# Agenda Item 12



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## **Report to Policy Committee**

Author/Lead Officer of Report: Jo Pass – Assistant Director – Living and Ageing Well. Nicola Afzal – Interim Assistant Director Living and Ageing Well

Report of:	Strategic Director of Adult (	Care and Wellbeing.		
Report to:	Adult Health and Social Ca	re Policy Committee		
Date of Decision:	16 <sup>th</sup> March 2023			
Subject:	Living and Ageing Well Stra Market Position Statement	ategic Delivery Plan and		
Has an Equality Impact Assessment (EIA) been undertaken?  Yes x No				
If YES, what EIA reference number has it been given? 1477				
Has appropriate consultation taken place?		Yes No x		
Has a Climate Impact Assessme	ent (CIA) been undertaken?	Yes x No		
Does the report contain confiden	itial or exempt information?	Yes No		
If YES, give details as to whether the exemption applies to the full report / part of the report and/or appendices and complete below:-				
"The ( <b>report/appendix</b> ) is not for publication because it contains exempt information under Paragraph ( <b>insert relevant paragraph number</b> ) of Schedule 12A of the Local Government Act 1972 (as amended)."				
Purpose of Report:				
This report outlines the City wide Older Adults / Ageing Well Strategic Delivery Priorities. It describes the vision for older adults and adults living with dementia, the steps that we have already been taken to implement our city-wide older adults /				

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ageing well service and the measures proposed to continue to embed and deliver

It also sets out a Market Position Statement which sets out our intentions for the way we intend to support people to 'Live and Age Well' in Sheffield. This will include what we intend to commission, how we would like this support to be delivered and the relationships that we would like to establish to make this a

our strategic vision for older adults and adults living with dementia in our city.

#### **Recommendations:**

It is recommended that the Adult Health and Social Care Policy Committee:

- 1. Endorses the direction of travel, including the priorities and closer joint working with primary care, voluntary sector, and communities.
- 2. Approves the Living and Ageing Well Market Shaping Statement.
- 3. Requests that the Director of Adult Health and Social Care provides the Committee with updates on the progress and outcomes of this delivery strategy on a 6 monthly basis.

#### **Background Papers:**

Appendix 1: Living and Ageing well Market Shaping Statement

Appendix 2: Equalities Impact Assessment.

Lea	Lead Officer to complete:-				
1	I have consulted the relevant departments in respect of any relevant implications indicated on the Statutory and Council Policy Checklist, and comments have been incorporated / additional forms completed / EIA completed, where required.	Finance: Liz Gough			
		Legal: Patrick Chisholm			
		Equalities & Consultation: Ed Sexton			
		Climate: Jessica Rick			
	Legal, financial/commercial and equalities implications must be included within the report and the name of the officer consulted must be included above.				
2	SLB member who approved submission:	Alexis Chappell			
3	Committee Chair consulted:	Councillor George Lindars-Hammond. Councillor Angela Argenzio, Councillor Steve Ayers.			
4	I confirm that all necessary approval has been obtained in respect of the implications indicated on the Statutory and Council Policy Checklist and that the report has been approved for submission to the Committee by the SLB member indicated at 2. In addition, any additional forms have been completed and signed off as required at 1.				
	Lead Officer Name: Jo Pass	Job Title: Assistant Director Living and Ageing Well			
	Nicola Afzal	Interim Assistant Director Living and Ageing Well.			
	Date: 16 <sup>th</sup> February 2023				

