

**Sandwell MBC**

**Care and Support Market Position Statement**

**September 2014**

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## Introduction

We are pleased to present our first Market Position Statement, which sets out our vision for care and support services in Sandwell and the Council's intentions as a strategic commissioner of services.

Strategic commissioning is about analysing and prioritising needs in our communities and designing and securing services that target our resources in the most effective way.

The document is aimed at current and potential providers of care and support services so that they can understand the present and future demands and how services can respond to personalisation.

The Market Position Statement includes an analysis of the care and support market in Sandwell and is supported by a robust Evidence Base, this brings together data from a variety of sources including the Joint Strategic Needs Assessment, commissioning strategies, and market and customer surveys.

By using the Market Position Statement, independent, voluntary and community organisations can learn about future

opportunities and how they can develop services to address local needs.

**We want to create a market which thrives on excellence and provides good quality services where people can achieve better outcomes, safely and independently in their communities.**

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## Direction of Travel

Care and Support in Sandwell reflects and is determined by:

- National policy, legislation and direction from central government;
- The priorities and needs of local communities and people;
- The resources and assets available across the health and social care system and in the wider community.

### National policy...

The policy direction for social care in England is towards self-directed support, where people not organisations make decisions about the care and support they need.

The Care Act provides the legislative basis for a system that:

- Promotes well-being and the prevention, delay and reduction of needs
- Ensures a diverse, high quality and sustainable market for care & support services
- Organises and integrates the health and social care resources that are available

within the system for better value and outcomes

- Introduce funding reforms that seek to cap individuals' care costs and allow for the deferral of payments for care and support.

**The focus is on wellbeing within a system that seeks to prevent, delay and reduce needs, whilst improving outcomes for people who use care and support services.**

### ...local priorities...

With our NHS and community partners we have identified the health and wellbeing priorities for Sandwell, with targets for the period to March 2016 in respect of:

- early years and adolescent health
- frail elderly and dementia
- long term conditions and integrated care
- alcohol.

We are currently developing our integration transformation plans for 2014/15 and beyond through our work in response to the Better Care Fund and these will set out some of the ways we aim to deliver health and wellbeing priorities through integrated working, including 7-day services in health and social

care to support patients being discharged and prevent unnecessary admissions at weekends, and better data sharing between health and social care.

### ...reducing resources

Like other local authorities, we are facing substantial financial and demographic pressures as budgets are limited and our older population increases.

Government cuts to the level of funding that councils receive have meant that we are now facing an unprecedented reduction in the budget for adult social care. These cuts have come at a time when the number of disabled adults and older people requiring social care services continues to grow.

We need to change the way in which we operate in order to meet the many challenges that lie ahead. This will involve changing our current methods of commissioning, procurement and service delivery. In doing this it is inevitable that activity will be reduced or cease altogether in some areas.

At the same time, we need to identify and develop the range and quality of community

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resources that people can use in order to maintain their wellbeing and independence.

**Our challenge is to enable people to do as much for themselves as possible with the personal and community resources that are available to them.**

### A plan for change

The analysis summarised in this Market Position Statement makes the case for change across the care and support system and we want to work with providers to help us achieve this.

Ours is a vision, consisting of three elements, which will enable people to live longer and healthier lives and require less support from social care and health budgets:

**Prevent** – helping to prevent people from becoming ill or dependent;

**Rehabilitate** – ensuring people recover from illness or dependency which is amenable to effective treatment;

**Care** – ensuring people who have long term conditions or dependency receive effective, quality care and support with dignity.

We have identified a number of strategic imperatives that will help us to deliver this vision:

- Integration with health, providing opportunities to do things differently;
- A new relationship with Sandwell residents, built around people taking personal responsibility for their wellbeing;
- A new relationship with communities, so that people are better supported and enjoy access to a range of local supports;
- Demand management, through effective services that prevent, delay and reduce people’s needs for long-term care and support;
- Transforming public services, breaking down boundaries between the council, our partners and our communities;
- Investing for the future, by supporting initiatives that deliver long term savings whilst improving health, public health and social care outcomes

Change is vital - not just to cope with the challenges we face - but to meet the needs, expectations and choices of people today and into the future.

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## Current and Future Demand

Demand for care and support from demographic factors in Sandwell is expected to continue to rise, influenced by projected changes in the age and ethnic profile and the underlying health needs of the population.

### Demographic profile – trends and forecasts

Since 2001 the population of the borough has grown by 12% to 316,700 and is projected to rise to 359,200 by 2030.

