Developing a North Lancashire Area Commissioning Plan
(Appendices ‘A’ and ‘B’ refer)

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Executive Summary

This report provides a summary of the adult social care commissioning intentions for the coming four years, and provides the Lancashire Local with the opportunity to comment on and influence the development of a North Lancashire Area Commissioning Plan, which will set out how these intentions will be delivered at a local level.

Decision Required

Lancashire Local – Lancaster District is asked to:
(i) Consider and comment on the County commissioning intentions;
(ii) Consider and comment on the draft North Lancashire Area Commissioning Plan to help shape development of the final plan.
(iii) Advise on areas where they feel the Lancashire Local would wish to have a role in contributing to delivery of the plan.

Background and Advice

The purpose of this document is to provide a summary of the adult social care commissioning intentions for the coming four years.

Adult social care has embarked on a process of unprecedented change, which is part of a wider programme of public sector reform.

Social care has a significant contribution to make to the wider 'place shaping' and sustainable communities agenda, and reform will only be achieved by focusing on the importance of universal services in the lives of citizens, and the need for all partners to work together to shape communities that promote wellbeing for all.
Fundamental changes are required across all social care services, to enable the delivery of a system that is personalised, responsive and flexible and one which offers real choice and control to individuals. There will need to be significant changes in the types of services currently available and changes to how resources are utilised, particularly with the greater focus on prevention and early intervention.

The commissioning intentions described all have a clear rationale, defined outcomes and a set of actions to ensure delivery. A document summarising the rationale for each commissioning intention and the outcomes it seeks to deliver is attached at Appendix ‘A’. The action plans will be available early in 2010. They are consistent with the vision and priorities described in Putting People First (Department of Health 2007) and Transforming Social Care (Department of Health 2008) and underpinned by an understanding of need in Lancashire and our own vision, the "Lancashire Offer 2013". Many of these intentions build on existing services, approaches and good practice adopted by Lancashire County Council in recent years.

The County Council is clear how social care needs to change. It is about delivering a system which is characterised by:

- Accessible information and advice to all citizens with care needs
- A range of services that promote independence and prevent people needing ongoing care or support where this can be avoided
- The importance of universal services in the lives of all citizens especially those with care and support needs
- The extension of choice and control for all citizens with care or support needs
- All stakeholders working together to shape communities, with the needs of citizens at the centre, creating an environment where all citizens feel safe through a proactive approach to safeguarding
- Ensuring that the delivery of services is cost effective

It has long been recognised by Government that current service models will neither be affordable nor sufficient to meet needs within current resources. It is clear that radical solutions will be required to enable us to deliver these ambitious changes, at a time of significant financial restraint. Whilst the focus of reform has mainly been on the impact of personal budgets, the fundamental shift has to be towards prevention and early intervention. Closer partnerships with the NHS and other organisations will help to prevent, reduce or delay the need for care services and save resources. This has to mean:

- fewer referrals for social care assessment
- fewer people receiving packages of care
- fewer emergency admissions (and readmissions) to hospital
- smaller packages of care as a consequence of people using universal services and community support networks alongside their personal budgets
- Increasing numbers of people benefiting from recovery and rehabilitation services
Commissioning Intentions

The following sixteen commissioning intentions will be the focus of service improvement and redesign over the next four years:

1. Work with partners to ensure that people have access to a wide range of practical support and useful information. This will enable them to improve their sense of well-being and independence and help them make choices about their lifestyle, so that they can combat loneliness and isolation, and make a contribution to their community. Under a prevention and well-being framework for Lancashire, this will include:

   - universal access to advice and information
   - development of practical support services and social activities through Help Direct
   - improved employment and volunteering opportunities, including the promotion of Time Banks
   - improved networking of resources and activities in the local districts so that people can easily find the support which meets their needs
   - a more focused role for Voluntary Community and Faith Sector commissioned services
   - building the capacity of local communities and communities of interest
   - improved co-ordination of housing related support with other services

2. Re-model/recommission hospital avoidance, crisis support, intermediate care, step up/step down rehabilitation and end of life care as part of an integrated care pathway.

3. Re-model/recommission mental health community residential rehabilitation services, utilising principles of a 'socially inclusive recovery model' as part of a clear pathway and stepped care approach.