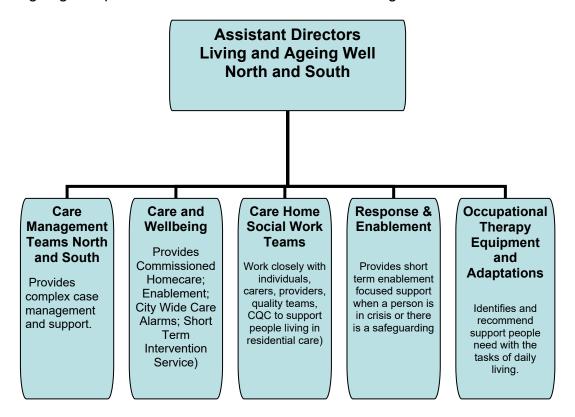
#### 1. PROPOSAL

- 1.1 Our vision is that 'everyone in Sheffield lives in a place they can call home, in communities that care, doing things that matter to them, celebrated for who they are and when they need it, they receive care and support that prioritises independence, choice, and recovery.
- 1.2 Through the future design of Adult Care, a Living and Ageing well service was established to provide a dedicated focus on enabling older Adults and people living with dementia to live the life they want to live. After a restructure of Adult Care, the Service went live on 27th February 2023.
- 1.3 The service brings together several previously separate functions into one portfolio so that a strategic and operational coordinated, holistic, and joined up approach can be undertaken across care services for the benefit of older Adults and people living with dementia, their family members and carers and our communities.

#### 1.4 An Overview of Living and Ageing Well

- 1.4.1 The Living and Ageing Well portfolio have an overall budget of £140.7m and a staff group of 433. It receives 50,000 contacts per year, supports 7,600 people on a long-term basis and has oversight of:
  - Social work assessment and care management functions across community, residential care, and hospital settings.
  - Commissioned and Council provision of homecare, enablement older adults residential care and day activities, including strategic leadership of all commissioning activity relating to older Adults and people living with dementia.
  - Occupational Therapy, Housing, Health and Adaptations, City Community Alarms, and provision of Equipment.
  - National and Strategic Agendas relating to Living and Ageing well, Integrating with Health, Urgent Care and Hospital Discharge.
- 1.4.2 The commitments and outcomes outlined in the <u>Adult Care Strategy</u> have been used as the guiding principles, for developing the Living and Ageing well service and design. They show how we'll achieve individual's outcomes and highlight what we want to do better for citizens of Sheffield. Our Living and Ageing Well Strategy.
- 1.4.3 Through working in partnership with the people and communities we serve, our workforce, unions, and partners across the city, valuing and empowering our workforce and maintaining a focus on enablement and strength-based practice, it's aimed that we make a fundamental long-term strategic shift and transformational towards enabling:
  - Meaningful coproduction with individuals and carers, so that individuals and carers drive change and planning, aligned to our commitment to coproduction.

- Greater opportunities for individuals and carers choice and control over support, aligned to our Direct Payments Strategy.
- Individuals to live well and as independently as possible in their own home and in communities that connect, care and are inclusive.
- Earlier intervention and prevention, particularly around admissions avoidance, falls reduction, reducing need for long term support and timely discharge from hospital.
- Meaningful integrated working with health, voluntary sector, and communities so that individuals experience joined up supports and only must tell their story once.
- 1.4.4 To support this, as part of implementation of the future design, living and ageing well portfolio is now structured in the following service areas:



- The teams are aligned to primary care networks and to trusts enabling Adult Care to develop our close working relationships with our health colleagues. In addition, the service will aim to connect with communities and work with voluntary sector, faith groups and providers to support Adults living in our communities to feel connected and able to live the life they want to live.
- 1.4.6 The teams will support, and lead delivery of the homecare transformation and residential care plans approved at Committee and our approach to admission avoidance and our home first model to enable people to be discharged when well. They service will also work with colleagues to look at housing with support as part of transformation of our residential offer.