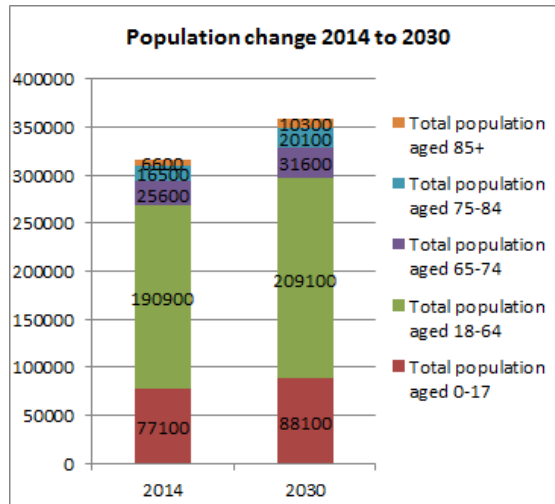


Figure 1: Projecting population growth to 2030

This includes 271,100 adults, of whom 62,000 will be over the age of 65 years. The projected population growth in the 65+ age group between 2014 and 2030 (27%) is less than is forecast for the West Midlands (34%) and England (39%). A more significant increase is forecast in the over 85's age group (up 56%) to 10,300 by 2030.

At the last census around 26.5% of the population of Sandwell was of black or minority ethnic origin, with around 14% of adult social care service users being of BME origin. The difference can be explained by the age profile of BME residents, which is somewhat younger than for the population as a whole. As the population ages it might be expected that there will be proportionately more BME residents using care and support services in future and it will be important for the market to ensure that services continue to meet the increasingly diverse ethnic and cultural needs of our residents.

The health of people in Sandwell is generally worse than the England average. Life expectancy for both men and women is lower, while disability free life expectancy at only 9 years for both men and women is low.

Deprivation is higher than average and there are high levels of worklessness. A fifth of the population (64,403 people) have a limiting health problem or disability, and Sandwell performs poorly in terms of 'healthy lifestyles', with eating, smoking, physical activity and obesity all worse than the England average.

As people pass through the NHS acute system and leave hospital there is often a need for social care provision. This might be short-term and recuperative in nature, where 'step-down' and reablement support is most appropriate, or of a longer term nature. As hospital trusts seek to return people to community living there can be significant seasonal demand pressures from this source and it is important that the market develops appropriate services to help people remain independent.

### Demand for publicly funded care and support

As at September 2014 there are over 3,700 people in Sandwell who are eligible under Fair Access to Care services (FACS) criteria to receive council funded care and support. Current almost 70% of the demand for council funded care and support comes from people

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aged 65 and over and as this population grows and ages it will be important to ensure that services are available which support elderly people to remain active and connected to their community and networks.

Nearly one in five of the population who are aged 85 are currently supported by council funded social care (18.7%) as this aged group is expected to increase by 3,700 people by 2030 this could mean an additional 692 FACS users in this age group alone, assuming the same proportion require support. Although these estimates are crude they give an indication of the potential increase in demand from an aging population.

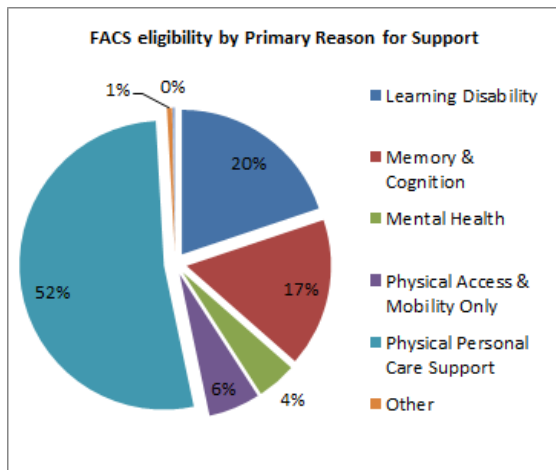


Figure 2: FACS eligibility by need (Sept 2014)

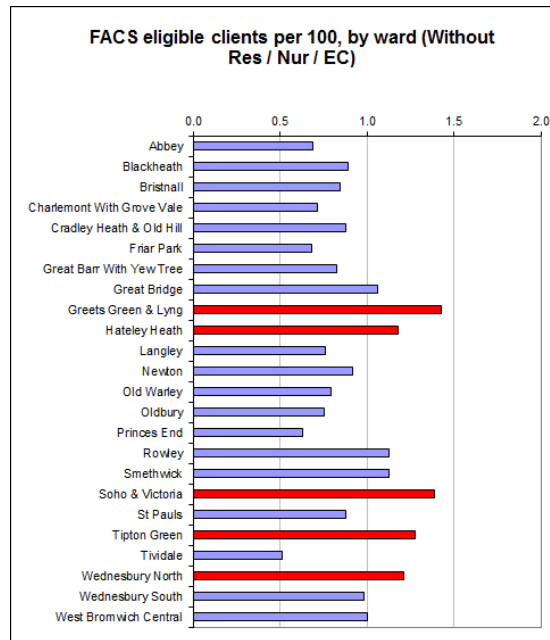


Figure 3: FACS eligibility by Ward

There are geographic differences in demand for council funded care and support across the borough. The highest demand comes from the Greet's Green & Lyng, Soho & Victoria and Tipton Green. Deprivation, unemployment and age are amongst the factors influencing demand in these wards.

