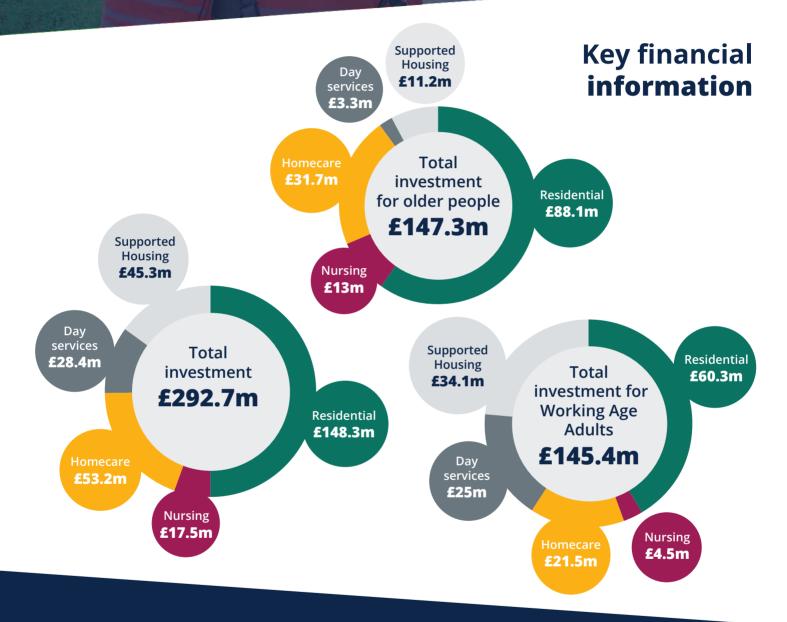
We believe that identifying and promoting best practice and sharing it across sectors is a great way to improve care services.

We want to continue to formally recognise the very best in care in Norfolk though our Annual Care Awards Event



Being the best

- We will work closely and effectively with key partners leading our prevention and early interventions
 programme, our social workers driving forward the Living Well programme and colleagues leading workforce
 and housing strategies.
- We will work with colleagues across the whole Council and key partner organisations to identify and develop best practice and new ways of working.
- We will be active players in regional and national market shaping, commissioning and integration networks.





Delivering success: selection of key performance measures

% regulated care providers rated as good or better target at least 80% in all sectors	% regulated care providers rated as inadequate target less than 1%	% unmet need for care package all sectors target less than 1% at any time in any sector	Social care avoidable admissions target	% publicly funded people in care homes for more than 18 months target less than 25%
Working towards reducing social care delays from 744 patient days in June to 566 in November	% of adults under the age of 30 in long stay care homes target 0%	% discharges from hospital to home target at least 90%	% of adults with LD living in their own homes target at least 90%	% of supported living settings with at least 6 units target 80%