- 1.4.7 Safeguarding is everyone's responsibility, and all our teams will fulfil our duties under the 2014 Care Act. Aligned to the safeguarding delivery plan this new structure brings greater alignment and coordination between Council and Commissioned provision and with that greater oversight and ability to consider earlier indicators of concern.
- 1.4.8 In addition, all parts of the service will build upon our early intervention and prevention offer, described in the early intervention and prevention report to Committee today as well as enable individuals to prevent admission to hospital and return home from hospital when well.
- 1.4.9 The next phase of Living and Ageing Well is to embed these new ways of working and to take a learning approach working in partnership with individuals, carers, our workforce, and partners so that we continue to develop the service. We will, in particular, focus on how we are delivering improved outcomes and experiences for older Adults and people living dementia and building a culture of continuous improvement and learning to do that.
- 1.4.10 As the service continues to grow and flourish, it's our aim that we become seen a model of best practice and innovation across England so that we can be confident that we are delivering very best outcomes.

### 1.5 Delivery on Outcomes

- 1.5.1 It's our ambition to enable people to live the life they want to live, to have positive experiences of social care and deliver improved wellbeing outcomes and experiences of individual's and carers who we support directly and through our commissioned services.
- 1.5.2 The I Statement's we intend to deliver upon and be measured by are those co-developed through our Strategy and measured by CQC, which are:

I Statements
Adult social care services and activities in your area
I know what services and opportunities are available in my area.
I know where to go and get help.
I know what services are available and can make informed decisions.
I am confident to engage with friends/support services.
The system is easy to navigate
The contact you have with adult social care workers and services
I have a conversation with someone who understands me.
When I need support, it looks at my whole situation, not just the one
that might be an issue at the time.
I deal with people I know and trust that are well-trained and love their
job, respect my expertise, and can make decisions with me.
I know that I have some control over my life and that I will be treated with
respect
I am seen as someone who has something to give, with abilities, not
disabilities. I get support to help myself.
I can make a choice on whether I move into a care home, and where

and with whom I live.

I know that I have control over my life, which includes planning ahead

We start with a positive conversation, whatever my age

I only tell my story once unless there are changes to 'what matters to me'.

I am listened to and heard and treated as an individual.

#### All about you

I am resilient and have good mental health and wellbeing.

I have balance in my life, between being a parent, friend, partner, carer, employee.

I feel that I have a purpose.

I can manage money easily and use it flexibly.

I can have fun, be active, and be healthy.

- 1.5.3 Over the past 2 years, we have made significant strides establishing the conditions and working environment for delivering improved experiences and outcomes for individual's by improving our offer. The improvements are set out in the Strategy update to Committee today and our approach to supporting our workforce as an enabler is also set out in the Workforce strategy today.
- 1.5.4 As part of our commitment to deliver on positive experiences and outcomes for all Adults we aim to embed continuous development, learning and improvement by embedding the I and quality statements and practice standards across all teams. We will also be introducing regular feedback from individuals, carers, communities, members, and partners and working in partnership with our workforce so that our workforce across council and commissioned services feel engaged and empowered to deliver excellent quality support.

#### 1.6 Living and Ageing Well Market Position Statement

- 1.6.1 A Market Position Statement (MPS) is written by local authorities to advise providers about how what we commission could change and what the local authority's commissioning intentions are. It is a key element of the analyse and plan stages of the commissioning cycle as it will inform the subsequent planning and delivery of services for the next few years. It will be updated as required.
- 1.6.2 In line with commitments set out in the Adult Social Care Strategy, Future Design, and the accompanying Delivery Plan, in this MPS we are setting out our intentions for the way we intend to support people to 'Live and Age Well' in Sheffield. This will include what we intend to commission, how we would like this support to be delivered and the relationships that we would like to establish to make this a reality.
- 1.6.3 In doing so, we aim to effectively contribute to the wider partnership in place in Sheffield to improve the lives and outcomes of individuals and Carers' who are ageing and to our communities across Sheffield. Our commitment is to involvement and co-design with individuals, Experts by Experience, and their families and carers, so that what we commission

- reflects individuals' views and wishes, and the outcomes and intentions set out in our Adult Social Care Strategy.
- 1.6.4 The Market Position Statement is attached at Appendix 1 and submitted to Committee today for approval.