### Demand from people who fund their own care and support

The Care Act makes it clear that the council's duties are to the whole of the population and not just those who are eligible for funded support. We recognise the need to understand more about those who fund their own care and aim to work with providers and self-funders to build this understanding.

In England, older people who pay entirely for their own social care and support account for 45% of residential care home places, 47.6% of nursing home placements and 20% of home care support. Locally, the Annual Adult Social Care Survey 2014 suggests that around 39% of people that the local authority supports also buy additional care and support privately or pay more to 'top up' their care. Legislative changes to the way that care and support is funded will further increase the demand for publicly funded support from amongst this group and faced with a continuing government squeeze on budgets, the council needs to become adept at managing demand by preventing, delaying and reducing needs and by promoting wellbeing and independence. Whilst we will continue to

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provide support for those who need it and who meet eligibility criteria, we will increasingly need to focus on what people can do, either for themselves or with community-based support, rather than on what they can't do.

A preventative approach means that everyone - not just those in receipt of funded care and support – will benefit from the assets and resources available within the system. We need to understand more about the needs of people who fund their own care and support so that we can design a preventative system that is appropriate to the needs of everyone.

### Carers in Sandwell

At the time of the 2011 Census, a total of 33,530 people in Sandwell (10.9% of the population) provided unpaid care to others. Almost 30% of these (9,937 people) were providing 50 or more hours of unpaid care a week.

There are just under 7,000 people aged 65 and above who provide unpaid care of whom 3,552 provide more than 50 hours of care per week. According to the council's 2013 carer's survey, 25% of respondents reported

providing more than 100 hours of care per week.

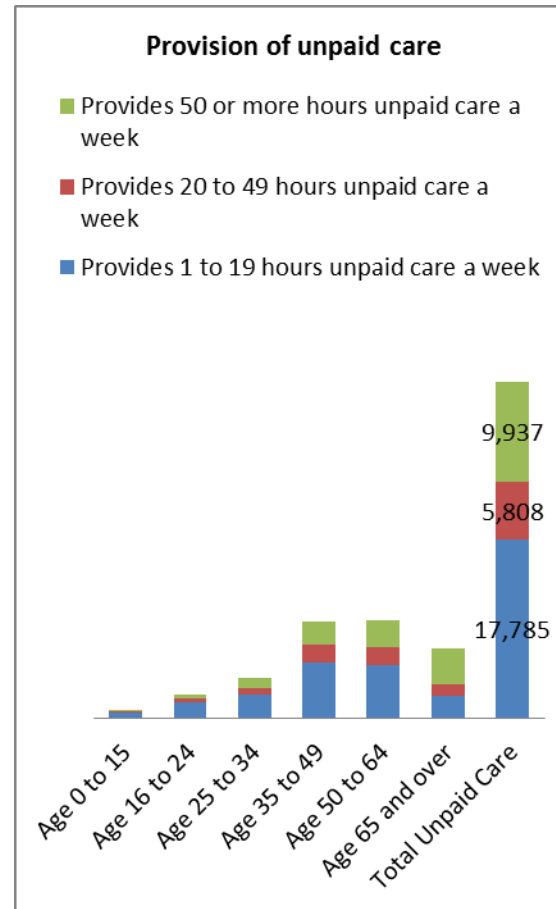


Figure 4: Unpaid care in Sandwell

As the population ages and people live for longer with increasing care and support

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needs, it is expected that the number of older carers will increase and this group is itself likely to experience increasing need for care and support services. Whilst the Council and its partners will want to implement the National Carer's Strategy for the benefit of all carers, it will be particularly important to ensure that older carers are appropriately supported.



## The State of Supply

### National Overview

The Government spends £14.5 billion p.a. on adult social care in England, with just over half of this on services for older people.<sup>1</sup>

Nationally, the largest providers of both residential care and home care are corporate providers although the market is well populated with small independent and voluntary sector providers working alongside larger corporate interests.

### The local care and support market

The council's duties in respect of the local market extend to both state-funded and self-funded provision and are set out in the Care Act. This requires that the Council ensures the diversity, quality and sustainability of provision.

We recognise the need to strengthen our relationship with providers who are active in Sandwell but not currently contracted to the council so that we can meet these obligations

<sup>1</sup> Fairer Care Funding: The report on the commission on funding of care and support, July 2011

on behalf of all those using care and support services.

### Diversity & Sustainability

Local care and support services are provided by a diverse range of providers from the Sandwell and surrounding area.

According to Care Quality Commission data there were 175 'active locations' registered to provide care and support in Sandwell in July 2014. However, provision in Sandwell is drawn from a wider geographic pool of providers - for example, there are almost 600 active care locations in the combined Black Country Authority areas, whilst the council has done business with over 350 independent sector providers in the last 12 months. Many Sandwell residents access services from providers registered outside of the borough and this increases significantly the size and diversity of the market. This ensures that people are able to choose the provider and services that are most appropriate for their needs and provides some assurance that the market would be sustainable in the event of provider failure.