4. Jointly commission with Primary Care Trusts a range of carer supports, as part of the multi-agency strategy.

5. Reduce the number of people entering residential care on a long term basis. This will be achieved by:

   - Fewer people entering care homes, in particular, straight from hospital or from sheltered accommodation.
   - Minimise new placements in care homes of people with a learning disability, and re-modelling existing care homes based on self directed supports.
   - A focus on reducing the number of people with mental health problems entering care homes.
• For people who need and choose a care home placement, a clear specification of what a personalised service should look like will be developed.

6. Commission assertive outreach supports for people with alcohol related issues as part of a stepped care pathway, linking to community based tier 1, 2 and 3 supports.

7. Anyone requiring and eligible for long term social care support will have a personal budget regardless of age and condition. This will include tenants of new housing and support services (including extra care). This will be achieved by re-modelling / recommissioning:

   • All long term supported living block contracts
   • Tier 4 substance misuse rehabilitation services
   • Day time support services
   • High cost care home placements

8. Commission community pathway model to support key areas of self directed supports including citizens brokerage, advice and support and training utilising a consortia of user led and community organisations.

9. Re-model and develop a range of supports to achieve local outcomes based on National strategies for dementia and stroke.

10. The development of accessible e-market systems that allow easy access to information on a wide range of services, and facilitate transactions both of services provided by organisations and person to person services.

11. Develop specific housing pathways for people with long term support needs to access a range of housing options, including assured tenancy, shared and full ownership.

12. Work with partners to review and recommission supported housing for people requiring short term services who are socially excluded (e.g. homeless people, teenage parents, people with substance misuse problems, young people at risk, offenders etc).

13. Review the Telecare service and re-model/recommission to ensure that an affordable and effective service is available across the County, as an integral part of the support offer available to people.

14. Delivery of a community equipment service consistent with the retail model.

15. Contribute to the development of an effective transport infrastructure across Lancashire.
16. Joint commissioning of HIV/AIDS community based advice, information and low level support with North and East PCTs.

Increasingly, individuals will use their personal budgets more creatively and commissioners will need to understand the overall pattern of choices being made, and ensure that providers are aware of changing patterns and areas for development. Inevitably, this will lead to different types of services possibly being delivered by different types of organisation (such as user led organisations and social enterprises). Commissioners will encourage innovation and new solutions, whilst ensuring that providers are offering high standards of care, dignity and services that are driven by the individual user.

There is already considerable work underway to deliver these intentions, the detail of which is contained in the full Commissioning Intentions document; the Commissioning Business Plan, and the range of projects that make up the commissioning and engagement Programme Plan. By the end of 2009, plans will be available which translate these intentions into specific actions for each of the three PCT localities. A draft of the Area Commissioning Action Plan for North Lancashire is attached at Appendix ‘B’ for consideration by the Local.

Supporting Documentation

The following documents will be available on the Commissioning web page access to which will be available on both the LCC intranet and the internet early in 2010.

1. Commissioning Business Plan
2. Adult and Community Services Commissioning Cycle and Toolkit
3. Market Development Strategy
4. Procurement Strategy
5. Prevention and Early Intervention Strategy
6. Community Engagement Strategy
7. Commissioning Communication Plan
8. Commissioning and Engagement Programme Plan
9. Locality Commissioning Plans

Consultations

The Area Commissioning Action Plan is currently in draft form and subject to consultation with Lancashire Locals, relevant Local Strategic Partnership themed groups, NHS North Lancashire and other stakeholders. It is envisaged that the Action Plan itself will be a live document which will form the work programme for the North Lancs Area Commissioning Team and as such will be regularly updated. Delivery of the Commissioning Intentions through the North Lancs Action Plan will result in a series of projects which will be managed using the Adult and Community Services Project Management approach. This will ensure that all aspects of the delivery of the plan incorporate appropriate arrangements for communication and consultation.
Implications

Similarly, the Project management approach used to implement the Area Commissioning Action Plan will ensure for each project that any implications e.g. financial, staffing, partnership working – are identified and managed as part of the project to deliver each element.

Risk management

Delivery of the Commissioning Intentions through the North Lancs Action Plan will result in a series of projects which will be managed using the Adult and Community Services Project Management approach. This will ensure that risk management is integral to the delivery of all of the projects reflected within the plan

Any representations made to the Directorate prior to the issue being considered in accordance with the Public Notice of Forward Plans

Name: Organisation: Comments:

N/A

Local Government (Access to Information) Act 1985
List of Background Papers

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<th>Paper</th>
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<th>Contact/Council/Tel</th>
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<tr>
<td>Adult Social Care – How things will be different in 2013</td>
<td>December 2009</td>
<td>Richard Jones</td>
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Reason for inclusion in Part II, if appropriate

N/A