## 1.7 Delivery Planning and Priorities for 2023 to 2025

1.7.1 As a next step, during 23/24 its intended to undertake key projects to continue to improve and build a sustainable system of working, reach our ambitions, and achieve positive experiences and outcomes for all Adults. The milestones are summarised below and its planned to bring a plan on page as part of endorsement of an overall Directorate plan to Committee in June for approval.

#### 1.7.2 The Milestones are:

Milestone Date	Actions
By June 2023	Establish a working group to implement joint working with health colleagues, local area committees, housing, providers and voluntary sector to achieve integrated and community connected model of working which delivers joined up local services for individuals, carers, and communities which promotes and enables individuals to live independent, healthy lives in their own home or a homely setting.
By June 2023	Launch and implement the Living and Ageing Well Market Position Statement
By June 2023	Feedback, surveys, quality assurance, and business improvement plans embedded in service so that this informs continued improvement.
By December 2023	Establish service wide practice model, practice standards, practice development plan and quality assurance, LGA Workforce standards, consistently across the service. Assessments and reviews are completed using a strength-based, outcomes led, and enablement approach and we are embedding a named worker approach.
By December 2023	Establish new homecare 'care and wellbeing service' and completion of phase 2 of the care home residential plan, including closer working relationships and a one team approach between care management, internal provision, and commissioned providers.

By April 2024	Establish and embed the living and ageing well model following on from launch of the Adult Care future design on 27 <sup>th</sup> February 2023.
By April 2024	Leaders, Staff and Stakeholders are and feel confident about the support, leadership and plans in place.
By April 2024	Continuous improvement, quality assurance, policies and audit processes are embedded and evidenced throughout all levels of the service and publicly available.
By June 2024	Co-design a new Sheffield Dementia Strategy to provide strategic direction.

#### 2. HOW DOES THIS DECISION CONTRIBUTE?

- 2.1 This proposal supports the delivery of the Councils 6 commitments. Of note it meets the Commitments 1,3 and 6 ASC outcome/s that are set out in the ASC Care Governance Strategy in several ways.
- 2.2 Our Living and Ageing Well strategy support people to live a fulfilling life at home, connected to the community and resources around them, and provide care and support where needed. Keeping the person at the heart of what we do, this strategy ensures that our adult social care services are structured in a way that supports working in partnership with older adults and those living with dementia and places our resources in the communities where they live. It facilitates closer working partnerships between the agencies and resources that support older adults and those living with dementia.
- 2.3 Provide care and support with accommodation where this is needed in a safe and supportive environment that can be called home. Our strategy is committed to promoting and enabling people to live as independently as possible in a place that they can call home. Once again partnership working is key to delivering on this commitment as we work with a range of colleagues including our housing services to support our work. The Adaptations, Health and Housing service are part of the the living and ageing well service. Our Care home transformation plan ensures that we develop a residential and nursing care offer that enables people to remain connected to their communities and the things that create well-being for that person.
- 2.4 Make sure there is a good choice of affordable care and support available, with a focus on people's experiences and improving quality. In support planning with people, we first and foremost consider their strengths and resources, we look at resources within their communities, assistive technology or will equipment and or adaptions meet their eligible need and promote their independence. If we need to explore formal support alongside the care and well-being transformational contract which moves

us from a home care provision centred around time and task to outcomes focused support. We continue to develop our offer in relation to the person accessing a direct payment giving the person choice and control as to how they purchase the support they need to meet their eligible support needs. This approach supports creating a choice of affordable care and support options.

#### 3. HAS THERE BEEN ANY CONSULTATION?

- 3.1 A crucial element in the successful promotion of independent living and reablement is the increased involvement in people receiving, and staff directly delivering care, in the development of all key parts of the plan. Throughout the sector, we know that involving and coproducing these makes them more likely to be successful.
- 3.2 To enable this, the governance structures will include the voices of those receiving care, carers, partners, and care providers so that we ensure we deliver what matters to people of Sheffield. This includes co-developing a mechanism (e.g., Citizens Board) so that people with lived experience are equal partners. An overall approach to coproduction and involvement is also a key element of the delivery plan, ensuring that the voice of citizens is integrated into all major developments ahead.