Where the council arranges care and support services for FACS eligible clients we tend to

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buy services from a small number of large providers. Of the 350 providers that the council has done business with in the last 12 months, 20 providers (5.7%) are supporting over half of our client base. Whilst nearly 70% of the providers that we do business with, each support fewer than 5 FACS users funded by Sandwell Adult Social Care.

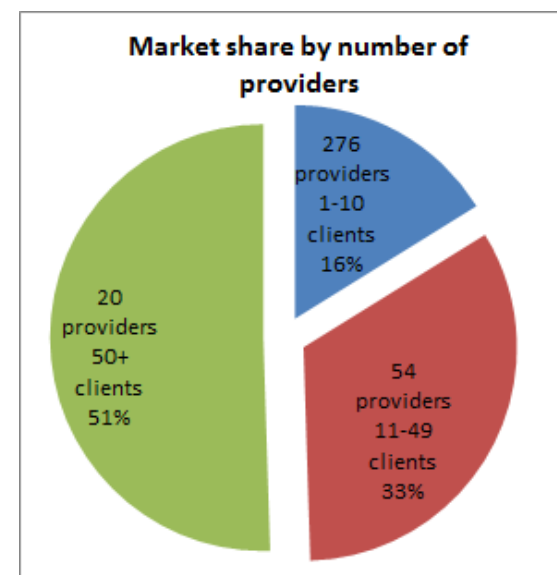


Figure 5: Council funded care and support market

### Quality and Outcomes

The Care and Support White Paper makes it clear that providers are primarily responsible for quality.

Quality of provision is measured in a number of ways although information about quality assessments is not yet consistently made known to the public. We seek to influence quality amongst those providers who are contracted to the council but currently have no arrangements in place that allow us to influence providers who exclusively support those who fund their own care.

A relatively small number of recent CQC inspections identify a range of instances of non-compliance in respect of assessing and monitoring the quality of service provision and the care and welfare of people who use services.

Satisfaction with care services in Sandwell is generally high, with 65% of people responding to the 2014 Annual Adult Social Care Survey saying they were extremely satisfied or very satisfied with the services they received.

Quality of provision is ultimately determined by the outcomes that people are able to achieve as a result of the supports they use. Outcomes are measures of performance that focus on:

- Enhancing quality of life for people with care and support needs

- Delaying and reducing the need for care and support
- Ensuring that people have a positive experience of care and support
- Safeguarding adults whose circumstances make them vulnerable and protecting them from avoidable harm

We will review the make up of the current market to ensure the availability of quality of provision in Sandwell that achieves consistent and demonstrable outcomes.

### Affordability

The council spends an estimated £83 million on care and support services each year (before top-up contributions from clients and income from partners and other agencies). In addition to this there are in house services which are funded such as extra care housing. During 2013/14 the council supported FACS eligible adults with their social care needs.

The council needs to deliver significant reductions of £23m from its Adult Social Care budget over the period 2014 – 2017 and will need to manage its resources to benefit the maximum number of clients. Residential care,

nursing care and supported living arrangements currently account between them for just under two thirds of the money spent by the council, despite supporting only one third of clients and we will continue to look at ways of reducing the pressure from these and other high cost services.

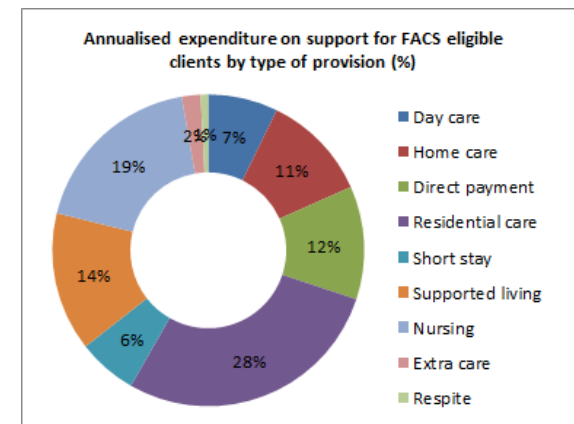


Figure 6: Where the council spends its budget

### How we meet needs

The council makes information available about care and support providers through its Information Point Directory – however, 1 in 4 people do not find it easy to find information and advice about support, services or benefits. We need to enhance our information offer so

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that people can make informed choices about their care.

We aim to reduce the demand for long-term care and support through services that prevent, delay and reduce needs, including through the use of assistive technologies that allow people to remain living independently in their own homes.

The needs of FACS-eligible clients are met in a number of ways, with an increasing reliance on accommodation-based supports (extra care, nursing care, residential care etc.) as people age.

Day care, respite care and supported living solutions are mostly taken up by younger adults, therefore we need to ensure that in the future these services will support people to fulfil their aspirations and achieve an active and independent life

Residential and nursing provision is predominantly used by people aged 65 and over (with the majority of residents being over 75). Approximately 80% of home care clients are aged 65 and over.

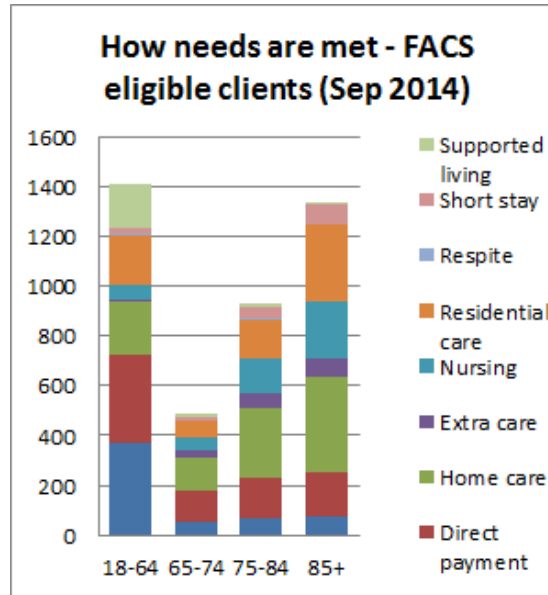


Figure 7: How needs are met

### Services for carers

There are weaknesses in the support available to carers in Sandwell, with many carers reporting difficulty in accessing the support they need at the right time.

*'I care for mum more than myself. There isn't the correct support out there for us. I provide personal and emotional support and I don't go to school'*

Comment from a young carer: local consultation.

The five priorities described in our Carers Strategy are intended to improve services for carers:

1. Supporting carers to identify themselves early by improving access to information, advice and support
2. Recognising the value of what Carers do by involving and empowering them.
3. Enabling young and adult carers to fulfil their education and employment potential
4. Personalised support for carers and those they support, enabling family and community life
5. Supporting carers to stay mentally and physically well

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## Summary of analysis by type of provision

Whilst our Market Position Statement covers the whole of the care and support market, the following points about specific forms of provision are intended to illustrate where specific change is required.

### Direct Payments

Whilst direct payment take-up is reasonably well established amongst FACS eligible adults we wish to encourage more people to take this option so that they can take more control of their care and support.

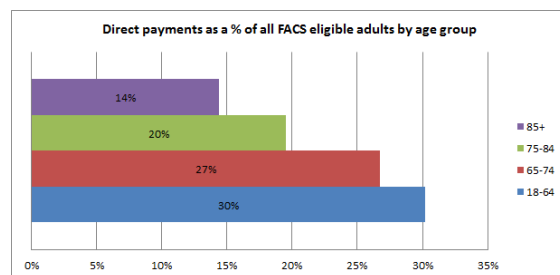


Figure 8: Direct Payments uptake

Satisfaction with direct payments is high and we wish to see greater take-up across all client and age groups and a more even distribution across electoral wards.

As more people take up direct payments there will be a transfer of buying power from the

council to individuals. This means that providers will need to develop more personalised services if they are to attract individual clients as council purchasing reduces.

We recognise that some people will require expert support to help them to manage and utilise their direct payments and hope to encourage providers to offer support arrangements through Individual Service Funds and services which support people with the administrative side of having a direct payment.

### Day Care

As at September 2014 the council commissions Day Care services on behalf of 349 adults, from 29 independent care providers at a cost of £4.9m per annum. The 3 largest independent sector providers (by client numbers) account for 59% of the total spend on independent sector day care. Costs are higher per client amongst smaller providers. The council also funds 6 in house Day Care services that support 227 users at a cost of £3.4m per annum.

Sixty four per cent of day care clients have a learning disability and this client group

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accounts for 84% of all expenditure on day care services.

The location of day opportunities in Sandwell broadly maps onto geographic concentrations of demand.

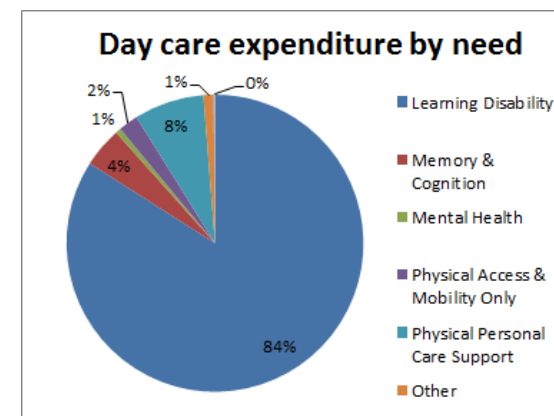


Figure 9: Day care expenditure by need

As the population ages we wish to see a broadening of day opportunities, particularly for older adults, who currently utilise 34% of day care spaces despite representing 70% of all FACS eligible clients.

We consider that it is essential to move away from traditional services to community based universal provision (such as at the Portway Lifestyle Centre) and to offer services which

enable people and improved employment opportunities.

**Home Care**

There are 1008 FACS eligible adults receiving council funded home care services in Sandwell. Services are commissioned from 45 independent providers at an annual cost of £9.3m. Seven large providers support over 77% of the client base. Eighty percent of home care service users are aged 65 and over.