#### 4. RISK ANALYSIS AND IMPLICATIONS OF THE DECISION

#### 4.1 Equality Implications

- 4.1.1 As a Public Authority, we have legal requirements under the Equality Act 2010, collectively referred to as the 'general duties to promote equality'. Section 149(1) contains the Public Sector Equality Duty, under which Page 124 Page 11 of 14 6.1.2 public authorities must, in the exercise of their functions, have due regard to the need to:
  - 1. eliminate discrimination, harassment, victimisation, and any other conduct that is connected to protected characteristics and prohibited by or under this Act.
  - 2. advance equality of opportunity between those who share a relevant protected characteristic and those who do not.
  - 3. foster good relations between those who share a relevant protected characteristic and those who do not.
- 4.1.2 The proposal described in this report is consistent with those requirements. It aims to develop a more efficient and person-centred approach and, as referenced in the Consultation section above, to ensure citizens' voices and experiences help to inform and develop the processes.

#### 4.2 Financial and Commercial Implications

4.2.1 There are no direct financial implications of this report.

#### 4.3 Legal Implications

- 4.3.1 The core purpose of adult health and social care support is to help people to achieve the outcomes that matter to them in their life. The Care Act 2014 sets the Council's statutory power to direct the provision that:
  - promotes wellbeing
  - prevents the need for care and support
  - protects adults from abuse and neglect (safeguarding)
  - promotes health and care integration
  - provides information and advice
  - promotes diversity and quality.
- 4.3.2 Beyond the Act itself the obligations on Local Authorities are further set out in the Care Act statutory guidance issued by the government. By virtue of section 78 of the Act, Local Authorities must act within that guidance.
- 4.3.3 The Care Act Statutory Guidance requires at para 4.52 that "... Local authorities should have in place published strategies that include plans that show how their legislative duties, corporate plans, analysis of local needs and requirements (integrated with the Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy), thorough engagement with people, carers and families, market and supply analysis, market structuring and interventions, resource allocations and procurement and contract management activities translate (now and in future) into appropriate high quality services that deliver identified outcomes for the people in their area and address any identified gaps".
- 4.3.4 This report evidences the continuing strategy to ensure these obligations are met within the Living and Ageing Well Service.

#### 4.4 Climate Implications

- 4.4.1 The Adult Social Care Strategy and Delivery Plan makes specific reference to ensuring a focus on Climate Change both in terms of an ambition to contribute to net zero as well as adapt to climate change.
- 4.4.2 Elements of the Strategy Delivery Plan with a significant climate impact, have and will continue to complete a detailed climate impact assessment to inform plans and decision making. The elements with the most significant climate impact to date are linked below and information can be seen in Climate Impact Sections of those reports:
  - Supported living, day services and respite care for working age adults
  - Approval of new technology enabled care contract extension and strategy
  - Adults Health and Social Care Digital Strategy
  - Transforming Care Homes for Citizens of Sheffield

- The Climate Impact Assessment for Recommissioning Homecare Services
- 4.4.3 It is planned to bring a specific Climate Action Plan to Committee later in 2023. The plan will cover how Climate Impact Assessments are done across the service, what the common themes are, how these can be addressed consistently.
- 4.5 Other Implications
- 4.5.1 No other implications identified.

#### 5. ALTERNATIVE OPTIONS CONSIDERED

5.1 The alternative option was not to provide an update to committee.

#### 6. REASONS FOR RECOMMENDATIONS

- An approved delivery plan and market position statement gives a structured approach to the promotion of delivering on our commitments to older adults and adults living with dementia through the development of the Living and Ageing Well Service. It will also provide greater accountability and transparency of how will do this.
- 6.2 Asking for regular updates will keep the Committee, wider stakeholders, and the public the ability to hold the Council to account for progress and provide an additional mechanism to input to future development

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