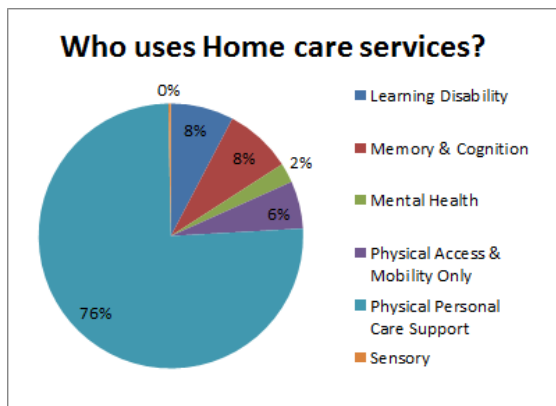


Figure 10: Who uses Home Care services?

Average hourly rates across all homecare providers are consistent at £12.17 per hour, regardless of provider size.

Home care is spread across a range of providers although 30% of home care service

users with a learning disability receive their support from 1 organisation. Nevertheless it appears that the home care market is reasonably diverse and offers a wide choice of provision.

Over 60% of home care service users reported being either extremely satisfied or very satisfied with services according to the 2014 Adult Social Care Annual Survey. This is slightly below the overall average for all services of 65%

**Extra Care**

There are 12 Extra care housing facilities in the borough. There are currently 169 FACS eligible adults in Sandwell in receipt of extra care services, with the council spending £0.7m per annum to commission these services directly. In addition to this there are a significant number of FACS eligible adults that live in Extra care but receive a direct payment from the local authority to fund their care and support.

Extra care services are mainly used by older people and people with a physical disability There are extra care providers in the wards of Tipton Green, Greets Green and Lyng, Soho

and Victoria, Old Warley, Hatley Heath and St. Pauls.

**Residential Care with Nursing**

Residential accommodation with nursing provision is a significant cost area, accounting for £14.7m per annum. There are 467 FACS eligible clients receiving Care Home with nursing support. Whilst the number of providers suggests a diverse market, choice is inevitably limited by bed availability.

Care homes offering nursing provision are well spread across the borough; the wards of Old Warley, Abbey and Soho & Victoria are possibly a little underprovided relative to residents’ needs, although neighbouring wards to the west offer a choice of accommodation.

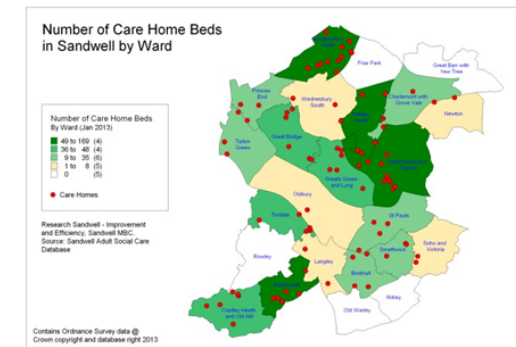


Figure 11: Nursing care provision in Sandwell

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Seven of the seventy one providers support 45% of the client base, accounting for 38% of the total expenditure. This includes one provider who currently supports 49 clients at an annual cost of approximately £1.45m.

The 20 highest cost packages are met by smaller providers and this has a distorting effect on the relative cost profile. Fifteen of these 20 high cost packages are for learning disabled clients where the average spend stands at £1,610 per week

Satisfaction with provision is relatively high with 70% of nursing service users reported being either extremely satisfied or very satisfied with services according to the 2014 Adult Social Care Annual Survey.

**Residential Care**

This is the council’s highest cost pressure, with the Adult Social Care budget funding residential care placements for 738 FACS eligible adults at an annual cost of £29m. Clients are placed in 168 homes.

Expenditure per client is driven by a range of factors, including complexity of need and length of stay. A significant proportion (42%)

of residential care expenditure is required for residents with a learning disability (who make up 20% of all residential placements).

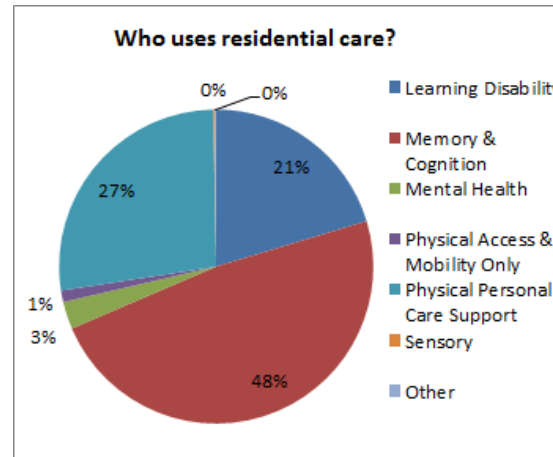


Figure 12: The needs of residential care clients

The distribution of care home beds in Sandwell broadly reflects the demand for residential care, with choice only limited by bed availability and the need for specialist accommodation.

Satisfaction with residential care homes in Sandwell is high, with 72% of people using residential care who responded to the 2014 Annual Adult Social Care Survey being either extremely satisfied or very satisfied with their care.

However, proportionately more safeguarding referrals relate to residential and nursing care settings (c.46% of all referrals) than comparator councils (c. 39%) and the all England average (c.37%).

**Respite Care**

The council spent £627k during 2013/14 on respite care, supporting 209 FACS eligible adults. A third of respite provision relates to clients with a learning disability. Two thirds of respite episodes are for older people, half of which are mentally infirm.

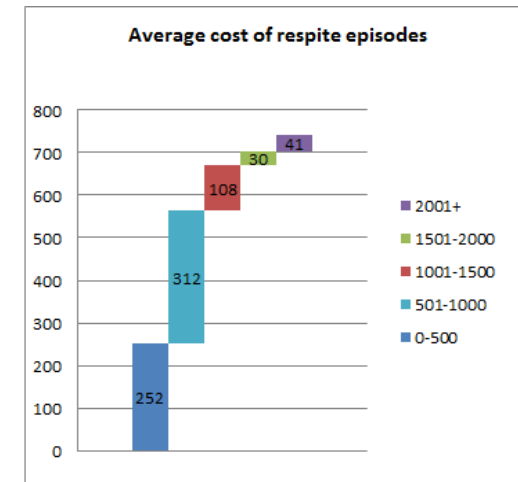


Figure 13: How much does respite care cost?

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The majority of respite episodes cost between £500 and £1,000. Cost is driven by length of stay and complexity of need.

Provision of respite care in Sandwell is dominated by one large provider who meets around 36% of respite demand. The remaining share of the market is spread amongst another 63 providers.

### Short Stay Accommodation

The council currently funds short stay accommodation for 158 clients at an annual cost of £2.7m. Accommodation is provided in 69 homes. No single home provides short term accommodation to more than 5 clients.

Most short stay clients (85% of the total) are aged over 65 and have the primary support reason memory & cognition or physical personal care. Proportionately more is spent on adults with a learning disability, with average weekly expenditure for LD clients being 4 times more than non LD clients.

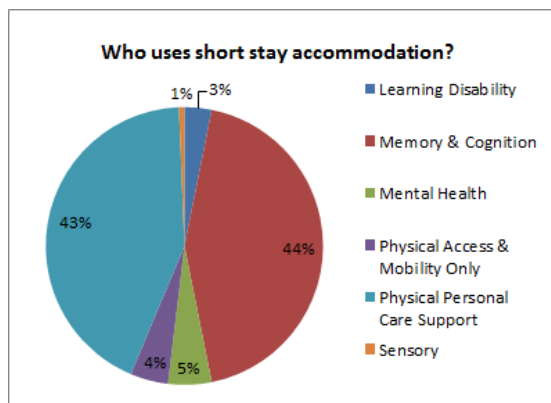


Figure 14: The needs of short stay clients

Whilst there are a number of providers who can, subject to bed availability, accommodate older adult's residents the choice for those with more complex needs is more limited. Whilst demand in these areas is low, capacity is likely to be an issue preventing timely placement of people into appropriate short stay settings.

### Supported Living

There are 203 FACS eligible adults in Sandwell in receipt of Supported Living services, at a cost to the council of £12m per annum.

Supported living services are purchased by the council from 33 providers. The 2 largest providers by client numbers support 45% of the client base, with the largest provider [ILO: UNCLASSIFIED]

accounting for 26% of all supported living clients.

The majority of clients (96%) are adults who have a learning disability and this category accounts for 97% of supported living expenditure. Whilst demand from other client groups is low, this may be as a result of limited choice in the market, with small numbers of providers catering for the supported living needs of all but those with a learning disability. This might also explain the high cost per client for supported living relative to other types of provision.

## Opportunities for providers

We wish to realign provision in Sandwell to the needs of residents in the context of our vision to prevent, rehabilitate and care – recognising that financial constraints will require us to use our resources differently.

We envisage a diverse and sustainable care and support market in Sandwell and believe that there is room for high quality providers of all sizes to flourish. We recognise the need to encourage and support small ‘micro-providers’ so that they can operate on equal terms with larger organisations.

Providers will have a significant role to play, by offering solutions that progressively enable people to recover and maintain/improve their independence, thereby reducing the demand for ongoing care and support. By developing more preventative services, providers will potentially be serving a much bigger market than at present.

We hope to work with providers over a range of initiatives including:

- Increasing the options for people who require ‘day opportunities’ to promote their enablement and support them to

remain active and connected to social networks within their community. This will involve moving away from traditional models of day care.

- Identify alternative options in procuring support for people with a Learning Disability to ensure choice and quality
- Commissioning universal services which prevent the onset of ill health and the need for higher level support
- Strengthening reablement services so that people can regain their independence on discharge from hospital
- Building the use of assistive technology and telecare solutions into support plans
- Developing money management and money advice services, so that people understand the financial choices available to them and are supported to manage their personal budgets effectively
- Providing advocacy support so that people can make their own decisions
- Increasing employment opportunities for people with physical and learning disabilities
- Improving access for carers who do not meet FACS criteria to time-limited support

We wish to commence a dialogue with providers to explore issues such as quality and the relationship between cost, price and outcomes.

Changes that we wish to see include:

- Better access to Supported Living, Extra Care and other supported housing schemes so that people have a wider range of choices about the type of accommodation they live in
- A personal assistant market that allows people greater control over their support at home arrangements
- Efficiency savings across the provider market, particularly in respect of high cost packages
- Services being personalised around the needs and aspirations that people have and the outcomes they wish to achieve

We wish to increase the range of community-based activities that are available to support people and will:

- Work with the voluntary sector to develop a more robust community offer
- Work with local communities and groups to develop a volunteer scheme

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- Work with local communities and groups to strengthen networks of support

We are committed to actions that help to improve outcomes for people with care and support needs in Sandwell and will engage with our communities to ensure that we are making progress. We have committed to the national 'Making it Real' programme which provides a basis for assessing progress towards a more personalised care and support market and wish to see providers in Sandwell sign up to Making it Real so that we can collectively deliver a step change in performance that people recognise.

We are in the process of identifying local priorities for action and will co-produce with local people and publish our action plan.

To find out more and to make your own commitment please visit the [Making it Real](#) website.

## Looking Ahead

We need to change the way in which we operate in order to meet the many challenges that lie ahead. This will include changing our current methods of commissioning, procurement and service delivery. In doing

this it is inevitable that activity will be reduced or cease altogether in some areas.

At the same time, we need to identify and develop the range and quality of community resources that people can use in order to maintain their wellbeing and independence.

We have worked hard to develop and maintain excellent levels of service for Adult Social Care service users and carers. Success in the future will mean working differently, integrating across health and social care through work being proposed in response to the Better Care Fund, and developing a new community offer centred on wellbeing and prevention.

## Future levels of resourcing

Like other local authorities, we are facing significant financial and demographic pressures as budgets are limited and our older population increases.

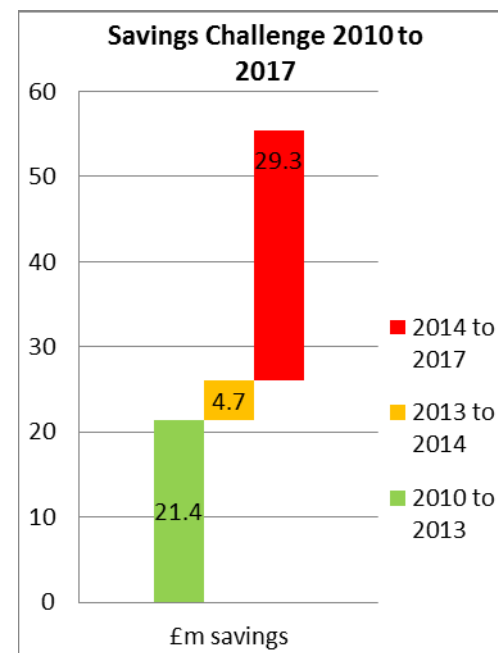


Figure 15: The financial challenge

Government cuts to the level of grants that councils receive have meant that we are now facing an unprecedented reduction in the budget for adult social care. We have already achieved savings of £21.4m over the period 2010 to 2013 and expect to save a further £4.7m by the end of March 2014. We are developing plans that will see us make further savings of £29.3m over the period 2014 to 2017.

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Reductions of this scale require careful planning to make sure that we continue to help people achieve positive outcomes and we will share our detailed plans as soon as they are confirmed.

### Support for Providers

We recognise that the demands provided by policy, legislation, demography and of course shrinking resources will prove challenging – for ourselves and for the providers who are so important to ensuring people achieve the outcomes they expect.

Over the coming months we hope to develop our relationship with existing and potential future providers so that we can face these challenges together.

This Market Position Statement is meant to stimulate a dialogue about the kind of market that we need in Sandwell; to take this dialogue forward we intend to:

- Host a series of provider forums and provider surgeries so that we can tackle these and associated issues;
- Identify training and development opportunities for the internal and external workforce;

- Review our procurement processes
- Develop more flexible and accessible contracting arrangements, whilst moving away from block placements;
- Implement electronic monitoring for in house and external home care providers as a means of identifying and delivering efficiency savings;
- Developing bespoke training options around Quality and Outcomes;
- Extending the scope of our Quality team to better support Learning Disability and home care provision.
- Develop a consistent approach to monitoring the quality of provision we have in Sandwell and the future direction of providers making up the market place.
- Review the current market place to ensure it is appropriately diverse and sustainable.

### Your Views

We welcome feedback on our Market Position Statement and supporting Evidence Base.

Please contact [asc\\_admin@sandwell.gov.uk](mailto:asc_admin@sandwell.gov.uk) with any comments you'd like to make.

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